

**LONGMEADOW PARKS & RECREATION
HEALTH CARE POLICY FORM
SECTION 430.159**

SUMMER DAY CAMPS

1. **Healthcare Consultant:** Dr. Robert Leavitt **Telephone: 567-4500**
734 Bliss Road, Longmeadow

Health Supervisor: Michael Barbieri, Director of School Age Services
Work Telephone: 565-4163

2. **Emergency Telephone Numbers:**
Fire-911
Police-911
Rescue/Ambulance-911
Poison Prevention Center-1-800-682-9211
Board of Health-565-4140

3. **Hospital(s) utilized for emergencies:**

Baystate Medical Center Telephone: 784-0000
759 Chestnut Street Springfield, MA 01199

Mercy Hospital Telephone: 748-9000
299 Carew Street Springfield, MA 01199

4. **Written Health Records:**

Copies of immunization records and a health history are required to be on file for each camper and staff member prior to the start of Camp. Parents give written authorization for emergency medical care on the program registration form at the time of sign up, and Camp Directors will have copies of registration forms on site at all activities.

5. **Role of Health Care Supervisor**

The Health Care Supervisor is responsible for the daily operations of the health component of camp.

6. **Emergency Procedures if parent cannot be contacted:**

The Camp Coordinator or Camp Director will notify an emergency contact person who is listed by the parent on the participant's registration form.

7. **Emergency Procedures when off the premises (including walks off the premises, field trips and participation at off-site facilities):**

Registration forms will accompany the staff and campers on field trips. A complete first aid kit and health care policy will be taken on all field trips. Day Camp Director and Specialists are first aid and CPR certified and will have access to a phone at their activity site in every instance.

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8. Procedure for First Aid:

1. Location of First Aid Kits – There is a first aid kit located at each campsite. First aid kits also travel with each unit to each activity.
2. Location of First Aid Manual – In all first aid kits.
3. First Aid is administered by Camp Staff, Specialists, Camp Director, Camp Coordinator and Assistant Director.
4. First Aid Kits are maintained by Camp Director

Class A First Aid Kit

- *16 Adhesive Bandages, 1"x3"
- *1 Adhesive Tape 2.5 yd
- *10- Antibiotic Treatment Application, 1/57oz
- *10 Antiseptic Applications 1/57oz
- *1 Breathing Barrier
- * 1 Burn Dressing, gel soaked, 4"x 4"
- * 10 Burn Treatment 1/32oz
- * 1 Cold Pack
- * 2 Eye Covering
- * 1 Eye Wash, 1 oz
- * 1 First Aid Guide
- * 6 Hand Sanitizer, 0.9g
- * 2 Pair exam gloves
- * 1 roller bandage, 2"x 4 yds
- * 1 Scissors
- * 2 Sterile Pads, 3" x 3"
- *2 Trauma Pads, 5" x 9"
- * 1 Triangular Bandage, 40" x 40" x 56"

Class B First Aid Kit

- * 50 Adhesive Bandages, 1"x3"
- * 2 Adhesive Tape 2.5 yd
- *25 Antibiotic Treatment Application 1/57oz
- *50 Antiseptic Applications 1/57oz
- * 1 Breathing Barrier
- * 2 Burn Dressing, gel soaked, 4"x 4"
- * 25 Burn Treatment 1/32oz
- * 2 Cold Pack
- * 2 Eye Covering
- * 1 Eye wash 4oz
- * 1 First Aid Guide
- * 10 Hand Sanitizer, 0.9g
- * 4 Pair Exam gloves
- * 2 roller bandage, 2"x 4 yds
- *1 Roller Bandage 4" x 4 yds
- *1 Scissor
- * 1 Splint, min 4" x 24"
- * 4 Sterile Pad, 3" x 3"
- *1 Tourniquet
- *4 Trauma Pad, 5"x9"
- * 2 Triangular Bandage, 40"x40"x56"

9. Plan for Injury Prevention and Management:

Each day, before participants arrive, Camp Staff will survey Camp area for hazards and items which need to be repaired. They will remove hazards and notify the Camp Coordinator of any needed repairs.

10. Procedures for maintaining and monitoring a Medical Log:

The Camp Director will document in a bound Medical Log, any illnesses, absences, and reasons for illnesses. At the end of Camp, the Camp Director will turn the attendance sheet and medical log into the Camp Coordinator. The Camp Coordinator will notify the Board of Health of any recurring illnesses.

11. Procedure for storage of prescribed medication

Medication prescribed for campers will be kept in a locked storage container in the possession of Camp Director or Health Care Supervisor. Prescribed medication for campers will be kept in original containers bearing the pharmacy label, which shows the date of filling, the pharmacy name and address, the filling pharmacist's initials, the serial number of the prescription, the name of the patient, the name of the prescribing

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practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in such prescription or required by law, and if tablets or capsules, the number in the container. All over the counter medications for campers will be kept in the original containers with the original labels and include the directions for use. When no longer needed, the Camp Director will return all prescribed medications to the parent or guardian.

12. **Procedures for administering prescription medications:**

Parents will be encouraged to administer all prescription medication before the child arrives each day. Medication will only be administered by the Health Care Supervisor. An epinephrine auto-injector will be administered by the Health Care Supervisor or only if the camper has a life threatening allergic reaction. Written approval from campers parent/guardian and the health care consultant will be on file for camper who is capable of self administration and who may carry and self administer an epinephrine auto-injector. Diabetic Campers requiring their blood sugar to be monitored or requiring insulin injections will have written approval from their parent/guardian and the Health Care Consultant stating that they are capable and allowed to self monitor and/or self inject themselves. The Health Care Supervisor who is properly trained will be present during any blood monitoring activities such as insulin pump calibration or self injection. Prescribed medication for campers brought from home will only be administered if it is from the original container and parents have completed the written permission form required.

13. **Procedures for emergency care if required beyond first aid:**

Refer to the child's health history form and contact in this order, parents, emergency contacts, child's physician, camp physician. Obtain ambulance service if deemed necessary with authorization from parent, child's physician, or camp health care consultant. If authorization is unavailable, refer to Emergency Medical Release form. The child's information form will accompany the child to the hospital. All incidences of injury and treatment will be properly documented using the MDPH form, logged properly and reported to the Longmeadow Board of Health.

If Injury is Serious:

- a. Activate EMS – Call or have someone call 911
- b. Apply First Aid or other necessary procedures up to one's ability
- c. Call parent or emergency contact person to meet you at the hospital
- d. Call LPRD Main Office at 565-4160
- e. Copy of the report is given to the parent and is logged in Camp Medical Log
- f. Child's file must accompany them to the hospital
- g. Complete an Injury Form and turn into the Camp Coordinator
- h. Copies of the Injury Form will be forwarded to the Longmeadow Board of Health and the Massachusetts Department of Public Health (when necessary) within 7 days of occurrence

If Injury is Minor:

- a. Have participants rest at the side of the field/court and determine if first aid is required
- b. Camp participants and apply a little TLC
- c. If First Aid is necessary, ask certified person to administer
- d. Complete an Injury Form in duplicate (not necessary for every band-aid)

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- e. Camp Director will give copy of Injury Form to parent at time of pick-up. Explain what happened so parents are fully aware.
 - f. Camp Director will drop copy of Injury Form at Camp Coordinator's office on the same day that injury occurs.
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- 14. **Procedures for informing Board of Health of any injuries & communicable diseases:**
A camper injury report form (430.153) will be properly filled out by camp staff that administered first aid and sent to the BOH within seven days of occurrence. Health Supervisor will report to the BOH, Division of Community Sanitation (MDPH) any suspected cases of food-borne illnesses or unusual prevalence of any illness and illnesses including, but not limited to: fever, diarrhea, rash, sore throat, vomiting or jaundice present. Camp Director will note all absences and reasons for absence on a daily attendance sheet.
 - 15. **Procedures for informing Parents when first aid is administered:**
All injuries and instances of first aid will be documented on an injury report form. A copy of this form will be given to the parents within 24 hours of injury.
 - 16. **Procedure for any ill Participant:**
Plan for infection control and monitoring hand washing procedures for Staff and participants: Staff and participants will wash their hands with soap using running water and friction before eating, after toileting, and after coming in contact with bodily fluids and discharges.
 - 17. **Procedures for the clean up of blood spills & other bodily fluids:**
Using latex gloves, the affected area will be wiped up using a disposable towel. If the spill occurs inside, the area will be disinfected with bleach and water. Gloves and towels will be placed in a plastic bag, sealed and then placed in another plastic bag and sealed before disposing. Staff will wash their hands thoroughly afterward.
 - 18. **Allergies/Emergency Medical Information:**
The Camp Director will review all participant registration forms prior to the beginning of each Camp session. The Camp Director will make Staff aware of any health problems or allergies of concern to the Camp situation.
 - 19. **Location of Staff smoking area:**
Staff will not be permitted to smoke while on duty.
 - 20. **Policy for use of sunscreen and insect repellents:**
Parents of Camp participants will be strongly urged in the written program materials to provide their choice of sun protection product (preferably with solar protection factor #15) and insect repellent. Parents will clearly label each product with their child's full name and product will be used on that child only. Parents are also encouraged to pack protective clothing such as hats, visors, etc. Camp Staff will remind participants to apply often.

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21. **Plan for Evacuating Area in Case of an Emergency:**

When evacuation is necessary, the Camp Director will bring his/her program files containing the rosters and emergency contacts, and carry it with them. If two camp counselors are available, one will lead the group and the other will trail, making sure that all children participate in the evacuation. A map of the area, clearly identifying alternate routes out of the area, will be posted in the Camp Shed and another copy will be kept in the Camp Director's program file. Once the group is away from the area and in a safe spot, the Director will call role, using the roster to insure all campers are accounted for. Emergency evacuation of areas will be rehearsed once per session (every other week).

22. **Exclusion Policy for Serious Illnesses, Contagious Diseases, Reportable Diseases to Health Department:**

Any participant with a serious illness or contagious disease will remain in a quiet spot within the Camp area until the parent or emergency contact is able to pick up. All reportable diseases will be reported to Longmeadow Board of Health Department by the Camp Coordinator. The Board of Health will inform the Camp Coordinator of any required isolation period during which the participant will be excluded from participation in Camp activities.

Revised May 2018

HEALTH CARE CONSULTANT AGREEMENT

NAME OF CAMP

LOCATION OF CAMP

The Massachusetts Department of Public Health recreational camp for children regulations, 105 CMR 430.000 requires that the operator of all recreational camps for children have a healthcare consultant. The regulation and responsibilities of this person are described below:

430.159 (A) Health Care Consultant – A designated Massachusetts licensed physician, nurse Practitioner or physician assistant with pediatric training as the camp’s health care consultant. The consultant shall:

1. Assist in the development of the camp’s health care policy as described in 105 CMR 430.159(B);
2. Review and approve the policy initially and at least annually thereafter;
3. Approve any changes in the policy;
4. Review and approve the first aide training of the staff
5. Be available for consultation as needed; and
6. Develop and sign written orders to be followed by the on-site camp health supervisor in the administration of his/her health related duties.

430.159 (B) Health Care Policy – A written medical policy, approved by the local board of health and by the camp health care consultant shall include, but not be limited to, daily health supervision, infection control, handling of emergencies and accidents, available ambulance services, provision of medical, nursing and first aid services, the name of the designated on-site camp health supervisor, and the name and address and telephone number of the health supervisor.

I meet the requirements of the health care consultant as described in 105 CMR 430.159 (A). I have reviewed these referenced regulations and understand the responsibilities of the position and agree to assist with camp regarding the same.

Print Name

Title

Signature

Mass License/Registration No.

Address

Telephone Number

Date _____