

Medical Policies:



Health and Safety Policies & Procedures

Every staff member carries the special responsibility for the welfare of all campers during the session. Staff members should always think “*Accident Prevention*”.

General Safety Rules

- Campers are supervised at all times.
- There are no isolated moments with campers.
- Riding on the back of a wheelchair or running with one is prohibited. Wheelchairs are not toys – they are some children’s only means of mobility.
- Shoulder rides are discouraged – just one slip and there could be significant harm to individuals.
- The Camp Director **AND** the healthcare staff must approve major changes in day-to-day activities to ensure proper safety guidelines are in place.
- Safety rules for specific program areas are reviewed and available at the site of the activity.

Medical Emergency Procedure

- You may call 911 for a victim who is not breathing, is unresponsive, or has no pulse.
- All phones can dial 911
- Inform them of your location and describe the nature of the injury.
- Call the healthcare provider onsite via cell phone for needs (502-794-4386)

Medical Responsibilities of Staff

- The healthcare staff at camp consists of hematologists, nurse practitioners, nurses, social workers, and physical therapists.

Healthcare staff will:

- Serve as a resource for camp staff on all medical issues.
- Provide nursing and medical care to all campers, staff, and volunteers with acute disease exacerbations, routine illnesses, and/or injuries.
- Perform all medical tasks that require advanced training and deal with needles.
- Perform all dressing changes.
- Store and distribute medications to campers.
- Conduct health education sessions as requested.

Counselors will:

- Monitor campers for issues that require medical attention: earache, sore throat, stomachache, rash, fever, etc. and notify the medical staff of these issues.
- Monitor and assist campers with hygiene needs: showering, dressing, toileting, changing sheets as needed and after an “accident”.
- Assist campers (provide comfort) during medical procedures.
- Be familiar with dietary needs, medication schedule, activity restrictions and other limitations for each camper.

Traveling with Camper to Hospital or Off Camp Medical Services

If a camper has to go to the hospital for any reason, the following steps will be taken:

- The healthcare staff will contact the Camp Director to notify of the need to transport camper to an outside medical facility.
- The Camp Director shall appoint one staff member to drive and/or accompany the camper.
- They will take a transport kit that includes:



- A copy of the camper's medical form (this is confidential info)
- Camp phone numbers
- Flashlight with extra batteries, and blanket.
- The Camp Director or designee will make arrangements for transportation as appropriate for the situation.
- If medical transportation is necessary, appropriate EMS services will be contacted.

First Aid Procedures

- All healthcare, social work, and physical therapy staff are required to hold CPR certification.
- Staff who are comfortable with administering minor first aid assistance to campers are encouraged to do so using supplies from first aid kits at activity locations.
- All injuries should be reported to a health care provider either immediately if severe, or at the next meal if minor.
- Please contact health center staff to clean any area contaminated with blood or other body substance (see Universal Precautions for more details).

Routine Medical Care

Camper's medical information

- Counselors will receive camper information including camper names, diagnosis, age, food restrictions, allergies, activity restrictions, social/behavioral information, and physical assistance needs.

Confidentiality

- Camper medical information is highly confidential and protected. Health records of both campers and staff are to remain confidential at all times. Sharing of this information is limited to those individuals who need such information to more effectively care for an individual.
- It is **ILLEGAL to share camper information** with other campers, family, or friends. Counselors not directly involved with the care of the individual/family should not have information regarding those individuals.
- Camper and family personal information are not a “topic of discussion” at mealtimes or during breaks. If you witness volunteers or staff inappropriately sharing information, please be the accountability partner and ask them to refrain from discussing privileged information.



Medical Center Procedures

- A member of the healthcare team can be reached at any time via cell phone
- The healthcare staff is available at all times when campers are on site.
 - The healthcare staff may not be in the health center at all times but can be easily reached by phone. Before going to the health center, please call the health team at 502-794-4386
 - Healthcare staff will provide “mobile clinic” services at your location to prevent individuals from leaving the activity. Please call 502-794-4386 to call for “mobile clinic” as needs arise.
 - If a child has an early morning or late-night treatment, please plan ahead with the camper's healthcare team.
- After conferring with a healthcare member, counselors may bring campers to the Health Center for:
 - Scheduled treatments
 - Procedures requiring privacy
 - Non-emergent medical problems (earache, sore throat, tummy ache, rash)
 - Medications that cannot be given in the dining hall

- **For urgent medical issues, staff should call the Health Center at 502-794-4386.**

This will allow the health team to prepare possible needed supplies/equipment prior to camper arrival.

- Examples of urgent medical issues:
 - Camper complaint of possible joint bleed (hemophilia)
 - Bleeding injury
 - Seizure
 - Your intuition tells you the camper needs to be evaluated by the medical staff

Camper Medications

- All camper medications will be checked in upon arrival. The camp nurses will review dosages, schedules, etc.
- Medication distribution will occur at mealtimes and before bed.
- Nighttime medications will be dispensed after the evening activity.
- The counselors and health staff are responsible for communicating with each other regarding medication distribution. The goal is to get medications distributed (primarily during mealtimes) and *with as little disruption as possible*.
- In individual circumstances, with prior approval of the healthcare staff, there may be medications that need to be kept readily accessible in the cabin or with the camper's counselor (i.e., albuterol, Epi Pens).



Staff Medications

- All staff living in cabins with campers must turn in their medications to the healthcare staff.
 - This includes prescription meds, non-prescription meds, vitamins, and herbal medications.
- Medications **must be turned in** prior to camper arrival.
- All narcotics and controlled medications must be locked and stored in the Health Center.
- Refrigerated medications must be stored in the health center refrigerator.
- Staff will be able to retrieve their medications at each meal and independently administer if 18 years or older.
- If you are a staff member younger than 18 years, the healthcare team will administer the medications along with camper medications at meals and bedtime.

Staff Illness

- The healthcare staff will be available to staff members to respond to acute illness and minor injuries.
- Any staff member with fever, cold symptoms, nausea, vomiting, diarrhea, a new rash, pink eye, or other infectious concerns should contact the Health Center staff as soon as possible. You should not allow yourself or other staff with these symptoms to be around our campers until cleared. This is to protect our campers.
- Staff who are sick for ≥ 2 days may be advised to return home.

Universal Precautions



****If it's wet and not yours, don't touch it!****



Defined: Techniques used to prevent exposure to bloodborne pathogens.

- Bloodborne pathogens are tiny germs present in blood that cause disease in humans, including HIV, Hepatitis B virus (HBV), and Hepatitis C virus (HCV).
- HIV cannot spread by casual contact such as hugging, holding hands, or sharing utensils.

Application:

- Applies to ALL staff and campers and **ALL body fluids**.
- Does not replace the need for proper hand washing.

Techniques:

- Healthcare staff will use care to prevent injuries when handling needles, scalpels, or other sharp instruments. All needles/sharps should be placed in puncture resistant sharps containers for disposal. Healthcare staff are responsible for disposal of all sharps containers.
- Wear gloves when it is likely that hands might be in contact with body substances (gloves found in first aid kit). Discard gloves and wash hands after soiling or contact with blood or body substances.
- Contaminated equipment, furniture or other surfaces should be disinfected by the medical staff. Please call 502-794-4386 for any blood spills. Wear gloves and use disposable paper towels to clean surface. Dispose gloves and wash hands when done.
- Contaminated trash (saturated with blood) should be placed in a red medical waste bag, tied, and taken to health center for disposal. The red bags will be available in the health center.
- CPR masks are located with the AEDs and are to be used for resuscitation.
- If hands or other skin surfaces accidentally come in contact with blood or other body substances, they should be immediately washed with soap and water.
- If significant exposure (**needle stick, mucous membrane exposure, or contact with non-intact skin to blood**) occurs, report the incident to the Health Center staff immediately. You may need testing or medications with significant exposure.

WASH YOUR HANDS!!!

- Use warm water and soap as friction greatly decreases microbes
- Before and after every meal
- After going to the bathroom
- After assisting campers or other individuals with personal care



- Hand sanitizer is available in activity areas and the dining hall in the event soap and water are not available (i.e. lakefront, nature)
- Staff and campers should cough/sneeze into bend of elbow, not hand.

SOILED LINEN:

- Soiled linen should be placed in clear plastic laundry bags marked.
- Personal clothing items soiled by stool or blood should be labeled (camper's name).
- All laundry is treated as if potentially infectious.

FOOD and ALLERGIES

- Campers will have food allergies identified on the back of their name tag to benefit counselors. We will try to provide alternative food options for those with allergies. Parents may be asked to send food for a child needing specific food options. There will also be an allergy free table for campers to sit at during all meals.

HELPFUL REMINDERS

- SUNSCREEN
- INSECT REPELLENT
- HANDWASHING
- PHYSICAL DISTANCING
- SLEEP
- HYDRATION

Asthma

Overview: Asthma is a chronic disease characterized by wheezing, coughing, shortness of breath.

Pathophysiology: When exposed to “triggers” such as mold, dust, animal dander, smoke allergens, cold air and infections, children can experience asthma attacks, or “exacerbations.” The small airways of the lungs become constricted and inflamed. The signs of an asthma attack are wheezing, shortness of breath, rapid breathing, chest pain or tightness, and coughing.



Clinical: There are different severities of asthma:

- Some children only experience *exercise induced asthma attacks* related to exercise or vigorous activities.
- Some children experience their asthma attacks because of severe allergies that cause the attacks such as pollens, molds, dust, animal dander, and hay.
- Some campers wheeze every day, some more occasionally.

Medication:

- Medication to control allergies.
- Inhalers to treat the symptoms of asthma.
- Inhalers to prevent attacks from happening.
- Nebulizers – special machines to administer the medicine.

Peak Flow Meter:

- Measures the peak expiratory flow rate (exhalation).
- If done properly, may be used to monitor asthma severity once baseline is established.

How does this affect the camper experience?

- When asthma is well managed a camper can lead a relatively normal life. As long as they take their prescribed medication, they can play sports and participate in activities.
- Some campers may have decreased respiratory tolerance to activity. Do not force them to participate in an activity if their breathing is restricting their ability.
- Common complaints may be, “my chest hurts”, “my chest feels tight”, or “I can’t catch my breath.”
- Many campers will have medication they have to take multiple times a day.

How do you prepare for the camper?

- Take all complaints of chest pain and breathing problems seriously. Report any issues to the healthcare team.
- Be aware of food and other allergies that your campers have. Watch closely for allergy and asthma symptoms at the horse barn.

- Some campers may need inhalers available all the time. You may be expected to carry those inhalers at all times and use as needed. If a camper is using an inhaler frequently, please notify the healthcare provider.
- Allow campers to determine their activity level. They will limit themselves based on symptoms and experience. Be mindful of campers that seem to be slowing down. Use frequent breaks for the group.
- In some circumstances, you may be asked to carry an Epi Pen as well. Please remember to trade off as the camper's counselor's change.

Hemophilia, Von Willebrand Disease, Rare Factor Deficiencies, & Platelet Disorders

Overview: Bleeding disorders result from a deficiency in blood clotting factors. The person is more likely to bleed or unable to stop bleeding. **They bleed longer, not faster.**



Bleeding Disorder patients can be missing:

- Coagulation factors: proteins that circulate in the bloodstream. (Hemophilia – Factor VIII or Factor IX)
- Other factors: proteins that interact with coagulation factors. (von Willebrand factor)
- Rare Factor Deficiencies – individuals may have deficiencies in other clotting factors other than Factor VIII/IX; they may be deficient in Factors such as 13, 10, 7, and 5.
- Platelet disorders may be a deficiency in platelets or a dysfunction of platelets – both of which can cause increased bleeding.

Increased risks for bleeding include:

- Trauma (esp. joint injury)
- Menstrual cycles
- Dental hygiene
- Nosebleeds

Bleeding may occur spontaneously without injury. You won't always see visible bleeding. Often the bleeding occurs in the joints (knees, ankles, elbows). **If a child with hemophilia complains of joint pain, believe them and seek treatment early. They will feel bleeding in the joint before you can see swelling.**

Treatment:

- Includes clotting factor replacement therapy which is given IV; Newer medications may be given SQ.
- Children may receive treatments as a preventative measure (called prophylaxis); Some children only receive treatment as needed for a bleeding episode.
- If treatment needed, please call the mobile clinic (502-794-4386) who can often treat the camper at the site of the activity.
- Prophylaxis treatments will usually be done right before or right after breakfast on their assigned day/days.
- Education sessions may also be provided for campers.

How does this relate to the camp experience?

- Contact sports are discouraged for individuals with a bleeding disorder
- A simple cut may take longer to clot. Apply direct pressure for 5 minutes. No peeking! There are first aid kits in each activity area with gloves and supplies as needed. Please notify healthcare staff if bleeding occurs.

- You can assist with controlling bleeding episodes and swelling by using RICE techniques.
R= rest
I = ice
C = compress –ace bandage or other wrap
E = elevate - place extremity on pillow or stool
- Report any injury or hit to the head, chest, throat, spine or stomach. These can be life-threatening injuries for an individual with hemophilia and should be addressed by the health center.
- Watch for joint bleeds. Look for swelling, bruising, limping or complaints of pain.

These children should not receive NSAIDS (Ibuprofen, Naproxen), aspirin, or medications containing aspirin (i.e., Pepto-Bismol).