

# YOUTH CAMP REGULATIONS

## COMMON HEALTH QUESTIONS

### Records

1. Question: What health records must be available at the camp?

Answer: A physical examination or health status certification for both campers and staff by a physician, advanced practice registered nurse, registered nurse or a physician's assistant, shall be kept on site.
2. Question: How recent does the physical exam need to be?

Answer: The physical exam or health status certification needs to be within thirty-six months prior to the date of arrival at camp.
3. Question: May the physical exam be waived?

Answer: Yes, it may be waived if it is contrary to the religious beliefs of the camper or parent(s). A written statement requesting such exemption shall be submitted annually and kept on file at the camp. A child who is determined homeless may now be allowed to attend the camp for up to 90 days without the physical exam, health status certification and immunization records.
4. Question: Do campers and staff require immunizations?

Answer: Yes, both campers and staff who are school age or younger through the twelfth grade shall include documentation that they have been adequately immunized according to the schedule adopted by the Connecticut Commissioner of Public Health.
5. Question: May there be a religious exemption for immunizations?

Answer: Yes, a medical or religious exemption may occur.
6. Question: What is an individual plan of care?

Answer: An individual plan of care is a plan developed by the child's parent(s) and health care provider for a camper with special health care needs such as, allergies, special dietary needs, dental problems, hearing or visual impairments, chronic illness, developmental variations or history of contagious disease. The plan of care includes appropriate care of the camper in the event of a medical or other emergency and shall be signed by the parent(s) and each staff member responsible for the care of the camper.

## Health Care

1. Question: What is a memorandum of understanding?

Answer: There shall be on file a memorandum of understanding with the on-call or resident physician or advanced practice registered nurse concerning the provision of medical care for emergencies and of routine care.
2. Question: What is meant by *Standing Orders*?

Answer: Standing Orders are a set of medical directives reviewed and approved by the camp physician or advanced practice registered nurse annually. They may contain directions for the administration or application of stock medications carried out by the licensed nurse. These are typically orders for medications to be administered for conditions that may frequently occur in a camp setting. Examples would include medications for constipation, diarrhea, vomiting, indigestion, headache, pain, fever, swimmer's ear, cold symptoms and cough. These standing orders may only be administered by a person with statutory authority to do so (e.g. a licensed nurse.) A "licensed nurse" is defined as an Advanced Practice Registered Nurse (APRN), Registered Nurse (RN) or licensed Practical Nurse (LPN).
3. Question: Who can use standing orders?

Answer: Standing orders are written instructions that may only be followed by a licensed nurse. An LPN may administer medications contained in the standing orders as long as an assessment is not required. An LPN may not make an assessment as that exceeds the scope of practice of that profession.
4. Question: What is meant by Instructions for the Director of First Aid?

Answer: Instructions for the person in charge of first aid are written directions to be followed to render the initial treatment to the injury or illness. This initial treatment would be provided while awaiting further care at a hospital or other emergency services if needed or no further care may be required. No medications would be included in these instructions. The instructions for the First Aider are to be reviewed and/or revised by the camp physician or advanced practice registered nurse annually.
5. Question: Who should use Instructions for the Director of First Aid?

Answer: LPN, an appointed unlicensed camp personnel, EMT, EMT-P, EMR, AEMT and Connecticut licensed athletic trainer may carry out advanced practice registered nurse or physician's first aid instructions provided they have the required proof of first aid training.

6. Question: Do all camps need Instructions for the Director of First Aid?  
Answer: Yes. Where the camp only employs a first aider and does not have a licensed nurse.
7. Question: What first aid supplies are required in camp?  
Answer: The supplies and equipment shall be specified by the camp physician or advanced practice registered nurse in the First Aid Instructions.
8. Question: What is the requirement for the bound volume?  
Answer: Camp must maintain an abstract record of all cases treated at the camp which shall be kept in a manner that prevents alteration of the information contained in the record. A bound volume is one example of an abstract record it shall include the date, time, circumstances that resulted in the case, the condition, treatment provided and persons responsible for the care.
9. Question: What is the responsibility for the abstract record?  
Answer: At least once a week these cases recorded in the abstract record shall be reviewed by the youth camp physician or advanced practice registered nurse who shall sign and date the abstract record indicating the review.
10. Question: Must there be a telephone line in the first aid area?  
Answer: Yes, there must be a working telephone available to the first aid staff with posting of phone numbers of the camp physician or advanced practice registered nurse, camp director, camp nurse, nearest hospital, local director of health, local fire department, local police, poison control center, and ambulance services.
11. Question: What is needed if there are ill or injured individuals or individuals who need isolation?  
Answer: There must be a defined area where the ill or injured may rest or receive care. This area shall be adequate to provide the temporary isolation of any suspected communicable disease and shall have its own toilet facility, not used for other purposes.
12. Question: Who is responsible for the Health Care in a camp?  
Answer: The physician or advanced practice registered nurse shall be on call and responsible for all health care, including first aid.
13. Question: When must the camp employ a registered nurse?  
Answer: When there are 250 or more campers or staff in residence (in a residential camp).

14. Question: Can a physician, nurse or other health care professional work with a license from another state?
- Answer: A physician who is licensed by another state whose standards are equivalent to or greater than those required in Connecticut may practice as a youth camp physician in Connecticut for a period not to exceed nine weeks. A nurse or other health care professional must hold a current license issued by the State of Connecticut, Department of Public Health.
15. Question: What is a temporary permit?
- Answer: A nurse from another state may apply to the Department of Public Health for a temporary permit to work in Connecticut. A temporary permit is only issued one time and is granted for 120 days.

### **Administration of Medication**

1. Question: Must a youth camp administer medications?
- Answer: If a youth camp administers medications, they must follow the Youth Camp Regulations as written. Unlicensed program staff must be trained and approved before they may administer medications. A camp should familiarize itself with the American's with Disabilities Act (ADA) before making a decision not to administer medications. A program may be required to make reasonable accommodations for a child.
2. Question: How may campers receive their medications?
- Answer: Medications may be received by self-administration by the campers, administered by a licensed person who has statutory authority to do so, or by an unlicensed program staff who has been satisfactorily trained.
3. Question: What types of medications may be administered by unlicensed program staff who have been satisfactorily trained at camp?
- Answer: Oral, topical, inhalant, injectable by a premeasured commercially prepared auto-injector, rectal, and injectable other than by a premeasured commercially prepared auto-injector may be administered.
4. Question: What is needed for a camper to self-administer medications?
- Answer: Campers may self-administer medications with documented parental and authorized prescriber permission. A staff member trained and approved to administer the required medication shall be present whenever a child who has written orders to receive medication is enrolled and present at the youth camp.

5. Question: Are there any medications that do not require the order of an authorized prescriber?
- Answer: Yes. Diaper ointments, ointments free of antibiotic, anti-fungal or steroidal components, medicated powders, and gum or lip ointments that are non-prescription and applied topically.
6. Question: May unlicensed program staff administer over-the-counter medication without the order of an authorized prescriber?
- Answer: No, even an over-the-counter (non-prescription) medication other than described above must have an order by an authorized prescriber. Some examples of over-the-counter medications include calamine/caladryl lotion, Bacitracin ointment, Tylenol, and hydrocortisone cream.
7. Question: What is the difference between Medication error verse Significant medication error?
- Answer: Medication error means failure to administer medication to the right child, the right drug, the right dosage, the right route, and at the right time. Significant medication error means a medication error that is potentially serious or has serious consequences for a child including, but not limited to, the administration of medication, by the wrong route, to a child with a known allergy to the medication, given in a lethal or toxic dosage or causing serious medical problems resulting from such medication error.
8. Question: What if a medication error occurs?
- Answer: Medication errors shall be logged and recorded in the individual written medication administration record of the child. The youth camp physician or advanced practice registered nurse shall review all logs of medication errors on a weekly basis. A written record of the review and any recommendations made shall be kept on file at the youth camp. The parent shall be notified immediately of a medication error and notified in writing not later than seventy-two hours after the medication error occurred.
9. Question: What if a significant medication error occurs?
- Answer: The parent shall be notified immediately of a significant medication error and notified in writing not later than seventy-two hours after the medication error occurred, and the error shall be documented in the medication administration record. Significant medication errors shall also be reported immediately to the Connecticut Office of Early Childhood by telephone and in writing not later than the next business day.
10. Question: How must medications be stored?
- Answer: Medications must be stored in the original child-resistant safety container.

The container or packaging shall have a label which includes the child's name, name of medication, directions for the medication's administration and the date of the prescription. Except for non-prescription topical medications, medications shall be stored in a locked area or a locked container. Controlled medications shall be double locked.

11. Question: How must refrigerated medications be stored?
- Answer: They must be locked and stored under refrigeration in accordance with manufacturer's directions. Medications must be stored away from food and inaccessible to children and unauthorized staff.
12. Question: How must emergency medications be stored?
- Answer: Equipment and medications prescribed to treat asthma, administer glucagon, control seizures, or as an emergent first line of defense medication against an allergic response or a diabetic reaction shall be stored in a safe manner, inaccessible to other children, to allow for quick access in an emergency.
13. Question: Must a written record be kept when youth camp staff administers medications, or can the abstract record serve as the record?
- Answer: An individual written medication administration record for each child must be kept.
14. Question: What are the training requirements for EMT, EMT-P, EMR, AEMT, Connecticut licensed athletic trainer and unlicensed program staff to enable them to administer medications?
- Answer: Medication Administration Training includes oral, topical, inhalant, rectal, and injectable other than by a premeasured commercially prepared auto-injector and has a three year renewal timeframe. Injectable by a premeasured commercially prepared auto-injector shall be valid for one year. Training must be provided by a pharmacist, physician, physician assistant, advanced practice registered nurse or a registered nurse.
15. Question: May an unlicensed program staff be trained for just the medication that is being given?
- Answer: Yes. Training required is specific to the type of medication being administered.
16. Question: What happens when a camp has a licensed nurse part of the time and unlicensed program staff at other times administering medications?
- Answer: The licensed nurse would administer medications according to Standards of Practice. She/he may work from individual orders and the Standing Orders. The unlicensed program staff may administer medications under an individual order for a child and may not administer stock medications as directed by Standing Orders.

## **Monitoring of Diabetes**

1.     **Question:**     What training is required of staff who will be conducting finger-stick blood glucose test?

**Answer:**       The training for finger-stick blood glucose testing may be provided by the child’s parent, a physician, physician’s assistant, advanced practice registered nurse, certified emergency medical technician, or a registered nurse. A valid first aid training certificate is required by the trainee prior to glucose monitoring training.
  
2.     **Question:**     What should be done if the glucose reading is not within the desirable range?

**Answer:**       The written order from the authorized prescriber should be followed. Such order should indicate the testing schedule, the target range, the specific action to be taken and carbohydrates to be given if the test results are outside (below) the target range, dietary or activity requirements or restrictions and when the child’s parent and/or authorized prescriber shall be contacted.
  
3.     **Question:**     How can you determine if the person administering medications or glucose monitoring is properly trained?

**Answer:**       A licensed nurse would need no further training but a copy of her/his current license should be available at the camp. A copy of the training given to an unlicensed program staff shall be available for review at the camp. If there are any questions about the contents of the training, a copy of the actual curriculum may be reviewed for further evaluation.