YOUTH CAMP REGULATIONS

COMMON HEALTH QUESTIONS

Record keeping

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.

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. A written statement must be submitted annually and kept on file at the camp.

4. Question: Do campers and staff require immunizations?
   Answer: Yes, both campers and staff must be immunized against diphtheria, tetanus, pertussis, polio, measles, rubella and any other disease specified by the Regulations of Connecticut State Agencies (RCSA).

5. Question: May there be a religious exemption for immunizations?
   Answer: Yes, a medical or religious exemption may occur.

6. Question: What agreements must be in place for medical emergencies?
   Answer: a) For a residential camp, a memorandum of understanding between the camp director and the nearest hospital for emergency medical care shall be in place.
   b) There shall also be a memorandum of understanding between the on-call or resident physician for medical emergencies and routine care.

Standing Orders for the Nurse or Instructions for the Director of First Aid (First Aider)

1. Question: What is meant by Standing Orders?
   Answer: Standing Orders are a set of medical directives reviewed and approved by the camp physician annually. They may contain directions for the administration or application of stock medications and are carried out by licensed medical personnel who have statutory authority to do so.
2. Question: What is meant by Instructions for the Director of First Aid?

Answer: Instructions for the person in charge of first aid would be written directions to be followed to render the initial treatment to the injury. 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 annually.

3. Question: Who can use standing orders?

Answer: Standing orders are written instructions for the licensed nurse to follow after assessing the camper. 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.) Standing orders are to be reviewed and/or revised by the camp physician annually.

4. Question: Who should use Instructions for the Director of First Aid?

Answer: Appointed unlicensed camp personnel may carry out physician’s first aid instructions provided they have the required proof of first aid training and CPR and DO NOT administer medications of any kind from standing orders.

5. Question: Do all camps need Instructions for the Director of First Aid?

Answer: Yes.

First Aid

1. Question: What first aid supplies are required in camp?

Answer: The supplies and equipment shall be specified by the camp physician in the Standing Orders, the Instructions for the Director of First Aid or the Physician’s First Aid Instructions.

2. Question: What is the requirement for the bound volume?

Answer: An abstract record of all cases treated at the camp shall be kept in a bound volume noting the date, the condition, the disposal and the person responsible for the care.

3. Question: What is the responsibility for the bound log?

Answer: The camp physician shall review all the cases at least once a week. The camp physician shall sign and date the bound log documenting the review.
4. Question: Must there be a telephone line in the first aid area?

Answer: Yes, there must be a telephone line for the use of the first aid staff with posting of phone numbers of the camp physician, camp director, camp nurse, nearest hospital, local director of health, local fire department, local police, poison control center, nearest state police barracks, and ambulance services.

5. 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. The area shall be adequate to provide temporary isolation of any suspected communicable disease. A toilet facility, not used for other purposes, shall be available in the first aid area.

**Staffing**

1. Question: Who is responsible for the Health Care in a camp?

Answer: The physician shall be on call and responsible for all health care, including first aid.

2. 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).

3. 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.

4. 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.

**Medication Administration**

1. Question: How may campers receive their medications?

Answer: Medications may be received by self-administration by the campers, or administered by a person who has statutory authority to do so, or by an unlicensed program staff who has been satisfactorily trained.
2. Question: What types of medications may be administered by unlicensed program staff who have been satisfactorily trained at camp?

Answer: Only oral, topical and inhalant medications and a pre-measured commercially prepared injection may be administered.

3. Question: What is needed for a camper to self-administer medications?

Answer: Campers may self-administer medications with documented parental and authorized prescriber permission.

4. 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.

5. 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.

6. Question: What if a medication error occurs?

Answer: The medication error shall be logged and recorded in the individual written medication administration record (MAR) of the individual child. A significant medication error must be reported in writing within 72 hours to the Department (DPH). The camp physician shall review all logs of medication errors on a weekly basis. A record of that review shall be kept on file at the camp.

7. Question: How must medications be stored?

Answer: Medications must be stored in the original child-resistant safety container. Except for non-prescription topical medications, medications shall be stored in a locked area or a locked container. Controlled medications shall be double locked.

8. 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.

9. Question: What must the medication label include?
Answer: The label must minimally include the child’s name, the name of the medication, the directions for the medication’s administration and the date of the prescription.

10. Question: Must a written record be kept when unlicensed program staff administers medications, or can the bound log serve as the record?

Answer: An individual written medication administration record for each child must be kept.

11. Question: What are the training requirements for unlicensed program staff to enable them to administer medications?

Answer: Basic Medication Administration Training includes oral, topical, and inhalant medications and has a three year renewal timeframe. Training must be provided by a pharmacist, physician, physician assistant, advanced practice registered nurse or a registered nurse.

12. Question: May an unlicensed program staff be trained for just the Epi-Pen?

Answer: No. Epipen training is done in addition to the basic medication administration training and must be renewed yearly.

13. 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. If a youth camp refuses to administer medications, it may be possible that a federal complaint may be made related to the Americans with Disabilities Act (ADA). The program may be required to make reasonable accommodation for the child.

14. Question: What would happen if the 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.

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**Diabetes Monitoring**

1. Question: Who may provide training for the finger-stick blood glucose test?

Answer: The child’s parent, a physician, physician’s assistant, advanced practice registered nurse, or a registered nurse may provide the training. 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 authorized prescriber shall provide a written order indicating 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.