



Camp Rince Ceol

Irish Dance Summer Camp

We hope that our nurses will blend with the normal operation of the camp, become familiar with the program, campers and fellow staff, but their primary concerns in the summer are the health and safety of each camper, and the efficient organization of our health records. The nursing staff is permitted to and encouraged to participate in all camp activities during the slow times in the Health Center as it is very helpful if campers are familiar with the nurses from their camp activities before they meet in a medical situation, but they should be aware not to lose sight of priorities. Our Health Center is primarily a medical facility; a comfortable, homelike medical facility.

Camp nurses fill many different roles during the summer, they are counted upon to 1) administer first aid, 2) tend to illness, 3) be the infirmary housekeeper and 4) be a resident parent.

- 1) All of the camp's bumps and bruises, large or small, channel through the Health Center. It is important that the nurse see all of the injuries, and that the proper antiseptics, ointments, and dressings are applied. Close consultation with the Director will assure that further medical attention, if necessary, is received in a timely fashion. ALL TREATMENTS should be documented in the event of infection or further complications. EVERYONE who enters the Health Center, for any reason other than receiving daily medication should be documented in the Camp Health Log.
- 2) **ILLNESS:** The Health Center will obviously treat sick campers and counselors. The most common ailments are dance related injuries such as, blisters, sore feet, shin splints, cracked toe nails, twisted ankles and muscle soreness or fatigue. Other 'every day' ailments tend to involve infected stomach aches and too much heat. Fluids and analgesics cure most of our ills, but extended symptoms may require antibiotics or a visit to the doctor. Documentation is critical here as well, so that extended illness or small epidemics may be tracked and a precise, well-documented history exists.
- 3) **DIAGNOSTICS:** First it must be said that it is our policy that Camp Nurses do not 'diagnose' a camper ailment. Occasional instances will require that the nursing staff and the directors make judgments about necessary and further treatments. These instances usually center on questions such as "should a Dr. see this child?" or "is this a sprain or a potential break?". We usually tend to take the most cautious route for treatment, but don't want to be over-reactive. Every rash can't be chicken pox and every bump won't be a broken bone, but the one in a thousand chance cannot be overlooked. Communication with the Director in these instances is vital. It is Camp Policy that any ankle injury requires a phone call to Parent and a possible trip to the Hospital for X-Rays.
- 4) **Resident Parent:** We have Counselor on the staff to help the Campers avert homesickness. However, it ultimately seems that the Health Center, with its sympathetic nurses is the only place to get "homesick pills". Homesickness can be traumatic in the mind of a small child, and we want them to get over it as quickly as possible. We'll cater to them at first and get firmer with them as there homesickness turns into a desire for attention. You should easily notice this gradual change, but if not, give the camper the benefit of the doubt. It has been our finding that homesickness can affect any age the symptoms are just different. The Director can be called upon when 'firmness' is needed.

COMMUNICATIONS:

In order to maintain the high standards necessary for a successful program, Nurse Communications with the Camp Directors are of VITAL IMPORTANCE. One Nurse should be at every Counselor meeting in the mornings to keep the Health Center abreast of the daily schedules and upcoming events and to provide the rest of the staff with any information necessary concerning any campers who have visited the Health Center.

When unusual situations such as emergencies or the necessity of a Doctor or hospital visits arise, the Camp Director should be consulted immediately to make the decision on the proper action to be taken.

The Camp Director should be notified of all situations which may arise in which the Parent must be contacted. Camper parents should be notified in the event their child is ill or injured, however, **ALL COMMUNICATION** with parents must be cleared with the Camp Director **first**.

RECORD KEEPING:

As in every other application of health care, accurate record keeping is extremely important. For a wide variety of reasons, accountability included, we need to know that medication was administered on time, precisely when a bug bite was first noticed, exactly which girl came in to have a tick removed, etc. Each document must be maintained as accurately and timely as possible. These written documents are our only history of medical care each summer. If there is ever a doubt about the importance of an incident, get it written down. You will never have too much written information in a child's file.

OPENING DAY:

As each camper checks in at camp, they must pass through the infirmary. On Opening Day, the nurses take the first readings weight and height and also check eyes and ears and general appearance to insure that no camper arrives with an illness. (enclosed is a copy of our medical card that will be filled out by the Camp Nurse at Camper Screening. Please note that Camper information including session, name, allergies and Rx will already be filled in by Camp office) Also, careful attention must be taken to collect all medication and make note of any that must be taken on a regular basis (for record on the daily medication list.)

NOTE: Never accept any unlabeled medication, and be sure you are aware of what the purpose and effects are of all medications. If you are expecting a specific medication for a child, make sure it arrives.

On opening day, additional staff members will be assigned to help in the infirmary. Campers will line up outside and strip down to their bathing suit. As they file through the infirmary, a volunteer will check and record Campers temperature. The nurse will check their eyes, ears and throat and record readings on their medical card. You will also make note of and visit with parents about all medications. A plastic baggie should be labeled for each Campers medication. One additional staff member will monitor outside to get campers organized Priority should be given to any Camper waiting in line with his parents.

MISCELLANEOUS:

List such as Medication Allergy, Dietary List, Environmental/Seasonal Allergy and Epi-Pen Users will provided to the Nurse before Opening Day Screening.

Each Nurse will have a Nurse Book that contains Roommate and Cabin listing, Daily Schedule, Meal times and medication dosage times.

The Nurse will communicate wit other Staff members under a 'walkie-talkie' system. Directions for use will be provided by the Director. It is important that at least one Nurse be in the Health Center at ALL times. If the Nurse must leave they **MUST** take the 'walkie-talkie' with them.

ASSISTANT NURSE

The health duties are nuch like the Head nurse health duties. The difference is the following

1. The Assistant Nurse is not permitted to administer drugs/medications to Campers
2. The Head Nurse makes recordings in Health Log Book
3. The Assistant Nurse main duties is to administer first aid, assist in Health Center Housekeeping and provide TLC for each Camper.