

Westchester County Department of Health

Camp Safety 101

2018 Camp Workshop

INSECT REPELLENT



EFFECTIVE JUNE 2017

- Section 1394 of the public health law has been amended.
- Each children's overnight camp, summer day camp and traveling summer day camp shall allow children attending such camp to carry and use insect repellent with the written permission of a parent or guardian
- A record of such permission shall be maintained by the camp.
- A child who is unable to physically apply insect repellent may be assisted by unlicensed personnel when directed to do so by the child, if permitted by a parent or guardian and authorized by the camp.
- Camp safety plans and camp health forms should be updated.

SUN SAFETY



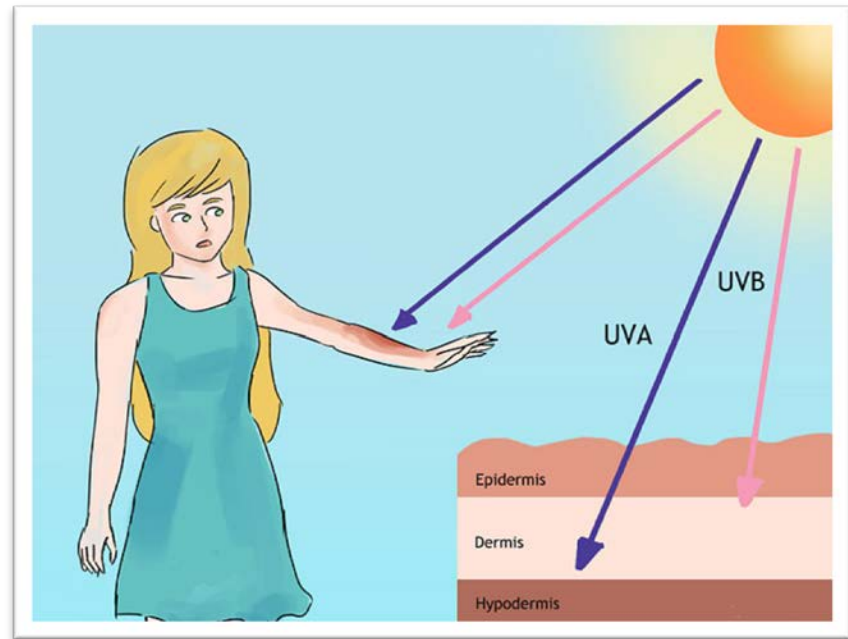
THE FACTS

- Skin cancer is the most common form of cancer in the United States.
 - Over 1 million people are diagnosed each year.
- It is estimated that 90% of non-melanoma skin cancers and 65% of melanoma skin cancers are associated with exposure to Ultraviolet (UV) radiation from the sun.
- Fortunately, a big part of its prevention is through a broad sun protection program, which includes the use of sunscreen.



UV RADIATION

- It is a known carcinogen.
- It can damage your skin in as little as 15 minutes.
- There are two types that affect the skin.
 - UVA Rays- These rays are not absorbed by the ozone layer, penetrate deep into the skin, and are a big contributor to premature aging.
 - UVB Rays- These rays are partially absorbed by the ozone layer and mostly affect the surface of the skin. They are the main cause of sunburn.



SUNSCREEN

- Sunscreen protects the skin by absorbing or reflecting UVA and UVB rays.
 - Each sunscreen is given a sun protection factor (SPF) number showing its effectiveness in blocking UV rays.
 - The greater the number the more protection it offers, but it is recommended that a sunscreen with at least 15 SPF is used.
- Sunscreen should be applied at least 20 minutes before sun exposure to allow it to absorb into the skin. It should be regularly applied every 2 hours or more often if you are swimming or perspiring.
- Shade, loose-fitting clothing, hats, and sunglasses are also important in aiding in protecting the skin from sun exposure.

SUNSCREEN LEGISLATION

- Chapter 242 amended NYS Public Health Law allowing a child to carry and use sunscreen at camp when all the following apply:
 - It is used to protect against overexposure to the sun.
 - It is approved by the FDA for over-the-counter use.
 - The child's parent or guardian provides written permission for the child to carry and use sunscreen.

SUNSCREEN LEGISLATION

- This legislation also requires the camp to maintain a record of the parental/guardian permission and allows unlicensed personnel to assist with the application of sunscreen when the child is unable to do so, if the child requests the assistance and that this assistance is permitted/authorized by the parent/guardian and the camp.
- Legislation effective date: August 30, 2013.
- Camp safety plans and camp health forms should be updated.

EXTREME HEAT



THE FACTS

- Extreme heat is defined as “summertime temperatures that are substantially hotter and/or more humid than average for that location at that time of year.”
- Along with the elderly and people with chronic medical conditions, infants and children are more prone to heat stress.
- **Heat-related deaths and illnesses are preventable.** Despite this fact, around 618 people in the United States are killed by extreme heat every year.

THE FACTS

- Heat-related illness occurs when a person's body cannot counterbalance and properly cool themselves.
- Sweating is how the body normally cools down.
 - During these extreme conditions, sweating is not enough and body temperature quickly increases.
- The following can affect the body's ability to cool down:
 - High humidity prevents sweat from quickly evaporating
 - Age
 - Obesity
 - Fever
 - Dehydration
 - Sunburn
 - Prescription Drugs

RECOGNIZING THE SIGNS OF HEAT DISORDER

- It doesn't take long in these extreme conditions to start feeling the effects.
- The following slide shows the symptoms to keep an eye out for, for different heat disorders and sun overexposure.

HEAT DISORDER SYMPTOM CHART

Disorder	Definition	Warning Signs
Heat Stroke	<ul style="list-style-type: none"> •Occurs when the body cannot regulate its temperature. •Body temperature rises quickly •Sweating fails and the body cannot cool down 	<ul style="list-style-type: none"> •Extremely high body temperature (above 103F) •Red, hot and dry skin with no sweating •Rapid, strong pulse •Throbbing headache •Dizziness •Nausea •Confusion •Unconsciousness
Heat Exhaustion	<ul style="list-style-type: none"> •Milder form of heat-related illness •Can occur after several days of high temperature exposure and inadequate replacement of fluids •This is the body's response to an excessive loss of water and salt present in sweat 	<ul style="list-style-type: none"> •Heavy Sweating •Paleness •Muscle Cramps •Tiredness •Weakness •Dizziness •Headache •Nausea or vomiting •Fainting

Source: <http://emergency.cdc.gov>

HEAT DISORDER SYMPTOM CHART

Disorder	Definition	Warning Signs
Heat Cramps	<ul style="list-style-type: none"> •Tends to affect those who sweat a lot during strenuous activity •Sweating uses the body's salt and moisture. Low salt levels in the muscles can be the cause of heat cramps •May also be a symptom of heat exhaustion 	<ul style="list-style-type: none"> •Muscle pains or spasms usually in the abdomen, arms or legs
Sunburn	<ul style="list-style-type: none"> •Reddening, inflammation, and in severe cases, blistering and peeling of the skin due to overexposure to ultraviolet rays of the sun 	<ul style="list-style-type: none"> •Skin becomes red, painful and abnormally warm after sun exposure •Fluid-filled blisters
Heat Rash	<ul style="list-style-type: none"> •A skin irritation caused by excessive sweating during hot, humid weather •Most common in young children 	<ul style="list-style-type: none"> •Appears as a red cluster of pimples or small blisters •Commonly occurs on the neck, upper chest and in the elbow creases

Source: <http://emergency.cdc.gov>

EXTREME HEAT PREVENTION GUIDE

- Drink plenty of fluids - Since sweating removes minerals and salts from the body, these must be replaced.
 - Drink more water than usual and do not wait until you're thirsty.
 - During activities drink enough cool fluids each hour to maintain normal color and amount of urine output.
 - Sports beverages can help replace the lost minerals and salts.
- Wear proper clothing and accessories.
 - Lightweight, light-colored and loose fitting clothing.
 - Wide brimmed hat.
 - Sunglasses.
 - Putting on sunscreen with at least a 15 SPF or higher.

EXTREME HEAT PREVENTION GUIDE

- Limit outdoor activities to morning and evening hours and utilize shady areas.
- Be sure to pace yourself, stop and rest when needed.
- When possible, stay indoors.
- Try to avoid hot foods and/or heavy meals since they will add to your body heat.



HEAT INDEX

- Defined as a quantity expressing the discomfort felt as a result of the combined effects of the temperature and humidity of the air.
- The following slide shows a table that can assist in determining the activity level and actions to take based on the RealFeel Temperature (heat index).
- The RealFeel Temperature can be obtained at the following website by inputting your zip code or town/city and state:
<http://www.accuweather.com>

HEAT INDEX PROCEDURES

Please refer to the following chart to take the appropriate actions:

	RealFeel (Heat Index) under 79 degrees	Full activity. No restrictions
R E C O M M E N D E D	Heat Index Caution: RealFeel (Heat Index) 80 degrees to 85 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider reducing the amount of time for the practice session.
	Heat Index Watch: RealFeel (Heat Index) 86 degrees to 90 degrees	Provide ample water and multiple water breaks. Monitor athletes for heat illness. Consider postponing practice to a time when RealFeel temp is lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time).
	Heat Index Warning: RealFeel (Heat Index) 91 degrees to 95 degrees	Provide ample water and water breaks every 15 minutes. Monitor athletes for heat illness. Consider postponing practice to a time when RealFeel temp is much lower. Consider reducing the amount of time for the practice session. 1 hour of recovery time for every hour of practice (ex. 2hr practice = 2hr recovery time). Light weight and loose fitting clothes should be worn. For Practices only Football Helmets should be worn. No other protective equipment should be worn.
REQUIRED	Heat Index Alert: RealFeel (Heat Index) 96 degrees or greater	No outside activity, practice or contest, should be held. Inside activity should only be held if air conditioned.

Approved May 1, 2010

RABIES



RABIES

- It is a preventable viral disease of mammals.
- The majority of rabies cases, about 7,000, reported to the CDC every year occur in wild animals such as;
 - Raccoons
 - Skunks
 - Bats
 - Foxes
- Raccoons are the most common carriers of rabies but bats more commonly infect people.

RABIES EXPOSURE

- The rabies virus is present in the saliva of an infected animal.
- Most common exposure is through the bite of a rabid animal.
 - Any penetration of the skin by teeth is considered a bite exposure.
 - It does not matter where the bite occurred on the body, there is still a potential risk for transmission.
 - Bites from some animals, such as bats, can be minor, making it difficult to detect the injury.
- Although uncommon, the rabies virus can also be spread if the infected saliva comes in contact with a scratch, abrasion, open wound (in the skin) or mucous membrane (such as mouth or eyes) of a person.

RABIES EXPOSURE

- Any potential rabies exposure should be reported to the Health Department.
- Camps are typically operating in areas that are prime habitat for wildlife, including bats.
- If a bat is found in an inhabited building, covered pavilion, etc., make every safe effort to capture the bat without coming in contact with it.
- The following slide lists items to have handy to use as a bat capturing kit.



CHILDREN'S CAMP BAT CAPTURING KIT

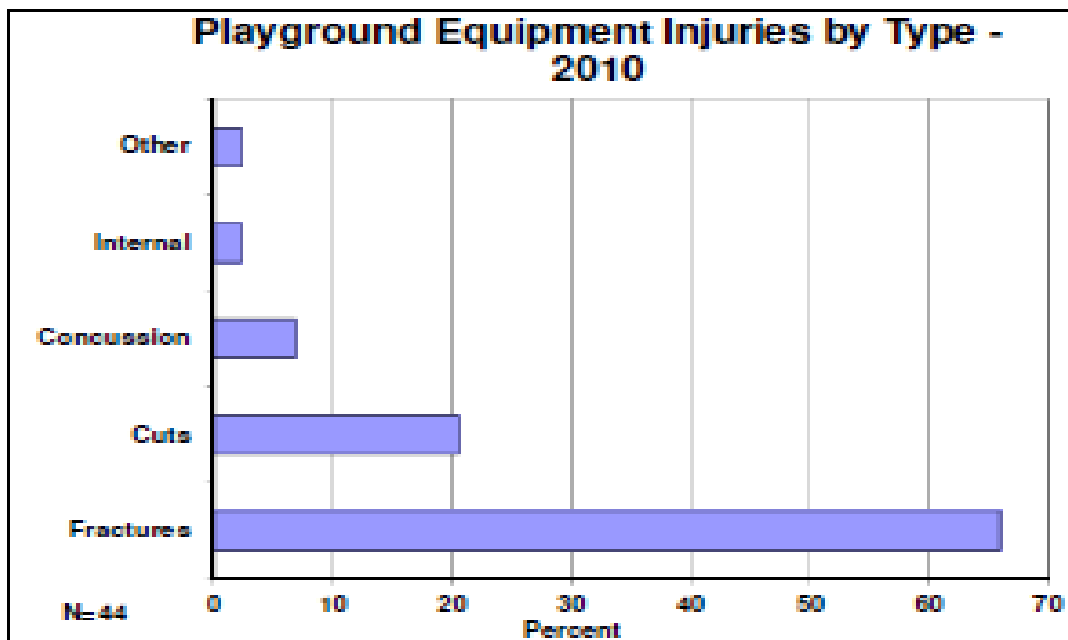
- Gloves (heavy, preferably pliable thick leather)
- Forceps (9" to 12" length, rat-tooth for gripping)
- Extension pole with net (fine mesh insect net of polyester or muslin material with a spring steel hoop on a telescoping pole)
- Coffee can with tight-fitting lid or similar container (e.g. cardboard ice cream carton with lid; keep multiple containers on hand)
- Sheet of cardboard to slide between wall and container to act as a lid
- Tape (to secure lid on container)
- Flashlights (including fresh batteries and extra batteries)
- General Guideline for Management of Bat-Related Incidents at Children's Camps (for display; article can be found on NYS Dept. of Health website)

PLAYGROUND EQUIPMENT SAFETY



PLAYGROUND EQUIPMENT INJURIES

- This chart shows the type and percentage of injuries that were reported to NYS Department of Health in the year 2010 and occurred on playground equipment.



PLAYGROUND INJURIES

- Playground equipment allows children to gain and test new skills by the many different challenges presented by the playground equipment.
- These challenges should be appropriate for the abilities of a certain age group.
 - Toddlers have a much different size, intellectual skill and physical ability than a school-aged child.

PLAYGROUND INJURIES

- Falls are a common occurrence on a playground.
 - As well as children using the equipment in unintended and unanticipated ways.
- Because of this, adequate supervision must always be present, proper protective surfacing should be present around and below the equipment and the grounds and equipment itself should be inspected daily for hazards.

PLAYGROUND INJURIES

- It is estimated that there are over 200,000 emergency room-treated injuries annually in the U.S.
- In a study, 2001-2008, reported to the CPSC, falls were the most common injury (44%), followed by equipment related hazards (e.g. breakage, tip over, design, and assembly (23%).
- Playground related deaths were also reported and involved entanglement of ropes, leashes or clothing, falls, and impact from equipment tipping over or structural failure.


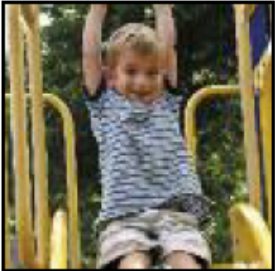

PREVENTION OF PLAYGROUND INJURIES

- **Age separation:** Separation of older, active children playing/running amongst younger, slower moving children who tend to have slower reaction times will help reduce the chance of injury.
- **Conflicting activities:** Keep active, physical activities (e.g. activities more suitable on an open field) away from more passive activities that occur on playgrounds.
- **Sightlines:** Ensure there are not any visual barriers (bushes/trees) preventing staff/counselors from completely seeing and supervising the campers.

PREVENTION OF PLAYGROUND INJURIES

- **Signs:** Many playgrounds have signs posted providing guidance to the age appropriateness of the equipment, but when not provided the design and scale of the equipment can easily show the intended age group for the equipment.
 - A child should be directed to the playground equipment that is appropriate for their age.
- If unsure what age group the equipment is appropriate for, the following slide gives a few examples.

EXAMPLES

TABLE 1. EXAMPLES OF AGE APPROPRIATE EQUIPMENT		
 <p>Toddler – Ages 6-23 months</p> <ul style="list-style-type: none"> • Climbing equipment under 32" high • Ramps • Single file step ladders • Slides* • Spiral slides less than 360° • Spring rockers • Stairways • Swings with full bucket seats 	 <p>Preschool – Ages 2-5 years</p> <ul style="list-style-type: none"> • Certain climbers** • Horizontal ladders less than or equal to 60" high for ages 4 and 5 • Merry-go-rounds • Ramps • Rung ladders • Single file step ladders • Slides* • Spiral slides up to 360° • Spring rockers • Stairways • Swings – belt, full bucket seats (2-4 years) & rotating tire 	 <p>Grade School – Ages 5-12 years</p> <ul style="list-style-type: none"> • Arch climbers • Chain or cable walks • Free standing climbing events with flexible parts • Fulcrum seesaws • Ladders – Horizontal, Rung, & Step • Overhead rings*** • Merry-go-rounds • Ramps • Ring treks • Slides* • Spiral slides more than one 360° turn • Stairways • Swings – belt & rotating tire • Track rides • Vertical sliding poles
<p>* See §5.3.6</p>	<p>** See §5.3.2</p>	<p>*** See §5.3.2.5</p>

PREVENTION OF PLAYGROUND INJURIES

- **Supervision:** Staff/counselors should always have their eyes on the campers when they are using the playground equipment, since injuries can happen so quickly.
 - The quality of the supervision can be affected by the knowledge staffers/counselors have on safe play behavior.
 - Is the equipment being used as it is intended (e.g. sliding down the slide, not running up it.)
 - Is the camper wearing proper foot wear.
 - Be sure to check for broken equipment, sharp edges, splintering wood surfaces, exposed/loose bolts, metal slides in direct sunlight, etc.

PREVENTION OF PLAYGROUND INJURIES

- Be sure to check for unsafe modifications, such as ropes tied to the equipment.
- Is the protective surface properly maintained.
- Be sure to stop dangerous horseplay, such as jumping from heights, climbing equipment posts, throwing the protective surface material, etc.
- Be sure campers do not wander away from the play area.
- Check the playground for any tripping hazards, such as exposed weed control fabric, exposed anchoring devices for the equipment (e.g. concrete footings), containment walls for protective surfaces materials (e.g. is it a contrasting color from the protective surface material, is the elevation change obvious, etc.).

INSPECTION AND MAINTENANCE OF PLAYGROUNDS

- Failing to maintain and inspect equipment has resulted in injuries.
 - Playgrounds should always be inspected for excessive wear, deterioration, and any potential hazard.
- The following table is an example of a daily inspection and maintenance checklist, which can be used to aid in developing your own.

Table 3. Routine inspection and maintenance issues

- Broken equipment such as loose bolts, missing end caps, cracks, etc.
- Broken glass & other trash
- Cracks in plastics
- Loose anchoring
- Hazardous or dangerous debris
- Insect damage
- Problems with surfacing
- Displaced loose-fill surfacing (see Section 4.3)
- Holes, flakes, and/or buckling of unitary surfacing
- User modifications (such as ropes tied to parts or equipment rearranged)
- Vandalism
- Worn, loose, damaged, or missing parts
- Wood splitting
- Rusted or corroded metals
- Rot

PROTECTIVE SURFACING MATERIALS

- The type of surfacing material present below and around playground equipment plays an important role in decreasing the likeliness of life-threatening head injuries.
- A fall onto a shock absorbing surface is less likely to cause a serious head injury than a fall onto a hard surface.
- According to the U.S. CPSC, there are a couple of options for surfacing material:
 - Unitary Surfacing Materials, e.g. rubber mats and tiles
 - Loose-fill Materials, e.g. wood chips
 - Keep in mind that the minimum depth of these loose-fill materials is based on the material type and fall height.
- The following chart, according to the U.S. CPSC, shows appropriate and inappropriate playground surfacing materials.



Appropriate Surfacing

- Any material tested to ASTM F1292, including unitary surfaces, engineered wood fiber, etc.
- Pea gravel
- Sand
- Shredded/recycled rubber mulch
- Wood mulch (not CCA-treated)
- Wood chips



Inappropriate Surfacing

- Asphalt
- Carpet not tested to ASTM F1292
- Concrete
- Dirt
- Grass
- CCA treated wood mulch

U.S. CONSUMER PRODUCT SAFETY COMMISSION

- For a more information, please follow the link below to the U.S. Consumer Product Safety Commission:

Public Playground Safety Handbook.

<https://www.cpsc.gov/s3fs-public/325.pdf>

BEST PRACTICES FOR CAMP OPERATORS



RATIOS FOR RTE AND CPR CERTIFIED STAFF

CODE REQUIREMENTS:

- First Aid (RTE or equivalent) = The Health Director or On-Site Designee. This individual may be counted toward the 1 per 200 campers requirement
- CPR (FPR or equivalent) = The Health Director (or On-Site Designee) AND 1 per 200 campers

RATIOS FOR RTE AND CPR CERTIFIED STAFF

CODE REQUIREMENT EXAMPLE:

- If there are 475 campers, the following are the **MINIMUM** number of required staff
 - 3 RTE (this includes the Health Director or On-site designee)
 - 4 CPR-FPR (this includes the Health Director or On-site designee)

RATIOS FOR RTE AND CPR CERTIFIED STAFF

- BEST PRACTICE:
 - Plan to have additional certified staff to avoid being in violation should the unexpected occur.
 - Common and mundane everyday occurrences such as doctor's appointments or family emergencies among staff, could leave you short staffed and vulnerable to legal action by this Department

SEX OFFENDER REGISTRY

CODE REQUIREMENTS:

- All camp employees **must be checked** against the NYS Division of Criminal Justice Services Sex Offender Registry: <http://www.criminaljustice.ny.gov>

SEX OFFENDER REGISTRY

BEST PRACTICE:

- Do you have staff working at your camp that have ever lived outside New York State? Do you know?
- To be sure, check your staff against the National Sex Offender Registry (it's free): <https://www.nsopw.gov/en>

EPI-PEN

CODE REQUIREMENTS:

- There is no requirement to maintain a supply of Epi-Pens for emergency use at a children's camp.
- Report to Westchester County Department of Health any use of Epi-Pens.

EPI-PEN

BEST PRACTICE:

- Maintain a supply of Epi-Pens at your camp for emergency use!!!
- The Camp only needs to have a prescription made out to them in order to stock the item
- Staff members must be trained in proper use of Epi-Pens
 - Refer to the following link for more information if your camp would like to participate in the Epi-Pen program:
<https://www.health.ny.gov/professionals/ems/policy/17-02.htm>

HAVE A SAFE AND FUN SUMMER

From the Westchester County Department of Health Staff