

# So Who Hired the Crazy Nurse?



Hiring the right nurse for your camp and providing the orientation and training necessary for them to succeed.

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## Table of Contents

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1. Session Objectives	Page 2
2. Speaker Bio	Page 2
3. What New Camp Nurses Want To Know	Page 3
4. Understanding Nurses	Page 4
5. Routine, Culture and Rewards	Page 4
6. Staff Orientation Manuals / Training	Page 5
7. Why Hire a Registered Nurse At All?	Page 6
8. Health Center Manual	Page 8
9. Seven Things You Might Not Know About Camp Nursing	Page 9

## Objectives for this session

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- To identify the needs of the first time camp nurse
- To identify methods of orienting new nursing staff
- To identify the core elements of a Health Center Orientation Manual
- To identify methods and means of training new camp nurses

## Speaker Background

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VJ Gibbins is a Registered Nurse. He has been the Head Nurse at Camp Cedar since 1998. During the off-season, his practice area is pediatrics; ranging from pediatric ICU, Burn ICU, Peds Oncology and Pediatric Cardiology and Cardiac Surgery and Cardiac ICU. He has been a faculty member at Dalhousie University and the University of Alberta teaching primary care and medical / surgical nursing. He has degrees in Nursing and Education with a major in Science. He is currently pursuing a Master's of Science in Disaster Medicine and Management.

VJ is President and Chairman of the Board of Directors of the Association of Camp Nurses and has spoken several times the New England and at the Mid-States ACA conferences and the ACN Annual Camp Nurse Symposium.

## What New Camp Nurses Want To Know:

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The following quotes come from the opening exercise at the New England Camp Nurse Workshop at Camp Cedar. Participants are asked to write out on index cards, 3 reasons for attending the workshop or 3 things they came to find out or know more about. These are some of their responses:

- To network
- Learn more about camp nursing
- How does HIPAA affect camps?
- Meds in the bunks and how do I deal with staff meds?
- How do you make Health/Sick call work?
- Lice and ticks – what do I have to know about them?
- Computer use in the Health Center
- I came because I was interested in all the topics – especially director-nurse relationships. How to deal with directors who do not share health concerns – Having fun is the priority
- What forms do I need? How do I get them? Make them? Ie. Med Sheets
- What does a Camp Nurse do?
- How to deal with bedwetting and homesickness?
- 3 things I want to learn:
  - Assessment skills (I want to make them better)
  - How to work with children
  - Protocols / expectations regarding what we are ‘expected’ to do, when we should do these things, when to call an ambulance or send to the hospital
- What activities are allowed with my license? Ex. Giving allergy shots?
- How do I set up medication administration such as schedules and documentation
- Med admin – how to properly organize a system that will work for 150+ campers
- How to approach and teach new nurses & acclimating them to the health center?
- How to handle an emergency? How to train staff to do initial first aid?
- How can I make health screening more smooth for staff and campers?
- Tips for making med admin more smooth – preparing and passing
- Different or alternate methods of med admin
- Teaching staff good health habits
- How HIPAA affects private camps
- How do I store Oxygen? Narcotics?
- Where do get first aid kits? What should go into home made kits?
- Should I have EPI pens in first aid kits?
- Should I send meds out on overnight/day trips
- What documentation do I need to do on a daily basis?
- Do I need to count narcotics like in a hospital?
- Should I pre-pour meds?
- How do I document prn meds and their response?
- How does HIPAA affect camp?
- Am I responsible for general camp health inspections?

## Understanding Nurses

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Nurses are an interesting bunch! They come from as wide a variety of educational backgrounds as they do practice areas. From new grad to experienced RN to master's-prepared Nurse Practitioners. From geriatric nursing homes to inpatient pediatric care. What's important to know is that the registered nurse with 20 years experience is going to be as overwhelmed as the new grad if (s)he has not worked in a camp health setting before. While your experienced ER nurse may find clinic or sick call fairly straight-forward, handing out meds to over 100 campers in the morning med pass will be a very daunting task – one (s)he would never have done in the ER. Nothing in nursing school prepares nurses for the volume and pace at which they are expected to perform in the camp health setting, often with little or no job-specific orientation.

### **Don't make assumptions....**

You should not assume or presume that because a nurse has applied to work at your camp that they will know what to do once they get there. Too often I have heard stories of nurses arriving at camp, being welcomed with a "Thank goodness you're here!", and shown to their room and the health center, thus ending their orientation.

### **Routine, Culture and Rewards**

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The most important aspect of orientation for a nurse in any setting – be it hospital, clinic or camp, is acclimation to the routine. Routine at camp includes when people wake up, when meals are, what does everyone do everyday? After routine, comes culture. Culture encompasses expectations and goals. For example, what is the camp's purpose? The traditional sleep-away camp whose strengths lay in sports and team development will have different healthcare needs than a day camp whose strengths lay in individual development in arts, music and drama. Rewards are the things that often are the practical items such as, "How do I do laundry?", "When do I get time off?", "Can I participate in activities?"

As a Camp Director, to cover all of these items thoroughly and possibly with multiple people arriving at different times is going to be difficult. Nurses tend to be the older staff at camp, or at least the more professionally prepared staff when compared to the counselors and support staff. With a hundred or so college-aged staff arriving for staff orientation, orientation specific for nurses is often forgotten or combined with general staff orientation. While answering some of the *Routine* questions, like "When does morning bugle sound," it doesn't address, "When and how do I prepare medications to pass in the morning?"

While it is often not feasible to dedicate a director to specifically orient all of the nurses, there are other ways to ensure your nursing staff has the orientation and foundation they will need to function independently and confidently in your camp setting.

Many camps have some form of staff orientation manual for their counselors. These manuals incorporate education materials required by the ACA for accreditation. For example: lines of communication within the camp community, age-specific growth and development information, staff responsibilities, daily routines as well as special events / activities such as Trip Days, safety protocols and emergency plans and First Aid.

Surprisingly, many nurses at camp nurse workshops report that they did not receive a copy of the staff orientation manual. Some reported not being aware of any policy and procedure manual for the health center. And some reported receiving no orientation to camp or to their role as nurse. Some reported that they were given a tour of camp, shown where their room and health center were and given a, “Good Luck and off you go!”

Staff retention is directly related to staff satisfaction. Satisfaction for most nurses is based on professionally challenging roles, opportunities for development and a fun, rewarding and appreciative work environment. Having a satisfied nurse this summer is your best bet to ensuring nursing staff for the following summer. Simply providing a copy of the staff orientation manual and encouraging and inviting the nurse to participate in orientation week events and games will go along way to making a nurse feel welcome.

Your nurses are generally older than the other staff and may feel set apart from the rest of the staff. They may think that new games and other name-learning exercises are for other staff and that they are not expected or encouraged to participate. Those feelings are often augmented by the growing piles of health forms that need to be screened and medications that need to be organized, which all seem to arrive during staff orientation week.

Your nurse may need to be individually invited to attend new games and other orientation week talks and I would encourage all camps to ensure that nurses attend talks on risk management, alcohol and drug use and abuse and preventing abuse policies. As the camp nurse is likely to become involved in any case where a staff member or camper was abused, hurt or exposed to a potentially harmful situation, the camp nurse needs to be well versed in the camp’s policy of assessing for, documenting and reporting these occurrences.

## Why hire a Registered Nurse at all?

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Wouldn't it be easier to just hire an extra counselor to pass out the pills and put on the band-aids? We all know that the reasons for having an RN at camp are more substantial than Tylenol and boo-boos. You hire a Professional Registered Nurse because you want the credible skills in assessment and decision-making that are assumed by the professional licensure that a Nurse has. This credibility adds to a camp's risk management profile. Accidents and illness at camp are reasonably foreseeable occurrences. As such, it should be reasonably assumed that camps have in place resources to manage those occurrences – such as a Registered Nurse.

With professional credibility comes responsibility. Responsibility on part of the Nurse to be prepared to deliver the expected level of care and responsibility on part of the camp to provide the resources necessary for the Nurse to carry out his/her professional duties.

Minimally, this would mean that camps are responsible for providing nurses with orientation to the camp and to their health care role. Again remember that even an experienced nurse will not necessarily have training to adequately prepare them for camp nursing.

Three items, which are integral to a nurse providing high quality care at your camp are:

### **1. Staff Orientation and Staff Handbook**

- a. Describe daily life of campers and staff.
- b. Describe the communication lines of your camp hierarchy.
- c. Describe safety and emergency protocols of your camp.
- d. Describe the rules and policies that all staff need to abide by.

### **2. Health Center Orientation**

- a. Health Center Statement of Goals / or Mission Statement
- b. Describe the role and function of all health care personnel (job descriptions)
- c. Describe the duties of the health care personnel which were outlined in the job description. (for example: if providing a health talk to the staff is a duty outlined in the job description, details of what that health talk must include should be further described in the manual)
- d. List of preparatory duties such as cleaning, ordering supplies, screening and organizing health forms, preparing medication administration records, etc. (\*\*Remember\*\* This may seem second nature and obvious to you veteran camp professionals, but will be a whole new world to the new camp nurse. They will appreciate a **To Do List**.)
- e. Policy and Procedures Section. This is perhaps the most important section of the Health Center Manual. Examples of policies which your nurse will be interested in are:
  - i. Medication administration policies – storing and security of medications, inhalers use and location – can campers keep their inhaler with them? Epi Pens? How and where are Epi Pens stored, who is to administer them? How are staff medications handled? How and when and where are medications administered? How are PRN or only as needed medications handled? Documented?

- ii. Clinic or Sick Call – how and when are campers and staff seen by the nurse / doctor? How do staff and campers access the nurse during non-clinic hours or at night? Do you use a logbook to sign campers in (an ACA accreditation requirement) how do you document the visit and treatment given?
  - iii. In-patients – who should spend the night in the health center? What criteria are used to make that decision? Who needs to be notified?
  - iv. Out of Camp Medical Care – Who goes with a camper on trips out of camp for medical attention? How do you access out of camp medical or dental services? How and when do you initiate 911 or emergency medical services? Is 911 service available in your community? What professional resources are available?
  - v. Medical equipment, storage and use – Do you have oxygen at camp? An AED (automated external defibrillator)? Blood Glucose tester? Pulse Oximeter? How and where is it stored? Who is authorized to use and administer it?
- f. Medical Treatment Protocols otherwise known as Standing Orders, are an integral part of your camp health program. Whether you have a physician at camp or not, your nurse requires – by law, to have medical treatment protocols which are signed and dated annually by the medical director of your camp. A Registered Nurse cannot legally give even a Tylenol to someone without a doctor's order. Medical treatment protocols are orders signed by a physician authorizing and prescribing treatment of conditions or symptoms, which are described in the protocol. A parent's authorization form is not medical prescriptive authority to administer a medication.

### 3. Camp Nurse Workshops

Camp Nurses, like your counseling staff, come from all over America and even Canada. As such, getting to a Camp Nurse Workshop near your camp's physical location may be impossible as most workshops occur in the pre-camp season. Through the Association of Camp Nurses (ACN) web page, you can gain access to many camp nurse workshops across the country. The site is updated frequently so I suggest checking back often. The web address is:

**<http://www.acn.org/edcenter/workshops.html>**

Camp Nurse Workshops are an easy way to provide training to your new nurse. Workshops cover material specific to camp nursing and health center operations. They provide an avenue for professional development and networking for your staff.

While many camp directors may be afraid of too many new ideas coming from the health center (like calling it a health center instead of an infirmary) because of course it has been fine the way it was for years, why change it now? The truth remains that health care needs of the generally well population are becoming more complex. 20 years ago camps didn't have campers with asthma, food allergies and anaphylaxis, diabetes and congenital heart defects in the numbers they do now. Those illnesses were considered debilitating or even fatal at an early age. Now these children are living with chronic illness and are coming to camp! The medications and treatments for these chronic illnesses change and evolve often. In order to stay abreast of new developments, nurses should receive in-service training every year in their practice area, whether it's: camp nursing, pediatrics, geriatrics or public health.

## Health Center Manual - Template

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Developing a health center manual is a time consuming project, but well worth the effort. Many of the ACA HW section requirements can be met with a well-written Health Center Manual. The core items to include in your health center manual have been briefly described in the previous section. For ease of preparing your own Health Center Manual, the following template is offered:

1. Cover Page: Health Center Manual: Health Care Policies and Procedures
2. Statement of Goals / Mission Statement
3. Health Care Personnel and title (RN, LPN, Student HCA, MD)
4. Job Descriptions and professional scope of practice statement
5. Description of how to carry out duties described in the job description
  - a. Orientation week tasks – setting up, ordering supplies, screening health forms, organizing medications, preparing medication administration & documentation
  - b. Staff Health Talk- items to be addressed, time frame allotted, methods to make presentations interesting
  - c. Preparing First Aid Kits – items directors expect to be included in the kit (ie. medication, EPI Pens, medical alert information, etc.)
  - d. How and what information about campers is to be shared with counselors caring for those campers.
  - e. Storing of: daily prescription medications, PRN or only-as-needed medications, narcotic medications, refrigerated medications, liquid medications, inhaler / spray medication.
  - f. Administration of daily prescription medications, PRN or only-as-needed medications, narcotic medications, refrigerated medications, liquid medications, inhaler / spray medication.
  - g. Documentation of medication administered, assessment of injury / illness, treatment rendered for injury / illness and parental contact.
6. Obtaining medical care / evaluation if there is not a physician at camp. If there is a physician on campus, how are his/her services obtained and documented?
7. How are new prescriptions handled (what pharmacy do you use?)
8. How are insurance claims handled? For prescription medication, out of camp health care needs like dental or orthodontic appointments?
9. Criteria for contacting parents and how to do so: Emergency contact information.
10. Guidelines for accessing the nurse and hours when the nurse is on and off duty. (Time off for nurses)
11. Criteria for admitting campers and staff to the health center overnight and who needs to be informed.
12. Handling workers compensation claims – who calls the claim into the WCB? Who completes the paperwork? How is the employee going to be evaluated for fitness to return to work?
13. Guidelines for determining suitability to come to / remain at camp in case of illness or injury. (Eg. a camper who was exposed to a school mate with chicken pox 4 days before camp starts, a counselor who breaks his foot during orientation week)
14. Blood Borne Pathogens Exposure Control Plan and Incident Reporting mechanisms
15. Medical Treatment Protocols as part of the Manual or as their own stand-alone reference.

## Seven Things You Might Not Know About Camp Nursing

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1. There is a professional Camp Nursing Organization called: “The Association of Camp Nurses” or ACN. Their website is [www.ACN.org](http://www.ACN.org). They provide professional contacts and networking, have authored several resources regarding camp nursing. They are working towards professional designation of Camp Nursing as a nursing specialty through the American Nurses Association.
2. There are professional “Scope and Standards of Camp Nursing Practice” which nurses would be held accountable to in a professional liability claim. Does your nurse have a copy? Copies are available from the ACN website [www.ACN.org](http://www.ACN.org).
3. Members of the Association of Camp Nurses receive a \$10.00 discount on orders over \$100 from Moore Medical – a national supplier of medical equipment and prescription and non-prescription medication.
4. Student Nurses make a great addition to your Camp Health Care Team. With properly identified roles, tasks and supervision – the student nurse as Health Care Assistant can alleviate some of the staffing pressures in your health center.
5. Nurses require a doctor’s order to give any and all medication – including over-the-counter medications, vitamins (yes, even Flintstones!), and herbal or homeopathic supplements. A parent’s request or written instruction to do so is not legal or acceptable unless that parent is a licensed physician.
6. The act of taking a medication out of its original, pharmacy-dispensed container, putting it into another container (like a coin or pill envelope) and labeling it with the person’s name and the name of the medication, is considered **Dispensing**. Dispensing, by law in almost all states, is restricted to pharmacists and physicians ONLY. So if your nurse questions your medication administration procedure, consider that what you are asking him/her to do may be illegal.
7. Nurses Network. They chat and share ideas, problems and solutions with each other through a variety of means. Internet chat rooms for nurses are very popular. Did you know that there are several internet chat rooms dedicated to Camp Nursing? Does your nurse have internet access to assist him/her with problem solving Health Center issues?