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The Ontario Camps Association (OCA) provides this revised Crisis Response Manual as a service to its Member Camps. The information found in this revised Crisis Response Manual is based on the 2006 manual, plus information provided by experts in the following professional fields: public relations, insurance, criminal background checks, disaster re-construction, public health, nursing, lifesaving, etc. The OCA makes no guarantee that this information is complete or sufficient to cover all situations. The responsibility for assessing and determining risk and response rests solely with the individual and/or camp.

While this document is titled “Manual”, it is not designed to be a one-stop shop for Crisis Response preparation. There is no substitute for proper professional planning. This Manual does not and cannot contain all the answers. If you have questions or require resources beyond the scope of this Manual, contact the OCA. We would be happy to direct you to other resources or to assist you in any way we can.

INTRODUCTION

You’ve heard numerous times that operating a camp is the riskiest thing that we do as camp professionals. That’s not to scare you or to discourage you from conducting camp programs – its wise advice, that highlights the fact that proper prior planning is necessary to ensure that your camp is safe, positive and educational in nature. Reviewing the OCA standards regularly and complying with them, along with establishing written policies and procedures for camp situations and knowing and applying Government Policies, will assist in mitigating the results of a significant event and may avoid a crisis.

Unfortunately, as part of your planning you need to think of worst-case scenarios – terrible things that could happen – and develop some standard procedures to follow should a significant event occur. These procedures can be extremely useful – in stressful times such as these, our ability to think and respond can easily go out the window. If you have thought ahead of time about what the best course of action is for a given situation, written your procedure down on paper, communicated the procedure to staff, and trained the staff to respond appropriately, you can take much of the confusion and stress out of a potentially overwhelming situation. If the situation or significant event is managed according to your response procedures you may avoid a crisis!

It is also important to note that not all significant events occur during the camp season. Often we learn of these at a later date. Even in these circumstances the camp may have to respond in a purposeful way to limit the effects on the camp community and the community at large.

Wikipedia describes a crisis as “any event that is, or is expected to lead to, an unstable and dangerous situation affecting an individual, group, community, or whole society. Crises are deemed to be negative changes in the security, economic, political, societal, or environmental affairs, especially when they occur abruptly, with little or no warning.”
This manual can help you to recognize when a significant event can lead to a crisis. It will offer a suggested plan of action and will identify some, but not all, significant events or situations that may occur at a camp. It will offer some approaches that may help camps to analyze and manage risk. It will offer you resources that you may apply to your crisis plan. Once your camp has determined that a crisis has occurred, the OCA does have a specific role to play and it is outlined in this document.

SECTION TWO of this Manual contains a number of samples of generic procedures for some (but not all) situations you could encounter in camp programs. Use these as a starting point for your camp’s crisis response procedures. Modify and add to these examples to reflect the unique aspects and challenges of your camp facility. Develop procedures for other situations not listed here. You may have procedures already in place; after looking at the examples presented here, examine your current plan to see how it compares. The point is this: have a response plan that works for your situation. Speed and honesty are cornerstones to remember when responding to a crisis.

It’s possible that you will go through your career and never encounter a crisis at camp. It’s also possible that you could face a situation similar to those on the following pages.

Be ready!

Any of these situations COULD happen at your camp:

- abduction/kidnapping/non-custodial parent
- bus accident
- civility (includes): bullying/cyber bullying, stigmas, physical/emotional/sexual/ psychological abuse, health issues, mental health issues, rape
- cultural/religious abuse
- child pornography
- criminal behaviour: thefts, assaults, other crimes of violence, weapons, drugs
- drowning
- drug and alcohol
- fire
- food poisoning
- hazing
- inappropriate staff/camper relationship
- lightning strike/hurricane/tornado
- missing person
- sexual and workplace harassment
- serious bodily injury
- death
- other
SECTION ONE:

CRISIS RESPONSE PLANNING
Once your camp has determined a crisis has occurred, it may be helpful to use a Crisis Response Plan Checklist to make certain you are responding in the best way possible. The checklist below is meant to be used only as a sample. Your camp will have to determine if there are more or fewer steps to follow.

CRISIS RESPONSE PLAN CHECKLIST:

☐ Post the OCA Hotline support number in appropriate places
☐ Open the crisis response headquarters
☐ Call the crisis response team together
☐ Notify emergency services and out-of-camp support team
☐ Mobilize the crisis response staff support team
☐ Notify the camp’s spokesperson of the event
☐ Gather pertinent materials prepared to be used during a crisis response
☐ Evaluate incoming information to determine next steps
☐ Notify the OCA office of the crisis
☐ Implement the media control plan
☐ Prepare, review and finalize dialogues/messaging responses to be used when contacting or talking to parents/guardians and others
☐ Keep a log of all calls and contacts
☐ If the crisis is of a physical or environmental nature make appropriate contacts
☐ If the crisis is of a social/sexual nature implement the camp’s policies and procedures
☐ If there is damage to the site, to the best of your ability secure the property from further damage and report this to your broker or insurer. Do not make substantial repairs without their authorization.
☐ Implement any changes to policies and procedures if required
☐ Continue to check the status of those involved in the crisis event
☐ Update/complete/follow up on all necessary documentation
☐ Continue to re-evaluate information and deal with follow-up where required
☐ Gather all reports, logs and material for post crisis follow up
☐ Notify legal team if required
☐ Notify insurer or broker if required
ADDITIONAL CONSIDERATIONS:

In the sample Crisis Response Plan Checklist on the previous page, you will notice the emphasis has been placed upon accidents/illness and environmental events.

It is important to realize that crises such as those related to harassment (sexual, physical, emotional), bullying, cyber bullying – off-site and after-camp issues including, suicide, horrendous accident or a major illness to a member of your camp community, needs to be considered in your planning process. As such, other CHECKLISTS may be necessary.

In order for a crisis response to be implemented, there are a number of steps to consider. Most, if not all, of the preparation prior to training should be completed before the start of camp. The Crisis Response ‘To Do List’ below is meant to provide you with some, but not all, items that could be included in your camp’s TO DO LIST. Your list should be specific to your camp's situation.

A CRISIS RESPONSE ‘TO DO’ LIST:

• Create a Crisis Response Team and discuss and assign roles and responsibilities
• Review AND UPDATE Crisis Response Plan
• Review OCA standards and legislation related to labour employment standards, privacy, accommodation, healthcare, etc.
• Brainstorm “what if…” scenarios with the crisis response team
• Update procedures for critical events and design new procedures
• Prepare general media messages in coordination with your professional support team
• Familiarize the crisis response team with the camp’s Crisis Response Manual
• Create the staff support team that will assist team leaders
• Notify the members of the staff support team and ask them if they are prepared to assume their responsibilities
• Contact your camp’s professional support services (see the sample form page 65)
• Appoint a credible spokesperson for your camp and familiarize that person with the aims and objectives of camp, the background of the camp, Policy and Procedure Manuals and other pertinent information
• Create signage to be placed at every phone and in staff areas with information such as:
  • camp phone number
  • extensions if there are any.
  • directions to the camp site
  • emergency services numbers
• Post the OCA Hotline number in appropriate places
• Have the crisis response team develop a training approach to deal with crisis for the staff
• Identify the members of the crisis team, their roles and the supports in place for the staff
• Identify a location for your crisis headquarters, away from regular flow of traffic, close to the office, accessible 24 hours, phone available

• Prepare a crisis box in which to place such items as follows:
  § topographical maps/site plans (e.g. electrical, plumbing, etc.) of camp, buildings and pools – location of staff, accident etc. in order to assist an emergency response
  § all forms/documentation that may be necessary in case of crisis (i.e. incident/accident) and organize them for easy accessibility
  § all office equipment that may be necessary (i.e. pencils, pens, staplers, clip boards)

• Talk with and provide police/fire/ambulance and the professional support team with directions to camp and information about your camp you feel that is important and they may require

• Prepare media control plans and materials

• Educate and train all third-party providers (e.g. electricians, construction workers, caterer, etc.) on crisis response

**Train, Drill and Document**
Staff has to know what to do. A Crisis Response Plan should include employee training. It should address general training for all employees, including:

• Ongoing employee training. Involve renters/vendors/suppliers you will either have onsite or may be supplying resources to enable your response

• Individual roles and responsibilities, potentially solicit input of camper representatives

• Information about threats, hazards and protective actions

• Notification, warning and communications procedures

• Means for locating family members

• Emergency response procedures

• Evacuation, shelter and accountability procedures

• Location and use of common emergency equipment

• Emergency shutdown procedures

• Always document

Build a crisis response plan into the culture of the organization. Regular orientation sessions for employees should include an overview of the crisis response plan.

**The Crisis and Our Staff**
Calmness and clear-thinking must prevail with all staff. The shock and stress of the incident may result in unusual behaviour by those involved. Staff must handle the actual emergency response to the best of their ability. At the same time, contact the camp nurse/doctor/first aider. In some situations, staff members may be asked to accompany an ambulance to the hospital, or act resourcefully as requested by the crisis response team. All staff should be aware that every crisis is viewed by those directly and indirectly involved from a different perspective. Comments to the media or parents following a serious accident should generally be avoided except by the Camp Director or those designated to be the contacts.
This will avoid ambiguous and uninformed statements that may have unintended consequences. It may take a little time before the Camp Director receives all the information and can determine what actually happened. The Camp Director or designate will then be the person who can appropriately inform media, parents, staff and campers, and answer their questions.

Each camp will have to decide for itself the roles and responsibilities of the Crisis Response Team. Below are some samples of key roles of players on the Crisis Response Team:

**CRISIS RESPONSE TEAM LEADER:**
- may be Camp Director or designate or the Board Chairman or designate
- calls the crisis response team together to prepare for and in case of crisis
- makes ‘executive’ decisions
- may be the contact person for the authorities

**MEDIA TEAM LEADER:**
- has knowledge and ability to deal with media scenarios
- often is assisted by Professional Support Team member(s)
- helps prepare and present to the crisis response team dialogue/messaging responses for approval

**SPOKESPERSON:**
- in order to avoid misconceptions about the events of the crisis, the camp may only want one person to address the media or public during and after the crisis. Camp can assign a back-up person here too.
- often is a respected camp professional or someone who is known in the community and is familiar with your camp
- is well versed in the camp’s aims, objectives and culture of the camp

**STAFF TEAM LEADERS:**
- prepares staff support team to respond to their responsibilities such as information gathering, camp activity monitoring and maintaining the ‘calm’ in and around camp

**HEALTHCARE TEAM LEADER:**
- is often the camp nurse, doctor or other healthcare professionals responsible for health information for those affected by the crisis
- in situations of physical or environmental events, assists in emergency responses and provides health information as required
- identifies those in need of emotional/psychosocial support
ADMINISTRATIVE TEAM LEADERS:
- is often the person who has dealt most often with contacts coming into the camp such as the secretary
- logs all communication
- uses the messages created by the Crisis Team when receiving inquiries about or contacting families etc.

SAFETY TEAM LEADERS:
- ensures that the facility is safe and secure during and after the crisis

The Professional Support Team
The list of professionals to be part of this team will vary from camp to camp. Contracting them and ensuring that they accept and understand their roles is usually complete early on in the YEAR PRIOR TO THE START OF CAMP. In the case of a camp with a Board of Directors these individuals may have the expertise necessary to be part of the Professional Support Team.

Examples of the type of professionals that may be accessed are:
- Lawyer
- Doctor/Dentist
- Clergy (may be several denominations serving your community)
- Insurance Professional
- Psychologist/Psychiatrist
- Public Relations Professional

Resources to Utilize When Dealing with a Crisis

How to Gather Information
- Take detailed notes and retain them in a secure location
- Speak to people and listen to their stories if they want to share them and to help them to feel calmer
- Be cautious of pressuring individuals to speak – they may not be psychologically ready – gather info from those willing to speak first, access use of nurse or supportive professionals for those not ready to talk
- Document everything and have it securely retained at camp for identified retention period – outside agencies will frequently ask for logs and notes (i.e. fire, EMS, police, insurers, lawyers, etc.)
- Know your tasks and generally those of others on the team so you are aligned in practice and overall objectives/philosophy
THREE WAYS TO KNOW YOU’RE IN CRISIS:
1. If your camp is in the headlines, in media materials, social/print
2. If your financial bottom line has decreased
3. If you have increased calls or have increased contact with online pictures/text/talk

HOW TO RESPOND TO WHAT MATTERS:
• Effective crisis communication begins before the crisis does
• You can manage a crisis by responding, but you can only manage a crisis successfully by preparing

CONSIDER YOUR AUDIENCES:
• Treat each audience distinctly
• How do you prepare for crisis for parents and media?

DEVELOP PROTOCOLS:
• How do you educate people?
• Take a top to bottom approach, no one is insignificant in a crisis
• Review crisis protocols yearly

PROTOCOLS AND EDUCATION:
• Immediate response can be summed up in three words: secure, contact and convene
  ▪ Secure safety of assets (people and property)
  ▪ Contact authorities (911)
  ▪ Convene emergency response team

CRISIS IN PROGRESS:
• Stop
• Breathe - breathe again!
• Put protocols into action

IMMEDIATE REACTIONS CAN BE INDELIBLE:
• Your first response will set the tone
• You are under NO OBLIGATION to make public disclosures
• It is not necessary to be nice
• What you do and say in first hours of crisis MATTERS

KEEP CONTROL OF INFORMATION FLOW:
• Design a communications flow chart specific to your camp
• Narrow the channel of incoming/outgoing information
APPOINT A SPOKESPERSON:

- The spokesperson can be internal or external (Board Member, camp media leader, PR professional, or lawyer). A second spokesperson can be a respected camp professional

CREATE AN INFORMATION FLOW PROCESS FOR SPOKESPERSON:

- Control events; don’t be controlled by them
- Develop messages (there may be many audiences that you need to address)
- Delivering messages:
  - the delivery of your message is critical to the success of that message
  - **Never lie**

- Develop messaging tactics:
  - internal communications (staff/campers): verbal for internal communications
  - stakeholder communications (parents): establish hotline, outgoing message line to post critical messages
  - line where parents can leave messages, written correspondence, teleconference
  - media communications: website, YouTube, Facebook, Twitter, release of carefully worded statements
  - media conference

- The message:
  - **Never lie**
  - never suppose, guess, anticipate, speculate, assume
  - you are never “off-the-record”
  - consistent, controlled messaging is one of the keys to managing public relations in a crisis
  - proactive messaging is more effective – be ahead of the news (when possible)
  - avoid reacting to feedback or rumor
  - control the agenda
  - messaging must consider both the short and long term legal, financial and brand implications
  - messages must be targeted and reflective of the intended audience
  - appreciate difference between fast and reckless
  - your early response must be timely, but cautious
  - balance the ‘right to know’ with the ‘right to privacy’
  - while always being truthful, be careful
  - be true to your own voice
  - although there’s crisis strategy that’s universal, customization is key

- Final suggestions:
  - document everything (timelines, correspondence, media coverage, actions, etc.)
  - consult lawyers and keep ultimate litigation in mind, but don’t let lawyers dictate communications strategy
  - be cautious – resist the temptation to respond to everything and everyone
  - consider everything ‘on the record’
  - think short term – then worry about long term
All insurance policies have terms and conditions and exclusions. In general terms the reporting procedures for most insurers are as follows:

Liability = Bodily Injury, abuse and damage to other people’s property

You must notify the insurer (or in some instances their authorized agents) as soon as an occurrence or offence is known, regardless whether or not this may result in a claim. To the extent possible, notice should include:

1. How, when and where the occurrence or offence took place  
2. The names and addresses of any injured persons and witnesses  
3. The nature and location of any injury or damage arising out of the occurrence or offence

It is recommended to speed up the process to report verbally and then follow-up in writing immediately confirming the conversation and reiterate any instructions given by the Insurer or their authorized agents. If you don’t believe a claim will result, report the occurrence under an ‘information only’ report which will allow the insurer to decide if further investigation is required.

If a claim is made or a suit is brought or an inquest is called:

1. Immediately send the Insurer or their authorized agents copies of all demands, notices, summonses or legal papers received in connection with the claim or suit  
2. Authorize the insurer to obtain records and other information  
3. Cooperate with the Insurer in the investigation or settlement of the claim or defense against the suit  
4. Assist the Insurer upon their request, in the enforcement of any right against any person or organization which may be liable to you because of injury or damage to which insurance applies  
5. If there is damage, to the best of your ability secure the property from further damage and report this to your broker or insurer. Do not make substantial repairs without their authorization.

YOU MUST NOT VOLUNTARILY MAKE A PAYMENT, ASSUME ANY OBLIGATION OR INCUR ANY EXPENSE OTHER THAN FIRST AID WITHOUT THE INSURERS CONSENT. TO DO SO WILL BE AT YOUR EXPENSE, AND IF YOU DO SO, THESE ACTIONS MAY PREJUDICE THE INSURER AND YOU COULD FIND YOURSELVES WITHOUT COVERAGE.

Sample reporting and contact information is as follows:

- brokers name  
- brokers email address and phone number  
- special reporting instruction provided  
- control adjusters name  
- control adjusters address and phone number  
- special reporting instructions provided  
- insurer (if this applies it can be supplied by the camps agent or broker)
PROPERTY AND BUSINESS INTERRUPTION LOSSES:

Reparations where there is criminal behaviour such as vandalism or theft need to be reported to the police immediately upon discovery. Obtain a copy of the police report.

You may not incur any expense other than immediate repairs to preserve the property or to prevent further damage. The Insurer or their adjuster will work with you to establish the repairs required and the valuation of the claim. You may proceed with repairs once authorized by the Insurer or adjuster to do so.

After discussions and confirmation from the adjuster that the premises are not habitable and before agreeing to any refund of fees, work with the adjuster to get the authorization to do so. Notify the clients/parents of the inability to continue to operate and you may tell them you are working through your Insurer to settle all aspects of this claim. Every camp has a different refund policy so it is not possible to give a 100% accurate answer on the returning of fees.

Assist the Insurer upon their request, in the enforcement of any right against any person or organization which may be liable to you because of the damage to which insurance applies.

AUTOMOBILE LOSSES:

In Ontario, all physical damages/losses in excess of the mandatory reporting limit must be reported to the collision reporting centre if the police did not attend the scene of the accident.

At the time of the loss, exchange insurance information between drivers. Automobile losses are generally handled directly by the Insurer and their in-house adjusters.

If police and/or Children’s Aid are involved in the crisis, the following information may be useful. Also see sample accident/incident forms in the Appendix.

Police and any other emergency first responders will likely desire details such as:

- Name of camp, address, ownership, Ontario business number if applicable, camp affiliation (i.e. church, YMCA etc.), and dependent on the crisis, who the lawyer is and Insurer
- Contact Information: Executive Director, Board Members, owners, Directors, most senior staff, etc.
- Supervisors on duty and all staff involved
- Numbers of staff and campers on site, verification of their location at present
- What you did in the investigation – likely asking for any and all reports completed and notes of anyone who was involved and their contacts
- Details of the camper/staff involved – parents/spouse/contacts, how long at camp, description (if missing), last seen where and when, what did they say/when/where/who else present, attire last seen wearing, any discipline or unusual behavior over their time at camp (either campers or staff), who are their best friends/associates, photos of camper/staff, staff Human Resource records/drivers licence/accreditation (CPR or other) etc.
• Do you have a visitor/vendor/supplier log? If so a copy may be requested as to time and date of entry or departure.

• Police may require staff or campers or others involved to provide witness statements to police; ask for copies of what is produced

• Police will likely want complete files and reports to view on each camper, and all notes/reports concerning the incident; be prepared to photocopy and keep originals; maintain log of what you provided and to whom, your insurer or legal team may wish to know

• They will ask for estimates of damage/impact if applicable

OTHER AGENCIES THAT MAY REQUEST INFO:

• Fire departments

• Media (confidentiality and need to know to be exercised – know your rights – nothing to media without authorization of Camp Director or lawyers)

• Hospitals/EMS: They will want as much information on the involved campers or staff as you have available (i.e. parents/contacts/who last seen, condition, attire, opinions on the campers health/well-being previous/during/after the incident etc.)

• Children’s Aid, child protection, Labour officials/workplace safety, Ministry officials: If involved will likely ask for the same items and information as detailed above if they are involved in the investigation

• Never be afraid to seek guidance from senior staff or director, lawyer, insurer etc., prior to providing information or documents

WHAT IS PSYCHOSOCIAL CRITICAL INCIDENT INTERVENTION?

A range of strategies aimed at reducing or preventing psychological stress following a traumatic event. This can be achieved by:

• Validating and strengthening existing coping mechanisms

• Providing education about normal reactions and increasing the range of available coping mechanisms

• Assisting with plans for further healing

• Crisis intervention

KEY VALUES AND BELIEFS:

• All individuals perceive events uniquely

• Crisis intervention utilizes a person centered approach

• Psychic energy and ego strength varies among individuals

• Crisis are a normal part of existence and can foster development and growth

• All individuals are helped best in an environment of acceptance, trust and empathetic understanding
Sustained change occurs when individuals feel ready and supported to do so.

All individuals have a need for self-mastery and control over their own lives.

Prepare all healthcare reports, forms and fact sheets required for medical emergencies or communicable diseases, etc.

The following are forms recommended regarding healthcare. Some cross over into other areas.

Prior to a camper or staff member arriving on site, all camps should have:

- Health forms – camper and staff – individualized and current
- As necessary:
  - crisis intervention plans (individualized for known mental health issues and a standard plan of care for the unexpected)
  - supplemental health forms, which include plans for medical emergencies: anaphylaxis plan, asthma plan, diabetic plan, seizure protocols, etc.
- Available to be used as needed:
  - treatment guidelines, camp specific
  - medication administration records
  - assessment tools (assessment forms may include: concussion, breakout /communicable disease, suicide assessment etc.)
  - emergency treatment forms – for detailed notes on injured/ill
  - arrival assessment (to be done on arrival at camp particularly residential camps)
  - exit assessment form (for those leaving camp with any health issues)
  - accident reports
  - incident reports
  - communicable disease, infectious disease processes/protocols in place; fact sheets from the local public health department
  - pre-drafted letter to be attached to communicable disease fact sheets (for easy and fast distribution)
  - list of contacts: public health, Ministry of Labour, poison control, etc.
  - quarantine protocols and plans
  - proper cleaning procedures
  - crisis response – health considerations/forms

**DURING AN EVENT:**

Access to:

- health forms and contact information. consider storage of back up health info in case of fire, lock down etc., where computers or paper forms cannot be accessed
- assessment tools as above
- detailed accident/incident reports
- emergency treatment forms – for detailed notes on injured/ill
- topographical maps/site plans (plumbing, electrical, etc.) of camp, buildings and pools; location of staff, accident, etc. in order to assist with the emergency response
PROFESSIONAL BEHAVIOR:

• Operate only within your authorized organizational framework when implementing your crisis response plan

• Model healthy responses; be calm, courteous, organized, and helpful

• Be visible and available; maintain confidentiality as appropriate; remain within the scope of your expertise and your designated role

• Be knowledgeable and sensitive to issues of culture and diversity

• Pay attention to your own emotional and physical reactions, and practice self-care

• Be prepared that survivors of a critical event will either avoid you or flood you with contact; speak calmly; be patient, responsive and sensitive

• Be aware of professional guidelines (College of Nurses of Ontario, College of Physician and Surgeons of Ontario, Occupational Health, etc.)
SECTION TWO:
CRISIS PREVENTION AND RISK MANAGEMENT PLANNING
Crisis Prevention and Risk Management Planning

To assist you with your crisis management, it is recommended that all camps review and ensure compliance with the Ontario Camps Association’s standards on a regular basis and review legislation and regulations listed in each section of the standards.

**STEPS IN THE RISK MANAGEMENT PROCESS:**

1. Identify hazards
   - Have the control measures created new hazards?
2. Assess the risks
   - Have the control measures eliminated or reduced risks?
3. Decide on control measures
4. Implement control measures
   - Have the control measures been implemented as planned?
5. Monitor and review

**WHEN ANALYZING RISKS, FACTORS TO CONSIDER INCLUDE:**

**HISTORICAL:** What types of emergencies have occurred in the community, at your facility, or nearby? (e.g. fire, natural disasters, accidents, utility, etc.)

**GEOGRAPHIC:** What can happen as a result of your location? (e.g., proximity to: flood-prone areas; hazardous material production, storage or use; major transportation routes; power plants, etc.)

**HUMAN ERROR:** What emergencies might be caused by employees? Are employees trained to work safely? Do they know what to do in an emergency? Human errors can result from poor training and supervision, carelessness, misconduct, substance abuse, fatigue, etc.

**PHYSICAL:** What types of emergencies could result from the design or construction of the facility? Does the physical facility enhance safety? Consider the: physical construction of the office; the facilities for storing combustibles or toxins; hazardous processes or by-products; lighting; evacuation routes and exits; shelter areas, etc.

**SOCIAL FACTORS:** Creating a plan to train and re-train staff on the process and implementation of the process to reduce or mitigate serious emotional impact an event may cause for camp staff and campers, including the ability to discuss and re-evaluate the event and process.
BUSINESS CONTINUANCE: Evaluating and creating a plan to reduce the impact from a serious event.

CAMP REACTION: Fears stop people from formally reacting to serious events, remember there are allies to help you through a crisis; don’t let fear stop you from reacting.

Emergency Response

Not every emergency will result in a crisis. The faster you respond to an emergency can lessen the negative impact it may have on your camp. Planning and thinking in advance decreases response time. Training and accessing the key support groups will enable you and your camp to problem solve through the event. If you share or rent a facility with another organization, make certain EMS is aware of the relationship and allow them to know who the contact will be.

EMERGENCY MEDICAL SERVICES:

- Emergency services can be invited to camp prior to start date to familiarize EMS with site
- For more remote camps, ensure that camp identifies EMS and potential wait times
- Create partnerships with EMS (special days, training, etc.)
- Keep in mind that when EMS is activated many trucks/cars may show up. Who is in charge?

Samples of Responses to Significant Events

In this section you will find samples of response plans/procedures for many, but not all, significant events that have been gathered from numerous agencies and organizations. They are reprinted here as they appear in their publications.

They are not appropriate or intended in their current form for use in your camp. They must be reviewed and revised by you to make them adequate for your camp’s needs and to ensure that they reflect your particular situation. They are meant to provide assistance for identifying some significant events and offering you guidance in developing your own procedures for your camp.

Severe Weather

**Watch**: Conditions exist/favorable. Keep staff informed

**Warning**: Severe conditions are imminent. Prepare and take shelter.

**CAMP DIRECTOR/DESIGNATE**:

- Make staff aware of watch and warning conditions as deemed necessary
- Ensure monitoring of latest weather information
- Sound appropriate alarms
- Determine need of power shut off
- If time permits, have everyone use restrooms, before relocating to ________________
- Supervise any needed movement of campers
• Determine need for evacuation of camp
• Determine need for emergency services and have designated staff call 911 if needed
• Determine need to contact senior staff, camp owners, Board of Directors
• Determine need to implement Emergency Media Plan
• Post 911/emergency services contact near camp phone for emergency-related communications.
• Debrief as soon as possible afterwards
• Gather information for incident report
• Determine advisability of parents removing campers; coordinate effort for dismissal of campers

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Ensure readiness for large amount of injuries
• Inform certified healthcare camp staff of potentials
• Perform necessary first aid per level of training/certification until emergency services arrive
• Supervise all other staff trained in first aid
• Document all care provided

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  ▪ names of missing campers
  ▪ injuries/health issues
  ▪ report any significant camper information concerning current emergency
• Maintain a calm atmosphere; keep campers in assigned group; conduct diversionary activities as needed
• If evacuating, ensure group stays together at all times

STAFF SECURITY:
• Wait for instructions from Camp Director
• Maintain access for emergency vehicles
**HURRICANE**

Upon notification of a hurricane watch status, all personnel will attempt to accomplish the following on an individual basis:

- Clear desk tops completely of paper and other articles
- Protect books, valuable papers and equipment by covering with plastic sheeting and masking tape
- Moving everything off floors on lower levels
- Where necessary and possible, move desks, file cabinets, etc., away from windows
- Close and latch windows and doors

**Hurricane Warning: Action – Responsibility**

- Announce emergency planning in effect to all directors who in turn will notify all personnel
- Establish media connection if needed
- Secure all windows and doors of all departments/faculty and administration
- Notify the municipality of your camp’s status, and request a police unit to secure and assist patrolling the facility
- Close front main entrance
- Make final facility check for debris
- Prepare for additional sandbagging
- Make sure all storm drains are clear of debris
- Verify that all vehicles have adequate fuel

**Hurricane Post-Storm: Action – Responsibility**

- Assess damage and report to Emergency Operations Team and security/safety
- Inspect facility for broken glass and other safety hazards
- Have incident commander announce all-clear to all directors and Crisis Team who in turn will notify their staff and others as designated
- Announce status through media as necessary
- Have all essential personnel report to work for their shift immediately following the hurricane, unless otherwise instructed. Scheduled days off will be canceled until further notice
- Have all maintenance, grounds and custodial personnel immediately report to work following the hurricane, unless otherwise instructed. NOTE: Temporary repairs made to facilities must be completed in an expeditious manner and employees must report to work immediately thereafter.
TORNADO

Immediate Considerations:
• Move to hallway, closets or go to the corner of the room
• Keep away from windows
• Do not go outside
• Follow evacuation measures
• Prepare shelter
• Secure loose objects exposed to conditions
• Secure buildings and laboratories
• Prepare vehicle if required
• Disseminate information to hospital staff as appropriate
• Update weather reports
• Coordinate with local authorities
• Clear and maintain access routes
• Check communications
• Do damage evaluation and reporting
• Preserve calm and order
• Lead a cleanup effort
• Identify and report downed power lines

EARTHQUAKE

Immediate Considerations:
• If you are indoors, protect yourself, drop down to the floor and take COVER under a desk or table; hold the furniture above you until the tremors have passed; if there is not furniture around, seek COVER against an interior wall
• If you are outdoors, move to a clear area away from trees, signs, buildings, etc.; if you are driving, pull over on the side of the road and stop in a clear area; stay in the car until the tremors have passed
• After the tremors, the biggest concern we will be broken underground gas lines.
  In the event of a gas leak, the following is recommended:
  ▪ **Do not** go into a room and turn on lights; the switch may generate a spark
  ▪ **Do not** strike a match or light any type of flame if the power goes out
  ▪ **Do not** use any room or enclosed space until after it has been checked for gas leaks
• In addition, review:
  ▪ Tactical command considerations
  ▪ Evacuation/shelter
  ▪ First aid
Utilities (gas, water, electricity, sanitation)
- Clearing and maintaining access routes
- Communications
- Preserving law and order
- Security of buildings
- Damage evaluation and reporting
- Downed power lines
- Rescue efforts
- Preparing for post-incident patient surge

**WARNING:** Sole priority is for the health and safety of all campers and staff. Individuals without appropriate training or proper safety gear should not attempt to fight fire or enter a structure that contains or is involved in a fire.

**FIRST OBSERVER:**
- Sound fire alarm
- Notify Camp Director- senior staff *immediately*

**CAMP DIRECTOR/SENIOR STAFF:**
- Determine situation; direct call to 911/local fire service
- Quickly determine extent of fire
- Implement camper/staff accountability system to quickly confirm everyone is present and safe
- Gather needed documentation:
  - original camp registration forms
  - copies of cabin rosters
- Ensure everyone has evacuated from building/area of fire
- Determine need to implement “minor or major injury” procedures
- Determine safest area(s) in camp and direct/divert campers and staff to that location if needed
- Determine need to evacuate to off-site location
- Contact senior camp staff, camp owners, Board of Directors
- Implement emergency media plan
- If possible and safe, post 911/emergency services contact near camp phone for emergency-related communications
- Determine advisability of parents removing campers; coordinate effort for dismissal of campers
- Ensure help for handicapped
- Turn off alarm system(s) if applicable
- Announce all clear after emergency; debrief as soon as possible afterwards
- Gather information for incident report
• Prepare for overwhelming influx of parents and media
• Contact parents of campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Perform necessary first aid per level of training/certification until emergency services arrive
• Supervise all other staff trained in first aid
• Document all care provided

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  ▪ names of missing campers
  ▪ injuries/health issues
  ▪ report any significant camper information concerning current emergency
• Maintain a calm atmosphere; keep campers in assigned group; conduct diversionary activities as needed
• If evacuating, ensure group stays together at all times

STAFF SECURITY:
• Wait for instructions from Camp Director
• Maintain access for emergency vehicles

STRUCTURE FIRE
Immediate Considerations:
• Call 911 or security if the fire alarm goes off
• Locate fire
• Close door to area that has fire
• Evacuate building
• Notify and evacuate surrounding buildings
• Be aware of hydrant locations
• Attempt to extinguish
• Protect building contents if possible
• Provide scene security
• Secure gas and electricity at location
CRISIS RESPONSE CONSIDERATIONS:

- Identify cause
- Determine injuries and/or deaths
- Determine extent of damages

**WARNING**: Sole priority is for the health and safety of all campers and staff. Threats should be taken seriously until proven otherwise by a thorough search by Emergency Service personnel. **DO NOT** use radios, cell phones, or any other electronic devices. However, if radios, etc., are on, leave them on.

**CAMP DIRECTOR/DESIGNATE:**

- Use siren/horn system to evacuate buildings
- Determine safest area(s) in camp and direct/divert campers and staff to that location if needed
- Alert staff. Ensure those who have 2-way radios **DO NOT** use them
- Direct call to 911 and other emergency phone number
- Ensure everyone has evacuated from threatened building/area
- Implement camper/staff accountability system to quickly confirm everyone is present and safe
- Gather needed documentation:
  - original camp registration forms
  - copies of cabin rosters
- Ensure help for special needs campers/staff
- Determine advisability of parents removing campers. Coordinate effort for dismissal of campers
- Contact senior camp staff, camp owners, Board of Directors
- Implement emergency media plan
- If possible and safe, post 911/emergency services contact near camp phone for emergency-related communications
- Turn off alarm system(s) if applicable
- Determine need to evacuate to off-site location
- Announce all clear after emergency; de brief as soon as possible afterwards
- Gather information for incident report
- Prepare for overwhelming influx of parents and media
- Contact parents of campers; inform and assure of camper safety
- Gather needed information to make good decisions and to communicate with emergency/crisis

**Bomb Threat**
RESPONSE OPERATIONS DIRECTOR:

Essential facts checklist:

☐ What happened? ☐ Who is in charge?
☐ Who was involved? ☐ What internal resources are available?
☐ Where are they now? ☐ What outside resources are needed?
☐ What is their present condition? ☐ How will assistance be delivered?
☐ What action has been taken so far? ☐ When did the incident occur?
☐ Who was supervising?

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:

• Ensure readiness for potential injuries and inform certified healthcare camp staff of potential

COUNSELLORS/STAFF:

• Ensure safety and well-being of all campers

• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  ▪ names of missing campers
  ▪ injuries/health issues
  ▪ report any significant camper information concerning current emergency

• Maintain a calm atmosphere; keep campers in assigned group; conduct diversionary activities as needed

• If evacuating, ensure group stays together at all times

STAFF SECURITY:

• Wait for instructions from Camp Director/designate

• Maintain access for emergency vehicles

CAUTION: DO NOT USE RADIOS, CELL PHONES, OR ANY OTHER ELECTRONIC DEVICES. HOWEVER, IF RADIOS, ETC. ARE ON, LEAVE THEM ON.

IF “BOMB THREAT” IS RECEIVED BY PHONE:

1. Listen carefully to caller.

ASK: When is the bomb set to explode? What will cause it to explode?

Where is the bomb located? Who put it there?

What does it look like? What is your name?
NOTE OTHER INFORMATION ABOUT CALLER:

<table>
<thead>
<tr>
<th>Gender:</th>
<th>Age:</th>
<th>Length of call:</th>
</tr>
</thead>
</table>

Significant voice characteristics:

☐ Calm ☐ Excited ☐ Hoarse ☐ Angry ☐ Slurred

☐ Nasal ☐ Disguised ☐ Loud ☐ Soft ☐ Normal

☐ Fast ☐ Slow ☐ Stutter ☐ Accent ☐ Crying

Noises in background:

Caller’s words:

2. After hanging up, begin if possible, phone call trace, if available in your area

3. Contact Camp Director *immediately*

**PLAN FOR TOTAL LOCK DOWN**

- Determine threatening situation; direct call to 911 emergency phone number
- Inform key staff of situation
- Contact designated camp security, ensuring no one enters or leaves camp unless/until Camp Director permits
- Divert/direct all of camp to their cabins or other “shelter in place” locations; ensure key personnel, especially each cabin, have 2-way radios if possible
- Gather needed documentation:
  - original camp registration forms
  - copies of cabin rosters
- Implement camper/staff accountability system to quickly confirm everyone is present and safe
- Staff to lock all main doors once everyone is accounted for
- Ensure help for individuals with special needs
- If possible and safe, post 911/emergency services contact near camp phone for emergency-related communications
- Determine advisability of (a) evacuation to off site location, or (b) parents removing campers; coordinate effort for dismissal of campers
- Turn off alarm system(s) if applicable
- Contact senior staff, camp owners, Board of Director(s)
- Implement Emergency Media Plan
- Prepare for overwhelming influx of parents and media
- Announce all clear after emergency; debrief as soon as possible afterwards
- Gather information for incident report
- Contact parents of campers/staff; inform and assure of camper/staff safety
CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Perform necessary first aid per level of training/certification until emergency services arrive
• Document all care provided
• Have camper health forms at hand
• Supervise all other staff trained in first aid
• Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  § Names of missing campers
  § Injuries/health issues
  § Report any significant camper information concerning current emergency
• Maintain a calm atmosphere; keep campers in assigned group
• If evacuating, ensure group stays together at all times and close main door(s)

STAFF SECURITY
• Ensure no one enters or leaves camp unless/until approved by the Camp Director
• Report any abnormal situations to the Camp Director immediately
• Record all names and license numbers of vehicles approaching camp and who are turned away
• Remain at entrance to camp and wait for instructions from Camp Director

PARTIAL LOCK DOWN
No one enters or leaves camp; programming continues if possible

CAMP DIRECTOR OR DESIGNATE:
• Determine threatening situation; determine need to direct call 911 emergency phone number
• Inform key staff of situation; ensure key personnel have 2-way radios
• Contact designated security staff, ensuring no one enters or leaves camp unless/until Camp Director or designate permits
• Determine need to ensure all campers are accounted for
• Determine need to upgrade to “total lock-down”
• Determine need to senior staff, camp owners, Board of Directors
• Determine need to implement Emergency Media Plan
• Ensure help for individuals with special needs

SECTION TWO: CRISIS PREVENTION AND RISK MANAGEMENT PLANNING
• Post 911/emergency services contact near camp phone for emergency-related communications
• Turn off alarm system(s) if applicable
• Prepare for possible influx of parents and media
• Announce all clear after emergency; debrief as soon as possible afterwards
• Gather information for incident report
• Contact parents of campers; inform and assure of camper safety

**CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:**
• Operate as normal
• Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary

**COUNSELLORS/STAFF:**
• Ensure safety and well-being of all campers
• As much as possible, continue with current camp program as normal, or conduct diversionary activities
• Keep an extra keen eye open for unusual or abnormal situations
• Report any abnormal situations to the Camp Director and/or designate immediately
• Maintain a calm atmosphere; keep campers in assigned group
• If evacuating, ensure group stays together at all times

**STAFF SECURITY:**
• Ensure no one enters or leaves camp unless/until approved by the Camp Director or designate
• Report any abnormal situations to the Camp Director or designate immediately
• Prepare to record all names and license numbers of vehicles approaching camp and who are turned away
• Remain at entrance to camp and wait for further instructions from Camp Director or designate
HAZARDOUS MATERIAL INCIDENT: NUCLEAR, BIOLOGICAL, CHEMICAL

Immediate Considerations:

• Call 911
• Identify nature of incident/material from distance
• Evacuate
• Establish perimeter and secure area
• Secure ignition sources.
• Identify specific material
• Identify wind and weather conditions
• Have evacuation routes ready
• Keep personnel upwind and out of immediate area
• Decontaminate area
• Allow no open flames or ignition sources
• Provide shelter areas
• Work with media involvement

DISCOVERY OF SUSPICIOUS OR HAZARDOUS MATERIAL

CAUTION: Do not attempt to handle, clean up or remove suspicious or hazardous substances. Allow trained individuals outfitted in proper safety gear to respond to these incidents.

FIRST OBSERVER:

• Isolate and restrict access to the area by best means possible to protect campers and staff
• Isolate anyone exposed to the substance away from the general camp population until emergency responders arrive on scene
• Report the situation and description and location of suspicion to Camp Director

CAMP DIRECTOR/DESIGNATE:

• Direct call to 911/local fire department or local hazmat team; follow instructions from dispatcher
• Inform key staff of situation
• Ensure all campers are accounted for
• Ensure help for handicapped
• List, ascertain condition, and ensure safety/comfort of isolated persons who were in area of the suspicious or hazardous material
• Determine need to evacuate to off-site (upwind) location
• Determine advisability of parents removing campers; coordinate effort for dismissal of campers
• Determine need to contact senior staff, camp owners, Board of Directors
• Determine need to implement Emergency Media Plan
• Post 911/emergency services contact near camp phone for emergency-related communications
• Prepare for influx of parents and media
• Announce all clear after emergency; debrief as soon as possible afterwards
• Gather information for incident report
• Contact parents of campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER AND COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  ▪ names of missing campers
  ▪ injuries/health issues
  ▪ report any significant camper information concerning current emergency
• If evacuating, ensure group stays together at all times
• Maintain a calm atmosphere; keep campers in assigned groups; as much as possible, continue with current camping program as normal, or conduct diversionary activities

STAFF SECURITY:
• Wait for instructions from Camp Director
• Maintain access for emergency vehicles

GAS RUPURE OR EXPLOSION

Immediate Considerations:
• **Call 911**
• Identify location
• Identify threat to hospital personnel/structures
• Take evacuation measures
• Establish perimeter and secure area
• Secure ignition sources

Utilities Malfunction
EXPLOSION

WARNING: Sole priority is for the health and safety of all campers and staff. Individuals without appropriate training or proper safety gear should not attempt to fight fire or enter a structure that has been compromised by an explosion.

FIRST OBSERVER:
- Sound fire alarm
- Notify Camp Director immediately

CAMP DIRECTOR/DESIGNATE:
- Determine situation; direct call to 911/local fire service and law enforcement
- Quickly determine extent of incident
- Implement camper/staff accountability system to quickly confirm everyone is present and safe
- Gather needed documentation:
  - original camp registration forms
  - copies of cabin rosters
- Ensure everyone has evacuated from building/area of incident
- Determine need to implement "minor or major injury" procedures
- Determine safest area(s) in camp and direct/divert campers and staff to that location if needed
- Determine need to evacuate to off-site location
- Contact senior camp staff, camp owners, Board of Directors
- Implement Emergency Media Plan
- If possible and safe, post 911/emergency services contact near camp phone for emergency-related communications
- Determine advisability of parents removing campers; coordinate effort for dismissal of campers
- Ensure help for special needs campers/staff
- Turn off alarm system(s) if applicable
- Announce all clear after emergency; debrief as soon as possible afterwards
- Gather information for incident report
- Prepare for overwhelming influx of parents and media
- Contact parents of campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
- Perform necessary first aid per level of training/certification until emergency services arrive
- Supervise all other staff trained in first aid
- Document all care provided
COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  § names of missing campers
  § injuries/health issues
  § report any significant camper information concerning current emergency
• Maintain a calm atmosphere; keep campers in assigned group; conduct diversionary activities as needed
• If evacuating, ensure group stays together at all times

STAFF SECURITY
• Wait for instructions from Camp Director/designate
• Maintain access for emergency vehicles

UTILITIES MALFUNCTION: SEVERE
Such as gas leak, downed power line, transformer fire, catastrophic sewer malfunction.

DO NOT USE RADIOS, CELL PHONES, OR ANY OTHER ELECTRONIC DEVICES in the vicinity of a gas leak. HOWEVER, IF RADIOS, ETC. ARE ON, LEAVE THEM ON.

FIRST OBSERVER:
• Isolate and restrict access to the area by best means possible to protect campers and staff
• Notify Camp Director immediately

CAMP DIRECTOR/DESIGNATE:
• Determine extent and severity of incident
• Determine need to sound alarm
• Make key staff aware of situation
• Determine safest area(s) in camp and direct/divert campers and staff to that location if needed; evacuate/move campers UPWIND if gas leak; for major gas leak, implement off-site evacuation
• Implement camper/staff accountability system to quickly confirm everyone is present and safe
• Determine need to follow ‘minor or major injury’ guidelines
• Determine need for 911/appropriate emergency services agency; if other than a 911 call, refer to emergency phone list for appropriate utility
• If not a hazardous incident severe enough for 911, ensure sufficient boundary around area
• Determine need to senior staff, camp owner, Board of Directors
• Determine need to implement Emergency Media Plan
• Ensure help for handicapped
• Turn off alarm system(s) if applicable
• Announce all clear after emergency; debrief as soon as possible afterwards
• Gather information for incident report
• Determine advisability of parents removing campers; coordinate effort for dismissal of campers
• Prepare for potential influx of parents and media
• Contact parents of campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Perform necessary first aid per level of training/certification until emergency services arrive
• Supervise all other staff trained in first aid
• Document all care provided

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Prepare to follow guidelines for “explosion”
• Perform accountability check of all campers and report information to Camp Director as soon as possible:
  ▪ Names of missing campers
  ▪ Injuries/health issues
  ▪ Report any significant camper information concerning current emergency
• Maintain a calm atmosphere; keep campers away from area; conduct diversionary activities as needed

STAFF SECURITY:
• Wait for instructions from Camp Director/designate
• Maintain access for emergency vehicles

UTILITIES MALFUNCTION: MINOR
FIRST OBSERVER:
• Notify Camp Director as soon as possible

CAMP DIRECTOR/DESIGNATE:
• Determine severity and extent of situation
• Determine need to follow “severe malfunction” guidelines
• Determine need for accountability check
• Determine safest area(s) in camp and direct/divert campers and staff to that location if needed
• Isolate area if needed
• Contact camp maintenance
CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:

- Operate as normal

COUNSELLORS/STAFF:

- Ensure safety and well-being of all campers
- Report any significant camper information concerning current emergency
- Maintain a calm atmosphere
- Keep campers away from affected area

ELECTRICAL OUTAGE

Immediate Considerations:

- Identify location
- Identify threat to personnel/patients
- Estimate length of outage

FIRST OBSERVER:

- Notify camp nurse immediately; include all important information, preferably by a runner
- Notify Camp Director; include all important information, preferably by a runner
- Onsite health care professional or person with highest certification in first aid and/or CPR to stay with patient(s) and perform any necessary first aid until camp nurse arrives

CAMP DIRECTOR/DESIGNATE:

- Alert the camp nurse to be sure he/she has been contacted
- Assess the scene for danger
- Have camper health forms at hand
- Discuss situation with camp nurse and determine need for 911
- Include the following information about the victim:
  - Is/are victim(s) conscious?
  - Is/are they breathing?
  - Is/are they alert to surroundings?
  - Their major complaint
  - Their age and gender
  - Relevant medical history
- Is there a possibility of other victims?
- Determine a need to do an accountability check
- Determine the need to follow other emergency plan guidelines
• Determine need to contact senior staff, camp owner, Board of Directors
• Gather information for incident report
• Contact parents of affected camper(s)

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Perform necessary first aid per level of training/certification until emergency services arrive
• If appropriate, contact parent or guardian in cooperation with the Camp Director
• Have camper health forms at hand
• Supervise all other staff trained in first aid
• Document all care provided
• Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Report any significant camper information concerning current emergency
• Maintain a calm atmosphere.
• As much as possible, continue with current camping program as normal, or conduct diversionary activities
• Keep campers away from area

STAFF SECURITY:
• Wait for instructions from Camp Director
• Maintain access for emergency vehicle

SERIOUS ACCIDENT/INJURY OR DEATH

FIRST OBSERVER:
• Notify camp nurse immediately; include all important information, preferably by a runner
• Notify Camp Director; include all important information, preferably by a runner
• Person with highest certification in first aid and/or CPR to stay with patient(s) and perform first aid and life saving techniques until camp nurse arrives

CAMP DIRECTOR/DESIGNATE:
• Alert the camp nurse to be sure he/she has been contacted
• Assess the scene for danger
• Have camper health forms at hand
• Discuss situation with camp nurse and determine need for 911/law enforcement/EMS
• Include the following information about the victim:
  ▪ is/are victim(s) conscious?
  ▪ is/are they breathing?
  ▪ is/are they alert to surroundings?
  ▪ their major complaint
  ▪ their age and gender
  ▪ relevant medical history
• Is there a possibility of other victims?
• Determine a need to do an accountability check
• Determine the need to follow other emergency plan guidelines
• Contact senior staff, camp owner, Board of Directors
• Implement Emergency Media Plan
• Gather information for incident report
• Contact parents of affected camper(s)
• Attempt to determine cause of injury – was there a perpetrator? Is there an intruder in camp?
• Make available to law enforcement any known witnesses to event and an interview area
• Contact crisis intervention team
• Determine advisability of parents removing campers; coordinate effort for dismissal of campers
• Prepare for potential influx of parents and media
• Contact parents of all campers; inform and assure of camper safety
• Debrief as soon as possible afterwards

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Perform necessary first aid per level of training/certification until emergency services arrive
• Have camper health forms at hand
• Supervise all other staff trained in first aid
• If appropriate, contact parent or guardian in cooperation with the Camp Director
• Document all care provided
• Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Report any significant camper information concerning current emergency
• Maintain a calm atmosphere; conduct diversionary activities as needed
• Keep campers away from area

STAFF SECURITY:
• Wait for instructions from Camp Director
• May be asked to assist with situation, depending on circumstances
• Maintain access for emergency vehicles

GUIDELINES FOR TRANSPORTING PATIENTS TO HOSPITAL

Camp nurse/primary camp healthcare provider in consultation with Camp Director/designate determine needs for ambulance or use of camp “emergency vehicle”

Transportation by Ambulance:
1. Call 911/EMS; provide necessary information to dispatcher as per above
2. Attempt to contact parents/guardians of camper
3. Make copy of camper’s registration form and health form
4. ENSURE COPY OF CAMPER’S/STAFF’S HEALTH FORM IS GIVEN TO AMBULANCE PERSONNEL
5. Camper’s registration form and health form to the hospital
6. Insurance form to the hospital if appropriate
7. Send all medication(s) the camper is taking
8. If a determination is made that parent/guardian is unable to meet ambulance at hospital for any reason, the Camp Director or designee, determined by the Camp Director, shall follow ambulance immediately to the hospital to ensure appropriate documentation is signed for proper care and to be present when parent/guardian arrives.

If EMS Does not Have to be Called:
The following MUST be taken for any such trips in the vehicle selected:
• Health form of camper/staff being transported
• Medications and first aid kit
• Reflector and fire extinguisher
• Appropriate camp policies and procedures should be followed
• The gas tank of the vehicle being used to transport the camper must be at least ½ filled before leaving the camp. The Camp Director is responsible for monitoring the level of the gas tank.
• The Camp Director will be notified before leaving the camp premises
The camp nurse/primary camp health care provider or designee, determined by the Camp Director, shall ride with the patient to the hospital.

In cases of anaphylaxis ensure an epinephrine auto injector (EpiPen or Allerject) must be taken in the vehicle along with a second person who is able to administer.

Attempt to contact parents/guardians of camper.

The Camp Director or designate shall follow shortly behind and remain present until parent/guardian arrives.

POTENTIAL CONTAGIOUS/SERIOUS ILLNESS OUTBREAK

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:

- Tend to the needs of those affected; recruit needed assistants from qualified counsellors/staff.
- Contact Camp Director to report suspected cases of serious or contagious illness.
- Contact local health officials and/or camp physician for guidance and instructions.
- Prepare those affected for transport to medical facility.
- Determine need to bring in additional healthcare professionals.
- Document all care provided.
- Ongoing assessment of the rest of camp for further outbreaks.
- Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary.

CAMP DIRECTOR/DESIGNATE/HEALTHCARE PROFESSIONAL:

- Consult with camp healthcare provider, local health officials and/or camp physician regarding severity of illness, potential for transmission to others and steps to take (e.g. continue with camp programming, monitor, close camp, quarantine, etc.).
- Contact senior staff, camp owner, Board of Directors.
- Implement Emergency Media Plan.
- Contact parents of those immediately affected.
- Work with communications and medical professionals to draft message for parents and media.
- Organize available camp staff to begin calling parents of other campers. Share information on:
  - Characteristics, severity and symptoms of illness.
  - Potential for transmission.
  - Response so far – what is being done.
  - Immediate camp plans (e.g. continue, monitor, close camp, quarantine, etc.).
- If a province-wide, regional or localized, contact and brief the appropriate healthcare agencies/institutions.
- If necessary, coordinate effort for dismissal of campers.
If necessary to quarantine, implement “total camp lockdown” procedures
Prepare for potential influx of parents and media

COUNSELLORS/STAFF:
- Monitor safety and well-being of all campers
- Report any significant camper information concerning current emergency
- As needed, provide assistance to camp healthcare provider and/or Camp Director
- Maintain a calm atmosphere; conduct diversionary activities as needed

STAFF SECURITY:
- Wait for instructions from Camp Director
- May be asked to assist with situation, depending on circumstances
- Maintain access for emergency vehicles
- Prepare for potential influx of vehicles entering camp
- Follow up with staff and campers who witnessed the injury/accident

SECTION TWO: CRISIS PREVENTION AND RISK MANAGEMENT PLANNING

ABDUCTION SITUATION

FIRST OBSERVER:
- Visualize perpetrator’s appearance (e.g. clothes, shoes, hair, color, etc.)
- Determine weapon, if any
- Notify Camp Director and/or extension agent immediately

CAMP DIRECTOR/DIRECTOR:
- Implement “total lock down” procedures
- **Direct call to 911**/law enforcement/EMS with details provided by first observer
- Contact senior staff, camp owner, Board of Directors
- Implement Emergency Media Plan
- Direct witnesses to write statement(s) to give to law enforcement
- Have witnesses available for law enforcement
- Consult with emergency service and determine need for evacuation of camp
- Determine, if possible, if perpetrator is a camper or intruder and inform law enforcement
- Contact parents of camper in hostage situation
- Provide all pertinent information on all involved persons to law enforcement

Missing Person
Gather information for incident report
Following incident, contact parents of all campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
- Be prepared to perform necessary first aid per level of training/certification until emergency services arrive
- Supervise all other staff trained in first aid

COUNSELLORS/STAFF:
- Implement “total lock down” procedures
- Ensure safety and well-being of all campers
- Report any significant camper information concerning current emergency
- Maintain a calm atmosphere
- Keep campers away from area

STAFF SECURITY:
- Wait for instructions from Camp Director
- May be asked to assist with situation, depending on circumstances
- Maintain access for emergency vehicles

SUSPECT/HOSTAGE SITUATION
Immediate Considerations:
- Call 911
- Identify location
- Determine nature of incident
- Isolate of scene and evacuation
- Determine number of persons involved
- Establish communications

UNAUTHORIZED/UNWANTED INTRUDER
FIRST OBSERVER:
- Stop and question anyone in camp without a visitor’s badge
- Offer to escort her/him to office to obtain badge
- If individual refuses, make a mental note of individual’s appearance, demeanor and weapon, if any; document encounter in writing
- Notify Camp Director and/or extension agent immediately
• Provide description of individual to Camp Director

CAMP DIRECTOR/DESIGNATE:
• Inform camp security
• **Direct call to 911**/law enforcement
• Determine need for implementing “lock down” or “partial lock down” procedures
• Follow recommendations of law enforcement
• Contact senior staff, camp owner, Board of Directors
• Implement Emergency Media Plan
• Gather information for incident report and arrange staff debriefing
• Following incident, contact parents of campers; inform and assure of camper safety

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Operate as normal

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Keep campers away from area
• As much as possible, continue with current camp program as normal, or conduct diversionary activities
• Keep an extra keen eye open for unusual or abnormal situations
• Report any abnormal situations to the Camp Director/designate immediately
• Maintain a calm atmosphere; keep campers in assigned group

STAFF SECURITY:
• Wait for instructions from Camp Director/designate
• May be asked to assist with situation, depending on circumstances
• Maintain access for emergency vehicles

RUNAWAY/ABDUCTED CAMPER SEEN LEAVING CAMP

FIRST OBSERVER:
• Determine if camper is alone or has a companion
• Determine if camper is leaving “freely” or by force
• Ask camper for an explanation and/or a return to camp
• If camper/they refuse, carefully notice clothes, license numbers, hair, etc.
• Send a runner to notify Camp Director immediately; stay close to leaving camper(s)
• If there is no runner available, write a complete description of camper and companion’s appearance and clothing, license number, vehicle description and report to the Camp Director/designate immediately

CAMP DIRECTOR/DESIGNATE:
• **Direct call to 911**/local law enforcement
• Call parent of camper; have parent provide a current photo of camper
• Implement camper/staff accountability system to quickly confirm that no other campers are missing
• Determine if any of the camp staff is related to, knows, bunks with or is the counsellor of the camper. If appropriate, ask that staff member to go to camper if safe and talk to her/him. However, this person should be same gender. Be sure to give him/her a 2-way radio.
• Determine if search team needs assembled; ensure search team has 2-way radios, and a specific search plan
• Determine if camp staff is aware of any arrangements for camper to leave camp.
• Pull camper’s registration and health form and have on hand for reference; look for parent notes to explain disappearance
• Contact senior staff, camp owner, Board of Directors
• Implement Emergency Media Plan
• Ask staff, especially those in missing camper’s cabin, for any information about missing camper
• Check missing camper’s bunk for information

CAMP SECURITY:
• May be asked to assist with situation
• Wait for instructions from Camp Director
• Maintain access for emergency vehicles

CAMP NURSE/PRIMARY CAMP HEALTH CARE PROVIDER:
• Report medical history to Camp Director as soon as possible
• Await instructions from Camp Director and/or extension agent
• Be ready to perform necessary first aid per level of training/certification until emergency services arrive
• Have camper health forms at hand
• Document all care provided
• Monitor constantly for any individuals who may be having psychological issues that may go unnoticed and intervene as necessary
COUNSELLORS/STAFF:

- Ensure safety and well-being of all campers
- Perform accountability check of all campers and report information to Camp Director as soon as possible:
  - Names of missing campers
  - Report any significant camper information concerning current emergency
- Keep a keen eye and ear open for signs relevant to missing camper

MISSING CAMPER

CAMP DIRECTOR/DESIGNATE:

- Refer to records to see if camper has signed out or if they were scheduled to be checked out; verify with parent
- Check camper’s bunk to see if personal belongings are still there and for any information
- Check where camper is supposed to be
- Check and determine if camper was at last activity
- Check and determine when camper was last seen, what was he/she wearing
- **Direct call to 911/local law enforcement**
- Call parent of missing camper. Have parent provide a current photo of camper
- Implement camper/staff accountability system to quickly confirm that no other campers are missing
- Determine if any of the camp staff is related to, knows, bunks with or is the counsellor of the camper. If appropriate, ask that staff member to go to camper if safe and talk to her/him. However, this person should be same gender. Be sure to give him/her a 2-way radio.
- Determine if search team needs assembled; ensure search team has 2-way radios, and a specific search plan
- Determine if camp staff is aware of any arrangements for camper to leave camp
- Contact senior staff, camp owner, Board of Directors
- Implement Emergency Media Plan
- Ask staff, especially those in missing camper’s cabin, for any information about missing camper
- Pull camper’s registration and health form and have on hand for reference; look for parent notes to explain disappearance
- If from another county, contact camper’s local extension agent
- Contact Camp Nurse for information on medical history
- Determine need for crisis intervention team
- Gather information for incident report
CAMP SECURITY:
- May be asked to assist in search of camper
- Wait for instructions from Camp Director
- Maintain access for emergency vehicles

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
- Report medical history to Camp Director and/or extension agent as soon as possible
- Await instructions from Camp Director and/or extension agent
- Be ready to perform necessary first aid per level of training/certification until emergency services arrive
- Have camper health forms at hand
- Supervise all other staff trained in first aid
- Document all care provided

COUNSELLORS/STAFF:
- Ensure safety and well-being of all campers
- Perform accountability check of all campers and report information to Camp Director as soon as possible:
  - Names of missing campers
  - Report any significant camper information concerning current emergency
- Keep a keen eye and ear open for signs relevant to missing camper
ALLEGATION OF INAPPROPRIATE ADULT/CAMPER, OR CAMPER/CAMPER CONTACT

May include allegations of sexual harassment, inappropriate touching, or violation of “above suspicion” or bullying policies. For incidents which are clearly criminal or child abuse, contact the appropriate agency.

WITNESS OR ACCUSER:

- Notify Camp Director/designate of the nature of the alleged incident

CAMP DIRECTOR/DESIGNATE:

- Determine need for 911/law enforcement/EMS/children’s services
  - If criminal in nature (for example, if alleged act constitutes rape, assault, child abuse, or is sexual in nature)
- Contact senior staff, camp owner, Board of Directors
- Remove accused from all potential contact with campers; do not leave accused alone or allow them to leave the premises until police arrive on scene and speak with them
- Provide a quiet, isolated area if needed by accuser (with at least two adult chaperones, at least one of which the same gender as accuser)
- Document all actions you take and information volunteered by accused, accuser or witnesses for incident report; record names of potential witnesses, but do not attempt to engage in an investigation on your own
- Contact parents of involved/affected camper(s)
- Try to limit the number of people who know of the allegation
- Make available to investigators any known witnesses to event and a quiet interview area, preferably in a location that will provide as little disruption to camp activities as possible
- As soon as possible after debriefing with the appropriate senior officials, resume your regular camp duties
- Debrief with all camp staff as soon as possible
- Ensure all staff complies with confidentiality requirements

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:

- If there is a nurse on staff – nursing assessment of individual
- Documentation as per College of Nurses of Ontario
- Operate as normal
COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Report any significant camper information concerning incident
• Maintain normal camp activities

STAFF SECURITY:
• Wait for instructions from Camp Director
• May be asked to assist with situation, depending on circumstances

SEXUAL ABUSE

PREVENTION PHASE: Balancing Caution and Caring
Developing and understanding the following guidelines can help foster the culture of safety needed to report, address and prevent sexual abuse in your camp setting.

Policies:
• Refer to your camp policies on interacting with youth and understand the local laws on sexual abuse. If this is lacking, ensure that you:
  ▪ Develop clear guidelines for appropriate interactions between employees-employee, employees-youth, and youth-youth
  ▪ Develop well-defined reporting structure so individuals know
  ▪ Provide ongoing training and education
• Partner with child protective services, law enforcement and sexual abuse advocacy centres before any allegations arise for resource support and to ensure that your policies are current and to seek support
• Work with legal, health and counseling professionals to develop a tailored sexual abuse reporting policy for your camp

ROLES AND RESPONSIBILITIES:
Camp Director/Designate Staff Committee:
• Ensure your camp has a well-defined reporting and documentation structure so employees know what to do if they observe potentially inappropriate behaviors
• Establish direct-line and back-up reporting systems in your organization; the back-up reporting system is used if the incident involves the direct-line authority

All Employees:
• Know how to identify and monitor for inappropriate or harmful behavior and potential risk situations that can lead to sexual abuse (i.e. employees showing favoritism, giving gifts and looking for time alone with youth)
• Know how to respond as per your camp policies and the law
INTERVENTION PHASE: Responding to Inappropriate Behavior, Allegations and Suspicions of Sexual Abuse

Respond quickly and appropriately to (a) inappropriate or harmful behavior, (b) infractions of sexual abuse prevention policies, (c) evidence or allegations of sexual abuse. Do not independently investigate abuse claims; this can further harm the victim and legal investigative process.

ROLES AND RESPONSIBILITIES:

Camp Director/Designate Staff Committee:

• Define inappropriate and appropriate strategies of staff response
  (e.g. Clarify that it is not the role of the employer/employee or organization to evaluate or investigate an allegation or suspicious event or incident.)

• Delineate what behavior your organization will respond to internally vs. what will require reporting to authorities:
  ▪ E.g. If a youth tells a sexually risqué joke, you may encourage employees to inform a direct-line supervisor and/or youth’s caregiver; provide the youth with guidance, redirection and instruction; and/or file an incident report
  ▪ If a youth or employee forces sexual contact with youth, contact law enforcement, child protective services and caregiver

• Inform law enforcement and/or child protection services to investigate allegations or suspicions of abuse immediately

• Act on infractions of your camp’s sexual abuse prevention policy:
  ▪ If an employee has breached a policy, such as having contact with youth outside of your camp, you must take action, even when sexual abuse is not suspected.
  ▪ The consequences of violating policies should be explicit and violations addressed

• Clearly communicate that all employees are professionally and legally accountable for ensuring all cases of abuse are reported to the proper authorities (i.e. Child Welfare, law enforcement, etc.)

• Develop a confidentiality policy to ensure staff know in advance what information should remain private and what information can be made public in accordance to legal requirements

• Consider creating a separate response team or identify members from your committee (consisting of few key healthcare providers, counselor staff trained in basic psycho-social techniques such as psychological first aid) to take lead on:
  ▪ Ensuring the safety and well-being of all campers
  ▪ Arranging for support for victims and families
  ▪ Arranging support for bystanders and reporters

Counsellors/Staff:

• Ensure you understand your role and responsibility in reporting sexual abuse

• Maintain confidentiality of potential victims, accused perpetrators and individuals who made the report of sexual abuse
Reporting and Recording:

- If evidence of sexual abuse has surfaced or an allegation has been made, complete and file a formal report to an outside agency (i.e. law enforcement, Child Welfare agencies)
- Ensure that you have developed reporting policies consistent with current provincial laws
- Allegations and suspicions should be reported to key crisis response team members before contacting authorities to maintain the psychological safety of the victim (i.e. minimize the number of times an individual has to repeat allegation) and to expedite the process
- Consider developing a system to track allegations and suspicions of sexual abuse for the following purposes:
  - Incident review to determine what went wrong and to prevent future scenarios
  - Strengthen internal policies and procedures

FIRST OBSERVER:

- Do not confront the individual except under extreme circumstances
- If individual is not threatening, notify Camp Director immediately including name, description and location of person, if known

CAMP DIRECTOR/DESIGNATE:

**If there is a weapon in camp, but is not “on” anyone:**

- Retrieve weapon immediately with assistance from other adult staff
- Determine need to contact law enforcement

**If camper has possession of a dangerous object:**

- Determine seriousness of situation:
  - Will camper hand it over?
  - Is it a pocket knife which camper felt was totally innocent?
- If inadvertent, counsel and remind of rules
- Determine need to contact parents

**If individual is armed and dangerous:**

- Contact camp security
- Inform key staff of situation
- Direct call to 911/local law enforcement
- Determine need to implement “total lock down” or “partial lock down” procedures
- Ensure safety and well-being of all campers
- Identify a safe perimeter and isolate area
• Consider relocating campers and staff between suspect and the entrance to camp if possible
• Contact senior staff, camp owner, Board of Directors
• Implement Emergency Media Plan
• Gather information for incident report and arrange staff debriefing
• Cooperate with law enforcement
• Determine need for crisis intervention team
• Gather information for incident report
• Prepare for potential influx of parents and media
• Following incident, contact parents of campers; inform and assure of camper safety

CAMP SECURITY:
• May be asked to assist with individual
• Wait for instructions from Camp Director
• Maintain access for emergency vehicles

CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:
• Wait for instructions from Camp Director; prepare for injuries

COUNSELLORS/STAFF:
• Ensure safety and well-being of all campers
• Maintain a calm atmosphere; keep campers away from area; conduct diversionary activities as needed
• Keep a keen eye and ear open for signs relevant to situation
• Report any significant camper information concerning the situation to the Camp Director
**Dangerous, Vicious, Venomous Animals**

**FIRST OBSERVER:**
- Determine whether animal is dangerous, venomous or vicious
- Protect and ensure safety of campers
- Have another counsellor divert campers away from animal
- Have someone contact the Camp Director

**CAMP DIRECTOR/DESIGNATE:**
- Determine severity of situation
- Determine safest area(s) in camp and direct/divert campers and staff to that location if needed
- Isolate area if needed
- Determine need for animal control

**CAMP NURSE/PRIMARY CAMP HEALTHCARE PROVIDER:**
- Be prepared to provide emergency first aid
- Contact poison control as necessary
- Operate as normal

**COUNSELLORS/STAFF:**
- Ensure safety and well-being of all campers
- As much as possible, continue with current camping program as normal, or conduct diversionary activities
- Report any significant camper information concerning current incident
- Maintain a calm atmosphere
- Keep campers away from affected area

**STAFF SECURITY:**
- Wait for instructions from Camp Director/designate
- Maintain camp access for utility vehicles
INCIIDENT PREVENTION:

1. Staff qualifications
2. Job descriptions
3. Organizational structure, information package and staff manuals
4. Training documentation
   - Staff orientation procedure
   - Staff training record
   - Training expectation
   - Training content
   - Attendance record
   - Frequency and duration of training
   - Training conductor(s)
   - Minutes of meetings (staff and supervisor)
   - Shift replacements and work record
   - Recertification procedures
   - Staff performance appraisals
   - Disciplinary policy
5. Public education (sample announcements during recreational swim)
6. Water chemistry (all records)
7. Staff manuals (operational materials)
8. Program registration forms
9. Program schedules
10. Admittance forms
11. Staff screening tests – pre-season training
12. Facility emergency procedures
13. Facility inspection reports
14. Copy of Steps to Take Following A Major Incident or Accident
15. Copies of Legislation Affecting Operations
INCIDENT RECORDING:
1. Security camera footage of incident
2. Staff contact list
3. Individual staff report(s) of incidents
4. Media reports and resources
5. Supervisor(s) summary and reports
6. Daily record – log books
7. Staff contracts
8. All telephone numbers of persons/organizations involved
9. Staff sign-in sheet
10. Facility attendance records
11. Seasonal program schedules
12. Photographs of facility
13. Video footage of the incident
14. Map of facility and blue print of pool
15. Weather reports
16. Staff map (positioning during incidents)
17. Master time line (following up steps after an initial rescue completed)
18. Contacts log (including police, ambulance, fire, parents, media, etc.)
19. Other pertinent information
   - Memoranda of communication
   - Training resources
   - Staff initiatives
MAJOR INCIDENT KIT:

Contents:
1. List of what to do (for head guard and management team)
2. Exit strategy for patrons
3. Contact list for management team
4. Press comment (who speaks & what is the message)
5. Witness report
6. Pens, paper and clipboards
7. Signage for pool and/or facility closure (steps to decide about reopening)
8. Camera (not digital)
9. Emergency forms
10. Employee assistance protocols
11. Cleaning supplies
12. Voice recorder
13. Measuring tape
14. Flash light
15. Caution tape
16. Department phone lists (customer service, recreation, fitness, maintenance and aquatics)

MAJOR INCIDENT HEAD GUARD CHECK LIST:

☐ Activate EMS
☐ Ensure scribing is being completed
☐ Ensure smooth transition with EMS
☐ Gather witnesses
☐ Secure facility and post signs
☐ Contact a member of management and Aquatic Managers
☐ Have staff and witnesses complete witness reports (separately)
☐ Make sure forms are completed
☐ Take photos of the scene
☐ Clean areas as necessary
☐ Work with management team to complete next steps
SECTION THREE: OCA’S RESPONSE TO A CAMP IN CRISIS
OCA Accredited Camp Members are obligated to contact the OCA office when a crisis occurs:

1. The President prepares a statement of purpose, which briefly describes the OCA, for use in response to a request from the media for information after a camp’s crisis.

2. Prior to the summer season, the OCA will notify camps how to access the Crisis Support Line, which is available 24/7. In addition, the office is open weekdays from 9 a.m. to 4 p.m. at 416-485-0425.

3. A camp leaving a detailed message on the Crisis Support Line notifying the OCA of a crisis can expect a response within 4 to 6 hours.

4. A list with current contact information of members who are experienced and will offer advice in specific crisis situations will be maintained at the office. The OCA designate who answers a call will inform the camp of the colleague who may be the best able to provide guidance in dealing with the crisis.

5. On receipt of the call or message, the OCA will provide, if possible, help for an immediate, identified need.

6. The OCA will request a copy of the camp’s media statement and will ensure that the office staff uses the statement if contacted by media.

7. The media statement will be shared with the OCA Board.

8. The OCA will continue to monitor the situation and support the member.

9. If the crisis results in a Coroner’s Inquest, the OCA will obtain the report and inform all the membership of the relevant recommendations.

WHEN SHOULD YOU CALL THE SUPPORT LINE?

If you think an event or incident is an emergency or crisis, call the support number at:

416-708-8131

WHAT HAPPENS WHEN YOU CALL THE SUPPORT LINE?

• All information is confidential.

• Information is documented.

• Pertinent emergency contact information, appropriate to your event/incident, will be provided to you.

• Camp leaders/health care professionals/other appropriate to your event/incident will be recommended for your guidance.

• A process for moving forward is discussed.

• If appropriate, follow up is sometimes requested.

• During the conversation, the caller will be informed if this serious event/issue will be discussed “in confidence” with the OCA President should the OCA need to proceed with their own action/process.

• The person camp/individual/vendor proceeds with their plan of action.
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DISCLAIMER

The following are resources including sample forms that have been provided by a number of individuals and organizations related to Crisis Response Planning. These resources can be used as a guide and support when developing your camp’s Crisis Response procedures. They are reprinted here as they appear in their publications. They are provided to offer you guidance and assistance in developing your own procedures for your camp.
### POTENTIAL REACTIONS OR BEHAVIOURS

#### Detachment, shame and guilt
- Provide a safe time and space to discuss with your teen the events and their reactions to it
- "Many young people, and adults, feel like you do like being angry or blaming themselves and wishing they could have done more; you are not at fault"

#### Self-Consciousness
They may be feeling self-conscious about their fears, their sense of vulnerability or fear of being seen as abnormal
- Help your teen understand these feelings and reactions are normal
- Encourage your teen to connect with supportive family or peers
- "I was feeling some of the same things when it happened. Most people have feelings like this when things like this happen, even if they are looking OK and calm on the outside".

#### Fear the event will happen again or fear of reminders of the event
- Help to identify things, that for them, are reminders of the event. Clarify for them the difference between the event and reminders that occur after the event.
- Discuss that media coverage of the event can trigger fears of it happening again
- "When you are reminded, you might try saying to yourself, I am upset now because I am being reminded about it, but it is not happening right now and I am safe"
- Suggest: "Watching news reports about it could make it worse. You are seeing the same images repeatedly. How about turning the TV off for a while?"

#### Risky Behaviour
This could include using alcohol or drugs, risky sexual behaviour or accident prone behaviours
- Help teens understand risky behaviours is a dangerous way to express their strong feelings (like anger) about what happened
- Limit your teen's access to alcohol or drugs
- Talk about the dangers of risky sexual behaviour
- On a time limited basis, ask your teen to let you know where they are going and what they are planning to do
- "Many teens, and some adults too, feel out of control and angry when something like this happens. They think drinking alcohol or taking drugs will somehow help. It is very normal to feel that way but it is not a good idea to act on it".
- "It is important right now I know where you are and how to contact you", assure them this extra 'checking in' is just temporary until things have calmed down
### Abrupt shifts in interpersonal relationships

- Teens may pull away from parents, family and even friends; they may also have strong reactions to a parent’s reactions to the event.
- Explain the strain this event can cause on relationships is understandable.
- Emphasize that it is really good to have the support of family and friends at times like this.
- Encourage tolerance for the different ways family members are reacting to the event. Explain that everyone has their own unique course of recovery.
- Accept responsibility for your own feelings.
- Spend more time talking as a family about how everyone is doing. Say: “The fact we are irritable with one another is normal given what we have been through. It is good we have each other”.
- “I want to apologize for being short with you yesterday. I am going to work more on trying to stay calm myself”.

### Radical changes in attitude

- Radical changes in attitude are common after events like this. It will likely return to usual in time.
- “When things like this happen it is normal to feel stresses and even scared or angry. It may not seem like it now but things will feel better and become more like normal in time”.

### Concern for other victims or families

- Encourage constructive activities on behalf of others, but do not burden them with undue responsibility.
- Help your teen identify meaningful, age appropriate projects that will help them express their concerns.

#### Teach adolescents simple relaxation techniques:

- Inhale slowly (count one thousand one; one thousand two; one thousand three) through your nose.
- Comfortably fill your lungs all the way down to your belly.
- Silently and gently say to yourself “my body is filling with calm”.
- Exhale slowly (count one thousand one; one thousand two; one thousand three) through your mouth.
- Comfortably empty your lungs all the way down to your belly.
- Silently and gently say to yourself “my body is releasing tension”; repeat this five times slowly.
SAMPLE DIRECTIONS:

From the West via Steeles Avenue:

Take Steeles Avenue to Dufferin Street. Turn right onto Dufferin Street. Travel south on Dufferin Street. Drive 1.33 km to Martin Ross Avenue. Turn right onto Martin Ross Avenue and proceed west. Stay on Martin Ross Avenue, go through the lights, when they turn green. OCA Camp will be the third building on your right-hand side. Make a right-hand turn into the Metro Hardware driveway as park anywhere in the parking lot.

From the West via Highway 407:

Take the 407 Dufferin Street. Turn right (south) Dufferin Street. Travel South on Dufferin Street. Drive 4.78 km to Martin Ross Avenue. Turn right onto Martin Ross Avenue and proceed west. Stay on Martin Ross Avenue, go through the lights, when they turn green. OCA Camp will be the third building on your right-hand side. Make a right-hand turn into the Metro Hardware driveway as park anywhere in the parking lot.
Crisis Response: Information Distribution Tracking

ANNOUNCEMENT:

INDICATE THE PEOPLE WHO HAVE RECEIVED THIS INFORMATION:

☐ ____________________  ☐ ____________________
☐ ____________________  ☐ ____________________
☐ ____________________  ☐ ____________________
☐ ____________________  ☐ ____________________
☐ ____________________  ☐ ____________________
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Ontario Camps Association
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<tr>
<th>NAME OF INJURED</th>
<th>AGE</th>
<th>CABIN</th>
<th>SEX</th>
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LOCATION OF ACCIDENT:

STAFF IN CHARGE OF ACTIVITY AND PRESENT AT THE SCENE:

WITNESSES PRESENT:

ACCIDENT REPORTED TO:

STATE THE TYPE OF INJURY, INCLUDING LOCATION (E.G. LEFT ARM BROKEN):

STATE THE TREATMENTS PROVIDED ON SITE OF THE ACCIDENT AND WHO PROVIDED THE TREATMENT:
WAS THERE A NEED TO FOLLOW UP TREATMENT OFF SITE?  ☐ YES  ☐ NO

IF YES, HOW WERE THEY TRANSPORTED, BY WHOM AND WHERE?


STATE THE FACTS SURROUNDING THE ACCIDENT, INCLUDING THE ENVIRONMENTAL CONDITIONS (E.G. WET GROUND):


WAS THE PROPER EQUIPMENT BEING USED? PLEASE PROVIDE DETAILS:


WERE THE RULES AND REGULATIONS OF THE AREA BEING FOLLOWED? PLEASE PROVIDE DETAILS:


WERE PARENTS/GUARDIANS NOTIFIED?  ☐ YES  ☐ NO  IF YES: TIME:         BY WHOM:

FOLLOW UP INSTRUCTIONS:


ACTIVITY STAFF SIGNATURE:  1.        DATE:

         2.        DATE:

         3.        DATE:

WITNESS SIGNATURE:        DATE:

         2.        DATE:

         3.        DATE:

NURSE SIGNATURE:        DATE:

DIRECTOR'S SIGNATURE:        DATE:
Incident Report

DATE OF INCIDENT: ___________________________ TIME OF INCIDENT ___________________________

LOCATION OF INCIDENT: __________________________________________________________

DESCRIPTION OF INCIDENT. PLEASE USE REVERSE IF MORE SPACE REQUIRED:

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

PERSONS INVOLVED: ________________________________________________________________

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

WITNESSES PRESENT: ______________________________________________________________

________________________________________________________________________________
________________________________________________________________________________
________________________________________________________________________________

FOLLOW UP INSTRUCTIONS: _________________________________________________________

________________________________________________________________________________

ACTIVITY STAFF SIGNATURE: 1. ___________________________ DATE: ___________________________

2. ___________________________ DATE: ___________________________

3. ___________________________ DATE: ___________________________

WITNESS SIGNATURE: 1. ___________________________ DATE: ___________________________

2. ___________________________ DATE: ___________________________

3. ___________________________ DATE: ___________________________

NURSE SIGNATURE: ___________________________ DATE: ___________________________

DIRECTOR’S SIGNATURE: ___________________________ DATE: ___________________________
Key contacts you may need to access during an emergency:

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<th>FUNCTION</th>
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<td>Hospital</td>
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<td><strong>CAMP PARTNERS:</strong></td>
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<td>Transportation</td>
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<tr>
<td>Ontario Camps Association</td>
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<td>416-485-0425</td>
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**CAMP CRISIS RESPONSE TEAM:**

**CAMP DIRECTOR:**

- Cell: 
- Pager: 
- Home: 
- Other: 

**NURSE/DOCTOR/FIRST AIDER:**

- Cell: 
- Home: 
- Other: 

**CRISIS RESPONSE SUPERVISOR:**

- Cell: 
- Home: 
- Other: 

**CRISIS RESPONSE TEAM MEMBER:**

- Cell: 
- Home: 
- Other: 

**CAMP LEADERSHIP TEAM:**

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## Professional Resources:

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## Emergency Resources:

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<td>Infectious Disease</td>
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<td>Kids Help Line</td>
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<td>Local Municipality</td>
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<td>Mental Health Help Line</td>
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<td>1-800-531-2600</td>
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<td>Ministry of the Environment</td>
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<tr>
<td>Ontario Spills Action Centre</td>
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<td>1-800-268-6060</td>
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<td>Phone Company</td>
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<td>Pool Service</td>
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<td>Provincial Parks Authorities</td>
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<td>Taxi &amp; Limousine</td>
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<td>TeleHealth Ontario</td>
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<td>Tree Care</td>
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<tr>
<td>Veterinary Clinic</td>
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</table>
## Missing Camper on a Bus: Crisis Response

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<th>EMERGENCY BUS CHECKER</th>
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**OCA**

Ontario Camps Association
## Event Log Sheet

**NAME:**

<table>
<thead>
<tr>
<th>DATE</th>
<th>TIME</th>
<th>EVENT</th>
<th>FOLLOW-UP</th>
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### Supervisor Stabilize Checklist

There is a series of actions we can take in response to a crisis that will increase the likelihood of a good outcome.

- [ ] Disperse greeters (who and where):
  
  COMMENTS:

- [ ] Gather and count those involved in the crisis:
  
  COMMENTS:

- [ ] Attend to the needs of those involved in the crisis:
  
  COMMENTS:

- [ ] Look for additional injuries:
  
  COMMENTS:

- [ ] Tend to the non-injured:
  
  COMMENTS:

- [ ] Deal with existing hazards:
  
  COMMENTS:

- [ ] Assign roles to those that will preserve the maintenance of regular camp program:
  
  COMMENTS:

- [ ] Preserve all materials involved in the crisis:
  
  COMMENTS:
### Fact Sheet

Objective, factual information you initially obtain will form the cornerstone of many of the subsequent actions you will take.

- What happened?

- Who was involved?

- Do any victims have siblings at camp? Consult office via MIKE:

- Where are those involved now?

- What is their condition?

- What action has been taken:

- What do they need now?

- What camp resources should be immediately initiated?

- How should assistance be delivered?

- Who is in charge on the scene?

- Who has been contacted?

- When and where did the crisis occur?

- What were the environmental conditions before and after this incident?
<table>
<thead>
<tr>
<th>DUTIES</th>
<th>A.M.</th>
<th>P.M.</th>
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<tbody>
<tr>
<td>Ride in ambulance and meet family</td>
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<tr>
<td>Regular camp administration: Director</td>
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<tr>
<td>Regular camp administration: Program</td>
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<tr>
<td>Regular camp administration: administrator</td>
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<tr>
<td>Greeter 1</td>
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<td>Greeter 2</td>
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<td>Driver 1</td>
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<td>Driver 2</td>
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<tr>
<td>Preparations for out-of-towners</td>
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NOTES:

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Post-Incident Checklist

☐ FIND OUT MORE
☐ Assign two staff members to collect objective information independently
☐ Photograph all areas

COMMENTS:

☐ UPDATE STATUS OF AFFECTED CAMPERS AND STAFF
☐ Person(s) involved in incident
☐ Others affected by incident
☐ Crisis Team
☐ Camp community
☐ Anyone who has left camp

COMMENTS:

☐ Order additional supplies if needed:

COMMENTS:

☐ Establish protocol for meeting with the media:

COMMENTS:

☐ Instruct media to direct all questioning to spokesperson:

COMMENTS:

☐ Update camp spokesperson and OCA:

COMMENTS:
THIS AREA IS CURRENTLY DESIGNATED AS CRISIS HEADQUARTERS

PLEASE **DO NOT ENTER** WITHOUT THE EXPRESSED PERMISSION OF THE CRISIS RESPONSE TEAM.
### Affected Campers/Staff Tracking Sheet

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<th>NAME:</th>
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---

**Ontario Camps Association**
Crisis headquarters is a place to create a quiet, secluded setting where you and your crisis team can think clearly, discuss issues without intrusion and make phone calls without distraction.

☐ Establish headquarters and communicate headquarter protocol:

COMMENTS:

☐ Prepare phone protocol for dealing with all incoming phone calls:

COMMENTS:

☐ Establish headquarters and communicate headquarter protocol:

COMMENTS:

☐ Designate individuals that will receive calls relating to the crisis:

COMMENTS:

☐ Designate individuals that will receive regular camp calls:

COMMENTS:

☐ Contact camp spokesperson:

COMMENTS:

☐ Contact OCA:

COMMENTS:
DISCLOSURES RELATED TO PROVIDING HEALTH CARE:

38. (1) A health information custodian may disclose personal health information about an individual,
(a) to a health information custodian described in paragraph 1, 2, 3 or 4 of the definition of "health
information custodian" in subsection 3 (1), if the disclosure is reasonably necessary for the provision
of health care and it is not reasonably possible to obtain the individual's consent in a timely manner,
but not if the individual has expressly instructed the custodian not to make the disclosure;
(b) in order for the Minister, another health information custodian or a local health integration
network to determine or provide funding or payment to the custodian for the provision of health care; or
(c) for the purpose of contacting a relative, friend or potential substitute decision-maker of the
individual, if the individual is injured, incapacitated or ill and unable to give consent personally.
2004, c. 3, Sched. A, s. 38 (1); 2006, c. 4, s. 51 (2); 2007, c. 10, Sched. H, s. 13.

Notice of Instruction

(2) If a health information custodian discloses personal health information about an individual under
clause (1) (a) and if an instruction of the individual made under that clause prevents the custodian
from disclosing all the personal health information that the custodian considers reasonably necessary
to disclose for the provision of health care or assisting in the provision of health care to the individual,
the custodian shall notify the person to whom it makes the disclosure of that fact. 2004, c. 3, Sched. A,
s. 38 (2).

Facility That Provides Health Care

(3) A health information custodian that is a facility that provides health care may disclose to a person
the following personal health information relating to an individual who is a patient or a resident in
the facility if the custodian offers the individual the option, at the first reasonable opportunity after
admission to the facility, to object to such disclosures and if the individual does not do so:
1. The fact that the individual is a patient or resident in the facility.
2. The individual’s general health status described as critical, poor, fair, stable or satisfactory,
or in similar terms.
3. The location of the individual in the facility. 2004, c. 3, Sched. A, s. 38 (3)

http://www.e-laws.gov.on.ca/html/statutes/english/elaws_statutes_04p03_e.htm#BK51

The following form is a template created by the OCA Health Care Committee using information from
a variety of health forms from different camps. The idea is to use only the parts of this form that your
camp wishes to use. It includes many pieces of information some of which your camp will require
and some information you may choose to omit from your camps health form.

All wording of questions has been well thought out to solicit information that is often omitted
in health forms. In some cases information is requested in more than one way again in an effort
to obtain complete health information.

This is an ongoing project that will require updating. If you feel there is information missing or if
you have suggestions as to how we can improve this template please pass your information to the
OCA office at info@ontariocamps.ca and the health care committee will review the submissions.
We appreciate all input.
The camp must be notified of any change in health status from the time this form is completed until the camper/staff starts camp.

*Camp does not require a physician to fill out this form nor is a physical examination required. Ministry of Health dictates that parents who choose to have a physician complete this form may incur expenses.

**GENERAL INFORMATION/CONTACT INFORMATION:**

<table>
<thead>
<tr>
<th>CAMPER NAME:</th>
<th>DATE OF BIRTH: dd/mm/yy</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>SEX:</th>
<th>M</th>
<th>F</th>
<th>OTHER: PLEASE SPECIFY:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>WEIGHT: pounds / KG</th>
<th>HEIGHT: feet / inches</th>
<th>HEALTH CARD:</th>
<th>VERSION:</th>
</tr>
</thead>
</table>

*If the camper does not have a current Ontario Health Card a copy of their medical insurance must be attached to cover any medical care outside of camp.

<table>
<thead>
<tr>
<th>HOME ADDRESS:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>PHONE: ( )</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>CUSTODY/LIVING ARRANGEMENTS:</th>
<th>BOTH PARENTS</th>
<th>SHARED CUSTODY</th>
<th>SOLE CUSTODY</th>
</tr>
</thead>
</table>

**Contact 1:**

<table>
<thead>
<tr>
<th>NAME:</th>
<th>RELATIONSHIP:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HOME: ( )</th>
<th>CELL: ( )</th>
<th>BUSINESS: ( )</th>
</tr>
</thead>
</table>

**Contact 2:**

<table>
<thead>
<tr>
<th>NAME:</th>
<th>RELATIONSHIP:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HOME: ( )</th>
<th>CELL: ( )</th>
<th>BUSINESS: ( )</th>
</tr>
</thead>
</table>

Will you be away while your child is at camp?  [ ] YES  [ ] NO

<table>
<thead>
<tr>
<th>HOLIDAY LOCATION:</th>
<th>PHONE: ( )</th>
</tr>
</thead>
</table>

If unable to contact either parent/guardian listed above, in the event of an emergency, please give us the names of two contacts who we can notify and will be able to authorize emergency medical treatment.

These people know my child and have agreed to be contacted in the event I am not available:

**Emergency Contact 1** (Different from Contact 1 or 2):

<table>
<thead>
<tr>
<th>NAME:</th>
<th>RELATIONSHIP:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HOME: ( )</th>
<th>CELL: ( )</th>
<th>BUSINESS: ( )</th>
</tr>
</thead>
</table>

**Emergency Contact 2** (Different from Contact 1 or 2):

<table>
<thead>
<tr>
<th>NAME:</th>
<th>RELATIONSHIP:</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>HOME: ( )</th>
<th>CELL: ( )</th>
<th>BUSINESS: ( )</th>
</tr>
</thead>
</table>
Physician Information:

FAMILY DOCTOR NAME: ___________________________ PHONE: (_____)_____

SPECIALIST NAME: ___________________________ PHONE: (_____)_____

TYPE OF SPECIALTY:

SPECIALIST NAME: ___________________________ PHONE: (_____)_____

TYPE OF SPECIALTY:

MEDICALLY CONFIRMED ALLERGIES:

Anaphylactic Allergies (*mandatory field)

Does the camper have any anaphylactic (life threatening) allergies? □ YES □ NO

If yes, please list the anaphylactic allergy:

TYPE OF AUTO INJECTOR: EPIPEN®: □ Adult □ Junior ALLERJECT®: □ Adult □ Junior

DATE OF LAST ANAPHYLACTIC REACTION (dd/mm/yy):

*If your child has a life-threatening allergy you MUST fill out an ANAPHYLAXIS EMERGENCY PLAN FORM. It is recommended your camp creates an emergency response plan form and have it available online. Refer to anaphylaxiscanada.ca for sample forms.

All Other Allergies: Please check all that apply.

□ FOOD: □ NUTS/PEANUTS/TREE NUTS □ DAIRY □ OTHER FOOD: Please specify.

□ DRUGS/MEDICATION: Please specify.

□ ENVIRONMENTAL (hay fever etc.)

□ LATEX (balloons, gloves, band aids etc.)

□ ANIMALS: Please specify.

□ INSECTS: Please specify.

□ OTHER: Please specify.

Dietary Requirements:

□ REGULAR, DIET AS TOLERATED □ LACTOSE-INTOLERANT (Please bring your management products such as Lactaid)

□ VEGETARIAN: □ Semi-Vegetarian (no beef or pork) □ Lacto-Ovo (no beef, pork, chicken, seafood or fish)

□ Vegan (no meats, eggs or dairy) □ Other: Please specify:

□ CELIAC (GLUTEN FREE DIET) Is there a medically confirmed diagnosis of Celiac? □ YES □ NO

□ PICKY EATER

□ OTHER FOOD RESTRICTIONS: Please specify.

Has the camper ever been diagnosed with an eating disorder/disordered eating or displayed similar symptoms? □ YES □ NO If YES, please explain:

______________________________
HEALTH HISTORY:

**History of Communicable Diseases**: Include dates (dd/mm/yy) on the lines provided:

<table>
<thead>
<tr>
<th>Disease</th>
<th>Date (dd/mm/yy)</th>
</tr>
</thead>
<tbody>
<tr>
<td>CHICKEN POX</td>
<td></td>
</tr>
<tr>
<td>MONONUCLEOSIS</td>
<td></td>
</tr>
<tr>
<td>SCARLET FEVER</td>
<td></td>
</tr>
<tr>
<td>HEPATITIS</td>
<td></td>
</tr>
<tr>
<td>WHOOPING COUGH (PERTUSSIS)</td>
<td></td>
</tr>
<tr>
<td>RHEUMATIC FEVER</td>
<td></td>
</tr>
<tr>
<td>MUMPS</td>
<td></td>
</tr>
<tr>
<td>MEASLES, RED</td>
<td></td>
</tr>
<tr>
<td>TUBERCULOSIS</td>
<td></td>
</tr>
<tr>
<td>MEASLES, GERMAN (RUBELLA)</td>
<td></td>
</tr>
</tbody>
</table>

**Other Health Issues**: Please check all that apply

<table>
<thead>
<tr>
<th>Health Issue</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>ASTHMA</td>
<td></td>
</tr>
<tr>
<td>ANXIETY</td>
<td></td>
</tr>
<tr>
<td>APPENDICITIS</td>
<td></td>
</tr>
<tr>
<td>ARTHRITIS</td>
<td></td>
</tr>
<tr>
<td>BED WETTING</td>
<td></td>
</tr>
<tr>
<td>BRACES: ORTHODONTIC (at present)</td>
<td></td>
</tr>
<tr>
<td>BRONCHITIS</td>
<td></td>
</tr>
<tr>
<td>BOWEL ISSUES</td>
<td></td>
</tr>
<tr>
<td>BLEEDING DISORDER</td>
<td></td>
</tr>
<tr>
<td>CANCER: TYPE:</td>
<td></td>
</tr>
<tr>
<td>CONCUSSION (dd/mm/yy):</td>
<td></td>
</tr>
<tr>
<td>CONTACT LENSES</td>
<td></td>
</tr>
<tr>
<td>DIABETES</td>
<td></td>
</tr>
<tr>
<td>DEPRESSION</td>
<td></td>
</tr>
<tr>
<td>EAR INFECTIONS</td>
<td></td>
</tr>
<tr>
<td>EAR TUBES: Date Inserted (dd/mm/yy):</td>
<td></td>
</tr>
<tr>
<td>EAR PLUGS: Currently used for swimming</td>
<td></td>
</tr>
<tr>
<td>EATING DISORDERS</td>
<td></td>
</tr>
<tr>
<td>EYE GLASSES</td>
<td></td>
</tr>
<tr>
<td>FAINTING EPISODES/SPILLS</td>
<td></td>
</tr>
<tr>
<td>FRACTURE: Specify:</td>
<td></td>
</tr>
<tr>
<td>FREQUENT Colds</td>
<td></td>
</tr>
<tr>
<td>HAY FEVER</td>
<td></td>
</tr>
<tr>
<td>HEART CONDITION</td>
<td></td>
</tr>
<tr>
<td>HEADACHES</td>
<td></td>
</tr>
<tr>
<td>HEAD LICE (within the past year)</td>
<td></td>
</tr>
<tr>
<td>HEARING DIFFICULTIES</td>
<td></td>
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<tr>
<td>HEARING AIDS</td>
<td></td>
</tr>
<tr>
<td>HERNIA/HERNIA REPAIR: Type:</td>
<td></td>
</tr>
<tr>
<td>HIGH BLOOD PRESSURE</td>
<td></td>
</tr>
<tr>
<td>MIGRAINES</td>
<td></td>
</tr>
<tr>
<td>NOSE BLEEDS</td>
<td></td>
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<tr>
<td>PROSTHESIS: Type:</td>
<td></td>
</tr>
<tr>
<td>SEIZURES</td>
<td></td>
</tr>
<tr>
<td>SIGHT/VISION DIFFICULTIES</td>
<td></td>
</tr>
<tr>
<td>SINUS TROUBLE</td>
<td></td>
</tr>
<tr>
<td>SKIN CONDITIONS/RASHES</td>
<td></td>
</tr>
<tr>
<td>SLEEP WALKING</td>
<td></td>
</tr>
<tr>
<td>STOMACH ACHES: Severe/Frequent</td>
<td></td>
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<tr>
<td>STROKE</td>
<td></td>
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<tr>
<td>SUN SENSITIVITY</td>
<td></td>
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<tr>
<td>TOOTHACHES</td>
<td></td>
</tr>
<tr>
<td>URINARY TRACT INFECTIONS</td>
<td></td>
</tr>
<tr>
<td>OTHER: Please specify:</td>
<td></td>
</tr>
</tbody>
</table>

Have you travelled/lived outside of Canada within the past 6 months? □ YES □ NO

If YES – where, when and how long?
FEMALES ONLY:

Has she menstruated?  □ YES  □ NO

If no, has she been told about menstruation?  □ YES  □ NO

If you have checked off any of the boxes above, please provide further details:

________________________________________________________________________

________________________________________________________________________

EMOTIONAL, SOCIAL AND MENTAL HEALTH HISTORY:

Detailed answers to these questions will assist us in making your camper’s stay at camp safe and successful; if you require more space for specifications, please attach another page.

Has the camper received a diagnosis of Attention Deficit Disorder (ADD) or ADHD?  □ YES  □ NO

Has the camper received a psychiatric diagnosis, such as depression, OCD, or panic/anxiety?  □ YES  □ NO

If yes, please specify:

________________________________________________________________________

Does the camper see (or has seen) a professional to address mental/emotional concerns?  □ YES  □ NO

If yes, please specify:

________________________________________________________________________

Has the camper required counseling for emotional, behavioural or mental health concerns?  □ YES  □ NO

If yes, please specify:

________________________________________________________________________

Does the camper have a learning disability?  □ YES  □ NO

If yes, please specify:

________________________________________________________________________

Does the camper have any physical disabilities?  □ YES  □ NO

If yes, please specify:

________________________________________________________________________

Are there any restrictions to activities or any accommodations required for full participation in the camp program?  □ YES  □ NO  If yes, please specify what adaptations or limitations may be necessary:

________________________________________________________________________
OTHER RELEVANT HEALTH INFORMATION:

Please describe other relevant medical information including health conditions not listed above, recent operations, illness or injuries the camper has had, etc., and provide details:


MEDICATION:

Does the camper currently take any medication (including non-prescription drugs) at home on a regular basis?  
☐ YES  ☐ NO  If yes, please specify:

List any medications that will be discontinued while at camp:


List any prescription and/or non-prescription medication or treatments to be given while at camp:


PLEASE NOTE:

• All medication must be in the original container or pharmacy issued blister pack. Non-prescription medications must also be in the original container with proper labeling.

• Please bring/send enough medication to last the entire time at camp.

• All medication, vitamins, etc., must be turned over to: ____________________________, the person responsible for medications at camp.

<table>
<thead>
<tr>
<th>MEDICATION OR TREATMENT NAME</th>
<th>DOSE (AMOUNT)</th>
<th>ROUTE (METHOD MED IS TAKEN BY)</th>
<th>TIME(S) (TAKEN EACH DAY)</th>
<th>REASON (FOR TAKING MED/DIAGNOSIS)</th>
<th>SPECIAL INSTRUCTIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>e.g. EpiPen, Salbutamol, Risperdal</td>
<td>e.g. 2 puffs inhaler, 1.5 mg pill</td>
<td>e.g. By mouth, g-tube, etc.</td>
<td>e.g. As needed, 8 a.m.</td>
<td>e.g. Asthma, ADHD</td>
<td>e.g. Crushed, with apple sauce</td>
</tr>
</tbody>
</table>
Does the camp’s ____________________________, the person responsible for giving medications, have your permission to administer the following non-prescription medications to your child, according to the package instructions, camper’s age and weight as required?

**PLEASE NOTE:** It is within a registered nurse and doctor’s scope of practice to administer non-prescription medications without parental permission.

- **TYLENOL**
  - [ ] YES  [ ] NO
- **COUGH MEDICINE**
  - [ ] YES  [ ] NO
- **ADVIL**
  - [ ] YES  [ ] NO
- **POLYSPORIN**
  - [ ] YES  [ ] NO
- **ANTI-HISTAMINE**
  - [ ] YES  [ ] NO
- **ANTACID (Tums, Maalox etc.)**
  - [ ] YES  [ ] NO
- **THROAT LOZENGES**
  - [ ] YES  [ ] NO

**IMMUNIZATIONS:**

- [ ] We have chosen NOT to immunize our camper?

Health Canada states the following immunizations are mandatory: Measles, Mumps, Rubella, Pertussis, Tetanus, Diphtheria, Polio, Meningococcal, and Chicken Pox.

Please complete the immunization chart by inserting the date (dd/mm/yy) in the column which corresponds with your campers immunization record – you should refer to the yellow immunization record form your doctor.

<table>
<thead>
<tr>
<th>IMMUNIZATION</th>
<th>DOSE 1 DATE</th>
<th>DOSE 2 DATE</th>
<th>DOSE 3 DATE</th>
<th>DOSE 4 DATE</th>
<th>DOSE 5 DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria</td>
<td></td>
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<tr>
<td>Tetanus</td>
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<tr>
<td>Pertussis (Whooping Cough)</td>
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<tr>
<td>Polio (IPV) Injection</td>
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<tr>
<td>Polio (OPV) Oral</td>
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<tr>
<td>Hib</td>
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<tr>
<td>Pneumo</td>
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<tr>
<td>Rotavirus</td>
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<tr>
<td>Measles</td>
<td></td>
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<td></td>
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<tr>
<td>Mumps</td>
<td></td>
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<td></td>
</tr>
<tr>
<td>Rubella</td>
<td></td>
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<tr>
<td>Men-conjugate</td>
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</tr>
<tr>
<td>Varicella (Chicken Pox)</td>
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<tr>
<td>Hep B</td>
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<tr>
<td>HPV (Human Pap. Virus)</td>
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<tr>
<td>Pneumo-Poly</td>
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</tbody>
</table>

Camps should add camp specific consent information. This should include, but is not limited to, permission for treatment at camp, permission for hospital/emergency treatment, permission to share health information with appropriate senior staff and counselling at the health care custodian’s discretion etc.

Camps must add their own text for parent or guardians signature and date.
STEPS TO TAKE FOLLOWING AN AQUATIC INCIDENT:
The following checklist is used to guide the follow-up to a serious injury or near-drowning:

A.1 Make critical incident stress counseling available to staff involved in the incident
A.2 Appoint one official spokesperson to speak with media and to prepare subsequent media as appropriate
A.3 Obtain signed incident reports from all staff involved; retain original copies for future referral
A.4 Contact your agency’s legal counsel; request a meeting to assess the situation
A.5 Issue a communiqué to staff outlining the basic facts and directing that all requests for information be referred to the official spokesperson
A.6 Record weather, lighting and all environmental conditions on the day of the event

B.1 Obtain copies of the witness reports from the Police
B.2 Confirm qualifications of all staff involved
B.3 Obtain copies of staff job descriptions, job contracts and staff manuals dealing with policies, procedures, operations and responsibilities; program and public promotional material may also be required
B.4 Obtain records of the content, frequency and attendance of all pre-session and in-service training sessions
B.5 Obtain records of all facility maintenance reports which deal with water clarity, chemistry, equipment repairs, etc.
B.6 Obtain a copy of all Ministry of Health inspection reports
B.7 Collect all media reports of the incident

C.1 Keep a log of all telephone conversations and minutes of all meetings connected with the incident
C.2 Construct a detailed time sequence of events for the day of the incident, starting from when the staff involved arrived at work; this should include staff activities before, during and after the incident, plus their position, movements and all distractions while on duty
C.3 Conduct an evaluation; this should be prepared in two parts:
   i) An analysis of the procedures prior to the incident that contribute to accident prevention:
      • staff qualifications and training
      • emergency procedures
      • staff deployment (number on duty, positioning of staff)
      • facility design
      • equipment availability and functioning
ii) An analysis of the procedures used in the handling of the incident:
   • recognition and response of lifeguards/instructors
   • first aid treatment
   • contact with EMS
   • follow up reports

iii) Work with your legal counsel:
   • to ensure that the focus is on issues central to this incident
   • to ensure that a true and balanced perspective will be presented, negative publicity will be minimized and positive aspects of the program are presented
This Crisis Response Resource Manual has been developed and provided complimentary to you by a committee of hard working professionals who are experts in the field of crisis response. This manual should be reviewed by your camp annually.

BEFORE A CRISIS HAPPENS, REMEMBER TO...

- Plan ahead
- Promote safety
- Practice: Training and drilling
- Plan for all contingencies
- Follow up regularly