



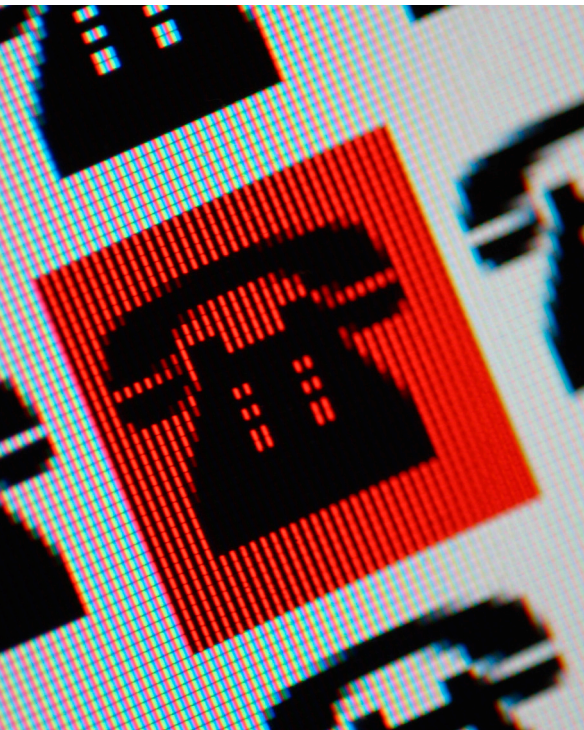
Providing Camp-Specific Knowledge on Legal,
Legislative, and Risk Management Issues

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ACA Camp Crisis Hotline — Annual Review 2011

Case Studies and Lessons Learned from Another Year with the Hotline

Since 1985, the ACA Camp Crisis Hotline has helped thousands of camps in times of crisis. The Hotline serves as outside support for camps in crisis. While the Hotline Team does not provide medical or legal advice, they help camps talk through their crisis and consider options for next steps. The Hotline staff provides callers with resources, strategies that have been successful in other camps with similar crises, and sometimes simply a “listening ear” to support callers. Based on twenty-six years of providing resources to camps, this year the Hotline Team created an online resource that contains the most frequent information, tips, strategies, and resources provided to callers. The resource main page is www.ACACamps.org/camp-crisis-hotline — there you will find links to our most popular resources, previous annual reviews of lessons learned, and information about other helpful resources.



Every year, ACA provides a review of the lessons learned on the Hotline, case studies for you to use with your staff, and links to the resources we found most useful. We hope you will use this review as a training tool for your staff, and as a resource to help you prepare your own crisis management plans.

This year, the calls fell into the following categories:

- **Health and medical issues: 43%**
- **Camper behavior: 11%**
- **Personnel/staff issues: 11%**
- **Allegations of abuse at home: 8%**
- **Parent behavior: 5%**
- **Allegations of camper-to-camper abuse: 5%**
- **Allegations of staff-to-camper abuse: 2%**
- **Miscellaneous: 15%**

THE CAMP HOTLINE

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Health and Medical Issues

By far, the most common type of call to the Hotline related to health/medical issues. This category includes a broad range of issues from how to treat common childhood illnesses (e.g., chicken pox) and infestations (e.g., lice, bedbugs), to questions about procedures. Tragically, it also includes our being notified of five deaths this year. The deaths reported were: a heart-attack causing death in a fifty-four-year-old user group participant, two camper drownings, a staff drowning, and the death of staff person due to natural causes.

Health and Medical Issues Lessons Learned

- ***It is critical that your health care staff be familiar with the most common childhood illnesses, injuries, and infestations.*** We found that the vast majority of calls in this category came from camps that did not have knowledgeable healthcare staff. As an example, many camps had trained RNs on staff, but those RNs specialized in areas that do not regularly treat children in the camp environment (e.g., operating room nurses, oncology nurses, etc.). We know how difficult it is to secure healthcare staff and sometimes the best available choices are professionals who are not intimately familiar with issues in the camp environment. If your best choice is someone who is lacking in this area, it is imperative that they receive training and support prior to camp opening. The Association of Camp Nurses (www.ACN.org) provides excellent resources and support. In addition, have your health care staff review ACA's Hotline resource pages on medical issues: www.ACACamps.org/camp-crisis-hotline. We have detailed resources about some of the most common issues.
- ***Ensure that your health care staff understands the laws in your state relevant to camp health service.*** It is critically important that your staff members understand the state laws relevant to health care. In one example, a camp nurse called us because she suspected that a child had a rash and she wanted to know if she could examine the male camper in his groin area. After discussion, she revealed that as a school nurse (in a different state), she is not allowed to examine a student under their clothing. In those situations at her school, children are sent home and parents are expected to seek the appropriate medical examination. We immediately helped her connect with the nursing board in her state where she discovered that she could indeed examine the groin area of this child as long as a male adult was present.
- ***Prevention of the spread of disease starts before anyone even enters your camp.*** Camps should provide advice to parents to not send sick children to camp. Camps should perform detailed health screenings (taking temperatures, etc.) on all incoming campers, and should initiate stringent hand-washing and camp sanitation procedures.
- ***Distribution of medication laws vary by state.*** Often a caller will ask us something such as "Can my counselors distribute medication if they are out on a night hike with campers?" We cannot provide the definitive answer — as the answer varies by state — but we can direct you to

your local resource. It is important that you know this information before camp and have set up appropriate procedures. Helpful resources are listed in the Health and Medical Resources section of this article (page 3).

Health and Medical Top Tips for Camps

- ***Select and train your health/medical staff carefully.*** Ensure that they understand how to identify, prevent, and treat the most common childhood illnesses, injuries, and infestations.
- ***On your computer, bookmark the pages that provide camp-specific information on common health issues (see the Health and Medical Resources section).*** Also bookmark the Centers for Disease Control and Prevention (CDC) (www.CDC.gov). The CDC offers the very best information available on virtually every disease and illness you may encounter. Among the diseases, illnesses, and afflictions we were asked about this year were: Norovirus, Methicillin-resistant *Staphylococcus Aureus* (MRSA), Scabies, Head Lice, Pinworm, Chicken Pox, and Pink Eye.
- ***Have a health/medical support system in place.*** Before camp ever starts, identify health and medical resources you can call at a moment's notice to assist you in whatever challenges come your way. This plan includes not just your on-site healthcare staff, but the list of contacts you would phone in the event of the unexpected. (e.g., mental health professionals, dentists, etc.)

Scenarios to Discuss With Your Health/Medical Staff

- What would you do if you suspect a child is ill when he arrives at camp check-in?
- What would you do if you suspect a child is harming himself?
- What would you do if the prescriptions in your possession seem to be disappearing even when you think you have them under lock-and-key?
- What is your policy on lice? (Nits v. no-nits?)
- How would you handle an outbreak of MRSA?
- If a camper confides that she suspects she is pregnant, what would you do?
- What would you do if you discover an outbreak of bedbugs in the majority of your cabins and the camp doctor is recommending complete evacuation of the camp?
- If your camp has a policy that requires parents to provide health insurance for their children, and you suddenly discover on a health form for a currently-in-camp camper who needs to be brought to the hospital for a suspected sprained ankle that the parents do not have health insurance, what do you do?
- If you discover that some of the adults from an adult user-group are using marijuana, and, after approaching them, they show you that they have prescriptions for medical marijuana, what do you do?

Health and Medical Resources

- Association of Camp Nurses: www.ACN.org
- Bed Bugs: www.ACAcamps.org/knowledge/health/diseases/bedbugs
- Centers for Disease Control and Prevention www.CDC.gov
- Communicable Diseases and Infestations: www.ACAcamps.org/knowledge/health/diseases
- Heat-Related Illness: www.ACAcamps.org/knowledge/health/firstaid
- Lice: www.ACAcamps.org/knowledge/health/diseases/lice
- Management and Administration of Medication: www.ACAcamps.org/campline/s-2000/managing-monitoring-and-administering
- MRSA Infections: www.ACAcamps.org/knowledge/health/diseases/MRSA
- Scabies: www.ACAcamps.org/knowledge/health/diseases/scabies
- Ticks: www.ACAcamps.org/knowledge/health/disease/ticks
- Water Bourne Illness: www.ACAcamps.org/knowledge/health/diseases/naegleria-fowleri
- Preventing Injuries and Illnesses Online Courses from ACA: www.ACAcamps.org/einstitute/healthycamp/

- State Boards of Nursing: www.healthguideusa.org/state_nursing_boards.htm
- Teen Pregnancy Issues and Support: www.healthywomen.org

Camper Behavior Issues

Issues related to the behavior of campers comprised 11 percent of the calls this year. One trend we identified was related to the unauthorized use of cell phones — especially in the taking of inappropriate pictures. (See Case Study #4 for details.) Bullying also remains a concern. Research shows that harassment (both sexual and otherwise) is happening at younger and younger ages. What are your camp's policies and consequences for camper-to-camper harassment? Almost every case of campers being inappropriate with each other happens when there is little or no direct supervision from staff. Examine the times when campers are not directly supervised, such as when using the restroom, changing for programs, resting, and when staff are sleeping, etc. Provide training and policies that do not allow campers to be alone without staff supervision — ever.

Camper Behavior Lessons Learned

- *Proper supervision is the key to decreasing camper behavior issues.* Ensure that your procedures and staff training are designed not only to protect campers from harm, but also from the inappropriate behavior of other campers.



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- ***It is acceptable to search a camper's belongings if you suspect illegal or unsafe activities.*** Unless the camp is owned by a public entity (e.g. the city recreation department), there are no constitutional issues in having a policy to search belongings of campers. Invasion of privacy issues may be superseded by safety concerns. Ensure that parents are aware of your policies.

Camper Behavior Top Tips for Camps

- ***Train your staff well.*** Ensure that they understand why you have supervision and ratio of camper-to-staff policies. Teach them to identify situations where campers may be inclined to have bad behavior.
- ***Ensure that parents and campers understand your policies and consequences for ignoring the policies.*** Ensure that parents have access to written copies of all of your policies related to camper behavior.
- ***Instill an atmosphere of respect for all campers and staff in everything you do.*** Ensure that your staff are exhibiting positive behaviors and serve as role models for the campers.

Scenarios to Discuss With Your Staff

- What would you do if you caught a camper using a contraband cell phone and taking pictures under the door of a bathroom stall?
- What would you do if you suspect that a camper is taking illegal drugs?
- What would you do if you suspect that a camper is being bullied by his bunkmates when staff are sleeping in an adjoining room?
- If a staff member reports to you that one of the camper cabins smells like marijuana, what would you do?

Camper Behavior Resources

- Bullying: www.ACAcamps.org/child-health-safety/bullying
- Searching of Belongings: www.ACAcamps.org/content/privacy-vs-protection-can-you-search-camper-and-staff-belongings
- Bob Ditter's "In the Trenches" Columns in ACA's *Camping Magazine*: www.ACAcamps.org/camping-magazine

Personnel Issues

Calls related to staff and personnel issues were significantly down this year. We believe the trend to be that more and more camps are establishing and enforcing solid personnel policies. The calls we did receive ranged from what to do with a staff applicant who is biologically female but now identifies as a male (see Case Study #1) to how to handle staff's social media communications with campers.

Personnel Issues Lessons Learned

- ***It's not enough to simply have personnel policies — you must enforce them as well.*** Establish a clear understanding of what

the consequences are (dismissal, reprimand, etc.) for the violation of the policies.

- ***Have a plan in place regarding what you will do if you have to release a number of staff members (or someone does not show up after accepting the job) and you now need more help.*** Prior to the camp season, consider what you will do if shorter-term staff (like a nurse who will work for just one week) does not show up at the last minute. Or, what if you have to release a number of staff due to violation of the personnel policies? What network of ready-to-serve volunteers might you call upon at the last minute to assure supervision ratios and the safety of campers?
- ***It is imperative that your organization have access to an employment attorney.*** An attorney with experience in labor laws and employment issues that you can contact for help at any time is an invaluable resource for any camp.

Personnel Top Tips for Camps

- ***Create and enforce excellent personnel policies.*** Be sure to have your policies reviewed by your legal counsel.
- ***Understand the employment laws in your state.*** Because states vary concerning employment laws, it is important that you understand the requirements for your state.
- ***Establish thresholds for acceptable offenses in a background check for each position at your camp.*** Create your "thresholds" for acceptable past criminal history before you begin your hiring process. The decision to hire should not be based on whether you "like" someone or not — in fact, that can cause all kinds of legal headaches for you. Instead, your organization should sit down and consider what types of past criminal history would be acceptable to you — for each different type of job. For example, you might find it acceptable that someone applying for an activities director job had a petty theft conviction twenty years ago, but would that be an acceptable background for your accounting position? There are no definitive right or wrong answers (except in some states that tell you who cannot work with children), so you need to set your thresholds based on the culture of your camp. It is very important that you work with your legal advisors as you develop these thresholds, as you must comply with hiring laws while you protect the safety of those in your care. Then, it is critical that you be consistent and follow your own thresholds and not treat people who are interviewing for the same job differently (i.e., "I like her so she'll be fine.") Only you know your program and what is acceptable

Scenarios to Discuss With Your Staff

- If a staff member is found to be texting a former camper against the policies of the camp, what should happen?
- What would you do if another staff member is harassing you?
- If you find you need to release an international staff member from their position, what are the special considerations you need to think about regarding this individual?

Personnel Issues Resources

- Camp Administration e-Course: www.ACAcamps.org/einstitute/administrator
- Criminal Background Check Resources: www.ACAcamps.org/publicpolicy/cbc
- Staff Job Descriptions: www.ACAcamps.org/members/jobdesc
- International Staff Resources: www.ACAcamps.org/international/practices
- Employment Laws in Each State: www.dol.gov/whd/state/state.htm

Allegations of Abuse at Home

Revelations by campers that they are being abused at home are a very difficult situation to handle for any camp. Eight percent of all of the calls to the Hotline this year were about this issue. Many children feel safe at camp because they feel that people there care — thus, what they might not have revealed at home is sometimes more easily revealed at camp.

Allegations of Abuse at Home Lessons Learned

- *Because you have created an emotionally safe environment at your camp, children who are in an abusive situation at home may reveal that abuse to you.* In these situations, children often say “Please don’t tell anyone.” You cannot promise them that. Instead, you need to assure them that you care and that you must tell the people who can help.
- *You are a mandated reporter.* If you suspect that a child in your care is being abused, you are obligated to report it to the authorities. While state laws vary, in general, as camp professionals serving *in loco parentis*, you must call the proper authorities in your state when allegations of abuse are revealed. If the child lives in another state, your state may

ask you to contact that state instead. Be prepared with all of the correct phone numbers. (See the Allegations of Abuse at Home Resources section below.)

Allegations of Abuse at Home Top Tips for Camps

- Understand that you are a mandated reporter. It is your obligation to contact the authorities if you suspect a child is a victim of abuse or neglect.
- Have the number of your child abuse reporting authority on hand and easily accessible. See the Allegations of Abuse at Home Resources section below.
- Document all details related to the child revealing their alleged abuse. As with all sensitive matters, it is imperative that you document in writing all that happens, all that you are told, and all that you do.

Scenarios to Discuss With Your Staff

- If a camper reveals to you that his step-father is abusing him and his mother knows about it but is doing nothing about it, what would you do?
- If a camper reveals that she was date-raped at a party at home last week but never told anyone, what would you do?

Allegations of Abuse at Home Resources

- Child Abuse Reporting Telephone Numbers by State: www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172
- Mandated Reporter Issues: www.ACAcamps.org/campline/s-2011/remember-camps-are-mandated-reporters
- Recognizing and Reporting Child Abuse and Neglect e-Course: www.ACAcamps.org/einstitute/childabusereporting-ecourse

ACA Webinar:

Lessons Learned from the ACA Crisis Hotline in the Summer of 2011

October 20, 2011, 1:00–2:30 p.m. (ET)

Register at www.ACAcamps.org/einstitute/webinars/hotline11

Presenters: Members of ACA’s Hotline Team (Deb Bialeschki, Kim Brosnan, Barry Garst)

Session Description

This webinar, which explores situations from the ACA Crisis Hotline that arose during the summer of 2011, is designed to share knowledge gained from the experiences of other camps in crisis situations and to encourage discussion with ACA Hotline staff.

Several issues are reported to the Hotline more frequently than others — providing valuable lessons every camp can learn. This year’s topics will include: medical issues, employment issues, allegations of abuse (at home and at camp), camper behavior issues, parent behavior issues, and special situations.

Registration: \$0.00 member; \$40.00 nonmember

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Parent Behavior Issues

While just five percent of all of the calls to the Hotline were regarding the behavior of camp parents, these can often be the most difficult issues for camps. In Case Study #5, we have highlighted a situation where a parent is refusing to pick up their child per the camp's pick-up policies.

Parent Behavior Issues Lessons Learned

- ***Be a partner with parents, not an adversary.*** Establish a culture whereby you partner with parents in order to solve any issue that arises — from camper behavior issues to questions about your policies.
- ***Not every camp is suitable for every child — but there is a camp for every child.*** Be clear with families — prior to registration — about the culture and practices of your camp. Allow parents to make informed choices about whether their child is suited to your camp or a different camp.

Parent Behavior Issues Top Tips for Camps

- ***Ensure that all families have a copy of and understand your camp's policies*** — including refund policies and consequences for breaking the rules.
- ***Communicate. Communicate. Communicate.*** An informed parent is a partner. An uninformed parent can become an adversary — with their children caught in the middle.

Scenarios to Discuss With Your Staff

- If you find out that a former camp parent is telling everyone that your camp is terrible and people should not send their children there, what would you do?
- If a parent refuses to pick up their child when you have expelled her from camp because of her harming other campers, what would you do?

Parent Behavior Issues Resources

- ACA Communications Toolkit: www.ACACamps.org/members/toolkit/crisiscomm
- Case Studies Regarding Parent Behavior Issues from Previous Years with the Hotline: www.ACACamps.org/camp-crisis-hotline

Allegations of Abuse Occurring at Camp

Five percent of our calls were concerning allegations of camper-to-camper abuse, and two percent were regarding alleged staff-to-camper abuse. Most often, these calls are about clarifying the mandated reporter laws and whether the call to the authorities must be made.

Allegations of Abuse Lessons Learned

- ***It is absolutely critical that your staff be vigilant about identifying situations where campers could be alone and potentially abuse each other.*** All of the calls to the Hotline about this issue allegedly occurred in those brief moments when staff were not directly in contact with campers.

Sleeping time, overnights in tents, trips to the bathroom, and times when campers are changing clothes for the pool are clearly the times when camps need to be ever more attuned for the possibilities of camper-to-camper inappropriate activities. Provide training and policies that do not allow campers to be alone without staff supervision — ever. An excellent new resource on abuse among children is listed in the Allegations of Abuse Resources below.

- ***Establish and enforce policies where a staff person is never alone with a camper.*** Your supervision and counseling policies should ensure that one staff person is never in seclusion with one camper. Staff need to understand that there can be no physical contact between campers and staff (if you allow such contact as hugging and high-fiving, you need to be very clear about what is acceptable).

Allegations of Abuse Top Tips

- ***The best prevention of campers abusing other campers is to eliminate their opportunity to be alone together.*** Make sure staff are vigilant in their supervision and adherence to camper-to-staff ratios.
- ***Be crystal clear in your staff training that one staff person must never be alone with a camper.*** Be sure that there is at least eye-contact from another staff member if a staff member is counseling an individual camper.
- ***Understand that you are a mandated reporter and must report any suspicions of abuse.*** It is your obligation to notify the authorities whenever you suspect a child is a victim of abuse or neglect.

Scenarios to Discuss With Your Staff

- If a camper awakens you in the middle of the night and wants you to take him to the bathroom, what should you do?
- If you discover two male five-year-old campers touching one another under their bathing suits in the pool, is that abuse? What do you do?
- If you serve a vulnerable adult population that requires one-on-one care, how do you ensure that counselors are not being inappropriate in their offering of personal care?

Allegations of Abuse Resources

- Camper-to-Camper Issues: Do Children Sexually Abuse Other Children? — Stop It Now: www.stopitnow.org/pubs.html#otherchildren
- Child Abuse Reporting Telephone Numbers by State: www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172
- Mandated Reporter Issues: www.ACACamps.org/campline/s-2011/remember-camps-are-mandated-reporters
- Recognizing and Reporting Child Abuse and Neglect e-Course: www.ACACamps.org/einstitute/childabusereporting-ecourse

Miscellaneous Issues

A full 15 percent of our calls were of an uncategorizable nature. They ranged from questions about how to handle a camp-neighbor who is blasting inappropriate music all night to calls about forest fires. While these diverse issues don't show any trends, consider the following questions to help you prepare for the unexpected.

Scenarios to Discuss With Your Staff

- If a fire suddenly breaks out in the middle of the night in your dining hall, what is your emergency plan?
- If the staff who have the proper certifications in aquatics suddenly take ill, how will you cover your activities and ensure camper safety and adherence to the laws?
- If your drinking water is suddenly compromised, how will you acquire the water you need to keep your camp healthy and safe?
- If the weather takes an unexpected turn for the worst and you suddenly are in a situation of excessive heat for a number of days, how will you alter your program and keep everyone healthy and safe?
- If you are informed by the local authorities that a prisoner has escaped from the local penitentiary, how will you ensure the security of your camp and the safety of campers and staff?
- What would you do if you are told that a twelve-year-old who has applied to attend camp has been removed from her home and has been found guilty of abusing her younger siblings? How would you even go about verifying the information?

Case Studies

The Hotline Team has identified a number of case studies to help you learn from the crisis situations of other camps and help you prepare for your season.

Case Study #1 — Transgendered Staff Applicant

Overview

A former camper (who attended camp as a girl) is applying for a camp counselor position as a male. The camp director knows the prospective counselor personally and is aware that she is pre-operational (i.e., she had not yet received sex reassignment surgery to become male). The director feels strongly that she wants to be inclusive and believes that this individual will be a strong staff member. However, the director is also very concerned with how the parents of the other campers — and the staff — would react if the prospective counselor is hired. She also feels that her camp does not have the appropriate housing facilities for a counselor experiencing a transition to another gender because the camp is a very primitive resident camp (e.g., only group showers, etc.) and they do not have the appropriate accommodations for this counselor. The Hotline Team talked through the kinds of questions that need to be considered in this situation and helped them focus on issues they would need to think about.

Questions/Issues

- *Is sexual orientation or gender identity a protected class in your state?* To date there is no federal law that consistently protects LGBT (lesbian, gay, bisexual, transgendered) individuals from employment discrimination. In twenty-nine states it remains legal to discriminate based on sexual orientation, and in thirty-five states to do so based on gender identity or expression.
- *What is your camp's commitment to diversity and how is that reflected in your hiring practices?* What do you do to ensure that you are nondiscriminatory?

Crisis Help Available Twenty-Four Hours a Day

We remind you that the ACA Camp Crisis Hotline is available to you twenty-four hours a day. We encourage you to use this service when you need help in a crisis. This year, we've added a new resource for you — a page on the ACA Web site that lists resources and links related to the most common types of calls we receive on the Hotline. Take a look at the broad range of resources now — *before* you need them: www.ACAcamps.org/camp-crisis-hotline. Consider using the case studies as a staff training tool!

The Hotline phone number is

800-573-9019

- **What is your camp's organizational approach to serving the needs of LGBT campers and staff?** Does your camp hire openly gay, lesbian, bisexual, and transgender professionals? Some companies have established an Equal Employment Opportunity (EEO) policy stating that it is against company policy to discriminate or harass employees due to "gender identity or expression." Would such a policy be consistent with your camp's mission and philosophy?
- **What accommodations would your camp consider reasonable for a potential employee in a situation like this and where would you be unwilling or unable to make accommodations?** What privacy issues would you need to address?
- **Do you ask specific questions in your employee interviews related to gender identity or sexual orientation?** If so, are you following the law about what you can ask an applicant?
- **How does the possibility of a transgendered staff member impact your relationship with parents and what — if any — specific messages would you share with parents?** How would your camp balance the rights of your employees to privacy with parents' expectations for information?
- **If your camp were to experience this situation, would you have clear organizational hiring policies and practices that would guide your decision making?** If not, what policies and practices need to be developed or clarified?

THE CAMPLINE®

Published three times a year by the American Camp Association.

■ The digital issue of *The CampLine* is not only environmentally friendly but allows you to utilize *The CampLine* resources more readily. Click any of the links throughout *The CampLine* to be sent directly to a Web browser where you can research and learn more about specific topics. It's just one more way *The CampLine* can help you.

Contributors:

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- **Do you regularly consult with an employment attorney, and when was the last time your camp's hiring practices were reviewed by an employment attorney?** An employment attorney familiar with your state's laws is critical for any camp.
- A number of camps have also dealt with the issue of a transgendered camper applicant. Read the case study from 2010 at: www.ACAcamps.org/campline/fall-2010/camps-in-crisis-annual-hotline-review-2010.

Case Study #1 Resources

- National Gay and Lesbian Task Force — Nondiscrimination: www.thetaskforce.org/issues/nondiscrimination
- Social Work Practice with Transgender and Gender Variant Youth: www.amazon.com/Social-Practice-Transgender-Gender-Variant/dp/0415994810
- GLSEN (the Gay, Lesbian, and Straight Education Network): www.glsen.org/cgi-bin/iowa/all/home/index.html
- Workplace Guidelines for Transgendered Employees: www.tgender.net/taw/tggl/index.html
- Parents, Families, and Friends of Lesbians and Gays (PFLAG): <http://community.pflag.org/Page.aspx?pid=194&srcid=-2>
- 20/20 Toolbox: Transgender Youth — The Role Camps Might Play: www.ACAcamps.org/campmag/1109/transgender-youth-role-camps-might-play
- Advocacy for Trans and Gender Queer: www.campuspride.org/advocacy_trans_gender.asp

Case Study #2 — Trip and Travel Program and MRSA Infection

Overview

Following an expedition (trip and travel) camp experience, two campers came back with what was diagnosed by the camp's health care staff as "infected spider bites." A few days after the campers were sent home, the camp received a call from one of the camper's parents indicating that the "bite" was now believed to be a MRSA infection based on a pediatrician's diagnosis. MRSA, or Methicillin-resistant *Staphylococcus Aureus*, is a skin infection caused by antibiotic-resistant staph bacteria. The camper's culture had been sent to a lab and the parents were waiting for possible MRSA confirmation from the pediatrician. Although the "infected" campers were no longer onsite, the camp director shared that a staff member was now showing a similar "spider bite" and she was concerned that she had an infectious disease now spreading through the camp. She wanted more information about MRSA and help considering the issues involved. ACA has an excellent resource page dedicated to MRSA at: www.ACAcamps.org/knowledge/health/diseases/MRSA.

Questions/Issues

- **Quick response is critical!** Responding promptly to infectious disease to avoid the transmission to other campers

and staff ensures that a small problem doesn't become a major problem.

- **What key messages does your camp use when infectious diseases are found in the camp population?** When and what do you communicate with parents? Fall is a perfect time of the year to review and update your communication plans based on recent incidents at your camp or based on situations described in this article. (See ACA's Crisis Communications Toolkit in the Resources section, right.)
- **Ensure that camp staff, particularly health care staff, are trained to identify MRSA correctly.** Although MRSA has nothing to do with spider bites, the sores associated with MRSA look and feel like a spider bite (because of the swollen or necrotic tissue near the wound). When in doubt, have the camper or staff member checked for a MRSA infection.
- **Remember the five "Cs" of how MRSA is transmitted: crowding, contact with the skin, compromised skin, contaminated items or surfaces, and cleanliness problems.** Recognize that you can have an active MRSA infection (you show symptoms) OR you can be a carrier (you don't show symptoms but you still have MRSA bacteria living on your skin and/or in your nose.)
- **Does your camp have clear emergency protocols for outbreaks of infectious and communicable disease like MRSA?** These protocols should include procedures for: health care, housekeeping, laundry, isolation or removal from camp, parent notification, and health department reporting as appropriate.
- **Assess your camp's hygiene policies and practices, particularly in your health center, to prevent the spread of disease.** MRSA is often spread in health care settings.
- **Ensure that your staff is trained regarding their role in reducing the spread of infectious diseases — particularly hand-washing and personal hygiene policies.** Staff training should include the following topics:
 - Wash your hands.
 - Don't share personal items that come in contact with your bare skin, such as towels.
 - Keep wounds covered.
 - Shower with soap after sport/recreational activities or contact games.
 - Use a barrier between your bare skin and public surfaces with shared use.
 - Do not participate in contact activities if you have a draining wound.
 - If you have a cut or sore, wash linens and clothes in hot water and dry in hot dryer.
 - Wash sport/recreational clothes after each use.
 - If you have an infected cut or sore, seek medical attention.
- **What are your camp's housekeeping protocols and how are these protocols reinforced when infectious diseases**

are identified in camp? Camps should establish routine housekeeping protocols that maintain a clean environment by establishing cleaning procedures for frequently touched surfaces — especially those that come in contact with people's skin. It is recommended these cleanings be done at least daily.

- **What is your camp's relationship with your local health department?** Camps are encouraged to contact their local health department if MRSA is confirmed and follow their recommendations.

Case Study #2 Resources

- MRSA Web Page on ACA's Web Site: www.ACACamps.org/knowledge/health/diseases/MRSA
- Centers for Disease Control and Prevention — MRSA Resources: www.cdc.gov/mrsa/index.html
- Living with MRSA: www.unc.edu/depts/spice/LivingWithMRSA.pdf
- ACA's Crisis Communications Toolkit: www.ACACamps.org/members/toolkit/crisiscomm
- ACA's Illness and Injury Prevention Online Courses for Staff: www.ACACamps.org/einstitute/healthycamp
- ACA's Trip and Travel Standards: www.ACACamps.org/sites/default/files/images/accreditation/standards/Final-Program-TripTravel-Standards-for-review.pdf

Case Study #3 — Parent's Response After Camper Fighting

Overview

During a resident camp session, two male campers were not getting along, primarily due to "Camper A's" ongoing harassment of "Camper B." In one instance, while the unit counselor was in the bathroom, Camper B (who was allegedly fed up with being harassed by Camper A), put his forearm into Camper A's throat and made it clear that he wanted to be left alone. After more altercations such as this one, the camp director invited Camper B's parents to the camp to discuss Camper B's behavior. Camper B apologized to Camper A and was allowed to stay in camp. Everything seemed fine. However, the camp had not contacted Camper A's parents. A couple of days later when they contacted Camper A's parents, Camper A's mother became very upset when she learned that her son was "assaulted" by Camper B. The mother spoke to her son on the phone, and although he said he was fine, she threatened legal action against Camper B's family and against the camp (for "aiding and abetting," according to the mother). The mother then asked the camp director for contact information for Camper B's parents so that she could bring charges against the camper and his parents. While the Hotline Team cannot provide legal advice, we did discuss key questions to consider with legal counsel.

Questions/Issues

- **Consistency in disciplinary action and parent follow-up is critical.** In this case, the fact that parents were contacted on

two different days may have exacerbated the second parents' feelings that they were not treated properly by camp administration.

- *Although no associated state regulations were identified, the camp in this case recognized the importance of checking their state guidelines regarding communication requirements.*
- *How does your camp address bullying behavior like the behavior described in this case?* The camp has a primary role in protecting the health and safety of campers in cases like this (which they did by making sure that Camper B's behavior was addressed according to their camp policies and procedures). But what about Camper A's harassment of Camper B?
- *Developing clear policies for parent communication before camp begins is very important.* What are your camp's policies and procedures related to camper behavior and parent communication? Do you have clear guidelines for when parents are contacted and when they might not be? What information do you disclose (or do you allow your staff to disclose) to parents about a behavior problem that involves other campers? Does your camp ever take an active role in facilitating a conversation between two sets of parents / legal guardians in situations similar to the one described in this case?
- *How does your camp react when a parent threatens legal action?* Although parents may threaten legal action and never actually bring charges, it is important to take such expressions seriously. When do you involve your legal counsel and inform your insurance company?

Case Study #3 Resources

- Bullying Prevention — Camps Take a Stand: www.ACAcamps.org/bullying
- ACA's "Partnering with Parents" articles: www.ACAcamps.org/member/parent-communications-resources/partnering-with-parents-articles
- Working with Camper Parents — A Prescription for Success: www.ACAcamps.org/campmag/issues/0909/working-with-parents

Case Study #4 — Cell Phone Misuse by Campers

Overview

This case study focuses on privacy issues related to cell phone use by campers. We will consider two situations. In the first scenario, LITs (campers who are in a "Leaders In Training" program) were allowed to use their personal cell phones only during evening activities. At all other times the phones were stored in the staff living quarters. The staff suspected that one LIT was using her phone at other times and checked the LIT's cell call log, which showed she had made calls during non-approved times. When the mother of the LIT was made aware of the situation, she was angry because she perceived that her child's privacy had been breached by the

staff when they searched her call record. The mother threatened to sue the camp. The camp does have a personal possession search policy that had been shared as a part of registration. The mother did not acknowledge that her child had lied to her about the cell phone use and trespassed into the staff area to retrieve her phone.

In a related scenario, two male campers who were in the shower house took pictures over a bathroom stall with a cell phone (cell phones are not allowed at the camp) of another boy using the toilet. The victim was upset, as were his parents when they were informed of the situation, and the family decided to remove the boy from the camp program. The family wanted to know if the pictures had been posted to any social network sites. In addition, the parents demanded all written documentation of what happened and confirmation that the pictures were not posted.

Questions/Issues

- *Where were the staff?* In the second scenario, where were the staff when the boys were in the shower house? In the first scenario, even though the camper was an LIT, what breakdown in supervision allowed for the LIT to enter staff quarters and retrieve her phone?
- *Was there a cell phone policy in place?* In both situations, the camps had policies in place about the use of cell phones. However, the camp with the LIT scenario had only a verbal agreement in place. They decided that they were going to change to a written agreement which the LITs would sign. The second camp had a clear policy forbidding cell phones and a forewarning system with specified repercussions for violations.
- *Are cell phone call logs, etc. covered by your personal possession search policy?* This is a good question to ask your legal counsel. You want to make sure you understand what you can and cannot do related to violating personal privacy.
- *Do you know what legal repercussions you might face from camper inappropriate use of cell phones?* One suggestion for camp administrators is to have a conversation with your legal counsel to learn more about your legal obligations in light of your cell phone/electronics policy. Can you search campers' possessions for cell phones? Can you search their call directories? Can you search the phone for pictures? What if inappropriate pictures are posted? These questions are all good to ask and understand before campers arrive.
- *What relationship exists between your cell phone policies and camper behavior policies such as bullying?* In the second example, the campers' behavior was covered by the camp's behavior policies regarding bullying incidents. The camp had clear steps to take when these campers violated the expected behaviors, including parent contact, potential camper dismissal from camp, and victim support.

Case Study #4 Resources

- Searching Personal Possession of Campers and Staff: www.ACAcamps.org/content/privacy-vs-protection-can-you-search-camper-and-staff-belongings

- “Cell Phone Deception and Other Tales from the Summer”: www.ACAcamps.org/content/cell-phone-deception%E2%80%94and-other-tales-summer
- Bullying Resources:
 - www.findyouthinfo.gov/topic_bullying.shtml
 - www.ACAcamps.org/child-health-safety/bullying
- Child Abuse Reporting Numbers by State: www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172
- Crisis Communications — ACA’s Communications Toolkit: www.ACAcamps.org/members/toolkit/crisiscomm
- Mandated Reporting:
 - www.ACAcamps.org/campline/2009fall-mandated-reporting
 - www.ACAcamps.org/sites/default/files/images/campmag/CampMandatedReporting.pdf

Case Study #5 — Parents Refuse to Pick Up Camper

Overview

A director called because he had an issue with a parent who was refusing to meet the camp staff at the train station to pick up her fourteen-year-old child upon his return from camp to finish the trip home. The camp’s procedure is that campers will travel, with

Standards: Reviewed, Revised, Reformatted

Over the past eighteen months, ACA’s accreditation standards have been reviewed, revised, and reformatted. This process has been a thorough/thoughtful review of one of ACA’s core programs, at the recommendation of the Accreditation and Education Task Force. While the actual content of the majority of the standards has not changed, all of the standards have been reviewed, and many have been reworded to focus on the practice that must be in place in order to meet the standard. The method by which compliance is demonstrated has been clarified, and there is now the opportunity for a camp to generate a customized set of ACA standards using a new Web-based system.

The purpose of ACA’s accreditation program has not changed! Education is still the main focus.

Key Changes

- The Program Design and Activity (PD), Program Challenge (PD), and Program Horse (PD) sections have been combined into one section.
- The sections of the standards have been re-organized so standards asking about related items (such as policies/procedures or staff training) are grouped together within that section.
- The numbering system of the standards has been slightly revised to reflect industry standards for the numbering of standards.
- “Contextual Education” replaces what was formerly called “Interpretation.” This section provides additional education and clarification to the content and context of the standard to help determine correct applicability and better understand the intent of the standard. The purpose truly is education.
- A “Camp Self-Assessment” review must be completed prior to the start of staff training for the summer season (or earlier if required by your local leadership). This consists of a review of twenty pre-identified standards all requiring written documentation. It is expected the written documentation will be complete at the time of the review, although the actual scoring will take place the day of the on-site visit. One of the purposes of this review is to help verify the camp is ready for their on-site visit as well as offer an additional opportunity for education and discussion.
- While not required, additional written documentation can also be reviewed prior to the start of the season.
- Using a secure, Web-based system, there is the opportunity to customize a set of standards for each camp based on the camp’s program, site, and modes. This system also allows uploading documents for review by a third party (visitor).

- Resources currently available on the resource CD that accompanies the *Accreditation Process Guide* will be available online. This will allow users easy access to the documents, and gives ACA the ability to make edits and additions to the resources as necessary.

What’s This Mean to Me?

- The 2012 edition of *Accreditation Process Guide* was released mid-September 2011.
- Camps will begin using these standards at their NEXT on-site accreditation visit (i.e., camps being visited in 2012 and after will use the revised standards). As stated in the required Annual Statement of Compliance, an accredited camp continues to meet the standards under which it was last visited, as well as all applicable mandatory standards.
- All camps and visitors will receive a complimentary printed version of the *2012 Accreditation Process Guide* prior to their visit, even if they choose to use the Web-based program.
- Prior to the on-site visit, each camp to be visited is required to have an individual who will be actively involved in both the preparation of materials, will be available on-site the day of the visit, and who will attend a Standards Course.

Important to Note

As in the past, accreditation is granted and removed at the local level. The NSC key responsibilities include oversight and establishment of the guidelines for the administration of ACA’s Standards Program.

Contributed by Rhonda Mickelson, Director of Standards Program

staff, from camp to the city by train where they will be released to their parent/guardian or authorized pick-up person. The parent was refusing because she felt that her son could make his way home from the train station via public transportation — like he does for all the other non-summer activities in which he participates (including activities offered by the camp). The director was unable to reach any other individuals on the authorized pick-up list or emergency forms and the mother stopped answering his calls. He wanted to discuss some options that he might have had that he hadn't already thought of before the call.

Questions/Issues

- *Did the difference in travel procedures between summer and non-summer programs exacerbate the situation for the camp and the parent in this situation?* What are the legal ramifications if a camp allows a child to “sign themselves out”? Does the age of the camper make a difference?
- *Can your day campers walk, ride their bike, or take public transportation to and from camp?* If yes, how can the parents and the camp know if/when the child gets to camp or arrives home?
- *In this case study, what if the camper needed money for the bus/subway?* Did the parent make sure they had enough to get home? Was the camp supposed to make sure the child had enough means to get home?
- *What is a director to do when a parent doesn't show up to get their child and no one can be reached including the parent?* If no one on the camper's application is reachable, your options will be limited. Police, child protective services, and your attorney can offer you guidance.

Case Study #5 Resources

- ACA Camp Parents Web Site www.CampParents.org
- Child Protective Services Numbers by State: www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172
- Various Articles on Partnering With Parents: www.ACAcamps.org/member/parent-communications-resources/partnering-with-parents-articles

Case Study #6 — The Camp's Registered Nurse and Her Children

Overview

The camp had a nurse that was finishing her two-week employment as the camp nurse — she had three days left. One of the perks for the camp nurse was that her children could attend camp while their parent was employed by the camp. These children were welcome to stay in the cabins with the appropriately aged camper groups. This particular nurse had two children that chose to attend camp while their mom was there. The older of the two campers proved a challenge to the camp staff and in turn the director. This child was described by the caller as a behavior problem and difficult to deal with in the regular camp group setting. The issue

that triggered the call to the Crisis Hotline was that the child told the cabin counselors that he wanted to go back to the “treatment facility” he had been in earlier in the year and that he had been talking about suicide. When the director brought this to the mother's attention (the camp's RN) she didn't seem too worried. She confirmed that her child had been in treatment at a facility for bipolar disorder, but did not think of the camp's concerns as any big deal. The camp was concerned for the child's safety and the safety of others around him. The camp might have sent the child home under other circumstances, but they needed the nurse to complete her employment contract and thought she might not if her child was removed from camp.

Questions/Issues

- *Should you send the child home and lose your camp nurse?* Does the director follow her instincts and send the nurse and her children home early so that the mother can get her child some professional help?
- *Should you keep the child in camp but remove him from your regular program?* Does the director remove the camper from the group to live in the health center building with his mother until her obligation as nurse is complete?
- *If the nurse leaves camp, how will you quickly recruit a replacement?* Do you have access to other health care professionals who can step in and assist at a moment's notice — even if only for a day while you search for more help?

Case Study #6 Resources

- Association of Camp Nurses: www.ACN.org
- Camper Behavior Management Tips: www.ACAcamps.org/member/parent-communications-resources/partnering-with-parents-articles
- “When Behavior Becomes a Legal Issue”: www.ACAcamps.org/campline/s-2010/when-behavior-becomes-legal-issue

Case Study #7 — A Camp Applicant Who Is HIV Positive

Overview

A camp director called wanting to know how they should handle a returning camper that had recently been diagnosed as HIV positive. The camper's mother called to let the camp know of the situation prior to their arrival for the next session. Without asking directly, the caller wanted to find out if they are required to accept this camper. They wanted to know if they could tell the parent that they were not equipped or prepared to handle this condition.

Questions/Issues

- *Persons with HIV are protected by the Americans with Disability Act (ADA).* It is important that you understand what the ADA requires as far as reasonable accommodation.
- *Is the camp's healthcare team prepared to accommodate the needs of the camper?* Will the staff need any special training

or in-service related to reinforcing universal precautions and use of appropriate protective equipment?

- *Does the camp have appropriate personal protective equipment readily available?* It is important that your camp is prepared with all of the necessary supplies.

Case Study #7 Resources

- U.S. Department of Justice Civil Rights Division Disability Rights Section — Questions and Answers: The Americans with Disabilities Act and Persons With HIV/AIDS: www.ada.gov/pubs/hivqanda.txt. (Scroll down to “Part III Public Accommodations”)
- Centers for Disease Control and Prevention HIV Resources: www.cdc.gov/hiv/
- Centers for Disease Control and Prevention Personal Protective Equipment Information: www.cdc.gov/niosh/topics/emres/ppe.html

Case Study #8 — Unexpected Visit by the Department of Social Services

Overview

During one of the hottest weeks of camp (camp was experiencing a 117 degree heat index), a female camper exhibited flu like symptoms the second day of camp. The camper’s counselor talked with the camper to make sure she was drinking enough water and it appeared that she was. The next morning the camper indicated she was feeling better and ate breakfast. Soon thereafter, the camper vomited. Per their policies, the camper was taken to the health center and the health care provider called the camper’s mother.

The camper’s mother was very upset and immediately came and picked up the camper and took her to the emergency room. Several days later, the camp received an unexpected visit from the Department of Social Services, which shared that the camper’s mother had called them to let them know the camper was apparently dehydrated (according to the physician). The camp director was unaware of anything else that might have been reported.

During the on-site inspection, the director shared that the camp had implemented an excessive heat policy, shared all the paperwork regarding the health center (and treatment of the camper), and documentation from Girl Scout Safety Wise. The individual from Social Services also talked with some of the counselors and received slightly conflicting stories about what had happened and when things happened (the incident had occurred five days prior to the Social Services visit).

The camp director and two of the counselors were going to have a phone interview with the Social Services person the day after the call to the ACA Hotline to clarify a few things. The camp director wanted to discuss thoughts/suggestions on how to help her counselor prepare for the conversation as well as ideas on how to end the summer strong (as this occurred during the last session).

Questions/Issues

- *What is the camp’s excessive heat policy?* Policies should include things such as: staff/campers take water breaks every

thirty minutes, making sure everyone has to drink a certain amount of water, having something like Gatorade available in the morning and afternoon, reviewing the CDC Web site for excessive heat practices.

- *Have all parties involved provided complete documentation of the incidents with the camper?* The camp director was going to talk to the two counselors prior to the phone call with Social Services and ask them to share with her what they remembered about the situation. (An incident report had been written by the health care person, but no other documentation was prepared.)
- *How do you help staff remain focused and energetic through the final session of camp?* To help end the summer strong, the camp was thinking of conducting an all-staff meeting so all staff could be brought up to speed on what happened, how to learn from the situation, and bring closure to it. It would also serve as a re-energizer meeting for staff to remind them they needed to remain focused and energetic for this final group of campers.
- *How will you respond to media inquiries about the incident, should they arise?* The camp director was going to talk with their media person in the event it was picked up by the media.

Case Study #8 Resources

- “As the Heat Turns Up, Make Sure Staff Are Prepared”: www.ACAcamps.org/news/heat-related-illness
- American Red Cross Heat Wave Safety Checklist: www.redcross.org/portal/site/en/menuitem.86f46a12f382290517a8f210b80f78a0/?vgnnextoid=8cc6a5f0f013b110VgnVCM1000089f0870aRCRD
- Centers for Disease Control and Prevention — Heat Related Illness: www.cdc.gov/learning/archive/hri.html
- Environmental Protection Agency — Excessive Heat Events Guidebook: www.epa.gov/aging/pdfs/resources/ehe_guide_lo_2006_0619.pdf

Case Study #9 — Camper Left at Camp with Behavior Issues Not Identified by Father

Overview

An eleven-year-old female camper was dropped off by her father on Sunday afternoon/evening — about four hours after normal check-in time. On Saturday, the father had sent the director a short note indicating his daughter might need a little additional attention but nothing that raised a real red flag. In talking with the camper, the camp director feels this e-mail did not give a full/fair picture of the girl’s needs. When the father dropped the camper off, he also left some “pills,” sharing with the camp director they were “vitamins.” The vitamins were not in the original bottle and there were no prescriptions for any of the items. Nothing on the health form or health history indicated a need for medication or any diagnosis of ADHD or other behavioral issues.

According to the camp director, the camper seemed to be cognitively aware (appropriate for an eleven-year-old), but she had what the director would consider severe behavior issues and no social skills. The camp had to have a counselor assigned specifically to this camper since the camper's arrival. The director also expressed safety concerns (the camper was found wandering around in the middle of the night). The camper was home schooled by the father and the mother died two years ago.

The director indicated she was willing to have the camper stay at camp if the father would provide an aide or help the camp provide one. The director had called the father four hours prior to calling the Hotline, but he had not returned her call. In a conversation with the camper, she told the director that her father had told her he was not going to answer any calls from the camp.

Questions/Issues

- *When a parent will not take your calls, what do you do?* Are there other people listed as emergency contacts on the camp application? (In this case, there were not.)
- *Document all attempts at communication.* Be sure to keep detailed accounts of everything pertaining to the situation.
- *When you are able to contact the father (assuming you can), what do you discuss?* Be sure to indicate that you want to partner with the parent but that the parent has misled the camp on what the child needs, and what the medications are. Be prepared to have some specific examples of the inappropriate behavior to share with the father.
- *What do you do if the father refuses to communicate with the camp?* In this scenario, the camp director felt she had no other choice but to contact the child welfare department if the father would not communicate with her soon.

Case Study #9 Resources

- Child Welfare Reporting Numbers by State: www.childwelfare.gov/pubs/reslist/rl_dsp.cfm?rs_id=5&rate_chno=11-11172
- Partnering with Parents Resources: www.ACACamps.org/member/parent-communications-resources/partnering-with-parents-articles

Case Study #10 — Inappropriate Touching by Very Young Campers

Overview

We received several calls this summer from directors who were faced with situations focused on inappropriate touching of a very young camper by another young camper. For this case study, camp was over and the director received an e-mail from a mother who said her son told her another boy in his cabin had touched his genitals one night. His mother said he did not seem perturbed by it, and it only came up in a conversation. She wondered if any of the other three young boys in the cabin (all between five and six years old) had mentioned anything. The director then contacted all the parents of the boys in that cabin (including the alleged perpetrator's parents). One of the boys confirmed the story;

however, he had not seen anything, but the boy told him that he had touched their friend in his "private parts." When asked about cabin supervision, the camp used a "duty counselor" who was outside in a common area between several cabins with younger campers that he was supervising.

Questions/Issues

- *Mandated reporting is applicable even in very young children (or adults with delayed cognitive development).* In this case, the mother of the touched child was not so concerned for her son as she was for the little boy with inappropriate behavior. She was concerned that he was possibly being sexually abused with similar behaviors. For his safety, she wanted the report filed.
- *Inappropriate sexual behavior is not necessarily confined to a particular age or developmental stage.* It is important for staff to understand that these inappropriate behaviors can occur between campers or camper-to-staff, even in very young children (for a number of reasons), so they need to be able to identify what is appropriate at various developmental stages and report when a behavior crosses the boundaries.
- *A camp director faced with a mandated reporting incident will likely want to contact their legal counsel and insurance agent.* These experts might know of state-specific nuances and resources that are useful to the mandated camp administrator.
- *The camper supervision plan, especially for night and rest times, is critically important to minimizing opportunistic misbehavior.* In this case, the director wanted to revisit their assumptions on the amount of direct supervision needed for their youngest campers.

Case Study #10 Resources

- ACA's Child Abuse Resource Web Page: www.ACACamps.org/child-health-safety/child-abuse
- Child-to-Child Abuse (Including Very Young Children): www.ACACamps.org/sites/default/files/images/campline/Child%20to%20child%20abuse.pdf
- Preventing Child Sexual Abuse: www.cdc.gov/ViolencePrevention/index.html

ACA's Camp Crisis Hotline, established in 1985, is available twenty-four hours a day, every day of the year. The Hotline provides support in times of crisis. If you have any questions about the resources and case studies in this article, please contact Hotline Team Leader Susan E. Yoder (syoder@ACACamps.org) at ACA's Administrative Office. For additional resources and case studies, visit www.ACACamps.org/camp-crisis-hotline. The Hotline phone number is 800-573-9019.

Contributed by ACA's Camp Crisis Hotline Team — Deb Bialeschki, Kim Brosnan, Barry Garst, Rhonda Mickelson, and Susan E. Yoder



Medical Marijuana: Current Issues for Camps

By Catherine Hansen-Stamp and Charles R. Gregg, ©2011*

Introduction

A call recently came into the American Camp Association (ACA) Crisis Hotline from a member camp: Three adults attended a family camp and brought medical marijuana with them. Upon arrival, they advised camp staff that the marijuana was in their possession in compliance with their state's medical marijuana laws. Camp staff were uncertain as to how to address the issue in light of the camp's "no smoking" policy, its rules against illegal drug possession or use on the premises, and the possibility that use of the drug might affect the user's ability to participate in family camp activities. As a result, ACA's *CampLine* staff asked that we address the use of medical marijuana. While the subject is novel — new and unusual, in our experience — it is important in itself, and for what we might learn in other circumstances when a camp, committed to inclusivity and opportunities for personal development — as well as compliance with the law — is confronted with the prospect of illegal activity or danger to camp staff and participants.

For those of you who may be unfamiliar with this issue, in the last few years, several states — by one count, fifteen¹ — have passed laws allowing marijuana use for medical purposes, in limited

circumstances. These laws have created confusion in many areas and conflicts with other state or federal laws. Our focus will be use by adult staff and participants, but we will also touch on use by minors. Our effort here is to highlight some of the current issues, raise your awareness, and give you insight into ways to prepare for these issues before they arise in your camp community.

The Issues

So, what are the issues? Significantly, camps may have an individual applying for a staff position or an existing staff member who currently uses or expects to use medical marijuana. Their desire (they may consider it a need) to use the marijuana, either on camp premises or off, can conflict with a camp's drug free workplace and "no smoking" policies. In addition, those engaging in marijuana use for medical purposes will likely test positive as part of any camp staff drug testing. Furthermore, use of medical marijuana, depending upon the timing of the use, will likely impair the individual's ability to conduct their job functions, and impact camper safety. Consider, for example, a staff member who is required to drive a camp vehicle, lead a climbing activity, supervise or facilitate the camp zip line, or conduct other activities



(Oregon's Medical Marijuana Act) was "without effect" — as marijuana remains an illegal drug under federal law.

A common theme running through these cases is that under the supremacy clause of the U.S. Constitution, the federal CSA preempts conflicting state law — and the use and possession of marijuana is a federal crime. The reasoning is that employers are thus entitled, for example, to fire employees that use marijuana, or that may possess it on their premises. (Colorado's medical marijuana law specifically states that "nothing in this section shall require any employer to accommodate the medical use of marijuana in any work place."¹⁷) Some states, including California, are attempting to enact state laws that address this issue — that is, to protect employees from being terminated for "lawful" (at least under that state's laws) use of medical marijuana. Other states' medical marijuana laws already contain these types of provisions, but the laws have not been tested. However, without a fundamental revision of the federal CSA, allowing for the use of marijuana for medicinal purposes, it appears that these state efforts will continue to fail in the face of the CSA's clear mandate.¹⁸

Other Laws

The Department of Transportation requires mandatory drug testing for those holding a commercial driver's license, and prohibits drivers from using CSA Schedule I drugs (including marijuana).¹⁹ The premise of the federal Occupational Safety and Health Act (OSHA) is that employers will commit to providing a safe work environment.²⁰ The Drug-Free Workplace Act of 1988 requires federal agency contractors and grantees to certify that they will provide a drug-free workplace as a pre-condition to receiving a contract or a grant from a federal agency.²¹ Title III of the ADA, which requires private organizations (that must comply with that law) to provide access to programs and services for individuals with disabilities, does not protect individuals (prospective campers, for example) who are currently engaging in the use of illegal drugs.²²

What to Do?

Confer with your legal counsel to understand your state's medical marijuana laws, and state anti-discrimination, disability rights, or other laws, should you be confronted with prospective employees or campers — or existing employees — using or seeking to use medical marijuana. However, it appears that organizations, including camps, will not likely be restricted (for example, by ADA Title I, or state disability rights laws) from terminating employees, or refusing to hire employees who are using medical marijuana pursuant to applicable state law, considering the federal CSA, and the fact that marijuana use, possession, manufacture, and distribution is considered a crime under federal law. Likewise, camper applicants who may be suffering from an ADA protected disability are not protected under the ADA (and many state disability rights laws) if they are currently treating that disability with illegal drugs.

So, what if your camp is approached by a staff applicant, an existing staff member who is using marijuana, or a camper applicant who has brought his medical marijuana with him to camp? Again, work with your legal counsel beforehand to understand the laws, and have a plan in place. The law seems clear, even in states that have passed medical marijuana laws, that an employer can

refuse to hire, terminate an employee, or refuse to allow a camper to attend, who is currently using marijuana, whether for medical reasons or otherwise.

If you are inclined to accommodate the use of medical marijuana on or off your premises by one of your employed staff, consider the consequences. Even if you choose to allow such use, consider that there is a well-documented body of research identifying that use of marijuana impairs an individual's ability to function — and that impairment would logically extend to many traditional camp activities (for example, driving vehicles or running a zip line or challenge course) and the supervision of co-workers and campers. This premise is evident in the state medical marijuana laws (as previously discussed) that specifically exclude use of medical marijuana in situations where it might impair another's safety, etc., as well as in the federal CSA determination to list marijuana as a Schedule I controlled substance. Interestingly, according to one expert, the marijuana (medical or otherwise) available today is many times stronger than that available a decade or more ago.²³ Camps are about providing adventure and recreational opportunities for campers, oftentimes in an outdoor or wilderness setting. Camps inclined to support individuals' use of marijuana should proceed very cautiously, considering the risk management issues associated with its use — whether the user is a staff member or a participant. A camp may decide to "accommodate" a staff member's medical marijuana use off the premises (as allowed by the state's laws). If the staff member comes to work still under the influence, and a camper under his or her supervision is hurt as a result, litigation may result, exposing the camp to a variety of claims. The staff member would be in violation of the CSA and, in addition, has likely violated the conditions of the applicable state law (e.g. see limitations in Colorado's medical marijuana law, previously described).

Stay tuned, as the evolution of these issues continues.

**This article contains general information only and is not intended to provide specific legal advice. Camps and related organizations should consult with a licensed attorney regarding application of relevant state and federal law as well as considerations regarding their specific business or operation.*

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Notes

1 *Rights of Medical Marijuana Users in the Workplace*, Arizona State University Law Journal, May 30, 2011.

2 21 U.S.C. 801, et seq.

3 21 U.S.C. 812(b)(1).

4 The CSA prohibits all use of Schedule I drugs with the only excep-



- tion being use of a Schedule I drug as part of a Food and Drug Administration preapproved research project. See 21 USC § 823(f).
- 5 *Emerald Steel Fabricators, Inc. v. Bureau of Labor and Industries*, 230 P.3d 518 (Ore. Supreme Court, 2010).
- 6 21 U.S.C. 801.
- 7 *Id.*
- 8 *Id.*, *supra* note 1.
- 9 See Colorado Constitution, Article XVIII, Section 14 (2011); 5 CCR 1006-2 — Rules and Regulations Pertaining to Medical Use of Marijuana (2011).
- 10 U.S. Department of Justice Memo and Guidelines dated October 9, 2009, to selected state U.S. Attorneys, from David W. Ogden, U.S. Deputy Attorney General.
- 11 *Ross v. RagingWire Telecommunications, Inc.*, 174 P.3d 200 (Cal. Supreme Court 2009)
- 12 *Roe v. Teletech, et al.*, 2011 Wash. Lexis 393 (Wash. Supreme Court June, 2011); *Casias v. Wal-Mart Stores, Inc.*, 764 F. Supp. 2d 914 (U.S.D.C. Mich. February, 2011); *Emerald Steel*, *supra* note 5; *Id.*, *Ross*.
- 13 *Supra* note 5.
- 14 The other two cases alleged wrongful termination in violation of that state’s medical marijuana laws and “public policy.”
- 15 *Emerald Steel* discusses such language in Oregon’s state disability rights law, *supra* note 5.
- 16 ADA Title I, 42 U.S.C. 12114(a).
- 17 *Id.*, *supra* note 9, Colorado Constitution, part 10.
- 18 Some commentators believe that state disability laws may provide protection. See footnote 1.

- 19 In a 2009 “DOT Office of Drug and Alcohol Policy Compliance Notice” the DOT clarified that its longstanding regulations requiring mandatory drug and alcohol testing for DOT regulated drivers do not authorize “‘medical marijuana’ under a state law to be a valid medical explanation for a transportation employee’s positive drug test result” (49 CFR Part 40, at 40.151(e)). The Notice continued: “therefore, Medical Review Officers will not verify a drug test as negative based upon information that a physician recommended that the employee use ‘medical marijuana.’ Please note that marijuana remains a drug listed in Schedule I of the Controlled Substances Act. It remains unacceptable for any safety sensitive employee subject to drug testing under the Department of Transportation’s drug testing regulations to use marijuana. We want to assure the traveling public that our transportation system is the safest it can possibly be.” Apparently, the DOT had received questions following the Department of Justice’s issued guidelines (see *supra*, note 10), indicating that federal prosecutors would not make it a priority to prosecute those using medical marijuana pursuant to applicable state law.
- 20 29 U.S.C. 651, et seq.
- 21 41 U.S.C. 701, et seq.
- 22 42 U.S.C. 12210 (“illegal use of drugs” is defined in ADA Title III regulations as those drugs that are defined as unlawful under the federal CSA — see 28 CFR 36.104); this is similar to the Title I restriction, described in the text accompanying note 15, left.
- 23 August 23, 2011 telephone conversation with Lynn Reimer, www.actondrugs.com. (Act on Drugs, Inc. is a nonprofit company organized to provide drug awareness and prevention training for communities.) Ms. Reimer has over ten years of experience in narcotics and has been recognized as a national expert.

ACA's Initiatives in the 112th Congress



The American Camp Association (ACA) continues to work to advance our public policy agenda in Washington, D.C. and in the states. Our agenda is simple, yet impactful. Our agenda for 2011–2012 is to:

- Protect the safety of children, youth, and adults participating in the camp experience.
- Achieve recognition that camp is an expanded learning opportunity.

We are pursuing a number of different initiatives with the current Congress:

- **Child Protection Improvements Act:** An important bill we have been advocating for since 2004. The bill will close the gaping hole in the federal law that prevents camps, children's groups, and other organizations that work with children from gaining access to federal criminal background checks on employees and volunteers. For the most up-to-date information, visit: www.ACAcamps.org/publicpolicy/cbc

- **No Child Left Inside Act:** An education reform bill that includes a commitment to environmental education for children. There are provisions in the bill that would partner community organizations (such as camps) with schools to provide environmental education programs and training. For the latest information, visit: www.ACAcamps.org/publicpolicy/NCLI
- **Motorcoach Safety:** We are monitoring a number of bills meant for the motorcoach industry to ensure that there are no unintended consequences that would negatively impact camps and camper safety. For more information, visit: www.ACAcamps.org/publicpolicy/motorcoach-2011
- **Equal Opportunity Employment Commission (EEOC):** ACA is providing expertise and comment to the EEOC to help them as they consider potential changes to the direction they give to employers regarding criminal background checks and the screening of employees. Read ACA's comments here: www.ACAcamps.org/publicpolicy/EEOC_CBC
- **National Youth Summer Jobs Act of 2011:** ACA is examining the potential positive impact this bill might have on summer camp employment opportunities. It was just recently introduced, and we are still examining potential. Read the bill here: <http://thomas.loc.gov/cgi-bin/query/z?c112:H.R.2539>:
- **Successful, Safe, and Healthy Students Act:** This very large piece of legislation may have an important element that provides funding opportunities for community organizations (such as camps) that partner with schools to reach certain goals. We are examining its potential impact. Read the bill here: <http://thomas.loc.gov/cgi-bin/bdquery/z?d112:s.919>:
- **Urban Revitalization and Livable Communities Act:** A bill dedicated to issues concerning urban parks. It might have elements that will positively impact camp programs being conducted in urban areas. ACA is currently examining potential issues. Read more at: www.nrpa.org/uploadedFiles/Get_Involved/Issue_Resource_Center/Urban%20Park%20Bill%201%20Pager_Final.pdf?n=9633

And finally, we are pleased to report that on September 13, 2011, Congress recognized the 150th anniversary of the organized camp experience in the United States Representative Chellie Pingree (Maine) extended remarks into the Congressional Record that honor the anniversary and recognize the important part camp experiences play in the year-round development and education of children. Find out what she had to say here: www.ACAcamps.org/publicpolicy/Congress-150th-Anniversary-of-Camp.

To keep up-to-date on all of ACA's government relations and public policy initiatives, visit: www.ACAcamps.org/publicpolicy. If public policy issues interest you, consider becoming one of ACA's public policy advocates or issues experts. Find out more here: www.ACAcamps.org/publicpolicy.

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