2027
Emergency Procedures and Emergency Action Plans

Tx Dept. State Health Services
Approved Emergency Procedures for HSLC
Date 5/4/2026: 5:06pm
Ian Brassett

HERMANN SONS LIFE CAMP
EMERGENCY PREPAREDNESS COORDINATOR

The EPC at Hermann Sons Life Camp will always be the Executive Camp Director.

The EPC/ECD is Steve Townley in 2027

Cell / Mobile Phone Number – 903-353-4439
OFFICE Number – 830-995-3223
EMAIL – camped@hermannsonslife.org

Job Description:
The Emergency Preparedness Coordinator will direct emergency preparedness activities, ensure procedures and policies are current, and make evacuation decisions during an emergency. In the absence of the Emergency Preparedness Coordinator, the Co-Camp Director, will take his place.

- **Co-Camp Director – Jessica James (512) 466-9744**

Duties/Responsibilities:
- Reviews and analyzes existing emergency preparedness and evacuation plans; makes recommendations for modifications to improve safety, efficiency, and effectiveness the plans.
- Identifies various potential hazards and risks that may arise in the event of an emergency; develops plans to mitigate or manage those risks.
- Plans, coordinates, and facilitates safety and evacuation meetings and drills as required.
- Develops, distributes, and maintains emergency communication protocols and documentation, which may include emergency contact trees, emergency response hierarchy, and other records.
- Ensures that relevant policies and procedures are current and in compliance with applicable regulatory requirements.
- Drafts emergency preparedness plan(s) for facility, ensuring OSHA and EPA requirements, national and local fire protection codes, and industry requirements are addressed and implemented. When applicable, submits plans to appropriate regulatory agencies in a timely manner.
- Monitors and assesses work environment for situations requiring activation of emergency procedures.
- Directs emergency efforts, collaborating with facility manager regarding partial or complete evacuations and evacuating employees as needed.
- Reviews emergency preparedness plans with employees and supervisors; provides updates when employee responsibilities or assigned actions change.
- Regularly inspects evacuation paths, ensuring exits and exit access are clear and free of obstructions.
- Oversees the operational and financial aspects of emergency preparedness and disaster management.
- Performs other related duties as assigned.
- **Manages and directs emergency situations including all contact with EMS and 9-1-1 when and as the emergency dictates.**

Required Skills/Abilities:
Current, thorough understanding of applicable safety rules and guidelines.
- Excellent verbal and written communication skills.
- Ability to remain calm under pressure.
- Strong leadership skills.
- Ability to anticipate hazards and problems and respond effectively.
- Excellent interpersonal skills.
- Proficient in Microsoft Office Suite or related software.

Physical Requirements:
- Prolonged periods sitting at a desk and working on a computer.
- Must be able to lift up to 15 pounds at times.

INTRODUCTION

In the wake of the flooding disaster that took place on July 4th, 2025, Hermann Sons Life Camp has reviewed all aspects of our Risk Management and Emergency response procedures.

While our plans and emergency responses have not changed significantly, our messaging and how we teach our staff and campers has been adjusted to help better prepare the camp for future weather-related events.

The foundation of a safe camp is a **fully prepared camp counselor**. The following pages are designed to help prepare our staff (and inform our parents) for the worst possible emergencies on camp. It is important that all staff members understand these procedures and their role in implementing them.

Risk Management is the term that describes the constant effort to make our Camp program safer and to help staff members understand their vital role in this process.

Better training, better supervision, more anticipation, and clearer foresight: That's what risk management is all about. **Risk, however, is an inherent part of our work.**

Perspective is also important. Understanding the camps specific needs and concerns is also vital when reviewing policies. Hermann Sons Life Camp (Hilltop) is approximately 150 Feet above the nearest River which is a little over a mile away.

To contextualize that, The flooding on July 4th, 2025 was 35 feet above the normal water level. At Hermann Sons Life Camp, our number one concern with weather related Interactions and with the natural environment is **lightening, high winds and tornados**. Human concerns (active shooter, sexual predators) also provide the camp great concern coupled with the involvement of campers and staff participating in various activities which all present the potential for accidental injury.

This manual has been put together using prior summer's accident and injury reports, countless risk management sessions at camping conventions, annual camp inspections from our insurance company and their risk assessment team, annual review of policies and procedures, annual site and equipment inspections and 35+ years of camp experience.

- Emergency procedures are updated annually.
- Emergency Procedures are reviewed annually by the Texas Department of Health Services
- Emergency Procedures are reviewed by Risk Management Professionals Annually.
- Emergency Procedures are reviewed during our ACA (American Camp Association) visits by peer camping professionals.

In 2027, the Emergency Procedures will also be:

- Emailed and a hard copy delivered to the Kerr County Emergency Management Coordinator.
- Posted Online for parents to review.
- Emailed to all camper parents through the Parent's Handbook.
- Emailed to all staff before camp begins.
- Posted in all camper Dorms on the Staff bulletin board in the counselor room.
- Emergency Procedures are taught and rehearsed during staff development.
- Staff Training will be documented by the EPC/ECD in writing and held in their office for review.
- **Emergency Procedures when they are updated and approved by the TSHS, will be emailed and/or posted online to be available to all the parties highlighted above by the EPC/ECD.**

STAFF TRAINING

Emergency Procedures when they are **updated and approved by the TSHS,** will be emailed and/or posted online to be available to all the parties highlighted below by the EPC/ECD.

- All the camper parents on our website and through the Parent Handbook.
- All staff through Email and Google Docs. Also available to staff in the Staff rooms in the dorms.
- Kerr County Emergency Management Coordinator through email and mailed hard copy.

- The Emergency Procedures will be taught during Staff Development by the EPC/ECD.
- All staff will be emailed the Emergency Procedures before their arrival in camp.
- All staff members will be expected to read the Emergency Procedures before they arrive in camp.
- All staff will be required to acknowledge in writing that they have read the Emergency Procedures.
- Staff Training will be documented in writing by having the staff initial their attendance at the specific training sessions.
- The Emergency Procedures will be broken down into 4 sessions. Each sessions Power Points will be available for the State to review along with the attendance sheets when inspected.

In 2027, the Emergency Procedures will also be:

- Emailed and a hard copy delivered to the Kerr County Emergency Management Coordinator.
- Posted Online for parents to review.
- Emailed to all camper parents through the Parent's Handbook.
- Emailed to all staff before camp begins.
- Posted in all camper Dorms on the Staff bulletin board in the counselor room.
- Emergency Procedures are taught and rehearsed during staff development.
- Staff Training will be documented by the EPC/ECD in writing and held in their office for review.

EXTERNAL COMMUNICATIONS

WHO TO NOTIFY AND WHEN!

IN AN EMERGENCY

The priority of the Camp staff in an emergency is to stay calm and focus on the immediate care and safety of the campers in their care/vicinity. Keep the campers together in a safe environment.
As soon as possible, without endangering the campers or yourself, move to a safe location away from the incident area.

Once the campers and staff are in a safe location, If necessary, solicit the assistance of another counselor to supervise your group while you handle the emergency.

- Use the camp's phones, radios and your cell phone to contact the EPC/ECD or any supervisor by phone, WhatsApp or text.

Once the emergency has been raised the EPC/ECD or Co-Director will co-ordinate the emergency procedures.

- It is important that all staff follow the directions of the EPC/ECD in a calm manner.
- It is important that all staff have read the Emergency Procedures and Emergency Action Plans before they arrive in camp.
- All staff will be trained on the Emergency Action Plans by the EPC/ECD before they are put in-charge of any campers.
- Documentation of the training and reading of the Emergency Procedures will be kept on-file by the EPC/ECD in the form of Training Documentation initialed by the staff member.

Once the EPC/ECD has been notified of an emergency, the emergency services (9-1-1) are to be notified. **Staff do not need to wait for the EPC/ECD to notify the emergency services.**

Once the immediate emergency situation has been "handled", the EPC/ECD will notify the Kerr County Emergency Coordinator to review the next stage of the emergency if appropriate.

- Once the EPC/ECD has notified the Kerr County Emergency Coordinator, himself or the Camp Director will notify the home office and the parents.
- This will be done by the following modes of communication and determined by the emergency at hand:
- Camp Brain, our Camp Database has the capacity to send an email to all parents of the campers currently in camp if necessary.
- If we are unable to use the Camp Brain system at camp, we will contact the Home Office in San Antonio to send the email communication to the parents. The EPC/ECD will communicate via phone or text with the CEO and CFO of Hermann Sons Life.
- The Home Office will post on the companies FB and website any emergency communications.
- The camp has the emergency contacts for all parents on a hard copy held in the EPC/ECD office during the summer for each session.

DEALING WITH THE MEDIA - PRESS OR BYSTANDERS ARRIVE (AD.21.3)

No one is authorized to deal with the media, or any other persons on camp related events except for the EPC/ECD. No statements or interviews are to be given by a camp employee unless specifically authorized by the EPC/ECD. The EPC/ECD will communicate with the Home Office before making any statements.

CAMP SECURITY & ACTIVE THREATS (AD.18.1)

Annually, Hermann Sons Life Camp does an internal Risk Management review of our procedures and facility in the Fall. In Spring, our facility and these procedures are inspected and reviewed by our insurance company.

- The Gates to Hermann Sons Life Camp are locked during the camp season.
- The code to the gates is changed annually, and when a staff firing has taken place.

After all emergencies, the EPC/ECD will collect the appropriate accident or injury reports.
Accident/Incident Reports are used to improve the safety and quality of the camp's operations moving forward. Was this preventable? Was this handled correctly? How can we better train staff moving forward? Was this negligence?

TO BE POSTED ON FRONT BLTN BOARD IN ADMIN

COMMUNICATING WITH CAMPERS – SAFETY ORIENTATION

The following is the outline of the safety orientation given to all staff on the day of their arrival. Before dinner, we will preform an Emergency Drill. In an Emergency, the PA system and radios will be used to communicate the muster point being used.
Senior Counselors will be responsible for their dorms performance in the fire drill. The location of the drill and safety orientation will be changed weekly to keep staff "on their toes".

- All campers and staff will report to the Flagpole (Emergency Muster location #1).
- In the event of a fire in the dining hall or dorms, (Emergency Muster location #2) will be used.
- The dining hall is our back-up Emergency Muster location#3.

The EPC/ECD or Camp Director will review the information listed below in the All-Camp Safety Orientation.

In addition to the following orientation, all campers have an additional safety orientation in their cabin (DORM MEETING) to review bunk policies and establish their own cabin rules. These rules include, but are not limited to supervision, curfews, cabin behavior expectations during an emergency, personal belongings, etc.

ALL-CAMP SAFETY ORIENTATION (AD.19)

EMERGENCY DRILL - Day One of all camp & Group Rentals.
Welcome campers/staff. A few rules and regulations for your safety.

- Weather emergencies (Fire, lightening, flood, wind, rain, etc.)
- Dorm evacuations discussed in dorm meeting. (See below)
- Identify the location of Emergency Muster Locations.
    1. Flagpole. If the flagpole is not safe to use, we will use the
    2. Lower basketball court. If lower basketball court is not safe or suitable,
    3. Dining Hall or HHAAC
- Follow the directions of your counselors. **Be respectful and kind to everyone in camp**.
- No-one is permitted to leave campgrounds. Stay within the fence line.
- All activity sites, pool, ropes course and archery and the HHAAC are out-of-bounds unless qualified staff are present.
- Only permitted in your own dorm.
- Wear shoes at all times outside the dorm
- No food in the cabins. Animals.
- No hitting or physical contact permitted.
- No bullying, name-calling and teasing allowed.
    - *We want everyone to have a great summer camp experience. Camp is a safe zone*.
- No cell phones. No drugs. No vapes. No alcohol. No knives / weapons.
    - *Turn them in now – amnesty until 12:00*.
- Do not leave your cabin after curfew!
- Always stay supervised.
- **Rule of three. Always travel with at least two other people.**
- Must drink water, lots of water!
- Use sunscreen. Use lip balm. Use a hat!
- No medicines, (including vitamins) allowed in a cabin except for inhaler or epi-pen.
- Clinic is available 24/7. Always take your counselor.

Safety Orientation to be given at the start of all group and camper sessions at HSL.

ARRIVAL DAY - SUNDAY DORM MEETING (AD.19.1D)

Hermann Sons Life Camp takes the approach that in order for campers to feel safe they must know and understand the parametersof their stay. Structure in camp is not a bad word. It is the basis of the camper's enjoyment. A smaller, shy camper may not feel comfortable their entire stay, if they are not sure what rules and regulations are applied to their fellow campers in the cabin.

"Since we are going to be living together or spending time together for the next several days, we need some agreements about how we want to be treated and how we treat others." Rules and regulations are in place to ensure the campers have a safe, fantastic week.

To emphasize the importance of the Dorm Meeting, Staff Training will be conducted during Staff Development. This training will be documented and will be kept on-file by the EPC/ECD in the form of Training Documentation initialed by the staff member.

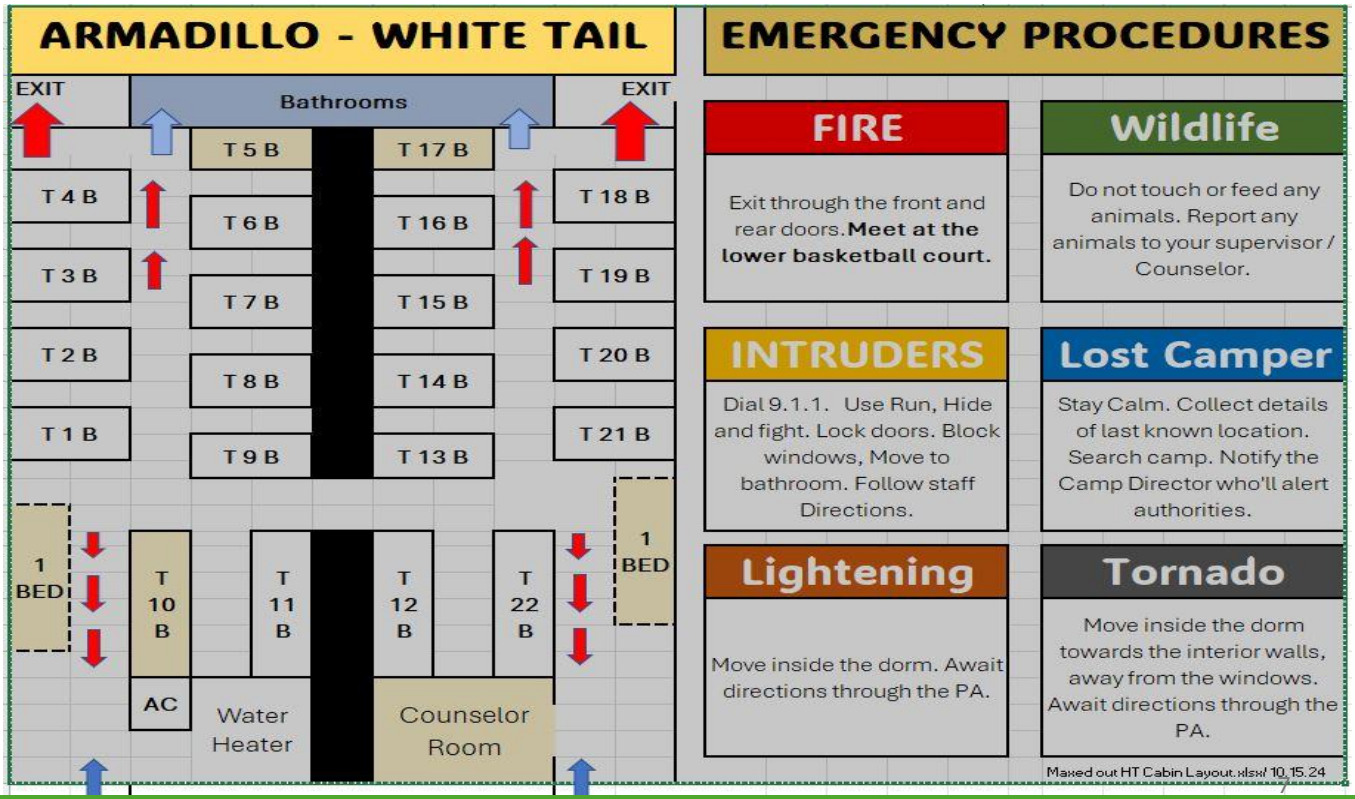
- The Senior Counselor and all the counselors must lead all Dorm Meetings.

Dorm Meetings are performed at the beginning of every camp session.

The topics of the Dorm Meeting Must include:

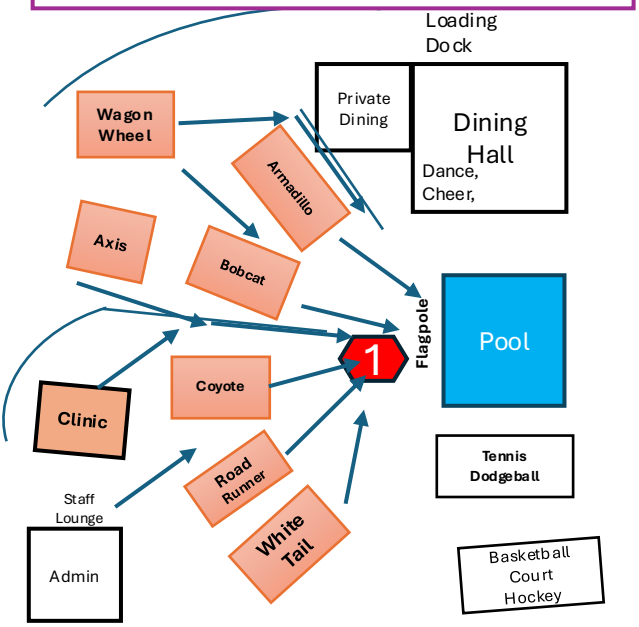
- Welcome. Staff Introductions
- Personal Behaviors/Boundaries to include
  - Rule of Three
  - Body Boundaries
  - Camper Code Of Conduct
    - Treat Others as you wish to be treated
    - No bullying, teasing, name-calling, etc.
- Emergency Procedure Review: Age-appropriate review of the Emergency Procedures.
- By age-appropriate, we mean that you give directions to the developmental comprehension level of the group.
  - Emergency exits
  - The importance of following your counselors' directions / Stay calm / Stay with your counselor
  - Review Safety Card / Dorm evacuation plan (Below) Explain to all campers regardless of age.
  - Show them the emergency evacuation routes and explain.
  - Emergency Muster locations (See Below). The Emergency Muster Map will be posted in all Camper Dorms.
- Dorm Rules
  - Listen to counselor/CIT
  - Clean for Ice Cream
  - Rest period / Relaxation
  - Lights-Out
  - Showers / Nudity in dorm.
  - Personal Space

AN EMERGENCY EXIT CARD and EVACUATION MAPS ARE POSTED IN EVERY BUILDING.

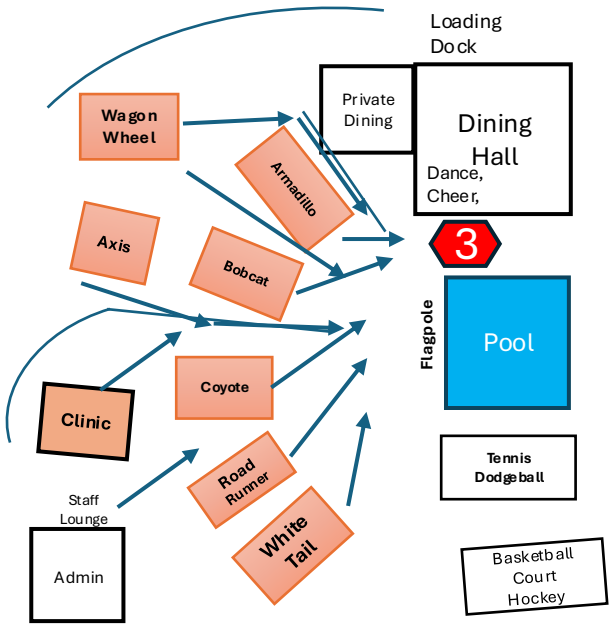


EVACUATION ROUTES FOR EMERGENCIES

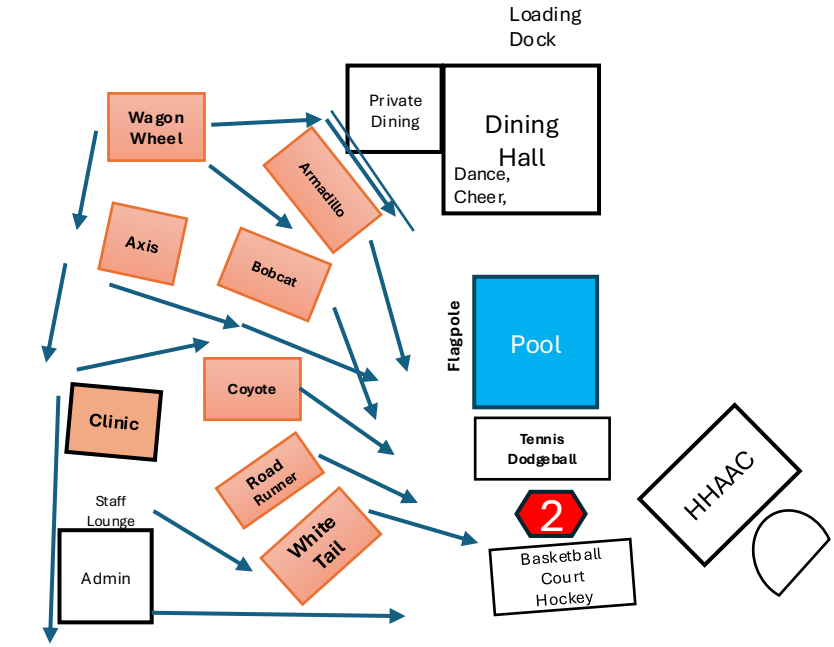
LIGHTED EMERGENCY EXIT TO FLAGPOLE MUSTER POINT #1



LIGHTED EMERGENCY EXIT TO DINING HALL. MUSTER POINT #3



LIGHTED EMERGENCY EXIT TO LOWER BASKETBALL COURT MUSTER POINT #2



EVACUATION ROUTES TO BE POSTED IN ALL DORMS / BLDGS

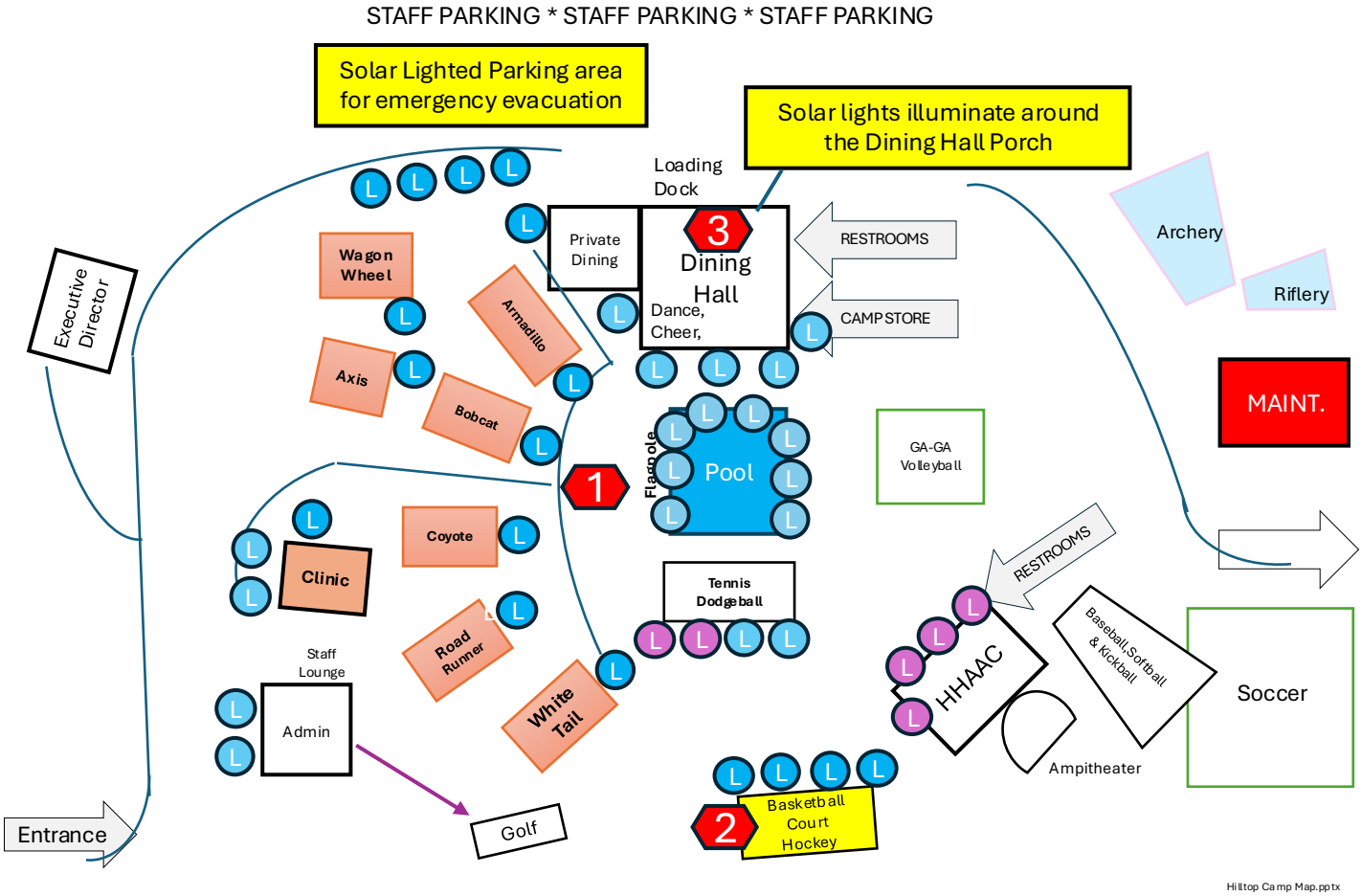
- Stay Calm
- Stay quiet
- Stay together
- Always follow your counselor's instructions

Once the emergency has been raised the EPC/ECD or Co-Director will co-ordinate the emergency procedures.

Once the EPC/ECD has been notified of an emergency, the emergency services are to be notified (9-1-1-). **Staff do not need to wait for the EPC/ECD to notify the emergency services.**

Once the immediate emergency situation has been "handled", the EPC/ECD will notify the Kerr County Emergency Coordinator to review the next stage of the emergency if appropriate.

EVACUATION LIGHTING



E — Emergency Muster Locations

L — Solar Lights Installed

L — Solar Lights purchased to be installed the week of 5/4/2027

Senior Counselor Responsibilities

- The solar lights provide an illuminated path to all three muster locations at night. (HSC141.0091)
- It is the responsibility of the Senior Counselor to visually inspect the solar lighting when they are on Night Duty. Night Duty is conducted daily.
- A laminated copy of this map is located on the front bulletin board of the Admin building. Use this to confirm all lights are operable.
- If any of the lights are not operable, it is to be brought to the EPC immediately. The EPC is the Executive Camp Director.

TO BE POSTED ON FRONT BLTN BOARD IN ADMIN

HERMANN SONS LIFE CAMP

INTERNAL COMMUNICATIONS

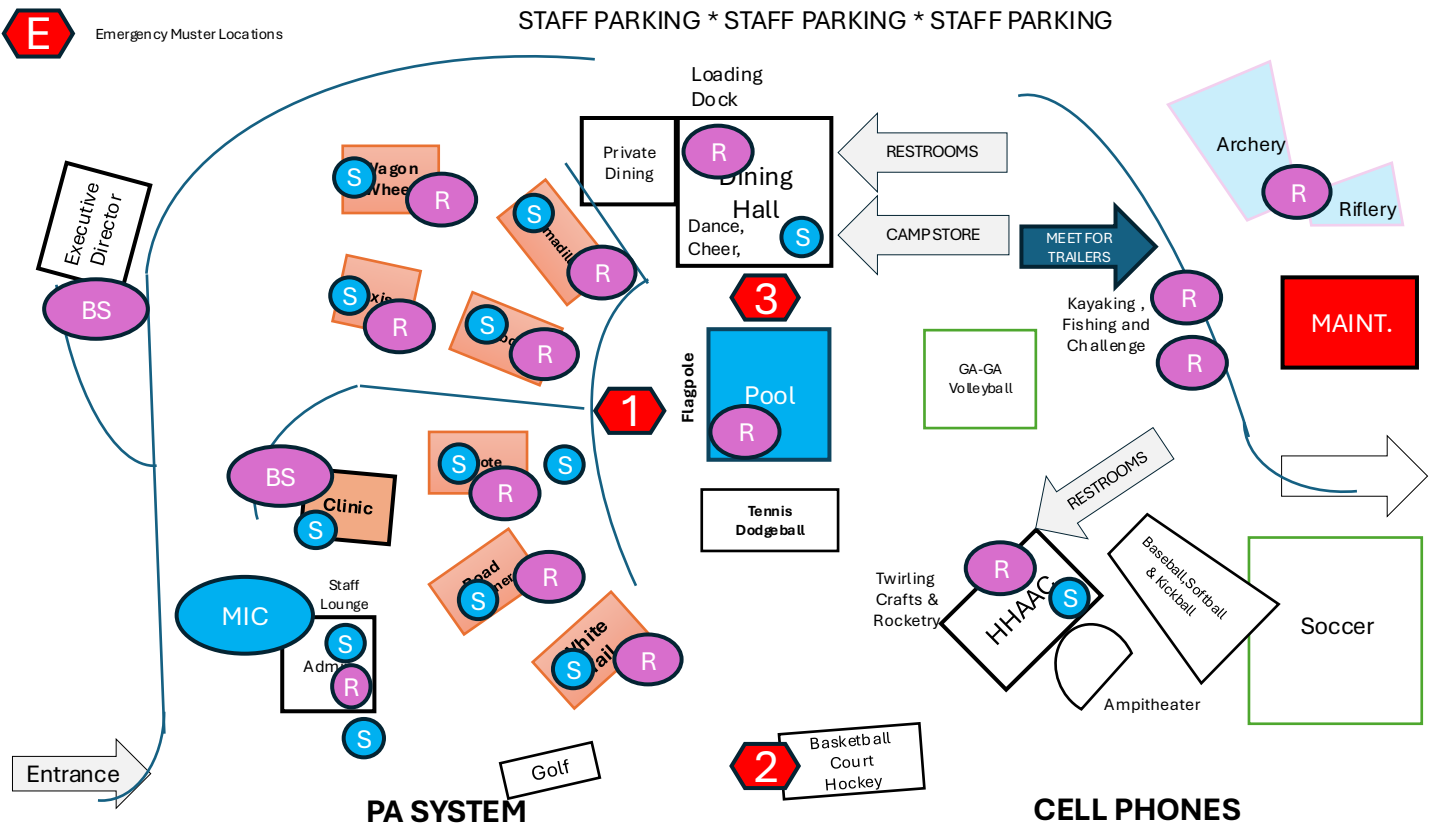
PA System, Radios & Cell Phones

R Radio I locations

BS Base Station for Radios

S Speaker for the PA system

E Emergency Muster Locations



PA SYSTEM

- Each spring, the EPC/ECD coordinates with Mood: Texas (210) 223-6383 to confirm the fully functionality of the PA system.
- The PA system is hard wired and not reliant on the internet/Wi-fi
- The hub of the PA system is located in the Main Admin Building.
- The PA system is used to communicate with all campers and staff.
- **All Senior Counselors and directors** are trained to operate the PA system.
- Campers who are hard of hearing (or deaf) are always supervised 24/7. In the event of an emergency, it is the staff's responsibility to the campers in their care to help ALL campers to safety.

RADIO COMMUNICATION

- Working in tandem and alongside the PA system is a Bearcat 980 SSB Single Sideband CB Radio located in the clinic.
- Another Bearcat 980 SSB Single Sideband CB Radio is located in the EPC/ECD residence.
- Handheld Radios are located in all dorms, the Admin Building, Kitchen, the HHAAC, the pool, River, challenge course and archery activities.
- All radios will be set to the same channel which will be tested and confirmed operational in writing by the EPC/ECD before the start of Staff Development (5/31/2027).
- All Medical Staff, senior counselors and directors also have hand-held radios tuned to the same channel.
- All senior counselors, medical staff and directors are trained on how to use the radios.

CELL PHONES

- All staff are permitted to carry their personal cell phones with them.
- All staff members are in a WhatsApp group where emergency messages can be passed quickly between each other.
- All senior counselors and directors are required to have the weather channel, weather bug, the ARC Emergency Alert system and lightening app tuned to the Camp's location on their phones.
- The EPC/ECD is also signed up to the automatic alert system initiated by the Kerr County Emergency Coordinator.

NOAA RADIO

- A NOAA radio will be set-up in the clinic and the Director's residence before camp begins.
- The EPC/ECD will confirm both radios are functioning.
- The EPC/ECD will confirm the radios are functioning on a daily basis. In the event of one of the radios not operating functionally, the EPC/ECD will purchase a new one the same day.

TO BE POSTED ON FRONT BLTN BOARD IN ADMIN

EMERGENCY PROCEDURES & EMERGENCY ACTION PLANs

HERMANN SONS LIFE CAMP

I Fiber internet

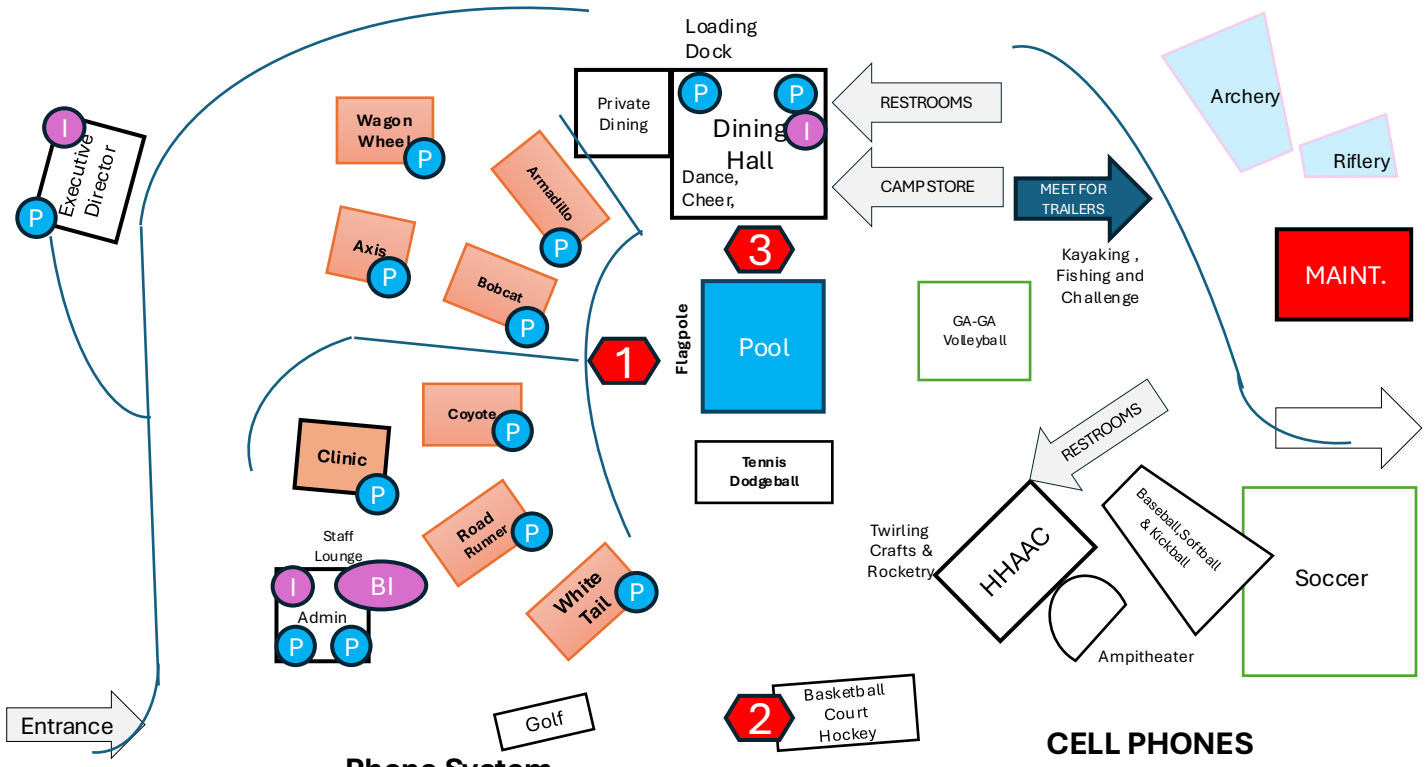
BI Back-up Broadband Internet

P Hard-lined Phone locations

E Emergency Muster Locations

EXTERNAL COMMUNICATIONS

Hardline Phones, Cell Phones, Internet



Phone System

- Each spring, the EPC/ECD coordinates with the IT department of the Home Office to confirm that all phones and computers are operational.
  - We have a phone service is through HCTC.
- There is a hard-wired telephone in all sleeping dorms, the Admin building, the clinic and the kitchen of the dining hall.
- There is an emergency contact list affixed next to each phone.

Internet

- We have three end-to-end fiber internet connections through HCTC that come into the camp.
  - The first comes into the Admin Building.
  - The second comes into the EPC/ECD private on-site residence.
  - The third comes into the Dining Hall.
- The back-up broadband internet service is through HCTC and is distinct from the end-to-end fiber internet. It will be the Staff Lounges only internet service. It is 4 x daily.
- The IT Department monitors the internet connections from our Home Office.

CELL PHONES

- All staff are permitted to carry their personal cell phones with them.
- All staff members are in a WhatsApp group where emergency messages can be passed quickly between each other.
- All senior counselors and directors are required to have the weather channel, weather bug, the ARC Emergency Alert system and lightening app tuned to the Camp's location on their phones.
- The EPC/ECD is also signed up to the automatic alert system initiated by the Kerr County Emergency Coordinator.
- The Directors have the Kerr County Emergency Coordinators phone number programmed into their phone.

IN AN EMERGENCY

PARENTAL COMMUNICATION (AD.21.2)

The Camp Director, in conjunction and communication with the Executive Camp Director will be responsible for communicating with the parents. This will be done by the following modes of communication and determined by the emergency at hand. *** PHONE CALL * USE OF CAMP BRAIN * EMAIL ***

- HSL has three separate fiber internet connections into Camp (Main Office, Director's Home and Dining Hall.).
- HSL has a backup broadband wireless system, distinct from the fiber.
- HSL has a Home Office based in San Antonio

TO BE POSTED ON FRONT BLTN BOARD IN ADMIN

EMERGENCY PROCEDURES & EMERGENCY ACTION PLANs

EMERGENCY TELEPHONE NUMBERS

EMERGENCY NUMBERS – 911

Comfort Volunteer Fire Dept	830.995-2124
Kerr County Emergency Management	**830.315.2430**
Kerr County Sheriff's Office	830.896.1216
Kendall County Sheriff's Office	830.249.9721
Constable Brian Vaughn – Kendall County	830.995.3386
Emergency Preparedness Coordinator (Steve Townley)	903-353-4439
Texas Dept. of State Health Services	512.231.5753
Youth Camp Coordinator TDHS: Lindsey Eudey	512.422.4091

CAMP DOCTOR

J. Christopher Meriwether 830.257.1440
1331 Bandera Hwy Ste. 10, Kerrville
Office Hours are Monday-Thursday, 9-12 & 2-5, Friday 8-12
Cornerstone Clinic 830.995.5633

URGENT CARE

FRANKLIN CLINIC, KERRVILLE

723 Hill Country Drive, Suite C, Kerrville, TX 78028
830.792.5800 Open: Monday to Friday 8:00 a.m. to 5:00 p.m.

BOERNE

Open 7 days. 8:00 a.m. to 8:00 p.m.
910 River Road, Suite 101, Boerne, TX 78006 830.331.2391

AFTER HOURS EMERGENCIES

Peterson Regional Medical Center 830.896.4200
551 Hill Country Drive, Kerrville, TX 78028

EXTERNAL SUPPORT EMERGENCY NUMBERS

Poison Control	800.222.1222	
Child Protective Services	Kerrville	830.792.4303
Child Protective Services	Boerne	830.249.8779
Child Protective Services	**Hotline**	**800.252.5400**
Texas Dept. of Health	Boerne	830.249-3511
Texas Dept. of Health	Austin	512.776.7111

Reporting Gas Leak/Emergency 911 and then call 800.959.5325

HERMANN SONS LIFE - COMFORT

Hilltop Camp Office	830.995.3223
Steve Townley (Executive Camp Director)	903-353-4439 (cell)

HERMANN SONS LIFE – SAN ANTONIO

Home Office 210.226.9261

Dial 9 for an Outside Line

EMS/EMERGENCY 911

DIRECTORS

Steve Townley – 903-353-4439

HILLTOP EXTENSIONS

400 – Front Desk
401 – Shelly
402 – Steve Townley
403 - Webster
404 –
406 – Clinic
407 – Kitchen
408 – Office in kitchen
410 – Armadillo
411 – Bobcat
412 – Coyote
413 – RoadRunner
414 - WhiteTail
415 – Wagon Wheel
416 – Axis

HOME OFFICE

239 – Tammi
272 – Robin Czarnek
267 – Letty (IT)
234 – Cindy (HR / Payroll)

HERMANN SONS LIFE CAMP

SUMMARY OF A COUNSELOR'S ROLE IN EMERGENCY SITUATIONS

1. Stay Calm.
2. Actively Supervise your campers and remove them from dangerous situations.
3. Take count and then **keep count of your campers**.
   I. How many campers do you have? Use your dorm list provided at the beginning of the week.
   II. How many should you have?
4. Ask the campers, if you are missing anyone, where they were last seen?
5. Never leave the campers unattended.
6. Follow the directions given to you by your senior counselor, either in person and /or via phone or radio.
7. Report your situation to the senior staff by using the radio or cell phone. Be calm. Be specific.
8. Dial 9-1-1 in the event you believe an ambulance or police services are required
9. Each staff member will be provided with a flashlight and list of emergency numbers which is to be kept on them at all times.
10. Each dorm is provided with a lantern (to lead your campers to safety if necessary) and a radio.

FIRE EMERGENCIES

- ❑ Help your campers out of the building.
- ❑ Move to a safe muster location.
- ❑ Count your campers.
- ❑ Call 9-1-1 once you and the campers are out of immediate danger.

INTRUDERS

- ❑ Dial 9.1.1.
- ❑ Never approach a stranger. Contact senior staff by radio or phone.
- ❑ Move campers to a safe area.
- ❑ RUN, HIDE, FIGHT.
- ❑ Bock windows and doors.
- ❑ Move campers to the shower stalls and require silence.

LIGHTENING

- ❑ Follow instructions from senior staff via. The PA system or the radio/ phone.
- ❑ MOVE yourself and all campers inside your dorm.
- ❑ Do you have all your campers? Count!
- ❑ Stay calm, play games in the dorm.
- ❑ Stay inside until instructed otherwise.

WILDLIFE

- ❑ Do not touch or feed any animals.
- ❑ Move campers and all staff away from the animal.
- ❑ Report via phone or radio the location of the wild animal to the senior staff.

TORNADO

- ❑ Follow instructions from senior staff via. The PA system or the radio/ phone.
- ❑ MOVE yourself and all campers inside your dorm.
- ❑ Do you have all your campers? Count! And count again!
- ❑ Move campers to the shower stalls. Sing songs or tell stories to help keep the campers calm.

LOST CAMPER

- ❑ Stay Calm. Count your campers.
- ❑ Contact Senior Staff. They will check clinic.
- ❑ Last known location, clothing?
- ❑ Senior staff will conduct search. Follow directions. Keep campers calm and take them to muster location or dorm (where directed).

HERMANN SONS LIFE CAMP

SUMMARY OF A SR. COUNSELOR'S ROLE IN EMERGENCY SITUATIONS

1. Stay Calm.
2. Actively Supervise your dorm counselors and campers and remove them from dangerous situations.
3. Take count and then keep count of your counselors and campers.
   I. Is anyone missing? Report count to the senior staff. How many campers do you have? Use your dorm list provided at the beginning of the week.
   II. How many should you have?
4. Ask the counselors and campers, if you are missing anyone, where they were last seen?
5. Never leave the campers unattended.
6. Follow the directions given to you by the EPC/ECD, either in person and /or via phone or radio.
7. Report your situation to the EPC/ECD by using the radio or cell phone. Be calm. Be specific.
8. Dial 9-1-1 in the event you believe an ambulance or police services are required
9. Each staff member will be provided with a flashlight and list of emergency numbers which is to be kept on them at all times.
10. Each dorm is provided with a lantern (to lead your campers to safety if necessary) and a radio.

FIRE EMERGENCIES

- ❑ Help your counselors and campers out of the building.
- ❑ Move to a safe muster location.
- ❑ Re-Count your campers and staff.
- ❑ Call 9-1-1 once you and the campers are out of immediate danger.

INTRUDERS

- ❑ Dial 9.1.1.
- ❑ Never approach a stranger. Contact EPC/ECD by radio or phone.
- ❑ Move campers to a safe area.
- ❑ RUN, HIDE, FIGHT.
- ❑ Bock windows and doors.
- ❑ Move campers to the shower stalls and require silence.

LIGHTENING

- ❑ Follow instructions from senior staff via. The PA system or the radio/ phone.
- ❑ MOVE yourself and all counselors and campers inside your dorm.
- ❑ Do you have all your counselors and campers? Count!
- ❑ Stay calm, play games in the dorm.
- ❑ Stay inside until instructed otherwise.

WILDLIFE

- ❑ Do not touch or feed any animals.
- ❑ Move campers and all staff away from the animal.
- ❑ Report via phone or radio the location of the wild animal to the senior staff.

TORNADO

- ❑ Follow instructions from senior staff via. The PA system or the radio/ phone.
- ❑ MOVE yourself and all counselors and campers inside your dorm.
- ❑ Do you have all your counselors and campers? Count!
- ❑ Move campers to the shower stalls. Sing songs or tell stories to help keep the campers calm.

LOST CAMPER

- ❑ Stay Calm. Count your campers.
- ❑ Contact Senior Staff. They will check clinic.
- ❑ Last known location, clothing?
- ❑ Senior staff will conduct search. Follow directions. Keep campers calm and take them to muster location or dorm (where directed).

NIGHT DUTY IN-CHARGE RESPONSIBILITIES

- ❑ **Observe Off-Off signout in the office**
  - ❑ Confirm mail has been distributed
  - ❑ Make sure everyone signs out and leaves a contact number
- ❑ **Run the nightly activity**
  - ❑ Explain the rules to all campers in the DH or at the flagpole.
  - ❑ Enforce safety rules
  - ❑ Make sure someone is taking photos on camp phone
- ❑ **Clean up the nightly activity**
  - ❑ Anything that was set up needs to be put away (ie. tables, supplies, game material)
  - ❑ If applicable: DH tables should be moved back into original locations for breakfast the next day - recruit help if needed
- ❑ **Monitor Dorms during showers & lights out**
  - ❑ Cover for SS that is off-off as needed
  - ❑ Check with the clinic - did all evening meds get dispensed?
  - ❑ **CONFIRM ALL CAMPERS AND STAFF ARE PRESENT.**
  - ❑ Assist counselors with dorm/camper issues as needed
  - ❑ **CONFIRM THE SOLAR LIGHTS ARE ON (IF NOT – CALL Steve Townley ASAP)**
  - ❑ Make sure all lights are out and cabins are quiet by lights out time
- ❑ **After lights out - you're in the office unless patrolling spots or camp.**
  - ❑ If quiet - log the day's observations
  - ❑ Monitor the Spots (CIT and Counselor)
  - ❑ **MONITOR THE WEATHER FORECAST BEFORE GOING TO BED.**
    - ❑ **Contact Steve Townley if there are any watches or warnings. Steve Townley will stay up and monitor the weather overnight.**
  - ❑ Tidy up office (sweep, clean up random stuff that gets left everywhere, throw out trash)
  - ❑ Patrol Camp (ie. walk past the dorms, CIT rooms, Dining Hall, and HHAAC)
  - ❑ Sign-in counselors as they return (all back by midnight)
    - ❑ If missing someone - call/text 10-15 min before midnight to check in on them.
  - ❑ Random Bed checks

Other Duty Responsibilities

On-Duty: You assist the in-charge with the nightly activity, cleaning up, and monitoring/assisting the dorms during showers/lights-out (see above). You are off-duty after dorm lights are out. Make sure you complete logging and then you can hang out in the office or turn in for the night.

Off-On: You are off-duty but on-camp after dinner. You can hang out in the office or hide in your room. May be called back on by the In-Charge if necessary.

ACTIVE SHOOTER

Unfortunately, in the United States there is an epidemic of Mass Shootings. Between 2000 and 2016, 661 people have been killed with 825 wounded. We need to be prepared. While the likelihood of an incident occurring is very low of an incident, we must know what to do in the event of an incident.

We will review an Active Shooter drill during staff development. The three main components of an Active Shooter policy are:

- **RUN/ESCAPE** – If possible, put as much distance between yourself and the shooting incident.
- **HIDE** – When you have run, find cover and conceal yourself away from danger. If escape is not possible due to the proximity of the shooter, hide / barricade yourself into a room. Lock the door.
- **FIGHT** – Only as a last resort. Only if absolutely necessary.

There will be an active shooter drill during staff development

RUN

- Have an escape route and plan in mind.
- Leave your belongings behind.
- Help others escape, if possible.
- Evacuate regardless of others.
- Warn/prevent individuals from entering.
- Do not attempt to move wounded people.
- Keep your hands visible.
- Call 911 when safe.
- Follow police instructions.

HIDE

- Your hiding spot should:
  - Be out of the active shooter's view.
  - Provide protection if shots are fired.
  - Not restrict options for movement. If the shooter is nearby:
- Lock the door.
- Hide behind large item (e.g., cabinet, desk).
- Silence cell phone/pager.
- Remain quiet.

FIGHT

- As an absolute last resort:
- Act as aggressively as possible.
- Throw items and use improvised weapons.
- Work together to incapacitate the shooter.
- Commit to your actions.

IN CAMP

- Think of what activities you teach. What would you do and where would you go in the event of an active shooter?
- If you are in a dorm, what would you do if you hear gunshots?

EMERGENCY LOCKDOWN PRODEDURE

During an active shooter event, time matters. Staying calm and thinking clearly matters.

- Did you hear gun fire?
- What direction did the gun fire come from?

Do not wait for an announcement. It may not be possible for Admin to announce.

1. When/If possible, we will use the PA system initially to warn campers and staff.
    - We will use the code “red” to signify lockdown.
2. We will use the Staff WhatsApp to warn staff of an intruder and their location.
3. Camp Admin will notify law enforcement of the situation when possible.
    - It is important that you silence your phone when a lockdown begins.
    - If you are safely away from danger, call 911. Stay calm. Stay quiet. Do not call if it will bring attention to yourself and the campers you are with.
4. If campers are outside when a lock-down begins, counselors should escort them away from the incident into the brush and hide, or to the closest building and follow the listed procedures below.
5. Once inside, counselors should barricade and lock the doors, have campers move to the bathrooms, position the group farthest from the windows, and turn off the lights. Everyone should stay quiet.

Do not leave your safety until the police give the all clear.

- THE ALL-CLEAR PASSWORD will be given to the staff at the beginning of each camp session.
    - This person will open the door with a key and announce that he/she is entering the room.
- If the person tries to open the door using the “under duress” password – FIGHT. BLOCK THE DOOR.
- THE UNDER DURESS PASSWORD will also be given at the beginning of each session.

There will be a lockdown drill during staff development

LOST (MISSING) CAMPER & LOST SWIMMER DRILLS (AD.20.1)

If a camper is missing at the waterfront, the lost swimmer drill at the waterfront will be implemented. If the camper is missing after dark, the Night-time Missing Camper Procedures will be implemented.

There will be a missing camper drill during staff development

Have you checked the Clinic? Administration Building? Cabin?

If the child is still missing…

1. ***Gather as much information as possible.***

- Initiate a Code Amber over the radio.
- Where was the child last seen? Get specifics.
- Was the child alone?
- Does the child have any special medical needs?
- Is there any reason they may have wandered off?
- Description of clothing and any potential medical issues.

2. Immediately notify a supervisor.

- Give details gathered from (1).
- Your location.
- Time the camper was discovered missing.
- Agree upon time for search to end (15 minutes from notification).

TIME IS CRITICAL!
Better safe than sorry. Do not hesitate to let us know if a camper is missing!

3. Conduct a Camp-Wide search.

- One-person will be in-charge of the search (Camp Director).
- Check the clinic and the camper's cabin immediately.
- Check the Administrative office for an early departure (signed-out).
- Check the camper's activity schedule.
- Keep all other campers supervised. Perform a head count.

4. Searching for a camper.

- The Executive Camp Director, Assistant Camp Director or senior staff member will brief the staff as to who is missing, where they were last seen and what the camper was wearing.
- Searchers should go out in pairs.
- Each searcher should have a map, radio (or cell phone), flashlight and noise-maker (whistle).
- Searchers should cover specific routes/areas.
- Searchers should call out for the camper. Make noise.
- End the search at a specific time.
- Inform based on a "need to know" basis. See also Mass Hysteria policy.

5. ***Still missing?***
   a. Bring all campers and staff to the flagpole and conduct a headcount.
   b. The EPC/ECD will Dial 911.
   c. The EPC/ECD will contact the Office of the Kerr County Emergency Management (830) 315-2430
   d. At this time, the EPC/ECD will contact the parents of the missing camper(s).

MISSING CAMPER NIGHT-TIME

1. **Initial Search:**
   a. Immediately search the entire cabin area and the bathrooms.
   b. Perform a head count. Everybody in the correct bed?
   c. If the immediate search does not locate the camper, initiate a Code Amber and contact the Camp Director or Senior Staff in-charge using your cell phone, dorm phone or radio.
   d. The senior staff will **check the clinic and Early Departure Form** immediately. If still missing,
   e. Perform a head count and bed check-in all cabins.

TIME IS CRITICAL!
Better safe than sorry. Do not hesitate to let usknow if a camper is missing!

2. **Gather as much information as possible.**
   a. Where was the child last seen? Get specifics.
   b. Was the child alone?
   c. Does the child have any special medical needs?
   d. Is there any reason they may have wandered off?
   e. **Double-check all cabins. Double check all restrooms.**

3. **Searching for a camper.**
   a. The Camp Director, Assistant Camp Director or senior staff member will brief the staff as to who is missing, where they were last seen and what the camper was wearing.
   b. Searchers should go out in pairs.
   c. Each searcher should have a map, radio (or cell phone), flashlight and noise- maker (whistle).
   d. Searchers should cover specific routes/areas.
   e. Searchers should call out for the camper. Make noise.
   f. End the search at a specific time.
   g. Inform based on a "need to know" basis. See also Mass Hysteria policy. Care must be taken not to frighten, misinform, or alarm the other campers. Hysteria will only compound a bad situation.

4. Still missing?
   a. Bring all campers and staff to the flagpole and conduct a headcount.
   b. The EPC or Camp Director will Dial 911. Kerr County emergency services.
   c. The EPC or Camp Director will contact the Office of the Kerr County Emergency Management (830) 315-2430
   d. At this time, the EPC or Camp Director contact the parents of the missing camper(s).

DROWNING AND DROWNING ALERTS (PA.3.1)

Drowning is one of the leading causes of accidental death in children. It occurs quickly, often quietly, in that moment when you were talking Lifeguards will use three whistle blasts to signal an emergency. All counselors will begin to calmly clear the pool/river unless otherwise directed by the lifeguard. Campers and non- essential staff should leave the area.

- Initiate a Code Blue.
- Lifeguards will enter the pool/river according to appropriate rescue protocols.
- Lifeguards will remove the injured participants face from the water immediately. If the cause of injury is unknown or if there is a likelihood to a friend, went to the bathroom, or got distracted. We must all obey the safety rules and remain observant when in and around water. There is to be no swimming or canoeing by campers **or staff** unless lifeguards are onduty.

MISSING PERSON ON THE RIVER - *Post at the River*

If a person is unaccounted for and it is strongly suspected that the person is in the river (overturned canoe), the staff should:

- Initiate a Code Amber and request medical staff.
- Hail the camper loudly & clearly. Request information from other canoers and remove them from thearea.
- Immediately contact the EPC/ECD via radio or cell phone.
- The EPC/ECD will initiate a Lost Camper procedures.
- The EPC/ECD will send other available staff to search shoreline.
- If the missing person is unaccounted for, all available staff will be sent to river to assist in “lost swimmerdrill”
  a. The EPC/ECD will Dial 911.
  b. The EPC/ECD will contact the Office of the Kerr County Emergency Management (830) 315-2430
  c. At this time, the EPC/ECD will contact the parents of the missing camper(s).

NEAR DROWNING PROCEDURE

- If a head/neck injury, the lifeguard(s) will immobilize according to spinal injury management methods.
- Get help.
- At the pool: A designated Staff member will call the Medical Staff via walkie-talkie and ask for Medical Staff Assistance, alerting them that "There is a Code Blue situation at the Pool. "The Medical Staff will designate someone to call 911 and respond with needed equipment to the pool. Initiate a Code Blue.
- At the river: A lifeguard will call Medical Staff via walkie-talkie and ask for Medical Staff assistance, alerting them that "There is a Code Blue situation at the Riverfront," and letting them know what the situation is. The Medical Staff will call 911 and send Medical Staff and equipment needed at the river. Initiate a Code Blue.’
- The lifeguards will coordinate the safe removal of the victim from the water.
- If the camper does not need CPR, administer First Aid as needed.
- If the camper does need CPR, connect oxygen to ambubag and use ambubag for rescue breathing. Use strong force. Administer CPR per protocol. Continue CPR until Medical Staff arrives or until the victim resumes breathing and a pulse can be measured.

PROCEDURES FOR MEDICAL STAFF

- Bring an emergency response kit and report to the scene of the emergency.
- Confirm that 911 is being called.
- Confirm the identity of the victim and get the medical form for transportation.
- Care for the patient until emergency services arrive.

DEPARTURE DAY

CAMPER VERIFICATION AND RELEASE (AD.23.1)

When enrolling, parents indicate during the enrollment process (on Camp Brain) who is permitted to pick-up their child at the end of their summer camp session. This CAMPER CHECK-OUT FORM will be provided to Main Gate. These procedures have been carefully developed and are necessary to protect the campers.

Upon arrival at the gate a senior staff member will:

- Ask for the ID of the person checking them out.
- Confirm that name is on the Camper Check-Out Form.
- The person's name will be highlighted by the senior staff.
- The senior staff member will radio the dining hall and let them know who is being picked-up.
- All campers, medication and luggage will available at Stage 2. Our friendly staff will help you and your child with their luggage.
- If your child has medication, please pick-it up at this time.
- Pick-up is between 9:00 a.m. – 11:00 a.m. on departure day.

If the name of the person is not on the excel report (Cabin Check-Out Form), contact the Camp Director, Assistant Director, or Executive Director.

- Ask for the name of the child or children.
- The Senior Staff will call the parent or guardian to obtain permission to release the camper to this person. Even parents whose name does not appear on the registration card must receive proper authorization before checking out.
  - The parent will be asked to text a confirmation to the Executive Director or Camp Director.
- The ECD or Camp Director will then inform the gate that the parent is authorized to pick-up that child.

AUTHORIZED AND UN-AUTHORIZED PEOPLE ON CAMP

Our camp visitation policy states:

- All visitors (including past staff and Grand Lodge dignitaries) must check in with the office upon arriving at camp.
- All past staff member visits must be approved by the Executive Camp Director.
- All guests are issued a **guest badge** that they are required to wear during their stay.
- All visitors are required to be off camp property by 6:00 p.m. unless otherwise arranged with the Executive Director.
- Any staff member noticing a "stranger" must report the individual immediately. Remove campers from the area and watch (from a safe distance).
- The EPC/ECD will approach the stranger to get an understanding of who they are. 911 will be called as soon as possible if necessary.
- Any visitors not adhering to the camp policy or is an un-authorized visitor, the ECD or any senior staff will contact 911 to report the incident.
- To protect the campers, we will institute a lockdown drill (Code Red) indicating the location of the unauthorized visitor… I.e. Code Red in the Admin Building. Code Red Archery. This will be conducted through radios and the PA system.

Some common visitors to camp include camper's parents, past staff, friends or family of staff, and Hermann Sons dignitaries.

TORNADO PREPAREDNESS AND RESPONSE

- If a tornado "**WATCH**" is issued for your area, itmeans that a tornado is "possible."
- Be alert to what is happening outside as well. If you see a tornado and it is not moving to the right or to the left relative to trees or power poles in the distance, It may be moving toward you!
- If a tornado "**WARNING**" is issued, it means that a tornado has actually been spotted, or is strongly indicated on radar, and the EPC/ECD will instruct all campers and staff it is time to go to a safe shelter immediately.
- All campers and staff will be directed to their Dorms by the PA and on the radios. The Senior Counselor will go to their assigned dorm.
- Attendance will be taken to ensure all campers and staff are present. The staff will play games with the campers, staying calm.
- The safest location on Hilltop is the dorms.
- Head to the bathrooms and move to the inside walls (showers).
- The EPC/ECD will contact the Kerr County Emergency Management Coordinator and 9-1-1 if necessary.

TORNADO INDICATORS

- A sickly greenish or greenish black color to thesky.
- A strange quiet that occurs within or shortly after the thunderstorm.
- Clouds moving by very fast, especially in a rotating pattern or converging toward one area of thesky.
- Whirling dust or debris on the ground under a cloud base – tornadoes sometimes have no funnel!
- Hail or heavy rain followed by either dead calm or a fast, intense wind shift. Many tornadoes are wrapped in heavy precipitation and can't be seen.
- Day or night: Loud, continuous roar or rumble, which doesn't fade in a few seconds like thunder.
- Night: Small, bright, blue green to white flashes at ground level near a thunderstorm (as opposed to silvery lightning up in the clouds). These mean power lines are being snapped by very strong wind, maybe a tornado.
- Night: Persistent lowering from the cloud base, illuminated or silhouetted by lightning – especially if it is on the ground
- Whirling dust or debris on the ground under a cloud base – tornadoes sometimes have no funnel!
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- Night: Persistent lowering from the cloud base, illuminated or silhouetted by lightning – especially if it is on the ground

AFTER A TORNADO STRIKE

- Remain calm and listen for information and instructions from emergency personnel.
- We will assemble at the soccer field while the buildings are assessed for damage.
- We will notify the Grand Lodge and communicate with the parents through them.
- Give first aid when appropriate. Don't try to move the seriously injured unless they are in immediate danger of further injury.
- Stay away from power lines and puddles with wires in them; they may still be carrying electricity.
- Watch your step to avoid broken glass, nails and other sharp objects.
- Stay out of any heavily damaged buildings; they could collapse at any time.
- Do not use matches or lighters, in case of leaking natural gas pipes orfuel tanksnearby.

AFTER TORNADO

After the danger has passed a team appointed by the Executive Director will survey the damage. The Grand Lodge will be contacted to help notify parents and prepare a public statement. If damage is substantial, the Executive will arrange for early dismissal. If damage is not major, the schedule will be adjusted for camp to continue.

LIGHTENING

WEATHER WATCH

Prior to the devastating floods that hit the Hill Country in 2025, HSLC required its directors and senior staff to have emergency apps on their phones to warn them of possible Flash Floods, lightening, tornados and other such weather-related warnings.

In 2027, HSLC has purchased Emergency Radios for each dorm that are tuned into the weather stations. These radios are kept in the Counselor Rooms – **charged**. There is also a radio in the Admin and Clinic.
We also have two Midland WR120 Weather Alert Radios. One in the director's residence and one in the clinic.
These radios are checked daily by the EPC/ECD as part of his morning routine. The senior staff check the radios at night before retiring to bed. Any storm activity at night is to be reported to the EPC/ECD. They will monitor the storm at night.

We also track the weather online at http://www.spc.noaa.gov.

- A "Watch" indicates that conditions are favorable for severe weather to develop.
- A "Warning" means that severe weather has been detected and may be imminent to the locale

The EPC/ECD will notify the staff of predicted weather hazards.

- Flash-to-bang rule: The observer begins counting once sighting a lightning flash. Counting is stopped at the sound of related thunder. The count is then divided by five (5) to determine the proximity in miles of the lightning strike. (5 seconds = 1 mile; 50 seconds = 10 miles, etc.).
- **DON'T FORGET THE 30-30 RULE. AFTER YOU SEE LIGHTNING, START COUNTING TO 30.**

There is no safe place outside when thunderstorms are in the area. If you hear thunder, you are likely within striking distance of the storm.
Just remember;

- If you hear thunder before you reach 30, go indoors (HHAC, Admin Building, Dorm or the Dining Hall).
- Contact the Admin Office immediately. Suspend activities for at least 30 minutes after the last clap of thunder.
- If no shelter is available, crouch low, with as little of your body touching the ground as possible. Lightning causes electric currents along the top of the ground that can be deadly over 100 feet away.
- The Hilltop Camp is built on a rock shelf making it more prone to lightning strikes. In the event of severe weather conditions, take the following precautions to minimize the danger of being struck by lightning.
- Do not take shelter under trees or near metal objects such as fences, metal railings, light or flagpoles, etc.
- If your hair suddenly stands on end, drop to your knees, bend forward and place your hands on your knees. This may not prevent you from being struck but will minimize the flow of current between you and the ground. Get to cover as soon as possible.

LIGHTENING INJURY RESPONSE

- Ensure scene safety (victims do not carry an electrical charge and can be touched).
- Follow local protocols for trauma injury and triage. If appropriate and safe move the victim to a safe place away from the threat of another lightning strike.
- Summon an ambulance as needed according to local protocols. CPR and/or AED may be necessary
- Heart irregularities, shock, or sudden loss of consciousness are possible.
- Keep the conscious victim calm and monitor closely.

ALL CLEAR

The Director will continue to monitor the proximity of thunderstorms and utilize local observations to make an informed decision, determining the appropriate time to recommend reopening outdoor activities.
Management may then allow for normal activities to resume after 30 minutes of no detected lightning strikes within a 10-mile radius of the site.

FIRE

BUILDING FIRES / WILDFIRES

If a fire is sighted, the staff should evacuate the area immediately of all campers and staff. If inside a building, remove all campers from the building. Orderly exiting through doors is expected. If a fire emergency occurs in a cabin and the front door is not accessible, campers and staff are directed to exit through the rear exit or through one of the cabin's window by pushing out the screens. There is an **emergency evacuation card** in each cabin.

- Report the location of the fire immediately and accurately once all persons are safe.
- If the fire is small, and you are safely able to do so, extinguish with a fire extinguisher while your co-counselors are removing the campers from the building. Do not return until the dorm is pronounced safe to enter. Notify the camp director of the incident. An Incident Report Form will be required.
- Contact EMS (9-1-1) ASAP if the fire is too large to extinguish, after all campers have been removed,
- Immediately notify surrounding dorms to evacuate.
- Contact the main office via radio or phone.
    - A radio will be placed in every cabin for emergency communication.
    - At least one senior staff will have their radio **on throughout the night. The EPC/ECD has a radio on 24/7.**
    - The Senior Staff (or counselor once all the campers are safe) will call 911.
    - An all-camp alert will be sounded by the Senior Staff member using the PA system and radios. (See above).

EMERGENCY DRILL

THE Safest Emergency Muster Point will be determined by the EPC/ECD or the Senior Staff working immediately with the incident and the factors involved.

- In the event of an emergency being called, and during the Emergency Drill, all campers and staff are to report to the **SAFEST EMERGENCY MUSTER POINT AVAILABLE** and stand in straight lines.
- At night, newly installed solar lights will highlight the sidewalk and flagpole area, DINING HALL AND along with the lower basketball court. In the event of fire and bad weather event, the dining hall will be used (Emergency Muster Point #3) or the HHAAC building (Whichever is SAFEST.)
- Counselors must be at the front and rear of their cabin lines.
- Each counselor is to do a head count. Repeat at least twice. **Be certain.**
- When asked for a head count by a senior staff member, they should respond:
    i. With the number of camper's present **and** four staff members.
        i. ALL ACCOUNTED FOR or
        ii. If a camper or counselor is not present, you would report:
            - 31 campers, 3 counselors, One counselor Off-Off,
            - One camper unaccounted for and last seen at Archery, or
            - One camper was a no-show or one camper left camp.
- Once the emergency has been raised the EPC/ECD or Co-Director will co-ordinate the emergency procedures.
- Once the EPC/ECD has been notified of an emergency, the emergency services are to be notified. **Staff do not need to wait for the EPC/ECD to notify the emergency services.**
- Once the immediate emergency situation has been "handled", the EPC/ECD will notify the Kerr County Emergency Coordinator to review the next stage of the emergency if appropriate.

- We will conduct an Emergency Drill on the **first day of every session**. These drills are to be taken seriously.
- **We must account for all campers and staff quickly and efficiently.**
- **Drills will rotate between muster locations to familiarize the staff to listen to announcements**
- Once we have a count, the director will give the welcome CAMPER SAFETY orientation (above).

There will be an Emergency Drill on every camper arrival day.

FIRE

WILDFIRE

In the event of a wildland, brush or grass fire, please report it immediately and remove yourself and the campers away from the fire to an upwind location far away from the incident. When notifying the Directors, please give as much information as possible.

The Executive Camp Director and Camp Directors will be responsible for coordinating responses and directing the actions of the staff in conjunction with the appropriate authorities. As in any emergency, keep campers together. Places to go prior to transportation arriving or in the event that transportation will not be possible include the tennis courts, pool area, and parking lot.

SMOKE DETECTION EQUIPMENT

All buildings in camp designed for living are complete with a smoke detectors. It is the counselor's responsibility to make sure the smoke detectors is operating **at the beginning of each session**. If you take out the battery, you must replace the battery immediately… *even at 2:00 a.m.*

It is a crime for anyone to tamper with fire protection equipment. Removal of a battery (without replacing the battery) or removing a smoke detector is punishable by a fine of up to $1,000.00 or six months in jail.

LOCATION OF FIRE EXTINGUISHERS

All buildings have a fire extinguisher. This includes all cabins, the camp office, the clinic, dining hall, maintenance, staff lounge, HHAC Building and the camp vehicles. The Fire Extinguishers are checked annually (in 2027 they were inspected on 3/20/27) by Hill Country Fire Safety (830) 257.6740. Please make sure your campers know they must not play with the extinguishers.

USING A FIRE EXTINGUISHER

P = Pull the pin on the extinguisher.
A = Aim the extinguisher's nozzle at the base of the fire.
S = Squeeze or press the handle.
S = Sweep from side to side at the base of the fire until it goes out.

Watch for re-flash and reactivate the extinguisher if necessary.

EVACUATION PROCEDURES

It is important for all of our staff to understand the seriousness of these policies and procedures. In 1987, the Guadalupe River took the lives of 10 campers from the Pot- Of- Gold Camp. Our neighbor. Again, in 2025 a flash flood took the lives of many people from Kerrville. The river rose 35 feet above its banks and devastated the local communities.

FLOOD WATCH - METEOROLOGICAL CONDITIONS EXIST THAT COULD CREATE FLOODING.

The EPC/ECD will keep in contact with the the local emergency services and the Kerr County Emergency Coordinator for reports on the amount of rainfall on the upper Guadalupe River watershed and river conditions. Staff will be briefed as necessary by the Directors. The most likely effect of a Flooding event will be Hermann Sons Life's Campers and staff to "Shelter in place". Hilltop Camp is approximately **one mile away, and 150+ feet above the riverbank**.

- An evacuation order will most likely be scheduled for **after a major flooding event**, once the local rivers subside and the roads become passable. The Kerr County Emergency Coordinator will be contacted and HSLC will follow the directions of the local authorities.

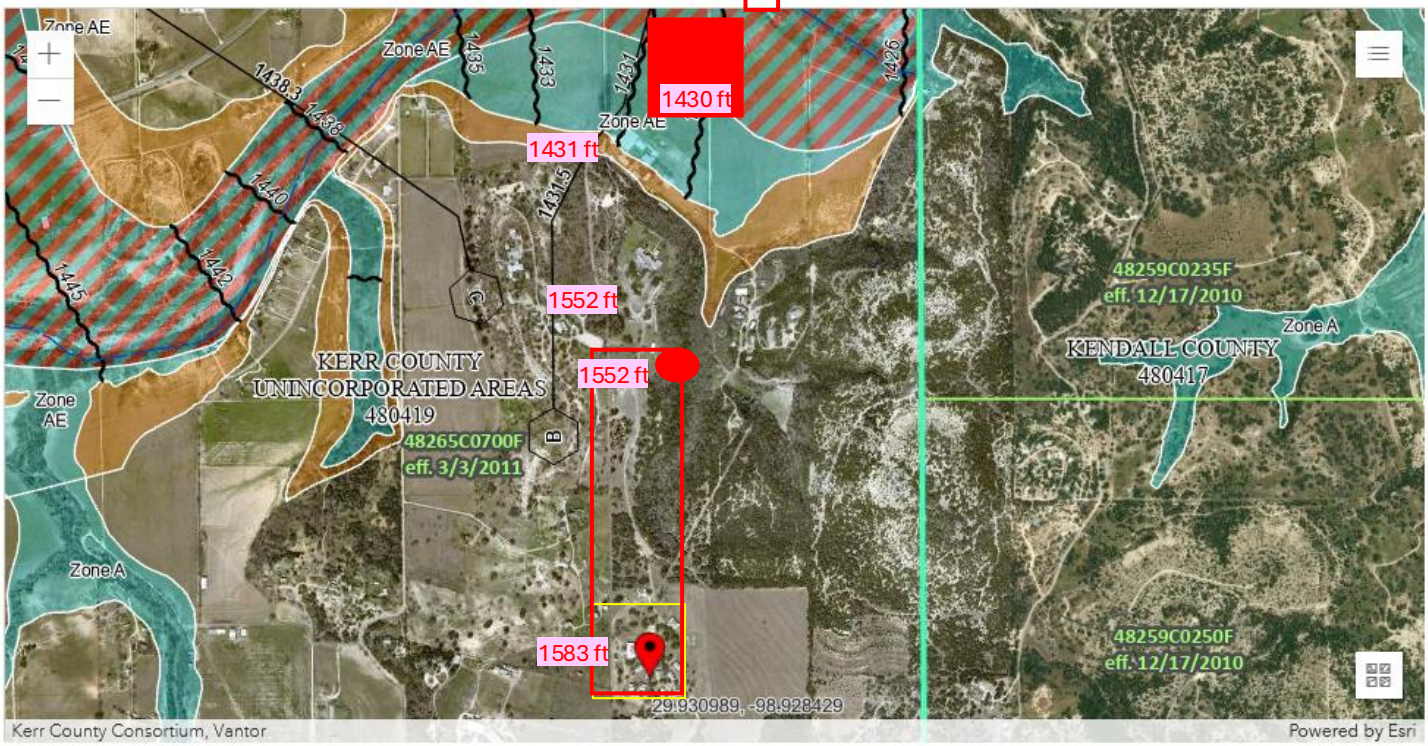
FLASH FLOOD WARNING - FLOOD CONDITIONS ARE IMMINENT.

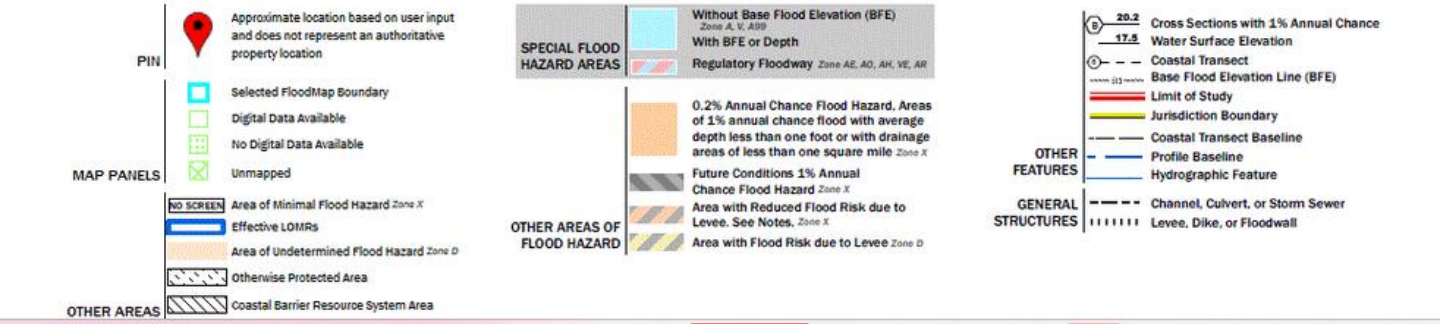
In the event that the National Weather Service issues a Flash Flood Warning for Hermann Sons Life Camp, the following procedures will take place.

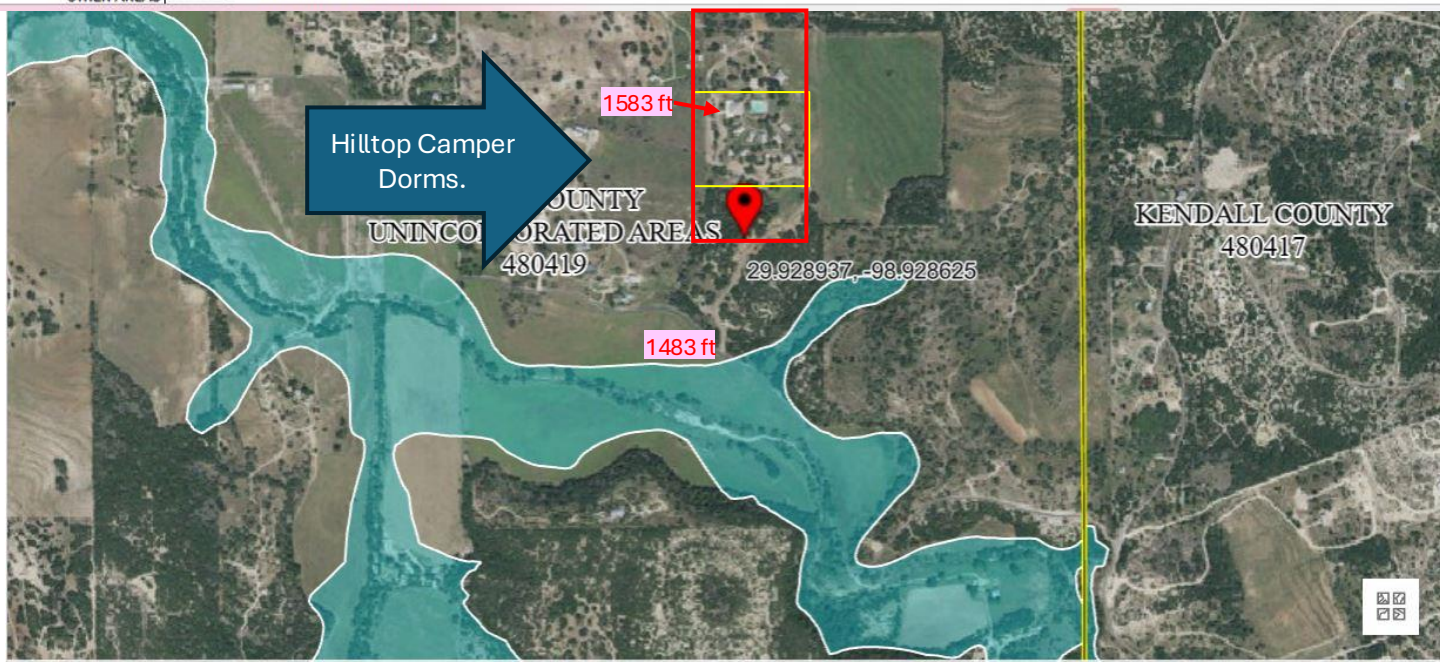
1. All campers and staff will be sent to their dorms. There will be a headcount in the Dorms and the Senior Counselors for each dorm will stay with their cabins. The counselors and senior counselors will stay calm and keep the campers in the dorm safe by playing indoor games and using the dorm boxes provided.
2. If HSL has any campers or staff with disabilities or access and functional needs, they will be assigned a staff buddy by the senior counselor. This staff buddy will ensure that the camper is accounted for, escorted/carried to safety. If special transportation is required, the EPC/ECD will inform the transportation company.
    a) The additional senior staff will assist the EPC/ECD with the coordination of the evacuation.
3. **The EPC/ECD will contact the Kerr County Emergency Management Coordinator and 9-1-1**.
4. Once the order has been given by the Kerr County Emergency Management Coordinator that it is safest for our campers to be evacuated from our specific location the following steps will be taken:
    a) HSL has reached out to Comfort ISD and Boerne ISD in regard to getting an MOU for transporting our campers in an emergency situation.
    b) HSL is part of Kerr county. The Emergency Management Coordinator for Kerr County has an MOU with the Kerrville School district to provide emergency assistance to residents and camps in the event of evacuation orders.
    c) In the event of emergency flooding situations, Hermann Sons Life- Hilltop Camp is available as a staging campus for any surrounding camp or community evacuation needs.
5. The EPC/ECD will notify the parents of the campers through email when we will be evacuating the camp.
6. At the same time, The EPC/ECD will notify the Home Office that we will be bringing our campers to the Home Office for reunification with their parents.
7. The campers will be loaded by Dorm into each bus along with the dorm staff. Role will be taken before leaving the dorm, and twice inside the bus. The Senior Counselor must see and hear each camper before departing.
8. The EPC/ECD will take the previously printed Departure form which contains the list of all campers in camp and those adults that have permission to pick-up their child. In the event that a new adult is authorized to pick up a parent/guardian's child, as is normal procedure, a text or email must be sent to the EPC/ECD to adjust the Departure form.
9. Once arriving at the Home Office, campers will be kept together in the main hall. Using our radios we will set up a system where a HSLC staff member reviews the ID of the parents and radios up to the Hall, where the camper is taken to the car by the dorm counselors. This process is very similar to the process used on departure day. Staff will be used to direct the parents.
10. Camper and staff medication will be taken to the Home Office where it will be dispensed to the camper's parents by the Medical Staff when they show their ID. Luggage pick-up will be scheduled after the fact.
11. Once all campers have been returned to their parents, the EPC/ECD will contact the Kerr County Emergency Management Coordinator to inform them. We will also get a status update on when it is safe to return to the camp.

HERMANN SONS LIFE CAMP

Challenge Course | Main Campus - Hilltop | Space Used by campers | River used







EMERGENCY PROCEDURES & EMERGENCY ACTION PLANs

HERMANN SONS LIFE CAMP

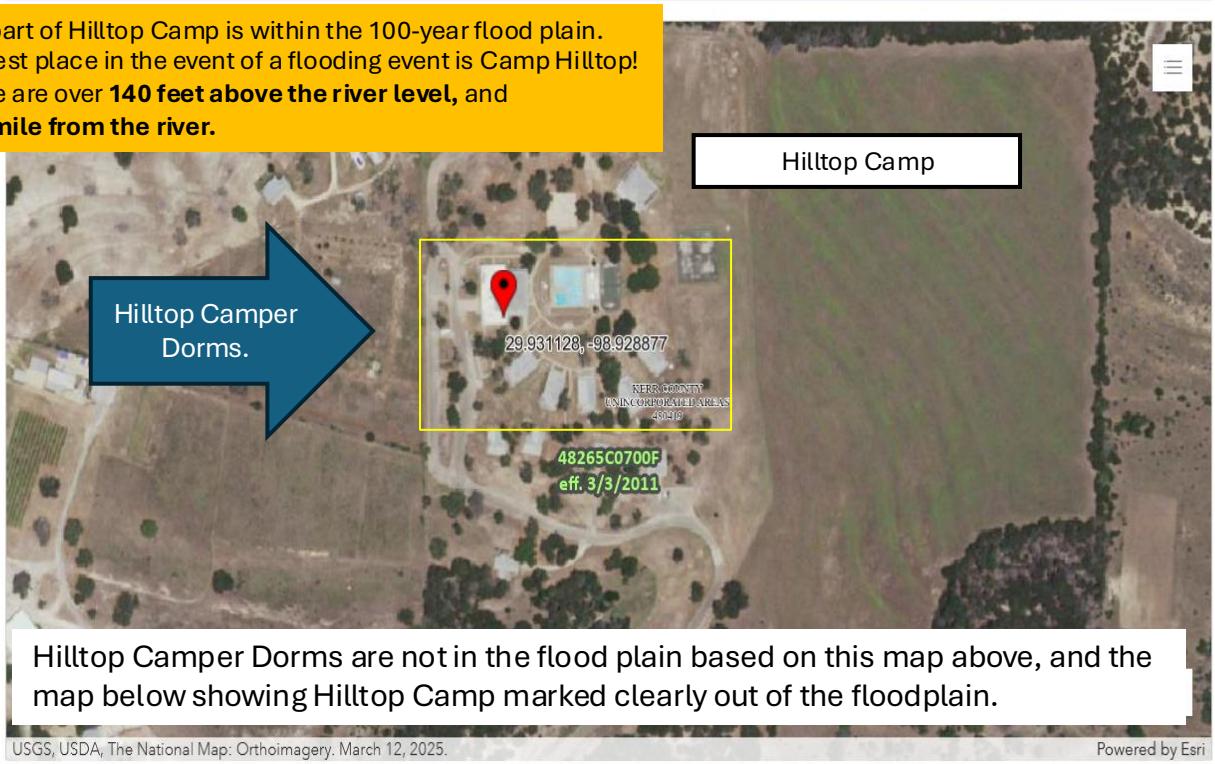
msc.fema.gov/portal/search?AddressQuery=170 Hilltop Camp Road%2C Comfort Tx 78013

ard | Hermann... Google Calendar - Ma... Pixieset Home - YouTube TV Ordering | Gordon Fo... Dashboard | Calendly Wild Packs Applications Other Bo

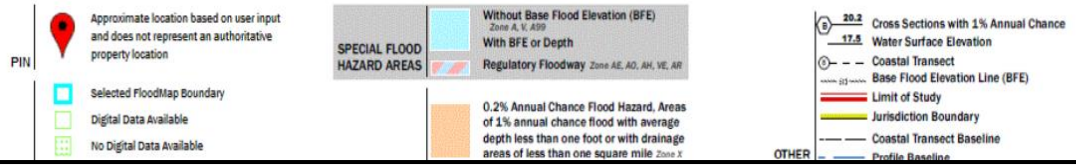
new location in the search field above. It may take a minute or more during peak hours to generate a dynamic FIRMette.

No part of Hilltop Camp is within the 100-year flood plain.
The safest place in the event of a flooding event is Camp Hilltop!

- We are over **140 feet above the river level,** and
- **1 mile from the river.**

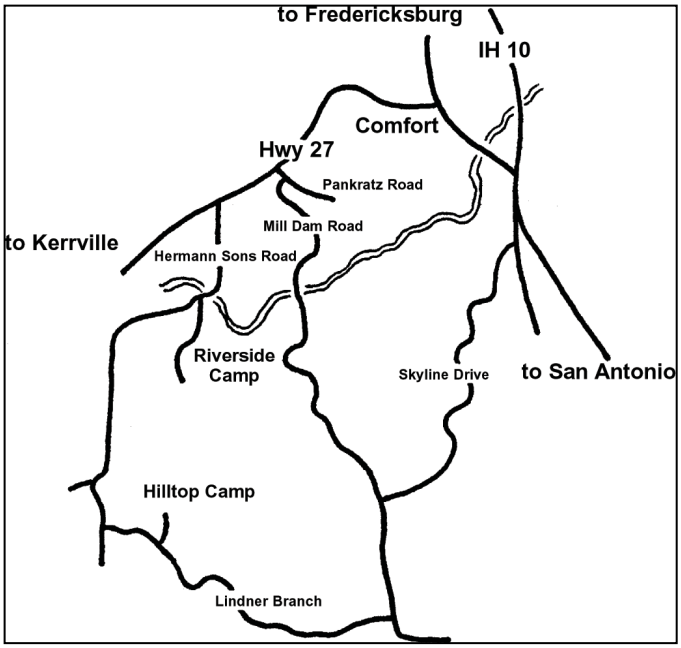


Hilltop Camper Dorms are not in the flood plain based on this map above, and the map below showing Hilltop Camp marked clearly out of the floodplain.



DIRECTIONS TO HILLTOP CAMP

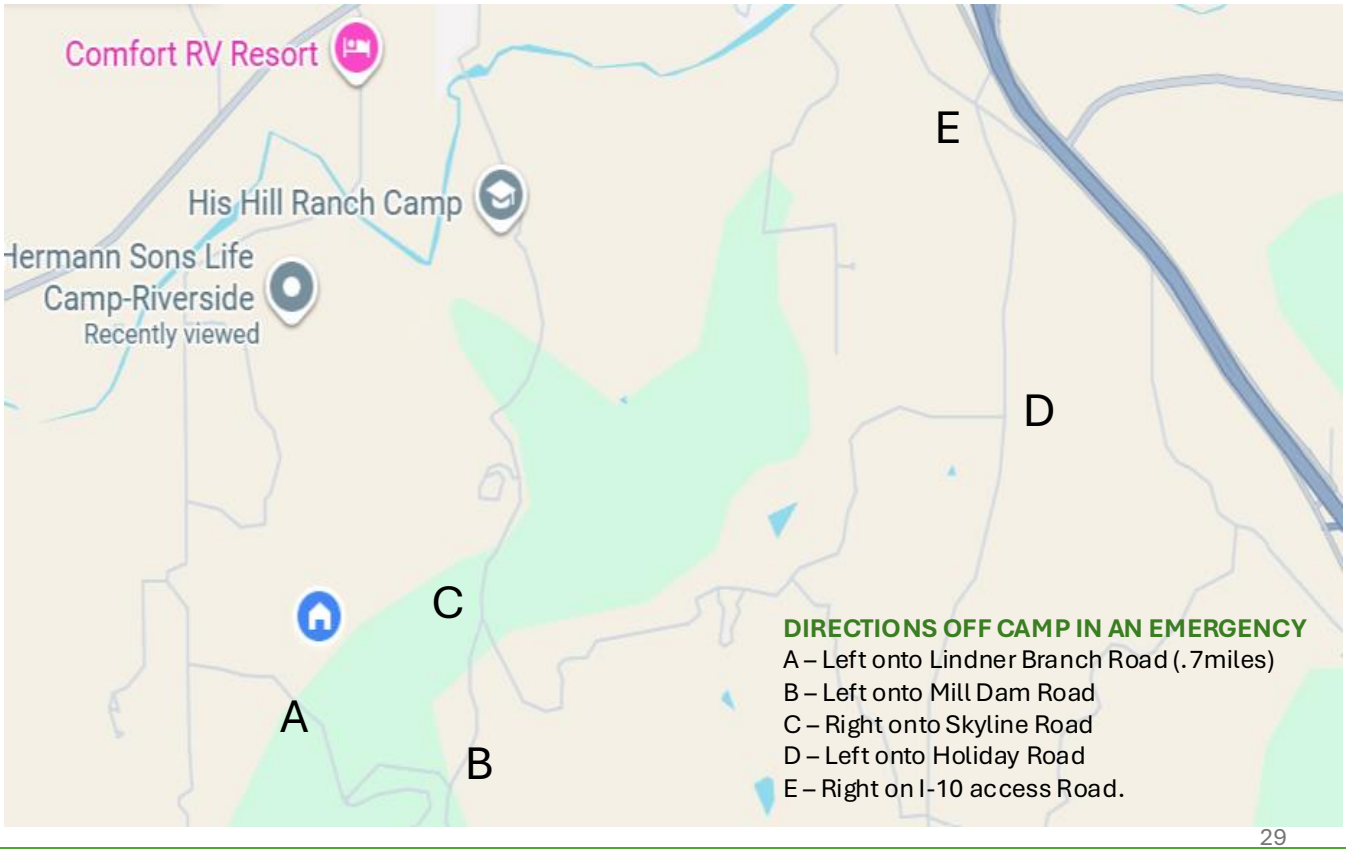
From Comfort take Hwy. 27 west toward Kerrville.
Just outside of Comfort, turn left on Hermann Sons Road.
Continue straight past Altenheim Road (do not turn left by following your GPS). Instead, drive an additional 1.5 miles, turn left on Lindner Branch, drive half a mile, then turn left on Hilltop Camp Road.
Hermann Sons Life Camp is located in Comfort, TX. One hour from San Antonio and located between Fredericksburg, Kerrville and Boerne.



ALTERNATE DIRECTIONS

On Rt. 27 make a left onto Pankratz Road. (Right if you are coming from Kerrville).
Look for a big sign for His Hill.
Make the **immediate right** onto Mill Dam Road.
Follow Mill Dam Road for three (3) miles.
Make the Right onto Lindner Branch Road.
On Lindner Branch Road you will see the sign for Hilltop Camp.
Make the right. (0.7 miles)

ADDRESS: 170 HILLTOP CAMP ROAD, COMFORT, TX 78013



DIRECTIONS OFF CAMP IN AN EMERGENCY
A – Left onto Lindner Branch Road (.7miles)
B – Left onto Mill Dam Road
C – Right onto Skyline Road
D – Left onto Holiday Road
E – Right on I-10 access Road.

WILD ANIMALS

It is always a good practice to view wildlife from a distance and do not approach them. If an animal harms anyone notify the medical staff immediately.

Any situations which involve potentially dangerous wildlife being too close to us, do not touch or disturb the wildlife. Inform the Camp Director of the location of the potentially dangerous animal (Mtn Lion, bobcat, coyote, snake, etc.) If an animal threatens you, please inform the Camp Director

SPIDERS

All spiders carry venom. Leave them alone and they will leave you alone. Brown Recluse spiders and black widow spiders are occasionally seen on our camp site. If a camper or staff member has been bitten, they should be taken to the Clinic immediately. The Health Care Staff will begin emergency procedures for bites. Neither spider bite is fatal; however, nausea and discomfort may accompany the bite.

SNAKES

Snakes are as scared of you as you are of them. Do not reach under logs or other cool dark areas. If you see a snake in the distance, calmly walk away.

If a camper or counselor is bitten by a snake, call for Medical Staff to help.

If someone is knowledgeable about snakes, ask them to identify the type of snake, but no one should approach, attempt to catch, or contain the snake.

BEE/WASP/HORNET/YELLOW JACKET STINGS

If someone is stung by a bee, apply sting reliever to the area that was stung and take them to the medical staff for further evaluation. If you know the person stung is allergic to bees take them to the Clinic IMMEDIATELY and notify the Health Care Staff via walkie-talkie of a possible allergic reaction (so the medical staff know what to expect).

If you see a wasps nest, please let maintenance know immediately!

SCORPIONS

Brown Bark Scorpions are found in Texas. Before the summer, all of our buildings are treated to hopefully prevent the appearance of any and all insects in the dorms and buildings. However, be aware that they are here and that their stings react somewhat like a bee or wasp sting.

All reactions to animal or insect bites are highly individualized and should be closely watched. Persons who have been stung by a scorpion should be taken to the Clinic immediately.

BATS AND CAMPING

Texas has many bat species and bats can be beneficial to the environment. However, a small number of bats in Texas may also carry rabies virus. Rabies is a deadly disease transmitted through the bite or scratch of an infected animal. Bats have small teeth and bite wounds are not always visible. The best prevention is reducing exposure to bats.

Bat-Proofing the Camp Environment

Bats can enter structures through holes as small as a dime. You can prevent bats from entering cabins or campsites by using the following precautions:

- Seal any visible openings with caulk, wool, or cloth
- Screen all vents, windows, and ventilation areas
- Do not leave unscreened doors and windows open
- Use mosquito netting over sleeping areas

Exposures to Bats

DSHS and the CDC consider the following bat scenarios as possible rabies exposures:

- A person is bitten or scratched by a bat
- A person awakens to find a bat in the room
- An unattended child touches a live or dead bat
- A bat flies into a person and touches bare skin
- A person steps on a bat with bare feet
- A bat is found near an infant, toddler, or a person who is sensory or mentally challenged
- A person puts their hand in firewood, brush, a crevice, or a dark space (i.e. a closet), experiences pain, then sees a bat.

Managing an Exposure

1. **Wash the affected area immediately**
2. **Notify proper authority to capture bat for rabies testing**
3. **Consult a healthcare provider for rabies vaccination**

For More Information:

DSHS Region 8—Zoonosis Control | 210-949-2000 or 210-949-2121

TRAINING FOR ACCIDENTS and EMERGENCIES

The potential for accidents or emergencies at camp are endless, i.e., sports injury, vehicular related injury negligence, fights, life threatening allergies, missing camper, fire, natural disasters, significant behavioral problems, etc.

During staff development the activity specialist instructors will be asked to identify safety concerns (hazards) related to the specific activity's operation and activity site.

MINOR INJURIES

Minor injuries which can be handled by qualified staff instructors who have access to the first aid kit located at the activity site should be attended to by the staff member before having the camper report to the clinic.

- **Note: The clinic must be notified of all first aid treatment provided.**

MAJOR (SEVERE) ILLNESS AND INJURIES

If a significant injury, illness, **death,** accident or emergency occurs in the camp, the following procedures apply:

- Apply first aid as deemed appropriate to your certification and get immediate emergency medical assistance.
- The on-site Medical staff will take control of the situation.
- The EPC/ECD will Dial 911.
- The EPC/ECD will contact the Office of the Kerr County Emergency Management Coordinator (830) 315-2430.
- At this time, the EPC/ECD will contact the parents of the camper(s).

MEDICAL EMERGENCY ON CAMPGROUNDS

INJURED PERSON CAN BE MOVED

1. If more than 1 staff member is present at the accident/medical emergency, one staff member accompanies the injured person to the clinic and the other staff member remains with the group.
2. If only one staff member is available, it may be necessary for the whole group to accompany the injured person to the clinic unless assistance is found or there is access to one of the camp's 2-way radios.

INJURED CAN'T BE MOVED

In the event of a medical emergency or an accident on campgrounds, the following procedures are camp policy:

1. If more than one staff member is present at the accident/medical emergency, then one of the available staff members is to immediately report to the clinic. In the alternative, get to the closest camp two-way radio and notify the medical personnel on duty of the situation.
2. If only one staff member is present at the accident and no other adult help is available, the staff member should send two of the most responsible campers to the clinic or to the closest two-way radio location - which ever is faster.

If possible, it is recommended that a camper not be sent on such an emergency mission. If another staff member can be obtained in any way, then that staff member should be sent to the clinic or to the closest camp walkie with the request for medical attention. A member of the medical staff is on-duty 24 hours a day.

One staff member should always remain at the accident site to maintain calm, to assist the injured person, and supervise the remaining campers.

Once the medical staff is notified, a member of the medical staff or the original messenger (if directed by the medical staff) is to radio and report the incident to the Camp Director or, in their absence, the Asst. Director.

The office staff member (or other senior staff person) will copy the emergency message and will stand by the telephone awaiting instructions from the Camp Director (or in his absence the Assistant Camp Director or the Health Supervisor) regarding ambulance or hospital notification.

Camp Medical Staff will report the status of the accident to the Camp Director (or in his absence the Assistant Camp Director) and, if hospital care is deemed necessary, a telephone call will be made by the office staff or clinic staff to the hospital. The Health Supervisor in consultation with the Camp Director, will determine if the camp emergency vehicle or 911 Ambulance Service should be utilized. The office staff or medical staff (or medical staff member) will call 911 if deemed advisable. (AD.21.1)

If a camp emergency vehicle is used, the office staff member (or medical staff member) is to obtain a qualified driver. Use the PA system or the camp's 2-way radio transmitter, as necessary.

As soon as possible, the Camp Director (or in their absence the Assistant Camp Director) should be notified of all the facts surrounding the accident by the medical staff member on duty. The medical staff member on duty should have the following information available:

- name of camper;
- age and dorm assigned;
- the camper's medical form (the campers medical form must be taken with the camper together with a Request for Treatment Form if a trip to the hospital is made);
- a factual account of how the accident occurred;
- list of eyewitnesses.

Depending upon the nature of the accident or the state of emergency, the Camp Director (or in his absence the Assistant Camp Director) will consult with the Camp Medical Staff to determine appropriate additional action.

The Camp Director will determine if law enforcement or other state or federal officials should be contacted.

Upon the establishment of facts and information which would be of value to the parent, the Camp Director or his designee (the health supervisor) will contact the parents of the individual. If hospital care is deemed necessary, parents of the individual should be contacted as soon as the camper leaves for the hospital. (AD.21.2)

All inquiries from the media must be referred to Steve Townley or, in his absence, Robin Czarnek. No other staff member is authorized to discuss the emergency with outside personnel. Personal information regarding the injured is considered confidential and is never to be released to the public/media. (AD.21.3)

EMERGENCY HOSPITALTRANSPORTATION

Hermann Sons Life Camp has a vehicle on site designated as our "Emergency Camp Vehicle". Before the camp season, Hermann Sons Life Camp informed the local EMS providers of our location and the number of staff/campers we have on-site. The local EMS provider is less than 3 miles from Hermann Sons Life Camp before the town of Comfort. Ambulances will typically come from Kerrville.

Ensure that the camper has seen the Medical Staff for immediate medical treatment. Should the Medical Staff feel that hospital attention is required, the Director is notified of the situation and will arrange transportation of the camper.

A member of our medical staff may be asked to drive a car to the hospital. A copy of the camper's medical form will be provided to the appropriate medical staff to bring to the hospital

The Medical Staff will decide if 911 needs to be called depending on the type of injury. If a Medical Staff is not immediately available and you need to call 911, it is important that you report: type of injury, condition of the victim, age of the victim and specific location of the injured person within Hermann Sons Life Camp. Administrative staff will make further arrangements, as necessary.

PERSONAL INJURY

Staff should refer to Work Related Injury Protocol, which is available in the clinic if they are injured while in performance of their assigned work duties.

We have a well-stocked Clinic and a Medical staff member to care for injuries and administer any needed medications. Many activity areas have a first aid kit. If you care for a minor injury such as small cuts and bruises to a camper or adult should be reported to Medical staff to be recorded in the logbook.

Serious injuries such as cuts that require stitches, or noticeable bumps will be taken care of immediately by the closest Hermann Sons Life Camp staff member and the Medical Staff will be radioed out to the scene to advise if the injured person should be taken to the hospital.

- The Medical Staff will decide if 911 needs to be called depending on the type of injury. If the Medical Staff is not immediately available and you need to call 911, it is important that you report: type of injury, condition of the victim, age of the victim, and specific location of the injured person within Hermann Sons Life Camp. Administrative staff will make further arrangements, as necessary.
- The Medical Staff should be notified immediately in the event of an Allergic Reaction. If the allergic reaction is severe, 911 will be called immediately.
- Life-threatening injuries such as unconsciousness require an immediate call to 911. Be prepared to arrangements, type of injury, condition of the victim, age of the victim, and specific location of the injured within Hermann Sons Life Camp. Administrative staff will make further arrangements, as necessary.

ACCIDENT REPORTS (AD.14.1)

If an accident occurs in your presence, it is **your responsibility** to complete an **Accident Report**. This report describes the accident, time of occurrence, location, parties involved, witnesses, and other relevant information about the occurrence.

The Accident Report is a confidential report, so copies of the form (and the information contained therein) are never to be released to other staff members, campers, or the public. If questions arise, contact the Camp Director. **Blank forms are located in the camp office and clinic.**

INCIDENT REPORTS

If something unusual or out of the ordinary happens while on-duty, which has relevance to safety or operational concerns, report the incident to your Activity Supervisor. If deemed serious, prepare an Incident Report Form.

ACCIDENT / INCIDENT REPORT FORMS

So as to identify patterns of events or actions that may require corrective measures, we require that all staff members document all incidents or accidents that occur in their presence.

Incidents are events of safety or operational concerns that occur that may not result in injury. Examples may include fires, natural disasters, danger from intruders or trespassers, crises arising out of camper or staff behavior (e.g. fighting, serious emotional outbursts threatening others) or other situations posing serious threat to the safety of others. Incidents are also defined as situations where a potential serious injury from a “near miss” could have occurred but didn't or as emergencies which did not result in injuries requiring an accident report but which are potentially harmful to campers or staff, i.e., use of drugs or alcohol, lost campers, or near drowning.

Additional incidents worthy of reporting also include: (a) a camper creating a disturbance that the staff member cannot handle, (b) the breaking/damaging of equipment, (c) theft, (d) facility area that is not in proper working order, etc. **Blank Accident / Incident Reports are stored in the camp offices and the clinics. Completed forms are delivered to the Camp Director's mailbox.**

An accident (or incident) report is to be completed by the Medical Staff with statements taken by witnesses as well as the victim. Said report should be filed with the Executive Camp Director within 24 hours for his review.

Appropriate Incident Reports are to be filed by those staff members if warranted. See the Camp Emergency Procedures (emergency communication plan) outlined in the counselor staff manual.

The Accident/Incident Report is a confidential report, so copies of the form (and the information contained therein) are never to be released to other staff members, campers, or the public. If questions arise, contact the Camp Director. It is important to write legibly. This is a legal document and must be completed by the staff member (or camper) that **witnessed the event.**

In the event of a “fight” or disturbance, please have the campers complete the PERSPECTIVE Form. Having the campers complete the form will allow them time to decompress and calm down.

INCIDENT / ACCIDENT REPORT

☐ Staff ☐ Volunteer

☐ Camper ☐ Visitor ☐ Rental Group

☐ Incident ☐ Accident ☐ Behavioral

What week?

PC / SD	Week #1
Week #2	Week #3
10-DAY	Week #4
Week #5	SPIST
MC	Group

☐ Hilltop

NAME OF PERSON INVOLVED _____ DATE _____ TIME _____

Person's Involved in the Incident/Accident. _____

Describe the Incident/Accident in Detail (What occurred?, where? Sequence of events? Equipment used? Etc.)

Were any Camp rules broken? (Circle) YES NO If yes, explain: _____

Were there any injuries? (Circle) YES NO If yes, explain: _____

What Medical treatment was obtained? Please describe steps taken.

☐ First Aid
☐ Clinic Visit
☐ Outside Service
☐ Worker's Compensation
☐ None

Were parent's notified? (Circle) YES NO If yes, explain call and outcome: _____

Signatures

Person Completing the form _____ Date _____

Head Nurse (If applicable) _____ Date _____

Senior Staff Member _____ Date _____

Camp Director _____ Date _____

Executive Director _____ Date _____

It is important to understand that there is nothing that can be done to completely eliminate the risk of exposure to both campers and staff to COMMUNICABLE diseases. (Covid-19 cold/flu viruses, pink- eye, etc) or other contagious diseases.

The purpose of this document is to layout strategies and protocols that minimize the risk of communicable disease taking hold at camp and to provide a clear pathway to the leadership of Hermann Sons Life Camp should an outbreak occur.

Universal Precautions

In order to avoid discrimination, treat *all* bodily fluids and fecal matter as though they may be infected and observe the following precautions:

1. **Use Barrier Protection:** Cover up any open wounds or sores before proceeding.
2. **Wear Gloves** when handling bodily fluids or contaminated materials and other waste.
3. **Wear a Face Mask/Gown**
4. **Use Caution** when handling sharp objects, needles, and waste.
5. **Discard Contaminated Materials.** Follow biohazard procedures for disposal.
6. **Clean Area** thoroughly with disinfectant
7. **Wash Hands Thoroughly** with soap and water for at least 20 seconds.
8. **Wash Clothing** in hot water.

www.FreePrintableMedicalForms.com

PREVENTION: A HEALTHY CAMP BEGINS AT HOME

Making It Less Likely that Communicable Disease Occurs at Camp

The strategies below have the potential to minimize the emergence of communicable diseases at camp. There is no single strategy will be 100% effective; rather, campers & staff have stronger protection when more prevention strategies are in place. The key message: implement as many as possible.

- We ask of the parents and staff that they arrive in camp well rested, well nourished and well hydrated. The goal is for individuals to arrive as resilient as possible.
- We inform parents that the camp reserves the right not to admit people who pose a communicable disease risk to others.
- We ask that all people not come to camp until they are healthy. Parents are instructed to contact the camp should their child become ill within 24 hours of their arrival in camp.
    - At Hermann Sons Life, as a member benefit we will discuss delayed starts and possibly moving the session without charge to help the camp stay healthy.

Note: the Healthy Camp research (2010) determined that between 5–7% of illness at camp started before the person arrived.

- We Pre-screen health history forms before Opening Day to identify those who may be more at risk for communicable illness. Once we pre-screen the health histories, we discuss with the parents and appropriate healthcare professionals a plan to minimize the risk for the campers or staff member and if it is appropriate or suitable for them to attend Hermann Sons Life Camp based on our ability to accommodate the necessary risks involved.

Note: the Healthy Camp research (2010) noted that individuals with chronic illness diagnoses have a greater potential to get ill while at camp.

- Conduct Opening Day screening of both campers and staff that includes assessment for communicable diseases.
- Staff are trained during staff development and documented in illness-reducing strategies. The Staff Development session is entitled **Staff Role in Healthcare**.
- At Hermann Sons Life Camp we implement practices that minimize potential for communicable disease once camp is in session:
    - Appropriate **hand-washing** and/or **hand sanitizing**.
    - Appropriate **coughing etiquette**.
    - Keep peoples' **hands away from their faces**.
    - **Sharing is not caring**. It is a camp rule that personal supplies – hairbrushes, pillows, caps, contact lens solutions, make-up – belong to the owner and should not be shared with others.
    - **Sharing is not caring** especially when it involves sharing a drinking cup.
    - Campers will be directed to sleep alternately head to toe as well as top and bottom bunks to maximize the distance between sleeping heads.
    - We always maintain a distance of at least 30" between beds.
    - Utilize **universal precautions** – for and by everyone.
    - Medical staff are directed to isolate people with questionable symptoms until communicable illness can be ruled out.
    - Staff are directed to send campers complaining of gastro-intestinal upset to the Health Center for assessment. ***Don't wait for kids to throw up!***
    - Food service staff know and implement safe food handling practices.
    - When food service personnel have questionable symptoms, especially those associated with the gastro-intestinal track, they are removed from food preparation until appropriately improved.
    - Maintain access to reliable sources of information about communicable illness.
    - Annually, the executive camp director reviews the CDC website and ACA website updates the Health Care Manual.
    - Reference the CDC website (www.CDC.gov) for information about outbreaks (consider where your campers and staff come from) and for information specific to a given illness.
    - Continuing membership in ACA which provide supports to camp professionals and pro-actively survey for emerging threats.

WATCH FOR SYMPTOMS

We will ask that parents and staff look out for possible symptoms in their child such as: Cough, Shortness of breath or difficulty breathing, Fever, Vomiting, Diarrea, Chills, Muscle pain, Sore throat and any new loss of taste or smell

In our email we will also attach a copy of the Medical Intake Form. This is where the parents will indicate what medications the camper will be taking while they are in camp. This Form will reduce the time spend online (and on camp) at the clinic.

INTAKE SCREENING AND ASSESSMENT

Families will drive campers to camp and be available to pick them up within 24-hour notification.

To reduce the number of families on-site at any given time, we will advise parents that there will be a **staggered arrival time for each dorm.** We need their assistance to run a smooth and safe summer camp program.

An alternate arrival time will be scheduled to safely introduce the camper into camp once all the dorms are in programming. A similar process will take place to admit any late arriving campers.

Upon arrival, there will be a drive through check-in area. A staff member will check that all the paperwork including the health history form is on file.

Having verified the information, the car will drive forward to a second station. The parent may need to drop off the camper's medication with the camp's medical staff.

The next station involves dropping the camper and luggage off, before the last station where the parents may drop off camper packages. at the last station.

CAMPER HEALTH SCREENING (HW 6.1)

- During Staff Development, the Medical Staff will review with the staff and provide specific written instructions on how to screen campers on arrival day (see Health Screening Form) which includes a lice check on all campers.
- This check must be performed by an adult (18+ years of age) and results documented on the screening form.
- At dinner, the counseling staff will give the clinic staff the health screening form. After dinner, the clinic staff will review the screening form for any discrepancies with the Health History Form and the Camper Medication Forms.

HSLC HEALTH SCREENING 2025

HILLTOP	Static, Cuz'Uns, PanFried, Rango, UVA			Session #5									Static
	ARMADILLO			Sunday - IN THE DORM					Wednesday - IN THE DORM				
	Camper's Name		Bunk	Does the camper seem to be in good health?	Have you been sick in the last 2 weeks?	Lice Check	Do you take any medication at the clinic?	Camper informed where the clinic is! Tour Given	How is camp going for you?	Have you visited the clinic this week?	Have you had a BM at camp?	Anything else you want me to know?
1	Birkholz	Jake	1T									
2	Boyd	Cole	2T									
3	Buckert	Waylon	20B									
4	Cleveland	David	3B									
5	Day	Keegan	12B									
6	Dikes	Jayton	4T									
7	Dikes	Robert	4B									
8	Dodson	William	14B									
9	Ezell	Wyatt	22T									
10	Garay-McFadin	Adrian	20T									

ARMADILLO | BOBCAT | COYOTE | ROADRUNNER | WHITE TAIL | Wheel | AXIS

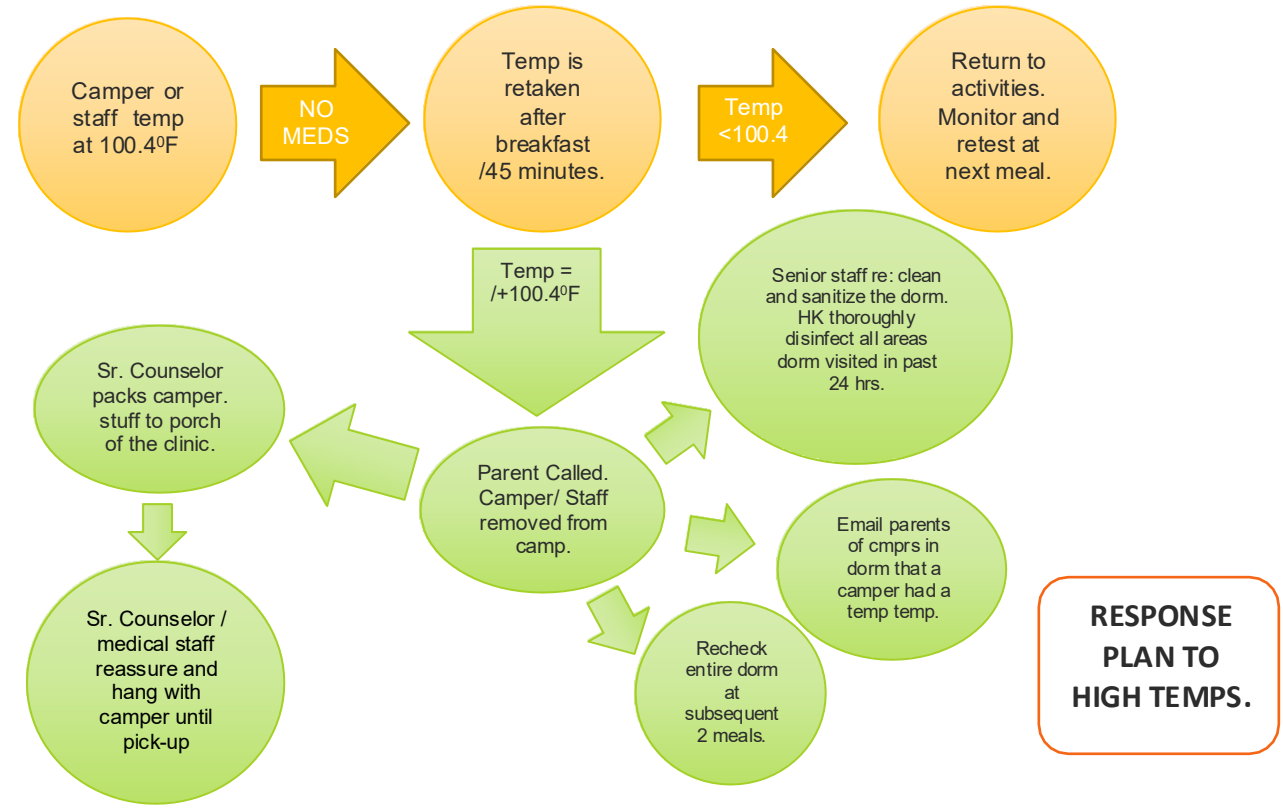
IDENTIFYING THE COMMUNICABLE DISEASE IN CAMP

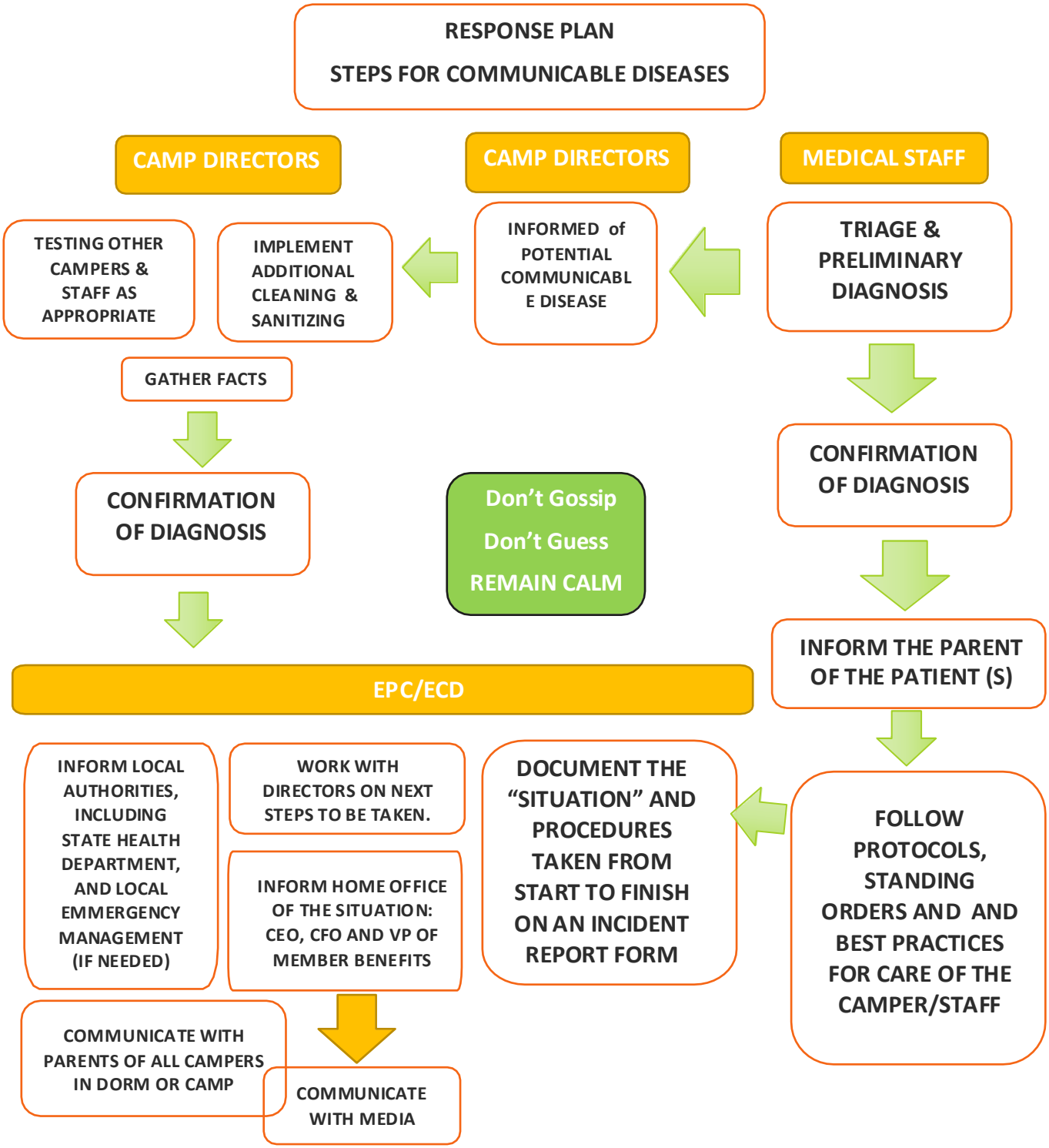
The most important people in identifying a potential communicable disease in camp is the dorm counselor. It is not solely the role of the camp's medical staff. Active Supervision by the dorm counselors will spot if a camper "is not themselves".

Active Supervision by the dorm counselor will hear a lingering cough, see a camper's eyes watering or more frequent trips to the restroom. The dorm counselor in these situations is required to direct the camper to the medical staff for triage and diagnosis.

RESPONSE IN CAMP TO A POSITIVE TEMPERATURE

This summer, we will be quicker to respond to a temperature, persistent cough and other such symptoms.




RESPONSE PLAN
STEPS FOR COMMUNICABLE DISEASES
MEDICAL STAFF
TRIAGE & PRELIMINARY DIAGNOSIS
CONFIRMATION OF DIAGNOSIS
INFORM THE PARENT OF THE PATIENT (S)
FOLLOW PROTOCOLS, STANDING ORDERS AND AND BEST PRACTICES FOR CARE OF THE CAMPER/STAFF
DOCUMENT THE "SITUATION" AND PROCEDURES TAKEN FROM START TO FINISH ON AN INCIDENT REPORT FORM
CAMP DIRECTORS
INFORMED of POTENTIAL COMMUNICABLE DISEASE
CAMP DIRECTORS
IMPLEMENT ADDITIONAL CLEANING & SANITIZING
TESTING OTHER CAMPERS & STAFF AS APPROPRIATE
GATHER FACTS
CONFIRMATION OF DIAGNOSIS
Don't Gossip
Don't Guess
REMAIN CALM
EPC/ECD
WORK WITH DIRECTORS ON NEXT STEPS TO BE TAKEN.
INFORM LOCAL AUTHORITIES, INCLUDING STATE HEALTH DEPARTMENT, AND LOCAL EMMERGENCY MANAGEMENT (IF NEEDED)
INFORM HOME OFFICE OF THE SITUATION: CEO, CFO AND VP OF MEMBER BENEFITS
COMMUNICATE WITH PARENTS OF ALL CAMPERS IN DORM OR CAMP
COMMUNICATE WITH MEDIA

EXPOSURE CONTROL PLAN

While most of our staff will not be exposed to blood and bodily fluids, all staff will be trained and certified in the ARC Bloodborne Pathogens training and instructed in the use of the biohazard kits. The proper protocols must be followed in detail.

Biohazard Kits are available in the Clinic:

- Oops Throw-Up kit
- Rubber gloves
- Masks
- Mini broom – dustpan
- Pail
- Spray bottle: 1 part bleach to 10 parts water

This information is provided to camp employees in partial compliance with OSHA's Bloodborne Pathogen Standard. It is the intent of the camp to educate people about issues related to exposure to body fluids, to use management techniques and equipment to minimize exposure risks for employees, and to monitor individuals' use of these techniques.

The camp program recognizes universal precautions as an effective control measure. This handout describes the application and monitoring of potential sources of risk in the camp program, the steps taken by camp to protect employees, and the actions taken by camp if blood or body fluid exposure occurs.

The camp's Medical Staff can reasonably expect to come in contact with blood and other body fluids. The potential for exposure to transmitted diseases is greatest for these staff members.

Members of the camp health-care team are to be orientated to the potential for exposure by camp's health-care administrator.

- A record of who received the education and its content is kept for three years by the administrator. The orientation includes:
  - Identification of risk areas: contact with bloodborne pathogens (e.g., hepatitis, HIV), contact with airborne pathogens (e.g., common cold, TB), contact with surface-borne pathogens (e.g., staph infections).
  - Education about the nature of the risk: method of transmission, virulence of pathogens, resistance factors related to potential host, symptoms, and information sources which provide clues to potential risk areas.
  - Work practices designed to minimize exposure:
    - Availability of personal protective equipment (PPE) – gloves, CPR mask, antimicrobial soap, (eye, nose and mouth) shield, body fluid spill clean-up kits.
    - Double-bagging via red bag and disposal procedure for hazardous waste.
    - Screening individuals who come to the program.
    - Requiring participants to provide health information.
    - Use of universal precautions by staff.
    - Education for people working in risk areas: health-care team members, lifeguards, housekeeping, kitchen staff.
    - Hepatitis B vaccination for nurses: camp pays for vaccinations done by the local provider during the nurse's contracted time. Camp encourages nonvaccinated nurses to get vaccinated.
  - CPR/First Aid and Bloodborne Pathogen training is given to all staff.
  - Sharps container provided which has biohazard label affixed.
  - Resource personnel to answer questions: camp health-care administrator, camp supervising physician, and State Dept. of Health epidemiologist.
- Behavior expected from employees to minimize risk:
  - Use of PPE:
  - Gloves are used when in contact with body fluids or providing skin treatment (e.g., applying medication to poison ivy, washing a rash).
  - CPR mask is used to provide CPR/artificial respiration.
  - Minimum 15-second hand washing with antimicrobial soap after: removing gloves, contact with potential risk, unprotected contact with any body fluid.
  - Minimum 60-second hand washing with antimicrobial soap after blood splash.
  - Use of body fluid spill clean-up kit.
  - Vaccination to protect from hepatitis B.
  - Sharps disposed of properly: no recapping of needles, all sharps (lancets, needles) placed in sharps container immediately after use, full sharps container given to Administrator for disposal through local hospital.
  - Participation in education about disease control.
  - Immediate report of suspected exposure (e.g., needle stick) to supervisor and Administrator.
  - Performing job tasks in a manner which minimizes/eliminates exposure potential.

Evaluation of compliance with the camp exposure control plan as part of the camp personnel-management system

- .

CAMP COUNSELING STAFF

While the potential for exposure to bloodborne pathogens is minimal for general counseling staff, it does exist. The camp health-care plan vests authority in general staff to respond to emergencies at the level of their training while initiating the camp emergency response system. Since camp emergency response occurs within minutes, the potential for exposure is limited and most likely confined to initiating CPR/artificial respiration and slowing severe bleeding.

In keeping with accepted practices, the camp health-care administrator educates camp staff during staff development about appropriate response practices:

- Staff are instructed to use a CPR mask for CPR and artificial respiration; masks are kept at the waterfront and clinic.
- Staff are instructed to use gloves when potential for contact with blood or blood-tinged fluids exist. Gloves are in all first-aid kits. Staff members who want to carry a pair on their person may obtain them from the Clinic.
- Staff are instructed to respond in emergency situations to the level of their training per State Good Samaritan regulations.
- Staff are instructed to initiate the camp emergency response system immediately.
- Staff participate in a discussion of "emergency" to establish defining attributes of their response.
- Staff are educated to approach care of minor injuries from a coaching perspective and specifically directed to refer injured people to the camp health-care team if self-care is inappropriate or impossible.

POST-EXPOSURE PLAN FOR CAMP

Camp employees who have a blood exposure incident are eligible for follow-up treatment. Follow-up is initiated by the employee who must immediately (within fifteen minutes) notify the camp nurse when a blood exposure incident occurs. The following plan is initiated. Records of the incident are maintained for the duration of employment plus thirty (30) years by the Camp Director and according to OSHA requirements (i.e., separate from personnel records). Camp administration debriefs each incident in an effort to identify ways to improve the camp's exposure risk.

TIME LINE	EMPLOYEE'S ACTIONS	CAMP NURSE'S ACTIONS	CAMP DIRECTOR'S ACTIONS
Within 24 hours	Exposure incident occurs. Report incident to camp nurse within 15 minutes of happening. Begin prophylactic treatment. Complete Workers' comp form & incident report with camp director.	Notify camp director. Begin 15- second scrub of area with bacteriostatic soap, followed by application of disinfectant. Contact supervising MD and refer client for assessment. Begin psychosocial support process.	Determine source of contamination; initiate request to have source screened for infectious diseases. Notify our insurance company. Create incident report file with supporting documentation. Contact mental health professional for employee. Complete Workers' Comp & incident report form with employee.
Within next 48 hours	Continue medical follow-up, per MD orders. Begin counseling support.	Monitor client adjustment to situation; answer questions, as needed. Provide needed care.	Follow testing of source individual as warranted. Consult with mental health professional to arrange post-camp therapy, per need.
Beyond first three days	Continue post-exposure prophylaxis, as directed by MD. Participate in review of incident.	Participate in review of incident.	Maintain contact with employee to follow incident. Lead review of incident. Review incident; adapt camp practices as needed to manage risk, and to minimize chance for repeat of situation. Maintain records for duration of employment, plus 30 years.

HERMANN SONS LIFE CAMP's GENERAL COMMUNICATION POLICY

- Parents must be informed whenever their child is **seen by a doctor** for illness or injury.
- OUTSIDE MEDICAL FACILITY. This call should be made by the camp nurse referring the camper. **Why are we sending the child to the doctor?** Parents need to be kept in the loop when using outside medical services.
- Parents must be informed **before** their child is seen in the emergency room for diagnosis or treatment of an injury or illness. In the event of an emergency situation, once the camper has been stabilized and is on their way to the hospital (ask the EMT/Paramedic which hospital), the camp nurse will call the parent to inform them their child is on the way to the hospital. It is important that the nurse show compassion and caring during the call. This has to be one of the worst calls a parent can receive. At this time, give the parent the cell number of the nurse or Executive Camp Director (always a medical staff member on an emergency run) that is accompanying the camper.
- If a facial injury requires sutures, parents should be called from the ER **before treatment takes place**. This way they can talk with the doctor and choose a specialist if they wish. Also call parents before treatment if an injury is complicated and you believe that a direct conversation with the ER doctor is best.
- It is most important that parents be telephoned and spoken with (and the phone call documented) before treatment in the following cases:
  - The parents have requested it;
  - Surgery is considered necessary;
  - Hospitalization is eminent;
  - It's a definite fracture,
  - There's a serious laceration of the face or any other area where plastic surgery might be advisable.
- In addition to speaking with the parents before treatment, the emergency room physician should be put on the phone to speak with the parents. The option to have the child treated elsewhere must be given to the parent.
- It is important, that once a parent has been notified that their child is on the way to the doctors, ER or Urgent Care that we keep them informed every step of the way. The Camp's Driver, or the staff member in-charge of a medical trip is to **call the parent from the facility** after the child has been seen by the doctor and the results of the visit have been given to the staff member. **This is very important**. This is often a good time to put the camper on the phone with their parent. They will want to hear the child's voice.
- Upon returning to the camp, **the parent(s) should be called again** to review/confirm the findings of the facility and discuss any follow-up procedures prescribed. This is also a good time to discuss with the parents the possible effect on the camper's summer camp activities.
- If hospitalization or overnight observation is required, **call every number** on the health form until you can talk with someone.
- Parents are to be called if the camper needs to have any kind of orthodontal work. This includes Broken bands, wires that needed snipping and loose brackets. The parent may need to schedule an appointment with their home orthodontist or request we schedule an appointment for them.

SERIOUS INJURY

- When dealing with a serious injury, we make every effort to contact the camper's parents immediately, before the camper is taken to the emergency room or the physician's office. If this means calling parents late at night, do it. If the parents can't be reached, contact the individuals listed as emergency contacts on the health from or enrollment application.
- Parents will never accept any excuse where their child was taken to a hospital at night and they were not informed until the next morning!

- If the child in on-route to the hospital, the best way to get through the first 10-15 seconds of the telephone conversation is to identify yourself and tell them that their child is on-route to the hospital for treatment/evaluation with a medical staff member and the medical staff member will call the parents as soon as the child is seen at the hospital.
- **Please note that it's camp policy that a medical staff member the camper to the emergency room in the case of a serious injury or illness.**

IN-PATIENT STAYS CLINIC

- Whenever a camper **puts their head on a pillow**, the parent is to be called.
- If the camper stay in the Clinic is **less than 4 hours** the call does not need to be made immediately. *The call is actually preferably made after the child is back at their activities.*
- If the camper stays in the Clinic for more than 4 hours, or their stay is overnight, the parent must be informed. The timing of the call is very important. Before 9:00pm, if you know the child will be spending the night in the Clinic the parent should be called immediately. *They will often wish to speak to their child.*
- If it is after 9:00pm and the child is admitted into the Clinic, the call can be made between 7:30am and 8:30am the next morning. **No later!**
- NEW IN 2021: If a child has a temperature of 100.4^0F the parent must be called and instructed to pick up the child. If it is between 9:00pm – 11:30pm talk to the camp director or executive camp director.
- Many times, **homesick campers** will report to the Clinic with no real symptoms and be allowed to stay for a short period of time out of consideration rather then need. A camper showing up frequently in the clinic and staying for a few hours may not be coming down with something but may be having adjustment problems. If the camper's head hits the pillow in the Clinic, the parent must be notified. It is often better to call the senior counselor to make this call to the parent. The senior counselor will determine whether the child speaks to their parents in these cases

COMMON SENSE

- If you feel that the camp should notify you of a health situation if it was your child instead of another camper, then notify the parent.
- It is advisable, if you bandage a camper's wrist or knee or buddy tape a jammed finger, contact the parents. Why? The parents will see a photograph of their child with their fingers taped and immediately call to find out what has happened to their child. It is much easier to make a quick call to notify the parent of the preventative measures or the minor bump they received.

FREQUENT FLYERS

- No one knows their child as well as the parent. It is important to realize that parents are a useful source of information about their child. They know if their child is a hypochondriac.
- Once the nurses get a sense that a child is "under the weather" but not sick enough to be admitted, it may be wise to call the parent and inform them that their child has been into the Clinic, say 6 times in a 72-hour time period!

ITS NOT ALWAYS WHAT YOU SAY, BUT HOW YOU SAY IT!

Before making any call to the parent, you want to take a few minutes to organize your thoughts and think through the purpose of the call.

- Always double check parent's names and contact information.
- You may have multiple calls to make, ensure you are talking about the right camper!
- Be sure to see if parents are living together or if there are any custody issues.
- ALWAYS call the parent listed first on the Health History.
    - Try the home phone then the cell phone. Then call the work phone number listed.
    - Check to make sure there are no vacation numbers listed in the camper's file.
    - Every attempt to contact parents or guardians as well as completed phone conversations should

be documented on the camper's Health Record.
    - *I.e. 7/10 Mothers cell #. Mailbox not set up. Or left message.*
- Then call the second parent listed.
    - Home (if different than the first parent), cell and work.
- Then, based on the urgency of the situation, call the emergency contacts.
- If the call is of an informational, "for your information" based call, stop after calling parent #1's cell phone.

LEAVING A MESSAGE

It is important not to alarm a parent when leaving a message.
Calmly state your name, and that Johnny is OK, he has a slight fever and will is currently staying with us in the Clinic. Please call us at <Give the direct line to the Clinic> REPEAT THE NUMBER.

- Indicate that you will try their cell phone number.

NO ANSWER

If you are unable to reach the parents the first time, try again at night, or try early in the morning before they leave for work. Try again at a work number or notify the relative or friend given as an alternative number. If a camper is confined to the Clinic for a day or more and the parent has been unable to be contacted, telephone the adult listed as the emergency person.

SPEAKING TO THE PARENT

When calling from the Clinic it is important that in the first sentence when introducing yourself to the parent that you let them know that their child is not in immediate danger!

"Hello Mrs. Johnson, this is Joe Bloggs, a nurse at Hermann Sons Life Camp, everything is fine, I'd just like to discuss James with you ."

Initially, It is often better to call the parent **without** the child present.

- Throughout the call, remain calm and speak clearly.
- Explain the purpose of the call.
- Explain what we have done, and plan on doing to help their child.
- Very often, if it was an accident the parents will want to know more about **how** the injury occurred. Why one action was taken rather than another and so on. Stay with what you know within your sphere of responsibility and things will go about as well as can be expected. Unless you or the driver were an eye witness to an event, stay with what you know. You don't have to be vague, either. Tell them you weren't there but that the person who will know what happened (Camp Director, Executive Camp Director, Senior counselor) is the one to talk with. All you know is that Jimmy is in the Clinic and you're treating him for x.
    - *Parents often need to unload a lot of emotion and while there is no need to be defensive, unwavering courtesy and deference to their rights is essential.*
- Call the camper into the Dr's office to allow for some privacy when making the call. Once the camper is on the phone, give the camper some space and let them know they have a few minutes. Monitor the call from outside. Make sure the camper is not getting distressed or too upset when talking to the parent. When a camper is hurt or injured, homesickness will really kick in!
- Document the telephone calls! On the camper's Health Record identify when the call was made (also document attempted phone calls the medical staff member who made the call, the parent (or emergency surrogate) contacted, and the substance of the discussion. In cases where a parent is unhappy with anything done by the camp, notify the Camp Director

PREPARE THE PAPERWORK

The paperwork that leaves camp does not change. Each time a camper leaves with:

- A copy of the Camper's Health History
- A copy of the camp's or staff members Insurance Information.
- A completed Request for Treatment form.

The assignment of which camp driver is to be used is made by Clinic Manager.

It is important for the Clnic Manager to consider:

- The gender of the camper(s) that are travelling.
- The outside service being used (see below)
- The time in which they need to leave.
- It is always advisable that there is never a 1:1 staff to camper ratio.
- It is always advisable to ensure there is always one staff member of each gender when sending multiple genders to an appointment/clinic.

CAN AN X-RAY DIAGNOSIS WAIT UNTIL TOMORROW? *SHORT ANSWER = NO*

Often, the medical providers recommend that an x-ray not be carried out the same day of the accident to allow for the radiologist to get a better image(finger, toe and ligament injuries usually can) provided that the patient is not in too much pain. The warning here is that we, as a camp run the risk of upsetting a parent who may see this delay in treatment as negligence on behalf of the medical staff or the camp, in some way "trying to hide" something.

The best practice in regards to accidents where a possible fracture has occurred is, regardless of the time-of day.

"IF IN DOUBT, SEND THEM OUT"

- It is advisable, in the interest of full parental communication, a telephone call be made to the parent. Even if our advice would be wait until the following day for our own children, inform the parent of their child's injury and our desire to send the camper out for an x-ray.
- At this point, the parent may decide to hold off, or in some cases refuse the x-ray.
- In all cases, document the phone call on the camper's chart and complete the Incident Form, Accident Memo and Accident Reports as though we were going to send the camper.

NEVER A GOOD TIME

Things crop up in the late afternoon or evening that you don't want to wait overnight. In an urgent referral, you want to have a driver ready to roll in 15-30 minutes. This kind of decision may depend on the pain level of the child, the possibility of complications, or the importance of prompt suturing.

In these cases evening medical runs will effect nights-off and possibly cabin coverage. The Camp Director will ensure there is a driver. The driver must be approved by the Executive Camp Director.

In a true emergency situation, you must always send either an EMT or Camp Nurse with the patient. Especially if we are using the local EMT service. Serious eye injury, seizures, localized burns, post epi-pen administration are some of the many reasons you may choose the latter course.

- A camp vehicle is always available for this purpose so you will be able to depart the minute you choose a second person.

Most international staff (and campers) will be required to go to the ER for both illness and injuries. Many of the medical practices in the region do not accept most insurance.

With the goal of obtaining the best possible "first" treatment for a camper or counselor, it is best to implement the above principle of Least distance, least number = least risk.

WHAT IS AVAILABLE?

Hermann Sons Life Camp is blessed with an incredible array of medical talent within the local community from which to choose. The Health Service Manual has a list of providers (in the appendix) in the region to which we can send our campers and staff for treatment.

During orientation, the Clinic Manager ***will confirm*** the following for each facility.

- Contact information and address
- Hours of operation
- Walk-in Vs. Appointments
- Types of services offered
- Insurances accepted
- Paperwork required (To be completed by the Medical Staff)
- Cost of the service

ACCIDENTS AT CAMP

Hermann Sons Life Camp prepares for the worst and hopes for the best. At Hermann Sons Life Camp we offer 24+ activities, some of which have an element of risk attached to the very core and nature of their appeal to campers. While accidents will happen, negligence cannot.

Whenever a camper (or staff member) reports to the Clinic having suffered an injury, or we, as a medical team are called to an accident, it is imperative that we have the counselors, and witnesses complete an incident report form.

EMERGENCY MEDICAL CARE & TRANSPORTATION

In the event emergency medical care is deemed necessary, the medical staff person on-duty will determine how the camper or staff member gets transported. Emergency transportation is available by using the camp's mini-van, the executive camp director's automobile, or by calling the the Ambulance Squad (911).

The ambulance squad should only be called when the emergency is serious or potentially serious (back injuries, unconscious state, unstable, etc.).

In the event of a serious injury a member of the medical staff or senior staff member must go with the camper to the emergency room. See the camp's emergency communication procedures. Also see appropriate files regarding obtaining emergency medical care and emergency transportation when campers/staff are attending an off-camp trip.

ANNUAL REVIEW

Hermann Sons Life Camp's written health care policies and procedures are to be **reviewed annually** by the camp administration and the camp's health care manager. Recommendations for improvement should be made in writing to the Executive Camp Director at the end of the camp season and attached to a copy of the existing health procedures.

Hermann Sons Life Camp's health care policies and procedures as outlined in this manual are not to be changed or deviated from **without written authorization** from the Executive Camp Director.

FIRST AID AND CPR COVERAGE

It is camp policy (and State regulation) that a nurse and a staff member with at least current certification in American Red Cross Standard First Aid and American Red Cross
CPR/AED (adult/child/infant) be on duty in either camp at all times when campers are present. (ST.3.1)

SANITATION CHECK

Members of the medical staff are requested to notify Administration staff if they notice any sanitation (cleanliness, hygiene and health practices) concerns in camp. Your findings
should be documented on an **Incident Report Form** and filed with the Camp Director. The forms will be reviewed during the weekly meeting held with the Camp Director and Executive Camp Director.

MEDICAL STAFF RESPONSIBILITIES

The medical staff team is responsible for the health and well-being of all campers and
staff within the camp community. The Medical Staff is comprised of an on-site medical staff member and a nurse's assistant. (ST.2.2.A)

The medical staff is responsible for reviewing all health forms and compiling all vital medical information on campers and staff. Vital information is then relayed to the counseling staff as needed. Our medical staff provide first aid when necessary, dispense all medications to campers (and junior staff), and keep accurate logs.

Medical Staff will review the Health Histories for the campers coming in the week following their stay. This will help the incoming medical staff on arrival day.

They are also expected to maintain a clean and prepped Clinic.

ESSENTIAL FUNCTIONS/DUTIES

- Provide care to campers and staff in accordance with the Hermann Sons Life Camp's Treatment Procedures.
- Review camper health histories with an emphasis on current illnesses and allergies.
- Communicate the health needs of the campers to counselors and administration as needed.
- Prepare a Med Alert List.
- Review the Camper Health Screenings performed by the counselors.
- Administration of prescription and over-the-counter meds.
- Provide first aid for minor injuries and illnesses.
- Refer serious cases to the appropriate med personnel.
- Maintain accurate health logs and incident/accident reports.
- Communicate with parents in regards to health concerns.
- Maintain a clean, healthy environment in the Clinic.
- Keep sick beds clean and prepped.
- Keep all over-the-counter medications in stock.
- Stay up to date on staff medical information and histories.
- Box and organize all camper health forms for storage with the Executive Camp Director.
- Checking inventory of equipment, supplies, medicines and drugs.
- Preparing purchase requests for consideration by Camp Director.
- Prepare and replenish first aid kits for the camp.
- Ensure that the Clinic's outside light is lit all night long and shut-off each morning.

CLINIC REPORTS

Medical staff members are expected to ensure properly completed Incident
Reports/Accident Reports. These reports are to be delivered to the Executive Camp Director in a timely fashion to ensure that Worker's Compensation Forms and insurance company supplied Accident Reports are completed as detailed in this Health Service Manual (see Accidents at Camp section).

PRESENTING EVIDENCE OF LICENSE

Within the first day or two of your arrival you will need to present original evidence of your license and appropriate certifications to the Executive Camp Director. The Executive Camp Director will make a photocopy and file it in the medical files located in the camp's administrative office.

MEDICAL ALERT LIST (HW.10.1)

The Medical Alert List is a list we use to notify appropriate staff members of special needs or disabilities pertaining to campers entrusted to their care or to staff members with whom they work. Who should receive this potentially confidential information will be discussed by the Executive Camp Director with the Clinic staff prior to its dissemination. At minimum the following staff members receive a copy of the Medical Alert List:

- Senior Counselors (to disseminate the information to the appropriate counselors)
- Kitchen Supervisor
- Camp Director

Life-threatening allergies like serious allergies to bee stings or serious allergies to peanut butter or even serious physical limitations should be addressed at a general staff meeting in addition to its listing on the Medical Alert List. This staff meeting will be scheduled by the Camp Director as needed, at least weekly.

The **Medical Alert List** is prepared by the Director's Assistant and Medical Staff when reviewing camper and staff health forms during staff development and at the beginning of each session and contains information regarding diet, allergies, medication, rest requirements, activity restrictions, recognition and care of potential medical problems such as choking, seizures, hypoglycemia, and any other specialized needs or limitations of the individual.

This information is shared on a "need to know" basis with appropriate staff members. In certain cases, as stated above, the entire staff should know about a particular camper/staff member's condition (peanut butter allergy, bee sting allergy, epipen situations).
Appropriate counselors or staff members may involve more people than one might initially think. For instance, if we have a camper at camp with an epileptic condition controlled by medication. In this case, all waterfront personnel would be immediately notified of the condition as well as the camper's counselors by way of the **Medical Alert List.**

A copy of the Medical Alert List is to always be kept on file in the Clinic. A second copy is to be kept with the Camp Director. At the end of the summer the Clinic's file of Medical Alert Lists are to be delivered to the Executive Camp Director for permanent filing.

ANAPHALACTIC REPORT

Before each session the Medical Staff will prepare a report of the campers and staff that have severe allergic reactions to either food or bee stings. This list indicates the campers name, dorm, what type of reaction along with treatment notes.

It should also indicate if the camper has an epipen and if the camper can use the epipen themselves.

If the camper carries the epi-pen with them at all times, we notate that the camper carries the epipen with them on the Medical Alert List and Medication Form.

CLINIC SET-UP
The majority of the Clinic will be set-up before the medical staff's arrival.

CLINIC EQUIPMENT AND SUPPLIES – INVENTORY (HW 11.1.A)
The medical staff is expected to take an opening inventory of all Clinic equipment and supplies at the beginning of camp. All purchases made by the camp for the Clinic during the course of the summer should be added to the inventory sheet.

An ending inventory of the Clinic's equipment and supplies is made at the end of the summer and filed with the Camp Director. In addition, recommendations for equipment and/or supply purchases for the next summer are made at this time.

The following system of inventory control is designed with 3 goals in mind.

- To be certain that camp opens with adequate supplies.
- To provide a flexible, cost-effective procedure for adding to or replacing inventory during the summer.
- Reduce loss and minimize wasting supplies and equipment. The inventory that you'll be dealing with this summer generally comes from three sources:
  - Stored inventory from the previous year
  - Medical supply companies/pharmacies
  - Camp provisions

ICE
We use a lot of ice. To help save ice, we prepare reusable ice packs made from sponges, cut into cubes and placed in ziplock baggies. Add water to the sponges and place in the freezer. Begin the camp season by making 50 ice packs. As the summer continues, we top off the count.

FIRST AID KITS
The preparation, checking, and re-supplying of all First Aid Kits is the responsibility of the medical staff. This should be done on a regular basis over the summer. (HW.18.1)

Somewhere in the previous year's inventory you should find a box of first aid kits. The kits are to be distributed as follows:

- All camp vans/cars (HW.18.1.C & E)
- Kitchen (HW.18.1.D)
- Admin office
- Pool house (HW.18.1.A)
- Canteen
- Canoe/Fishing (HW.18.1.A)
- OLS (carried on each trip) (HW.18.1.B)
- Adventures in Nature (HW.18.1.B)
- Challenge Barn (HW.18.1.B)
- Archery/Riflery Range (HW.18.1.B)

The supplies put in the first aid kits should be primarily for simple wound cleansing/band- aids/small dressings/tape, etc. with consideration of the type of activity and location. For example, the Canoeing, Fishing, OLS, Nature, and Challenge Barn kits should also have calamine lotion, cotton balls, and benadryl included in their kits.

CAMPER AND STAFF MEDICATIONS (HW 13.1.A & B)
All medications and the completed Medication Form must be collected from the campers (and junior staff) when they arrive in camp. These medications are logged-in and dispensed by the Medical Staff. **In 2027 we will be instructing parents to send two additional days worth of medication in the event we need to shelter in place.** All Counselors must keep their medication in the Clinic before the end of staff development week (before campers arrive).

Medications (including vitamins, medicated creams, and even aspirin) are required to be kept in the Clinic **under lock and key** when the medications are not under controlled possession of a camp medical staff member.

- An exception to this strict regulation would be made in the case of a life-threatening condition where a limited amount of the medication is carried by the camper or staff person (e.g., epipens, inhalers) or in the case where a limited amount of a certain medication is approved for use in first aid kits.

Prescription drugs are to be dispensed only under the specific directions of a licensed physician which includes directions on an original prescription bottle, a note on the signed health examination record, or something in writing from a licensed physician.

Nonprescription drugs (i.e., aspirin, cold-tablets, etc.) are to be dispensed only under the camp's written health care procedures (treatment procedures - standing orders) or under the signed instruction of the parent or guardian or the individual's physician.

CAMPER MEDICATION FORM

We will be sending each family a Medication Form. We ask that this form is completed and printed before their arrival to Camp, and brought with them to allow for a swift drop- off. During the week, Campers report to the clinic during the appropriate sick call and the nurse obtains the medicine from the camper's bag (which is organized alphabetically by dorm in the med room), administers the medication and documents its ingestion on the Camper Medication Form (see full Medication Procedures below).

- These medications do not have to be entered into the Health Log because the **Camper Medication Form** will ultimately be appended to the camper's Health History Form**.**

We dispense a lot of medication and if it's NOT something that must be given to the camper religiously, we leave it up to the camper to come and get it ("as needed"). *That's the general rule*. However, if the parent has given us a directive to make sure that the camper gets the vitamin, decongestant, etc. on a daily basis we must follow through.

The only way to ensure that we'll do the job is to treat the medication as though it was a prescription and complete a **Camper Medication Form** for the medication and enter the vitamin, etc. to be dispensed at Breakfast, Lunch, Dinner or Bedtime.

SOME POINTERS WHEN ACCEPTING MEDICATIONS

- Confirm that the doctor's script matches the direction being given by the parent for each drug.
  - *If there is any divergence from the doctor's script, accept the medication and inform the parent that **until we get a note from the physician** we must dispense per the original label on the medication.*

WHAT'S ON THE LABEL?

- *Prescription drugs must only be given under the specific directions of a licensed physician. Non-prescription drugs follow the guidelines of our Treatment Procedures, product package information, or the signed instructions of the parents.*
- *Sometimes, these two directives get clouded when parents send medications from home. Some examples:*
  - *Rx drug is for child but parent changes dose.*
  - *Rx drug is for parent but Mom gives it to daughter.*
  - *Rx(antibiotic) sent "just in case" but not infection specific or even the right therapeutic amount.*
  - *Specific instructions to down the dose (prescription) may not be a legal problem at home but in camp **unless the instructions are in writing and come from a licensed physician, it is camp policy that there is no deviation.** What Mom gives her daughter may be, for her, only a minor infraction of a legal code but it's unacceptable at camp.*

    Directions on an original prescription bottle, a note on the signed health examination record, or something in writing from a licensed physician is required to administer prescription medicine and any deviation from the instructions must be authorized in writing from a physician. If you have any concerns, talk with the Executive Camp Director. If instructions aren't clear or label says one thing and child says another, it's best to give the parents a call. Ask for an email of information if you think this is best. Unlabeled or "no name drugs" will not be given.
- Sometimes there will be parents that pre-package the medication.
  - *Parents are instructed not to do this in the Parent Handbook. Inform the parent that we need to see what we are dispensing! They will need to email the Executive Camp Director a photo of the packaging, which may then be dispensed.*
- When accepting medications on arrival day, **inform the parents** that the general rule we follow is that we do not chase campers for vitamins or melatonin. We dispense a lot of medication and if it's NOT something that must be given to the camper religiously (PRN), we leave it up to the camper to come and get it.
- If a parent brings an OTC that is stocked by the Clinic, inform the parent that we carry the medication and the camper will be able to receive an Advil or Tylenol from the nurses 24/7.
  - *By requiring the camper to come in to the Clinic, they will need to sign-in. By signing in, we, as the medical team will be able to monitor the camper and any potential health issues.*
- Refrigerated medications are to be accepted and then immediately refrigerated.
- Emergency Inhalers and EpiPens should be accepted on separate Medication Check-In Sheets with separate bag.
  - *Count the EpiPens and write the expiration date on the Medication Check-In Form.*
- All controlled substances and major medications MUST BE COUNTED in front of the parent(s). Write down the count on the Camper Medication Form and have the parent initial the count.

PARENTAL DIRECTIVES

If your child is taking medication (including over the counter medications, vitamins, creams, ointments, etc.) which will be needed at camp, please follow the procedures outlined below.

- *Camp policy prohibits the possession of any medicine, vitamin, aspirin, allergy pill, etc. in the dorm. All medications (including vitamins) are required to be stored in the Clinic. They will be collected upon your child's arrival in camp.*
- *An exception to the above policy is provided to campers who are required to carry an epinephrine auto injector or an inhaler to address emergencies.*
- *All medicine (non-prescription and prescription) must be clearly labeled with the camper's name, name of the medication, the time the medication should be administered, number of times per day, dosage, and any other special instructions (i.e., keep refrigerated).*
- *Non-prescription medicine must be accompanied by written instructions signed by a parent or a licensed physician.*
- *Prescription medications must be sent in the original prescription bottle with your camper's name, clear dispensing instructions, and the prescribing doctor's name.*

You are responsible for ensuring that your child has enough meds to complete his/her scheduled stay at camp.

COMMON SITUATIONS ON ARRIVAL DAY

There's few medication requests on the part of a parent that we can't accommodate.
However, before you do things the parent's way, see if you can persuade them to a more routine approach to receiving medications. Here are some of the more common problem requests and how to respond.

- Parent's direction does not match the label. Often this is for insurance reasons a label is written a certain way. **We must have correct dispensing information in writing by the Dr.**
- Ritalin: Child must have medication at 3 or 4 pm, no later or they will not sleep. The Clinic staff must make the Senior Counselor aware of the camper's medication routine. The nurses are to make sure the Senior Counselor and camper comes to the Clinic at the specified time.
  - The Medical Staff must follow up and make sure the camper is getting the med on time. If the camper does not come for his/ her medication, radio the Senior Counselor and request assistance.
  - If that does not help, have the camper PA'ed to the Clinic.
  - If the child still doesn't show up, inform the Camp Director.
- Embarrassment: Parents fear an anti-depressant or Ritalin will embarrass the child. All medications, including vitamins are given at the same time. No one will know. Also, we never announce "Go to the Clinic to get your medications". We announce **"Will the following campers please report to the Clinic"**
- Inhalers: No problem, the camper may keep them. If a camper uses an inhaler, a back-up should be kept in the Clinic. If the child needs to be monitored on the usage of the inhaler, the inhaler must be kept in the Clinic. We can't monitor this otherwise.
- Pain Medication: Parent insists that a camper keeps the med because it must be taken immediately. Contact the Clinic Manager in this case. We do not allow any medications in the dorms.
- Creams and Lotions: Parent insists that child keeps to apply at right times, or to avoid embarrassment. There is no embarrasment. All medications, this includes medicated creams, are to be kept in the Clinic.
- Vitamins/Herbals: We're sorry, but no. We make it a point to keep all medication bottles/boxes out of the dorms. It's just a bottom line safety issue.

MEDICATION PROCEDURES DISPENSING MEDICATIONS

1. Ask the camper their last name (always) and dorm.
2. Confirm their first name.
3. Collect their bag from the shelf… **DON'T SEE THE BAG?**
   - Check the fridge
   - Check along the shelf for the bag to be miss-alphabetized.
   - Is the Camper a Junior staff member?
   - Is the medication in a sibling's bag?
4. Check the list for which meds to dispense…
   - Is it "As Needed" medication?
5. Dispense the medication. Observe the camper taking the medication.
6. Check mark the medication when you put it in a cup (if multiple meds).
   - Cover the label!
   - Do not discuss medication specifics.
   - If you wish to discuss the medication with the camper, ask them in for privacy.
7. Document on the camper's Medication Form when you dispense to the camper and observe them taking the medication.
8. REPLACE THE BAG. Do not pull multiple camper bags.
9. START AGAIN!

TAKE YOUR TIME!
DISPENSE ONE CAMPER AT A TIME
(They are not going anywhere!)

PRN MEDICATIONS AND TREATMENTS

All PRN medications and treatments must be entered in the Camper Medication Form. OTC medications not brought by the camper, will be dispensed after reviewing the Health
History for possible allergies. These medications are documented on the Health Log.

A CAMPER MISSES THEIR MEDICATION

When a camper forgets to report to the Clinic and misses their daily medication, our job is to ensure that the camper takes their medication. The follow-up will depend largely on the time of day.

MORNING MEDICATION

- For campers that miss their morning medication a list of names can be given to the Admin Office for the campers to report to the Clinic. They will announce the names over the PA system.
- At this stage, make a notation on the Med Form that we have called the campers (call the names twice) over the PA system.
- What medication is missing? If it is a vitamin or once daily medication that can be taken at lunch – notate that the camper will be called then.
- If it is a medication that **needs to be taken** in a timely fashion, continue to call the camper over the PA system and call the Senior Counselor. Inform the Senior Counselor of the camper that has missed the medication and ask for their help in bringing the camper to the Clinic.
- If this does not work – inform the Camp Director.

LUNCHTIME MEDICATION

- If a camper has not taken their lunch time medication, radio the Senior Counselor. After lunch, the campers are required to report to their dorms for rest period. The Senior Counselor will be able to assit the Clinic in bringing the campers to the Clinic.

DINNER MEDICATION

- If a camper has not taken their dinner time medication, prepare a list to be called over the PA by the Camp Admin.

EVENING MEDICATION

- If a camper neglects to take their evening medication the Admin Staff will help. What is the medication? We do not want to wake a camper up just to take melatonin.

COUNSELOR MEDICATIONS

Staff medications are kept in a specific cabinet which is locked when not in use or supervised.

- During sick call staff members are permitted to go into the cabinet and take their own medicine. *We do not document staff medications*.
- However, anyone under the age of 18 (i.e. junior staff members) taking meds must be documented and will be treated according to the procedures established for our campers.
- Staff medication will **not** be available to the staff from **10:30pm through 7:00am**. We often have campers staying overnight in the Clinic. It is **not acceptable** for staff members to report back to camp at 12:25am and expect to get access to their medication. If counselors need medication during their off-off, they must pick it up once they have signed out and take it with them.

CAMPER DEPARTURE

Medications for departing campers are to be taken to the designated medication pick-up stop. The exception is for campers with refrigerated medication. This medication is to be kept in the refrigerator until the parents arrive to pick it up.

The medication will be turned over to the parents of the campers only! Do not give the medication to the campers unless their parents are immediately in front of you.

A MEDICATION IS MISSING?

It's very embarrassing when a camper brings a PRN or OTC medicine to camp, doesn't need it so doesn't use it, and on departure day finds that half the medicine is gone. **One camper's medication is not to be given to another.**

Reports of missing medication are to be documented on a Camp Incident Report and given to the Executive Camp Director.

CLINIC IN-PATIENT CARE

Sometimes a camper needs more than a medication, treatment or follow-up. They need in-patient care for 30 minutes, a few hours, an entire day or overnight. Categorically,
campers are usually placed in the Clinic because:

- They have a temperature of 100.4 or more or other cardinal symptoms of infection (see communicable disease plan section)
- They've sustained an injury requiring R.I.C.E., or observation after a significant fall.
- They don't feel well enough to attend regular activities.
- They have returned from the ER or doctor's office with this kind of recommendation or it's considered desirable to provide this kind of nursing care.
- They need a clearing space and time because of fatigue, homesickness, or behavior problems.

The nurse is usually the only staff person making the decision in the first four categories. Contact the camper's Senior Counselor regarding the last point.

AVAILABLE MEDICAL PROVIDERS

Hermann Sons Life Camp is blessed with an incredible array of medical talent within the
local community from which to choose. The Emergency Telephone Numbers (at the end of this manual) includes the providers in the region to which we can send our campers and staff for treatment.

During Staff Development, the Clinic Manager ***will confirm*** the following for each facility.

HSLC - TRANSPORTATION PROCEDURES SUMMER 2027

Hermann Sons Life Camp's general transportation procedures, safety responsibilities and group management guidelines are outlined below. Camp drivers must be thoroughly familiar with the material contained in this manual. Training is expected to be conducted by the Facilities Director (Heath Roemer).

All **drivers of a camp vehicle** or private vehicle used on camp business must be certified as outlined below.

CAMP VEHICLES

The operation of camp vehicles represents a major source of injury risk for campers and staff as well as a source of significant liability exposure for the camp. Therefore, the camp has established certain rules and regulations regarding the use of camp vehicles.

Our purpose is to accomplish the following:

- Operate with the highest regard for SAFETY.
- Reduce unnecessary usage of camp vehicles. Ensure the safe operation of camp vehicles.
- Reduce the possibility of accidents.
- Eliminate drivers who pose a risk of injury to campers and staff.

VEHICLES AT CAMP

GATORS

Both gators are used primarily by the maintenance staff for the performance of their duties.

- One gator must be parked behind the dining hall (Not in the driveway) at night when the shift ends.
- One gator must be parked next to the clinic **when not in use** with the key kept in the clinic.

WHITE VAN

The White van is the camp's **emergency vehicle**.

- The white van is to be parked outside the clinic. The key is to be kept in the clinic at all times.

The Health Service Manager is required to authorize all use of the camp's emergency vehicle (white van). It is expected that the only use of the camp vehicles medical trips to the UC or ER during camp sessions.

The white van is to be utilized on the weekends to take overseas staff on trips.

FORD F-150

The Ford F-150 is primarily (year-round) a maintenance vehicle. During the summer, the Ford is used primarily to transport campers to and from either the River or Challenge course.

- The Ford F-150 is to be parked Monday to Thursday in the parking area (next to the Archery)with the trailer attached.
- Friday to Monday the Ford F-150 is to be parked in front of the Main Admin building.
- The trailer for the Ford F-150 is to be parked in the parking area (next to the Archery).
- **ONLY HEATH ROEMER is to attach the trailer.**

TAHOE

The Tahoe is primarily (year-round) the Administration vehicle. During the summer, the Tahoe is used primarily to transport campers to and from either the River or Challenge course.

- The Tahoe is to be parked Monday to Thursday in the parking area (next to the Archery)with the trailer attached.
- Friday to Monday the Tahoe is to be parked in front of the Main Admin building.
- The trailer for the Tahoe is to be parked in the parking area (next to the Archery).
- On weekend's, the Tahoe is used by our senior staff to transport Overseas Staff.
- **ONLY HEATH ROEMER is to attach the trailer.**

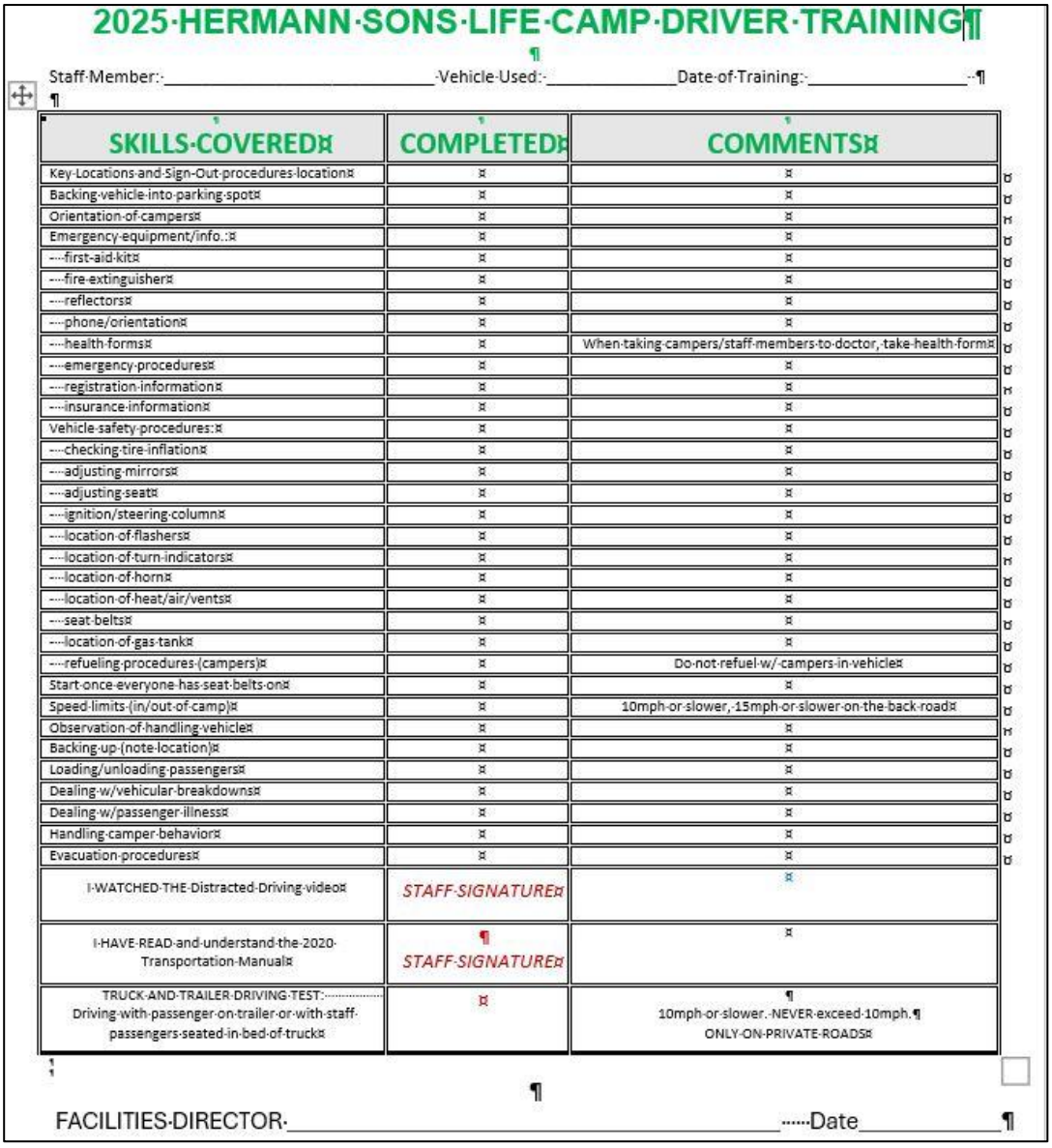
EMERGENCY BACK-UP to the BACK-UP.

DURING THE SUMMER, the Executive Camp Director's vehicle (driven by the ECD) will be used for Hospital runs, CAMP shopping trips, mail runs).

DRIVER REQUIREMENTS

All drivers must be:

- At least 19 years of age and must be authorized in writing for testing by the Executive Camp Director, Steve Townley.
- Must possess a valid U.S. driver's license appropriate for the vehicle driven. (AD.9.1.B) This information must be on file in the camp office.
- All driving records will be reviewed by the camp's insurance company within 4 months of the start of camp. This applies to seasonal and year-round drivers. (AD.9.1.A)
- Must watch the distracted driving video.
- Driving records are to be checked for the following:
    - Past records for revocation,
    - Suspension of license,
    - Moving violations, Accidents,
    - Charges for DWI or DUI



2025 HERMANN SONS LIFE CAMP DRIVER TRAINING

Staff Member:_____ Vehicle Used:_____ Date of Training:_____

SKILLS COVERED	COMPLETED	COMMENTS
Key Locations and Sign-Out procedures location		
Backing vehicle into parking spot		
Orientation of campers		
Emergency equipment/info.:		
----first-aid kit		
----fire extinguisher		
----reflectors		
----phone/orientation		
----health forms		When taking campers/staff members to doctor, take health form
----emergency procedures		
----registration information		
----insurance information		
Vehicle safety procedures:		
----checking tire inflation		
----adjusting mirrors		
----adjusting seat		
----ignition/steering column		
----location of flashers		
----location of turn indicators		
----location of horn		
----location of heat/air/vents		
----seat belts		
----location of gas tank		
----refueling procedures (campers)		Do not refuel w/ campers in vehicle
Start once everyone has seat belts on		
Speed limits (in/out of camp)		10mph or slower, 15mph or slower on the back road
Observation of handling vehicle		
Backing up (note location)		
Loading/unloading passengers		
Dealing w/vehicular breakdowns		
Dealing w/passenger illness		
Handling camper behavior		
Evacuation procedures		
I WATCHED THE Distracted Driving video	STAFF SIGNATURE	
I HAVE READ and understand the 2020 Transportation Manual	STAFF SIGNATURE	
TRUCK AND TRAILER DRIVING TEST: Driving with passenger on trailer or with staff passengers seated in bed of truck		10mph or slower. NEVER exceed 10mph. ONLY ON PRIVATE ROADS

FACILITIES DIRECTOR:_____ Date_____

INSURANCE

Before an employee is permitted to drive a company vehicle (except Gators), they must be accepted by the insurance company. *See chart to right for guidelines*.

Based upon insurance report results and other factors, the Executive Camp Director will determine which individuals are eligible to be trained as camp drivers.

Drivers must read the Transportation Manual and pass a driving test.

The behind the wheel driving test will include: (ST.19.1. A-H)

- Backing up
- Loading and unloading passengers
- Dealing with vehicular breakdowns
- Dealing with passenger illness
- Evacuation procedures (in a bus or van)
- Handling camper behavior
- Location of campers during refueling
- Checking vehicle prior to transportation of persons.

There must be written evidence of the staff member's competence before he/she will be allowed to drive a camp vehicle without direct supervision.

There must be additional written evidence if the vehicle driven is different than the one the driver regularly drives. (ST.19.1.A) Note: Drivers being tested is demonstrated. must be strictly monitored until competency

Driver Acceptability Matrix

Number of Moving Violations Within Past 5 Years	Number of Accidents Within Past 5 Years				Number of DUI or DWI Within Past 5 Years
	0	1	2	3	1 or More
0	Clear	Acceptable	Borderline	Prohibited	Prohibited
1	Acceptable	Acceptable	Borderline	Prohibited	Prohibited
2	Acceptable	Borderline	Prohibited	Prohibited	Prohibited
3	Borderline	Prohibited	Prohibited	Prohibited	Prohibited
4	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited
5	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited

Borderline	Motor Vehicle Report will be checked every 6 months; insurability subject to no deterioration in the record.
Prohibited	Employer must prohibit driver from driving company vehicles or using personal vehicle on company business.

This is for general reference only. Please refer to your auto policy contract or consult a licensed commercial Property and Casualty insurance broker or loss control representative at INSURICA for assistance.

HSLC - TRANSPORTATION PROCEDURES SUMMER 2027

VEHICLE'S SAFE OPERATION

Whoever drives a camp vehicle must realize that he/she has been entrusted to operate the vehicle in accordance with the motor vehicle laws of Texas. Any violation of these laws **will automatically suspend the authorization granted to drive the camp vehicle** in the future, e.g., speeding, ignoring stop signs.

When operating a camp vehicle with campers it is especially important that the driver be conscious of his or her responsibility for the safety of the children in his or her care.

All traffic laws are to be strictly obeyed. This means NO speeding! Note the Hermann Sons Life Camp Speed Rule stated above. All Hermann Sons vehicles have tracking devices.

- **STAFF are never permitted to use their phones.**
- **STAFF are never permitted to text while operating a camp vehicle.**

If you are late for an event do not speed. Instead, if a telephone call will help and a cell phone is available, pull over, call your destination and let them know you'll be late. **DO NOT speed or rush to your destination and compromise safety rules and regulations.** Better to be late than never to arrive at all! Give yourself enough time. Leave early!

- DO NOT deviate from the agreed upon routes.
- No tailgating. Apply the "4 Second" rule on most roadways and the "6 Second" rule on highways.

PROCEDURES BEFORE DEPARTURE

VEHICLE SAFETY CHECKS (FA.24.2)

During the summer, camp vehicles are to be checked weekly and documented in writing by the Facilities Director for the following:

- Lights
- Windshield and wiper condition
- Emergency flashers
- Horn
- Brakes
- Mirrors
- Fluid levels
- Tires – Each vehicle's tires must be checked with a tire guage. (FA.24.1)
- Tires - Before each trip, the driver must visually check the vehicles tires. (FA.24.1)

Damage is to be reported immediately to the Executive Camp Director in writing.

MAINTENANCE AND DAMAGE PROBLEMS

Any routine maintenance problems, failures, small accidents, body damage, or concerns, that occur while you are out, or that cause the vehicle not to be in proper operating condition for the next driver, should be noted in the maintenance log, and the director should be informed verbally, immediately upon your return. Reporting damage helps keep the vehicle safe.

The keys to any vehicle in questionable condition must be given to the Facilities Director, or the Camp Director along with a description of the problem.

MAINTENANCE STAFF NOTE

It is camp policy that campers and staff only be transported in vehicles designed to carry passengers. The intent of this policy is to prohibit transportation of individuals in the back of pickup trucks or gators where seats are not attached to the vehicles. For instance, support staff members are not permitted to ride in the back of the camp's pickup truck or gators.

This is too dangerous and, if permitted, **will eventually result in serious injury**.

There is an exception to this rule for camper transportation in the trailer driven at slow speed **(less than 15 miles per hour)** off public roads and where protective devices are provided to keep people from falling out or off the vehicle**.**

MECHANICAL SOUNDNESS

As part of the camp's annual procedures all camp motor vehicles are required to be evaluated for mechanical soundness by qualified personnel within one month of seasonal use. (FA.23.1.B)

Since no camp vehicle travels more then 9000 miles a year, this arbitrary maintenance schedule actually exceeds safety requirements.

All repairs or reports of trouble with a vehicle are checked out immediately by the director then if need be, the vehicle is sent to the garage for prompt repair or to be checked out in closer detail by a professional mechanic.

We never postpone a repair when trouble is reported.

HSLC - TRANSPORTATION PROCEDURES SUMMER 2027

PRIVATE VEHICLE USAGE

Normally, private vehicles are not used in the operation of the business. If a private vehicle is used on camp business, it's use must be authorized by the Executive Camp Director and there must be **written permission** signed by the owner on file in the main office. See the Private Vehicle Use Form. Permission to use a private vehicle assumes the owner has properly maintained the vehicle and certifies that the vehicle is mechanically sound**.** (AD.3.1)

SIGN-OUT SHEET

Hermann Sons Life operates very few trips. The destination and it's participants must be kept in writing on-file at the clinic. (AD.7.1.D) The Health Service Manager determines if the vehicle can be used. The vast majority of our trips are clinic runs.

EMERGENCY EQUIPMENT

Make sure that there is a stocked first aid kit, esp kit, emergency materials (reflectors/ flares), Roster of participants (a copy of the Sign Out Sheet must be kept in the clinic for all medical trips and admin office for non-medical trips), emergency telephone numbers, fire extinguisher, **registered cell phone**, Log Book (which contains Accident and Incident Reports), a copy of the safety orientation and plastic bags available in all camp vehicles (i.e., vans, maintenance trucks). (FA.22.1.) (HW.18.1.E)

PASSENGER SAFETY ORIENTATION

Passengers must be oriented in emergency and safety procedures by the driver prior to leaving camp. Counselor staff members must be trained in these procedures and certified during the staff orientation period. (AD.8.1)

Please review the following rules with all passengers (campers and staff) before traveling. (AD.8.1.)

- Please do not distract the driver.
- No excessive noise or rowdiness
- No horseplay
- No heads or limbs outside the windows
- All passengers are to remain seated whilst the vehicle is moving. (AD.7.1.C)
- Seatbelts must be worn when provided. One person per seatbelt. (AD.7.1.B)
- Throwing litter or any objects from the vehicle is prohibited.
- Playing loud distracting music is prohibited.
- Campers that are experiencing illness should express their discomfort to the counselor immediately.
- Behavior unacceptable in camp will not be tolerated off-camp (bullying, swearing, etc.)

These rules and regulations must be placed inside all camp vehicles.

SEATBELTS

Seatbelts are required to be worn by all passengers when they are available. (AD.7.1.B)

TEXAS CHILD PASSENGER SAFETY LAWS

- **When is a child restraint required?**

7 years or under and under 57 inches tall

- **What is the maximum fine for a first car seat violation?**

$25 minimum; maximum unlisted

- **When must a child sit in the rear seat?**

No Requirement

TEXAS SEAT BELT LAWS

- **When can a child start using a seat belt?**

8 years, and over 57 inches

- **Who is covered by the seat belt law?**

Riders 7 and under who are over 57 inches; Riders 8 and over

- **In what seats does the seat belt law apply?**

All

- **What is the maximum fine for a first seat belt violation?**

Riders under 17: $200 (driver); Riders 15 and over: $50

Never load more passengers into a vehicle than the allotted seating capacity unless an emergency exists. Any vehicle transporting more than 15 passengers must carry, in addition to the driver, a camp staff member who has been trained in safety responsibilities and group management.

Hitchhikers and Persons Not Enrolled in Camp or on Staff. Hitchhikers—No. No. Never. Friends and guests--only under very special circumstances and only with the express permission of the Executive Camp Director.

STAFF TO CAMPER RATIO (ST.39.1) (AD.22.1.a)

There is to be a min. of 3 people on all trips. Staff members are never permitted to transport a single camper alone. (**RULE OF THREE)**

- If there are any campers 5 years old, there should be 1 staff member to every 5 five year old campers.
- Campers aged 6-8 years old should be supervised by at least 1 staff member for every 8 campers.
- Campers aged 9-14 years old should be supervised by at least 1 staff member for every 10 campers.
- Campers aged 15-16 years old should be supervised by at least 1 staff member for every 20 campers.

Campers are not to socialize with "non-camp" people. If they are approached by "non-camp" people, they are to report the incident to the nearest staff member immediately. An Incident Report is to be made upon returning to camp. (AD.22.1.b)

HSLC - TRANSPORTATION PROCEDURES SUMMER 2027

BACKING-UP PROCEDURES

- **WHEN BACKING UP ALWAYS have a spotter** located at the rear of your vehicle. Make sure children don't wander in your way. Check all mirrors and look out back and side windows. After the "all is clear" signal is given, release parking brake and put transmission into reverse.
- **Continually tap the horn and take foot off brake**. The horn will signal that the vehicle is about to move or is in the process of moving. The signal is designed to alert the spotter that you are about to move the vehicle. It will also give notice to pedestrians in a blind spot. Be sure to beep the horn continually.
- Keep checking the rear and sides of the vehicle by using the mirrors and windows while reversing.
- If spotter gives the "not clear signal", stop. Start process again.
- Other tips and pointers: If you encounter rain or fog, SLOW DOWN! The roads will get slippery even in the summer. If you are driving at night remember, you're in a heavily populated deer area. Watch out! Go slow! If you're "running late" in getting back to camp (i.e., 30 minutes behind estimated arrival back to camp) call the camp office at 830.995.3223. Use the cell phone or call collect. **Do not speed.**

ACCIDENT PROCEDURES

- The bus must carry 2 staff members, at least one of whom has been trained to follow written accident procedures for:
- Providing or securing care for the injured,
- Supervising the uninjured,
- Specifying whom to notify in an emergency,
- Identifying witnesses and obtaining accident or emergency information,
- **Safety** responsibilities and **group** management (i.e., management of camper behavior on and off the vehicle, accounting for all passengers, use of seat belts and all the regulations specified in this memo), and the staff manual.

MEDICAL ALERT LIST

The driver should have the list of participants approved by the clinic. Campers with health problems will be idenitified, (i.e., epilepsy, serious asthma, bee sting allergy, inhaler use).

CAMP VEHICLE PARKING

Always park in designated locations and specifically assigned parking spaces for select camp vehicles. When backing up when children might be present (e.g., trip site, picking up kids, moving in camp), always have a second staff person step out to watch the rear of the vehicle to insure it is safe, and no one is behind of you.

UNLOADING PROCEDURES

Once you're at your destination and parking location, do not allow campers to leave the van/bus until:

- The transmission has been put in park, ignition has been turned off, and parking brake has been set.
- Never park a van or a truck on an incline. Parking brakes have been known to fail and we've had close calls in the past! If you must park a vehicle on an incline (facing downhill), put a wheel chuck under the tire to prevent rolling. A large rock pushed under the tire will suffice. No rock? The driver then stays behind the vehicle's wheel.
- Meeting points have been designated and reviewed with participants. (AD.22.1.c)
- Camp rules and regulations regarding this particular activity have been reiterated.

VEHICLE SAFETY CHECKS

- Vehicle Safety Checks are performed weekly by the Facility Director. Inside each vehicle is a Driver's Log Book.
- For **each trip** the driver is to walk the vehicle and check the tires. If the trip is expected to go into dark, the lights must also be checked. This check must be logged into the Log Book found in each vehicle.
- Make sure that there is a stocked first aid kit, esp kit, emergency materials (reflectors/ flares), Roster of participants (a copy of the Sign Out Sheet must be kept in the office for all trips), emergency telephone numbers, fire extinguishers, registered cell phone, Log Book, Accident and Incident Reports, flashlight, vehicle registration card, insurance card, pen/pencil, a copy of the safety orientation and plastic bags available in all camp vehicles.

HSLC - TRANSPORTATION PROCEDURES SUMMER 2027

UPON RETURNING TO HSLC

- Return the vehicle's keys to the clinic and sign-in.
- Bring lost items found in the vehicle to the Lost and found.
- Make sure the vehicle is clean (no trash).
- Close all windows. Lock all doors.
- Park the camp vehicle in its assigned location.
- If a vehicle is not operating properly the van key should not be returned to the clinic. **The key is to be** handed directly to the Facilities Director or the Executive Camp Director.

TRUCK AND TRAILER PROCEDURES

- HSLC uses a truck and trailer when the school bus is unavailable.
- All staff must be trained and certified by the Facilities Director annually before driving the truck and trailer.
- The speed limit is 15 mph when transporting campers.
- The driver is the only staff member to unlock the gate on the trailer.

The following regulations are required to be used to operate the truck and trailer.

- There must be at least one staff member trained to follow written accident procedures for:
- Providing or securing care for the injured,
- Supervising the uninjured,
- Specifying whom to notify in an emergency,
- Identifying witnesses and obtaining accident or emergency information,
- **Safety** responsibilities and **group** management (i.e., management of camper behavior on and off the vehicle, accounting for all passengers, use of seat belts and all the regulations specified in this memo), and the Staff Manual.

SAFETY ORIENTATION FOR THE TRAILERS

Please review the following rules with all passengers (campers and staff) before traveling. (AD.8.1.)

- Please do not distract the driver.
- No excessive noise or rowdiness
- No horseplay
- No heads or limbs outside the trailer.
- All passengers are to remain seated whilst the vehicle is moving. (AD.7.1.C)
- No-one stands up until given the OK by the driver.

These rules and regulations must be placed inside all camp vehicles that transport campers.

REFUELING THE CAMP VEHICLE

- Vehicles should be unoccupied when refueling in camp.

EMERGENCIES (AD.6.1)

- Situations occurring on the trip which necessitate emergency medical care must be referred to the nearest medical facility immediately. If you are qualified and certified for the required medical attention, please assist in the situation. If you are not qualified to render medical assistance, make the appropriate decisions to get qualified medical assistance. (AD.6.1a)
- In the event of an emergency one very important job will be supervising the campers and keeping them calm. It may be necessary to entertain campers to keep their minds off the accident and keep them "out of the way."
- Supervision of the UNINJURED: Staff members not required to address the immediate emergency should be assigned to the supervision of the uninjured campers. Remove them from the area to an area that is safe asap. Occupy the campers with a low energy activity. (AD.6.1b)
- If the driver is injured, the trip leader or most senior staff member should take charge. The First Aid Kit is also stored in the vehicle.
- **PASSENGER ILLNESS** If a camper or passenger becomes ill, immediately inform the Staff Member In-Charge or the medical person on duty. If the Staff Member In-Charge is the driver, attend to the passenger with applicable materials (i.e., bags, paper towels, quick ice, etc.) and have the driver pull off the roadway as soon as convenient.
- Encourage the campers to speak up if they feel they are going to be sick so the counselor can prevent a mess from occurring. If a camper is going to vomit (or gets sick) on the way to and/or from travel destination, the staff member in-charge should preemptively get a "sick bag" to the camper. Early intervention with a sick bag prevents a mess. The counselor should help make the sick camper as comfortable as possible. Refer to Hermann Sons Life Camp's Procedures for prevention of the transmission of bloodborne or body fluid pathogens.
- If there is a serious illness or injury, refer to the Camp's Emergency Communication Plans. The general rule is for the first aid certified staff member to stabilize the situation while the other staff member (or member of the group) contacts EMS either by cell phone, public phone, nearby residence or flagging a passing driver down.
- A first aid kit and esp kit must accompany each trip off camp grounds. The staff member assigned the responsibility for routine health care and first aid must record the information concerning any treatment given to campers or staff while out of camp. The information must state the date, time and name of person treated. A general description of the injury or illness as well as the treatment must be put in writing and upon return to camp the information must be appended to the daily medical log located in the clinic. (HW.18.1. C and E)

- Completion of Hermann Sons Life Camp's Accident Report Form for injuries incurred which required professional treatment is required to be completed immediately upon return to camp by the trip in-charge. File the form in the camp director's mailbox in their office. (AD.14.1)
- In addition to actual accidents, incidents (near misses, events that threaten harm to staff or campers, behavioral problems, campers missing check-ins, fights, improper behavior, any significant rule violation) are also required to be documented. Incidents are reported on a Camp Incident Form which is filed in the camp director's mailbox located in their office.

EMERGENCY BREAKDOWNS

- Move the vehicle off the road as far as possible or into a parking lot if possible.
- Set transmission in park, turn ignition off, and apply parking brake.
- Set 4-way emergency blinkers.
- If on a highway, set emergency reflectors at least 100 feet in front of and behind the vehicle.
- Do not unload passengers from the vehicle unless you're stopped in a parking lot.
- Call the camp main office. If a cell phone was not taken on the trip, send one of the attending staff members to travel to the nearest phone (i.e., private residence, business establishment, etc). The driver is to stay with the camp vehicle and the campers. Never leave campers unattended. If only one staff is available wait for police if located on a busy highway. If located on a road not well traveled, accompany campers (well off the road) to the nearest telephone.
- Do not try to fix the vehicle yourself.

ACCIDENT WITH INJURY

If the accident involves an injury that requires more than routine health care and first aid, DO NOT TOUCH the injured person unless you are appropriately qualified and certified. Make the injured person as comfortable as possible. If someone is on board who is qualified to provide the necessary medical care, that person should take charge of First Aid.

- One staff member is to contact appropriate emergency personnel, i,e, state police, EMS (CALL 9-1-1). Off camp trips are always led by staff members equipped cell phones. If there is no service with the cell phone, go to the nearest land-line telephone (maybe a private home/business) and call. Flag down a passing car if necessary. A list of emergency telephone numbers are stored in the first aid kit and/or in the trip file. (AD.6.1c)
- After emergency personnel are contacted, call the camp. The office staff member will contact the EPC/ECD (AD.6.1c)
- The EPC/ECD will contact the parents of the campers involved in the accident.
- The EPC/ECD will contact the Kerr Country Emergency Management Coordinator if necessary.
- Never leave campers unattended.
- Emergency reflectors should be placed 100 feet in front of and behind the vehicle assuming the vehicle is on the roadway or the road's shoulder.
- Turn on the vehicle's 4-way blinkers.
- After emergency service arrives, assist in whatever capacity required.
- If emergency transportation is necessary, document where the victim is being transported and relay this information to the camp asap. Send one staff member with the transportation if possible.
- Meet with state police or local police authorities at the scene of the accident. Request a copy of the accident report.

CAMPER SAFETY

- One staff member should unload the vehicle (unless unsafe) and move the campers to one location well off the road. Make sure that all of the campers are accounted for. Above all make sure that the campers stay calm and remain safe.

DOCUMENT

- Describe the accident and obtain the following information:
- Location, parties involved (addresses, phone number, license plate numbers, insurance carrier, insurance policy numbers), witnesses, authorities attended, and any injures. Also draw up a sketch of the accident using landmarks and the position of each vehicle. Any statements or admissions made by the other driver should also be written down. (AD.6.1.d)

ACCIDENT WITH NO INJURY

If the accident or emergency does not involve injury, double check. Make sure that no one was harmed and account for all campers and staff on the trip.

If possible, move the vehicle off the roadway. Unload the passengers from the vehicle (if safe) and move them well off the road to the nearest safe location. If the accident is a minor "fender bender" keep campers in the van, if it safe. If the van cannot be moved, turn 4-way emergency blinkers on and set-up emergency reflectors in front of and behind the van.

If the accident involves another vehicle or party, instruct the other staff member(s) to supervise the campers while you assess the situation. Follow CONTACT and DOCUMENT procedures above.

2027 HERMANN SONS LIFE CAMP DRIVER TRAINING

Staff Member: _____ Vehicle Used: _____Date of Training: _____

SKILLS COVERED	COMPLETED	COMMENTS
Key Locations and Sign-Out procedures location		
Backing vehicle into parking spot		
Orientation of campers		
Emergency equipment/info.:		
- first-aid kit		
- fire extinguisher		
- reflectors		
- phone/orientation		
- health forms		When taking campers/staff members to doctor, take health form
- emergency procedures		
- registration information		
- insurance information		
Vehicle safety procedures:		
- checking tire inflation		
- adjusting mirrors		
- adjusting seat		
- ignition/steering column		
- location of flashers		
- location of turn indicators		
- location of horn		
- location of heat/air/vents		
- seat belts		
- location of gas tank		
- refueling procedures (campers)		Do not refuel w/ campers in vehicle
Start once everyone has seat belts on		
Speed limits (in/out of camp)		10mph or slower, 5 – 10 mph or slower on the back road
Observation of handling vehicle		
Backing up (note location)		
Loading/unloading passengers		
Dealing w/vehicular breakdowns		
Dealing w/passenger illness		
Handling camper behavior		
Evacuation procedures		
I WATCHED THE Distracted Driving video	STAFF SIGNATURE	
I HAVE READ and understand the 2025 Transportation Manual	STAFF SIGNATURE	
TRUCK AND TRAILER DRIVING TEST: Driving with passenger on trailer or with staff passengers seated in bed of truck		15mph or slower. NEVER exceed 15mph. ONLY ON PRIVATE ROADS

FACILITIES DIRECTOR_____ DATE: _____