



Citizens Options
Unlimited

Your guide to



Everything you need for a successful, fun filled
Summer 2017



Web site: www.camployaltown.org and www.bunk1.com

WELCOME TO CAMP LOYALTOWN

Welcome! We are so excited about spending time with you at Camp Loyaltown this summer! As you know, Camp Loyaltown is a summer wonderland where each summer over 700 children and adults enjoy specialized activities, make lasting friendships and experience Mother Nature at her finest. It is our pleasure to be welcoming you to this beautiful place.

For your safety and to hopefully answer any questions that you have, we have put together this guide. You will find all contact information for Administrative staff at the end of this handbook.



CAMPER RIGHTS

All campers, without distinction of any kind, have equal rights to:

- Be treated with respect
- Receive the special care, supervision and medical care that his/her particular condition dictates
- Protection from exploitation, abuse (mental, physical and sexual) or any form of degrading treatment.

Each camper has a right to an enjoyable and safe experience at camp. The Senior Director of Citizens and the Camp Loyaltown Director have the right and indeed the responsibility to discharge any camper who

- Poses a threat to self or others (by word or deed)
- Is disruptive, preventing others from sleeping, eating or otherwise enjoying camp activities
- Has health issues which, in the opinion of the Nursing Supervisor and the Director, cannot be safely maintained at camp

CAMP SAFETY

Safety is the first priority of our camp! We work closely with the following agencies and strictly adhere to all health and safety codes:

- The New York State Department of Health
- The New York State Office for People with Developmental Disabilities.
- The American Camp Association (ACA) has accredited Camp Loyaltown as a camp that meets the ACA's high safety standards and quality programming.

The State Department of Health requires that we have a written safety plan that addresses many important areas for operating a safe camp, such as our procedures for hiring and training staff, supervision of campers and handling camp site hazards and emergencies.

The Department of Health also inspects the camp prior to the camp opening, and again while camp is in session. The reports from their findings are filed off-season in the Plainview office and Hunter Camp Loyaltown office during the camp season.

BACKGROUND CHECKS

To ensure the safety and quality of care of the individuals at Citizens, Camp Loyaltown, all employees must undergo the following inquiries:

- A search of the NYS Justice Center's staff exclusion list
- OPWDD fingerprinting for the purpose of a criminal background check
- A search of the OPWDD Mental Hygiene Law 16.34
- A check of the NYS Office of Children and Family Services Statewide Central Registry database

These inquiries will be made by Citizens, Camp Loyaltown administrative staff, using an employee's first and last name, in addition to his or her date of birth and/or social security number. All results will be kept on file in the camp office and will not be made public. No employee will be allowed to work for Citizens, Camp Loyaltown until he/she is cleared by the four agencies above. Any employee who fails, or refuses to comply with the above inquiries is subject to termination of employment.

All staff also completes a week long agency training to ensure they are knowledgeable and prepared to adhere to the high standards of working at Camp Loyaltown and in compliance with OPWDD/DOH. Our amazing staff is mature, diverse, and most importantly dedicated to the care of children and adults with disabilities. Most travel from all areas of the world from countries such as Australia, England, Jamaica, Hungary, Ireland and Mexico. This year we are very proud to say that 25% of our staff are returning for summer, 2017.

CAMP LOYALTOWN CALENDAR – SUMMER 2017

SESSION 1	JUNE 18 - JULY 2	Ages 18 and older
SESSION 2	JULY 2 - JULY 16	Ages 18 and older
SESSION 3	JULY 16 – JULY 30	Ages 18 and older
SESSION 4	JULY 30 - AUGUST 13	Ages 18 and older
SESSION 5	AUGUST 13 - AUGUST 20	Ages 4 thru 17
SESSION 6	AUGUST 20 – AUGUST 27	Ages 4 thru 17
SESSION 7	AUGUST 27 – SEPTEMBER 5	Ages 18 and older

SESSION 1 is the kick-off to summer! It is for campers over the age of 18. All campers are given the support needed to ensure a great time. This session can provide 1:1 staff support if needed. A programming schedule is created for the camper so that they can experience all areas of programming with their cabin mates. The Equine Program begins this session; more definitive dates are available closer to our start date.

Yay, July is here! **SESSION 2** is for campers over the age of 18. All campers are given the support needed to ensure a fun-filled two weeks. This session can provide 1:1 staff support if needed. A programming schedule is created for the camper so that they can experience all areas of programming with their cabin mates. Celebrating 4th of July is always a favorite! During this session the Equine Program is available

In the midst of summer, **SESSION 3** is our **most attended** session! It is for campers over the age of 18. During this session campers create individualized schedules and then given the opportunity to seek out the activities **independently**. Themed activities such as *A Night at the Races and Spirit Night* are among the traditional favorites! During this session the Equine Program is available.

SESSION 4 is for campers over the age of 18. Campers are given the opportunity to have 1:1 support if needed. A programming schedule is created for them so that every camper can experience all areas of programming with their cabin mates. Towards the end of the session we bid adieu to the horses! More definitive dates of the Equine Program will be available closer to the start of camp.

Yay! School is out and **SESSION 5** and **SESSION 6** welcomes campers 4-17 years old! Our staff is prepared to ensure that all of the children have a wonderful time. 1:1 staffing ratio is available. Programming is scheduled; however all of the children have the opportunity with their 1:1 counselor for more individualized programming of their choosing. *Sensory Night and Disney Night* are a pure delight for all.

As the summer is winding down, we are very proud to offer **SESSION 7** as an extension to the summer. It is a smaller session for campers 18 and over. During this session there is a relaxed feeling at Loyaltown. Some Program areas are Programming is stationed around the camp and with their cabin mates, campers are invited to partake in any activity they choose. *Our End of the Summer Dance* is perfect way to end our camp season.

For any questions regarding Camp Dates and Sessions for 2017, please call the Camp Office 516-293-2016x5608.



BUNK1!

BUNK1 is the source of our on-line application and camper database. To apply go onto the site www.bunk1.com, use the invitation code **loyaltown**. For first time users, the application can take some time to complete. For returning campers, it is a much quicker process, as most fields repopulate. Be sure to apply early so that you are not disappointed by being waitlisted. Our staff is here to help you. If you have no computer, you are invited to our office so we can guide you through it. Please always feel free to contact us! Contact information is in the back of this guide. **Please note these important details:**

- **If anything changes with the application, call the office, so we can make the changes for you!**
- **Only if you sign 'Yes' to the Photo Agreement at the end of application you will be able to view photos of your camper on BUNK 1! During camp, hundreds of photos are uploaded daily!**

TUITION PAYMENT

Every camper is unique to our program. The camper's form of payment may be as well. If your camper has been enrolled in **Self-Direction, Medicaid Waiver, Care at Home** or other programs, **you must notify the office**. We will require documentation to ensure we can utilize this funding properly. **If we do not receive this information, you will be responsible for cash payment.** Your Medicaid Service Coordinator and/or Self-Directed Broker should be notified that the camper will be attending Camp Loyaltown and will assist in obtaining the necessary documentation. You will receive an acceptance letter from the Camp Loyaltown Office within 3 weeks of applying and what method of payment/funding we will be utilizing. This will be your confirmation of enrollment.

SCHOLARSHIPS

Scholarships are available on a need basis. A letter stating the circumstances of the need for a scholarship and a copy of the parent's most current tax return should be mailed to the Plainview office to the attention of Jerri Walker, Assistant Director. **You will receive a letter if accepted or denied.** **If you have been the recipient in the past, you must reapply each year.** Do not assume that your camper will receive it each year.

INFORMATIONAL SESSIONS

Informational Sessions are our way of communicating to all families the important information that will assist everyone in having a successful and safe summer! It is also a wonderful time for you to meet with the administration of Camp Loyaltown and ask any questions you have. At each session, we will have copies of the handbook, food menus, medical forms and other information you might need. All Informational Sessions are scheduled at AHRC Nassau/Brookville Offices. **The address is 189 Wheatley Road, Brookville.** We meet in the **Ballroom of the Mansion**. You may park in the front or if you are in need of an elevator, the rear of the building. **You will need to RSVP for your session you are attending: jwalker@ahrc.org or call 516-293-2016x5451**
The Dates of the INFORMATIONAL SESSIONS for 2017 are:

Monday, May 1, 6:30pm-7:30pm
Wednesday, May 3, 6:30pm-7:30pm
Saturday, May 6, 10:00am-11:00am
Saturday, May 13, 10:00am 11:00am
Sunday, May 21 10:00am -11:00am
Tuesday, May 23 6:30-7:30pm

VISTING CAMP LOYALTOWN



We recommend that you visit Loyaltown with your camper before he or she attends for the first time. To schedule a visit during the camp season, please call the camp office in Hunter to set up an appropriate date; visits can be scheduled any day of the week. The only dates we try to not schedule visits are first and last days of the sessions. However, if one of these dates is the only one you are able to visit, we will do our best to accommodate your request. If you wish to visit camp prior to June 1st, please call our Plainview office.

DIRECTIONS TO CAMP – To use Map quest or a GPS for directions, use 118 Glen Ave, Hunter, and NY 12442

Take the Throgs Neck Bridge to Rte. 295 North which becomes Rte. 95 North. Stay on Rte. 95 North to exit 21 (Rte. 287 West-Tappan Zee Bridge). Rte. 287 will divide; take the exit for Rte. 87 North (Albany) over the Tappan Zee Bridge. Continue on Rte. 87 until exit 20 (Saugerties). After you pay the toll, turn left at the light onto Rte. 212. Make a right onto Rte. 32 North, follow for approximately 6 miles. At the flashing light, continue straight on Rte. 32A (approximately 2 miles) to the traffic light, Rte. 32A ends here. At the light make a left onto Rte. 23A west for approximately 10 miles. This will bring you into the village of Hunter; you will pass the entrance for the Hunter Mountain on your left. Approximately one mile past Hunter Mountain on Rte. 23A will be Glen Avenue on your right. Turn right onto Glen Avenue, go approximately 400 yards, and the camp entrance will be on your right. Pull into the camp gates and stop at the main office. If you pass the Hunter Movie Theater and Post Office you missed Glen Avenue.

A TYPICAL DAY AT CAMP LOYALTOWN

8:00 am	Wake up ☺
8:45 am	Line-Up
9:00 am	Breakfast
10:00 am	Cabin Clean up
10:45 am - 11:30 am	1 st Period
11:45 am - 12:30 pm	2 nd Period
1:00 pm	Lunch
2:00 pm - 2:45 pm	3 rd Period
3:00 pm - 3:45 pm	4 th Period
4:00 pm - 4:45 pm	5 th Period
5:30 pm	Dinner
7:00 pm	Start of Evening Activity
8:30pm	End of Evening Activity
8:30pm	Cabin time
10:00pm	Lights Out ☺



MEALS AT CAMP LOYALTOWN

We provide 3 nutritious meals a day as well as snacks. We serve meals family- style. The counselors sit with their campers at all times assisting campers in whatever capacity is needed. If you would like to see a copy of the menu served, please contact us anytime

If a camper has a special diet, such as gluten free or food allergies, then it is critical that our Health Center have that information highlighted on the camper's health form. We have a cook whose sole responsibility is to prepare special diet meals.

If you are sending in specific food items for your camper, please label them DINING HALL along with your camper's name. We request NO FOOD be kept in a camper's bag for snacking. We will label it and encourage all eating be done in the Dining Hall. We appreciate your assistance with this.

****If you are sending food to be given with medication, please label it HEALTH CENTER.**

Copies of our Camp Menu will be available on the Camp Loyaltown site closer to the start date of camp.

CAMPER HOUSING

The Camp Loyaltown administrative team is responsible for placing campers in cabins. This administrative team includes the Director, Assistant Directors, and Nursing Manager. To determine what cabin a camper is best suited for, the team takes into consideration factors such as age, gender, ability level, behavioral and medical issues. We also take into consideration housing requests from the applications and do our best to accommodate each request. However, requests that are made are not guaranteed to occur. Close to your Camp Session, you will receive a mailing that will provide the Cabin Number and Bus Number.

TRANSPORTATION

All drop-off and pick up locations are the same this year! We will be at our home location in Brookville! **The address is 189 Wheatley Road, Brookville, NY 11545.** When you arrive on the campus, follow the signs for the Brookville Center/Cissy Birnbaum Building. Our Coach Buses will be arriving/departing directly in front of this facility. Please find a spot in one of the parking lots to park. Close to your Camp Session, you will receive your bus number, luggage tags, and other instructions.

Please note, it is very important that you arrive on-time.

***Our buses leave strictly at 2:00pm**

SESSION 1	JUNE 18 JULY 2	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 2	JULY 2 JULY 16	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 3	JULY 16 JULY 30	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 4	JULY 30 AUGUST 13	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 5	AUGUST 13 AUGUST 20	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 6	AUGUST 20 AUGUST 27	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM
SESSION 7	AUGUST 27 SEPTEMBER 5	DROP OFF PICK UP	ARRIVE BY 1:15PM, BUSES LOAD AT 1:30 PM AND DEPART BY 2:00PM ARRIVE BETWEEN 11:30AM – 12:00PM

We know that arrival and departure can be a very exciting and anxious time! We ask that you all keep a proper decorum and if you are in need of anything, go to our Information Table, for assistance. Most medication and money have already been sent, but there may be some items remaining.

MEDICATIONS SHOULD NOT BE TRANSPORTED IN THE CAMPER'S LUGGAGE. MEDICATIONS SHOULD NOT BE BROUGHT TO THE BUS FOR TRANSPORT UNLESS PRIOR ARRANGEMENTS ARE MADE WITH THE NURSING SUPERVISOR AT THE CAMP HEALTH CENTER. NO MEDICATION WILL BE ACCEPTED AT BUSING WITHOUT OUR AUTHORIZATION. This is to ensure a Nurse has reviewed the medication and ultimately for the accuracy and safety of the camper. ALSO NOTE THAT THERE WILL BE NO MEDICATION GIVEN ON THE BUS WITH THE EXCEPTION OF AN EMERGENCY EPIPEN. If the camper has medications that are due during the bus ride time, please speak to your doctor about a dosing schedule for that day and relay that schedule to the camp nurse!

BUS LOADING AND UNLOADING PROCEDURES

LOADING

A parent or a house staff may bring an individual to the bus. When the individual boards, his/her name will be checked off our list. Once on the bus, a camper should not exit, unless there is an extreme emergency.

BUS SAFETY PROCEDURES

- All campers must remain seated throughout the bus ride unless they are using the bathroom.
- Everyone on the bus is encouraged to wear a seat belt for the entire ride to camp.
- If a camper is going to use the bathroom, he/she will be escorted by a counselor.
- Any campers with behavioral challenges or seizures will be assigned a 1:1 staff.
- Staffing on all buses will be at least 1:5.
- Counselors will suggest water and toileting to campers every hour.
- **No eating is permitted while the bus is in motion.**
- **PARENTS: Please ensure that your camper has eaten and has taken all appropriate medication prior to boarding the bus.**

UNLOADING

Staff assigned to oversee luggage will get off the bus as soon as they arrive and unload all of the luggage, including project bags. You may pick up your camper by coming to the front door of the bus. Once the bus captain is told the camper's name, the staff will bring the camper to the front of the bus. A camper is not allowed to get off the bus unless someone is there to meet them. If a camper needs to get off the bus, a staff person will be assigned to be with that camper and make note of it, so when the parent or house staff arrive it will be known that the individual is not on board.



DRIVING TO CAMP

If you want to drop off the camper at camp, then you should plan to arrive no earlier than 4 pm. Unfortunately, we will not have appropriate staffing available until that time. To pick up your camper, you should arrive between 9 – 10 am. Please note if you are dropping off your camper, this is not the time for meetings with the nurse or other camp staff. We need to have all staff available to assist for camper arrival/departure. All necessary conversations should take place prior to your camper arrival. Once again, this is for the safety of all campers.



LUGGAGE

Please try to pack all of your camper's clothing and other belongings in one suitcase or duffel bag. Your camper may also have 1 carry-on. All luggage must be brought to the bus with the camper. It will be transported to camp that day by bus. Food should not be packed in any bag!

PLEASE, REMOVE TAGS FROM PRIOR YEARS AND ATTACH THE CURRENT LOYALTOWN LUGGAGE TAGS THAT WILL BE SENT TO YOU PRIOR TO YOUR CAMPER'S SESSION. THIS WILL ASSIST OUR STAFF IN DELIVERING TO THE CORRECT CABIN. WE STRONGLY RECOMMEND THAT YOU DO NOT SEND NEW OR EXPENSIVE CLOTHING TO CAMP. WE CANNOT REPLACE OR REIMBURSE YOU FOR LOST ITEMS

SEE NEXT PAGE FOR CLOTHING LIST OR WEBSITE

Please note the variety of items we request. Remember that the weather at camp can vary greatly; it can be as cool as 45° F. at night and as warm as 98° F. during the day.

- Camp Loyaltown requests ALL CLOTHING AND ITEMS BE LABELED WITH THE CAMPER'S FIRST & LAST NAME WITH PERMANENT MARKER OR SEWN ON LABELS. LABEL ALL FOOTWEAR - Remember the shoes they are wearing as well!!
- **Do not send the camper's best clothing. All laundry is washed in hot water and dried in commercial dryers.**
- Please be sure to send at least the recommended number of items. Allow for more items if the individual has toileting or bedwetting incidents.

SESSIONS 5 & 6 CAMPERS ONLY REQUIRE HALF THE NUMBER OF ITEMS

If the camper uses the following, please be sure to send along **EXTRA:**

Epi Pen
Absorbent Waterproof Mattress Pad or Disposable Pads
Wipes
DIAPERS **

****If an individual wears a diaper, the individual must use a swim diaper for swimming. These may be ordered at www.Kiefer.com or by calling 1-800-323-4071.**

*If the camper has some miscellaneous items, we request that one transparent storage box be sent to fit under the bed which will be used to store their miscellaneous personal belongings. The approximate size is 12" d x 16" w x 6" h and boxes are available in Target or WalMart and are made by Rubbermaid or Sterlite.

**SUGGESTED CLOTHING LIST FOR CAMP LOYALTOWN
FOR ONE OR MORE 2-WEEK SESSIONS – SESSION 5 AND 6 (~ HALF)**

**DO NOT SEND BRAND NEW OR EXPENSIVE ITEMS, AS HARD AS WE TRY THINGS GET LOST.
WE CANNOT REPLACE OR REIMBURSE FOR LOST ITEMS**

CLOTHING:

- 8-10 Shorts
- 10-12 Shirts
- 2 Pants
- 3 Sweatshirts
- 2 Sweatpants
- 12 Underwear
- 12 *pairs of Socks*
- 2 or 3 sets of Pajamas
- 1 Medium Weight Jacket
- 2 or 3 Bathing Suits
- 4-5 Towels
- 3 Washcloths
- 2 pairs of Sneakers
- 1 pair of Footwear for rain – THIS CAN BE ANOTHER PAIR OF SNEAKERS
- 1 Raincoat, Poncho or Waterproof Jacket (WE SUGGEST PONCHOS FROM THE DOLLAR STORE)
- *1 pair of jeans if participating in Horseback riding**
- *1 pair of heeled shoe if participating in Horseback riding**
- *1 dressy outfit for ‘Banquet Night’**

PERSONAL ITEMS:

- Shampoo & Conditioner*
- Liquid Body-wash*
- Toothbrush & Toothpaste
- Deodorant
- Brush and/or comb
- Tissues
- Sun block (at least #15)
- Sanitary Pads (women)

MISCELLANEOUS ITEMS:

- Baseball hat or Sun hat
- Flashlight
- Mesh Laundry Bag (WITH NAME)
- Belt
- OPTIONAL ITEMS:** (only if needed)
- Bathing Suit Cover-up
- Heavy Duty Covered Toe Sandals (Teva-like)*
- Bug Spray
- Storage Box (12”d x 16”w x 6”h) – for crayons, books,
- 1 pair of Water shoes

IMPORTANT ITEMS (IF NEEDED)

- Orthotics
- Diapers (figure 1 and 1/2 times the # you use in 2 weeks)
- Wipes
- Washable, reusable swim diapers**
- (see Reverse for swim diapers)****
- Waterproof Mattress pad or Disposable Pads****

****These items are needed if the camper wears diapers or has incontinence issues.**

INSTRUCTIONS FOR LABELING CLOTHES

- 1. Clothing should be labeled so the full name of the camper is visible when the article is folded. For example: any item with a neck or waist should have the name on the inside of the back part of the clothing, toothbrushes should have the name on waterproof tape**
- 2. Inventory every item sent to camp and indicate the quantities on the list as a guide. Send more clothing if the individual has toileting accidents or requires frequent changing.**
- 3. Send a copy of this list in the individual’s luggage.**

INSTRUCTIONS FOR SENDING OTHER ESSENTIAL ITEMS SUCH AS DIAPERS, GLASSES, HELMETS OR ADAPTIVE EQUIPMENT:

Diapers – The clothing list is designed for campers who are toilet trained. Those campers who are not should bring more clothing than listed, particularly more undergarments, pants, shorts and pajamas. Be sure to send plenty of diapers. You may send diapers ahead of time if you wish or drop them off at the Main Office.

Glasses, helmets, hearing aids or other special orthopedic apparatus or adaptive equipment (wheelchair trays, eating utensils and communication boards) – These items must come to camp with the camper’s name securely taped to them or engraved on them.

All Adaptive Equipment must arrive at camp in good working order. If you are sending a wheelchair, everything must be operational, such as seat belts, brakes, etc.

Lost & Found Items

Do not send cell phones, ** Gameboys, Walkmans, iPods, iPads, CD players, or other expensive items, unless the camper can be solely responsible for it. Electric razors are also included in this list.

WE CANNOT REPLACE OR REIMBURSE FOR LOST OR DAMAGE ITEMS.

Unfortunately, we do have items that are left at camp. If the item is well labeled and identifiable, we will have the wonderful volunteers at the AHRC Nassau Day Program deliver the items back to you.

If you are in immediate need of the item, please call the Camp Office.

SPENDING MONEY

- SPENDING MONEY SHOULD BE SENT AS A CHECK OR MONEY ORDER ONLY— MADE OUT TO: **CAMP LOYALTOWN**, and mailed directly to camp at 118 Glen Avenue, Hunter, NY 12442
- **PLEASE PUT THE INDIVIDUAL’S NAME AND SESSION # ON THE MEMO LINE OF THE CHECK. IF THEY ARE ATTENDING MULTIPLE SESSIONS YOU MAY SEND ONE CHECK FOR ALL SESSIONS; BE SURE YOU WRITE THE SESSIONS IN THE MEMO LINE.**
- CHECKS WILL BE CASHED JUST PRIOR TO THE CAMPER’S ARRIVAL AT CAMP

RECOMMENDED AMOUNTS:

Session 1, 2, 4 & 7	\$15.00—\$20.00
Session 3	Adults—\$30.00
Session 5	\$5.00
Session 6	\$5.00

SWIMMING: Any camper with a known seizure disorder will be required to wear a life jacket in the pool. All campers with seizures will be assigned a counselor to swim with them.

TELEPHONE POLICY:

Parents may call camp and speak to the Unit Administrator in charge at any time. If he/she is unavailable, parents may leave a message and the administrator will call back. Campers may make phone calls home, however we try to encourage their engagement of activities at camp, especially when only attending one (1) two-week session.

MAIL:

The campers enjoy receiving mail from home. We suggest you mail a letter or postcard the Thursday or Friday prior to the camper departing for camp, so the camper receives mail early in their stay. Please include the cabin number as part of the address.

Mail to a camper should be addressed as follows:

Camper's Name, Camper's Cabin #
Camp Loyaltown
PO Box 316
Hunter, NY 12442
****Packages should be sent to 118 Glen Avenue, Hunter, NY 12442**

The camp will be providing postcards and stamps to the campers to send to the parent or guardian throughout their session.

Equine Program

Camp Loyaltown has partnered with HorseAbility, a "Premier" Accredited Center as recognized by the Professional Association for Therapeutic Horsemanship (PATH Intl.) with Certified Therapeutic Riding Instructors, and a specially trained equine heard. This unique opportunity offers the opportunity to focus on what your camper can do and the results are extraordinary. Please ensure you complete the paperwork for the Equine Program, by downloading the forms on Bunk1. HorseAbility requires their own medical forms as well. Please ensure you complete them if you want the camper to participate.

Horseability is only available for certain sessions. If you would like to know the dates, please call the Camp Office.

If you have any questions please contact our Equine Program Director; Alison R. Dodge at ProgramDirector@Horseability.org or 516-333-6151 x103.

TIPS FOR CAMP COUNSELORS

Acceptance of gifts from program individuals and program individuals' families is discouraged. However, our agency recognizes that some program individuals or family members may want to show their appreciation to staff with a small gift. Acceptance of small gifts from program individuals or family members is, therefore, permitted. Unsolicited personal gifts of significant value (i.e., \$25.00 or more) cannot be accepted. If the donor insists on giving the gift, it must be reported to the program supervisor so that appropriate action can be taken.

Charitable: Charitable solicitations are carried out exclusively under the auspices of the Agency's Community Resources Department. Employees who receive gifts either of money or tangible items intended to benefit Citizens/Camp Loyaltown must forward such gifts to the Community Resources Department for processing and acknowledgement.

HEALTH CENTER



Our health center is staffed with professionally licensed nurses 24 hours a day. The Health Center is equipped to handle routine and emergency care. Our qualified nursing staff is prepared to provide care for **short-term** illnesses and first aid care for **minor** injuries. For any medical issues outside of this, a visit to an Urgent Care Center or the local emergency room will be provided.

Only the camp nurses may administer medication. Nurses only administer medications as written by a doctor. Our nurses document and sign for every medication dose given. Nurses may not give a medication if the label is not clear or the label has expired. All narcotic substances or controlled drugs are double locked in the Health Center. **A picture of the camper is used to positively identify the camper before medication is administered, ensure we have one on BUNK1.** All medication, including that of staff, will be held securely in the Health Center and will be dispensed by the nurses. No one, including staff, may keep medications in the cabins. First Aid items may not be administered to campers without permission of a nurse.

Symptoms of illness or signs of injury will be monitored for up to 24 hours, and notification will be made as needed. In the rare event of an emergency, you will be called immediately. However, if we are unable to reach you, we will call your secondary contact which you provided for us on your camper's application.

MEDICAL PHYSICAL FORMS

Pursuant to New York State Regulations, each camper is required to have, on file, a **current annual physical exam**, a **current PRN sheet** (as needed/over the counter medication sheet), the **current year's Medical Clearance**, which must be signed or stamped by the doctor in order for camper to attend camp, and a **current copy of the camper's immunization record**. In the event that Vaccines are not received due to an underlying medical condition, documentation must be submitted from the doctor. If vaccines are not received due to religious beliefs, a form letter is provided to state this as well.

A physical exam form is considered current if the date of the exam was **within one year of the camper's attendance at camp**. Example; Joe Smith is attending Session 1 (June 18, 2016 – July 2, 2016) and the date of his annual physical was July 11, 2015. His medical exam is current; if the date of the exam was June 19, 2015 that would not be current. **If the current physical exam will expire while the individual is at camp, a visit to the doctor will be required prior to attending the full session.**

Annual Physical Exam, PRN form, immunization record for all campers and Medical Clearance is due into the PLAINVIEW Camp Office **BY MAY 15TH OR NO LATER THAN ONE WEEK AFTER THE ANNUAL PHYSICAL EXAM, IF AFTER May 15TH.** For those campers whose date for their annual physical is in the days just prior to their camp stay, the nursing department must be notified directly.

****For the purpose of camp, all "over the counter medications" are considered the same as prescription**

medications and require a doctor's prescription in order for our camp nursing staff to administer them. This includes vitamins, as needed allergy medications, supplements, etc. Doctors can list the as "needed medications" (not on the PRN list) on the signed physical form and that will suffice as a doctor's order.

****If camper's have specific MEDICAL GUIDELINES (e.g. seizures, insulin, bowel protocols, etc.), these guidelines/directions should be included/sent with the medical forms and/or to the Health Center to ensure the highest level of camper safety.**

Annual physical exam, medical clearance, immunization record, prescriptions and adequate supply of medications are required for camp attendance. We realize that there are insurance challenges and special exceptions. We will assist you in facilitating these items from your doctor if you require assistance, but for everyone's safety, campers will not be permitted to attend camp unless we have each of these medical forms prior to the camper boarding the bus.

After June 1st all medical forms must go directly to the CAMP HEALTH CENTER in HUNTER.

Contact us immediately at our Nursing Supervisor's office at (518) 263-4242 ext 25 if there are any medical changes after you submit the physical forms. Every camper attending our program has a special medical care plan, and we must update it accordingly. Early notification to our Health Center helps to avoid confusion and possible safety risk.

***** Please remember we have a large number of campers; help the nurses maintain medical safety for all by providing all required items in a timely manner.***

Any questions should be addressed directly to the Nursing Staff at Camp Loyaltown, (518) 263-4242 ext 25.

AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION

At the end of this handbook is a SAMPLE of the HIPPA Release that will only need to be completed **if requested** by the camper's doctor. If needed, this form will be mailed, emailed or faxed to you for you to complete and submit to your son or daughter's doctor.



CAMPER MEDICATION

For Summer 2017 we will be moving forward with a Medication Packaging System for all campers. We are currently doing our best to ensure this process goes as smoothly as possible for all. You will be receiving more information as soon as it is available. We will also present this information at our Informational Sessions in April/May. If you have any questions, please call the Nursing Manager at Camp Loyaltown at 516-293-2016x5623 or e-mail at mlamberg@ahrc.org.

AUTHORIZATION FOR RELEASE OF HEALTH INFORMATION PURSUANT TO HIPAA

[A litigation version of this form has been approved by the New York State Department of Health]

Patient Name John Doe	Date of Birth 12/11/1980
Patient Address 123 Main Street, Plainview, NY 11803	

I, or my authorized representative, request that health information regarding my care and treatment be released as set forth on this form:
In accordance with New York State Law and the Privacy Rule of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), I understand that:

1. This authorization may include disclosure of information relating to **ALCOHOL** and **DRUG ABUSE, MENTAL HEALTH TREATMENT**, except psychotherapy notes, and **CONFIDENTIAL HIV* RELATED INFORMATION** only if I place my initials on the appropriate line in Item 9(a). In the event the health information described below includes any of these types of information, and I initial the line on the box in Item 9(a), I specifically authorize release of such information to the person(s) indicated in Item 8.
2. If I am authorizing the release of HIV-related, alcohol or drug treatment, or mental health treatment information, the recipient is prohibited from redisclosing such information without my authorization unless permitted to do so under federal or state law. I understand that I have the right to request a list of people who may receive or use my HIV-related information without authorization. If I experience discrimination because of the release or disclosure of HIV-related information, I may contact the New York State Division of Human Rights at (212) 480-2493 or the New York City Commission of Human Rights at (212) 306-7450. These agencies are responsible for protecting my rights.
3. I have the right to revoke this authorization at any time by writing to the health care provider listed below. I understand that I may revoke this authorization except to the extent that action has already been taken based on this authorization.
4. I understand that signing this authorization is voluntary. My treatment, payment, enrollment in a health plan, or eligibility for benefits will not be conditioned upon my authorization of this disclosure.
5. Information disclosed under this authorization might be redisclosed by the recipient (except as noted above in Item 2), and this redisclosure may no longer be protected by federal or state law.
6. **THIS AUTHORIZATION DOES NOT AUTHORIZE YOU TO DISCUSS MY HEALTH INFORMATION OR MEDICAL CARE WITH ANYONE OTHER THAN THE INDIVIDUAL OR ENTITY SPECIFIED IN ITEM 9(B).**

7. Name and address of the provider or entity to release this information:
Dr. Philip Oz 111 Cherry Lane, Plainview, NY 11803

8. Name and address of person(s) or category of person to whom this information will be sent:
CAMP LOYALTOWN

Winter Address: 115 E. Bethpage Road Plainview, NY 11803	Summer Address: 118 Glen Avenue Hunter, NY 12442
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9(a). Specific information to be released:

Medical Record from (insert date) 6/2/2012 to (insert date) 6/2/2013

Entire Medical Record, including histories, notes (except psychotherapy notes), test results, radiology studies, films, referrals, consults, billing records, insurance records, and records sent to you by other health care providers.

Other: _____ Include: (Indicate by Initialing)

_____ Alcohol/Drug Treatment
_____ Mental Health Information
_____ HIV-Related Information

Authorization to Discuss Health Information

(b) By initialing here JD I authorize Dr. Philip Oz

Name of individual health care provider

to discuss my health information with the person or agency listed here:
Horse Ability

(Person or Entity Name)

10. Reason for release of information: <input type="checkbox"/> At request of individual <input checked="" type="checkbox"/> Other: Participation in horseback riding	11. Date or event on which this authorization will expire: 8/24/2013
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12. If not the patient, name of person signing form: Jane Doe	13. Authority to sign on behalf of patient: Parent
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All items on this form have been completed and my questions about this form have been answered. In addition, I have been provided a copy of the form.

Jane Doe Date: 10/29/2013

Signature of patient or representative authorized by law.

* **Human Immunodeficiency Virus that causes AIDS. The New York State Public Health Law protects information which reasonably could identify someone as having HIV symptoms or infection and information regarding a person's contacts.**

VOICES OF MENINGITIS™

A Meningococcal Disease Prevention Campaign
from the National Association of School Nurses

In collaboration with Sanofi Pasteur

What is meningococcal meningitis?

Meningococcal disease, which includes meningococcal meningitis, is a serious bacterial infection that strikes between 800 and 1200 Americans each year. Although rare, meningococcal disease can cause meningitis, swelling of the tissues around the brain or spinal cord; bacteremia, a severe blood infection; or pneumonia. Vaccination has been available for years and is a safe and effective way to help protect against this potentially devastating disease.

Who is at risk for getting meningococcal meningitis?

Although the disease occurs in all age groups, infants, adolescents and young adults, and people 65 years of age and older are at increased risk of contracting meningococcal disease.

How do you get meningococcal meningitis?

The bacteria that cause meningococcal disease are spread through respiratory droplets and direct contact with respiratory secretions. Common everyday activities can facilitate this spread, including kissing; sharing utensils and water bottles; and being in close quarters, such as living in a dormitory. Fatigue may also put people at greater risk of meningococcal disease, possibly by weakening the immune system.

What are symptoms of meningococcal meningitis?

Meningococcal meningitis can be hard to recognize, especially in its early stages, because symptoms are similar to those of more common viral illnesses. But unlike more common illnesses, the disease can progress quickly and may cause death in as little as 1 day. Symptoms may include high fever, severe headache, stiff neck, confusion, vomiting, exhaustion, and/or a rash.

Get the Facts

What can happen if you get meningococcal meningitis?

Although rare, meningococcal meningitis is serious and can potentially cause the death of an otherwise healthy young person within as little as 1 day after symptoms first appear. About 10 to 15 percent of the 800 to 1200 Americans who get meningococcal disease will die. Nearly 1 in 5 survivors are left with serious medical problems, including: amputation of arms, legs, fingers, or toes; neurological problems; deafness and kidney damage.

How can you help prevent your child from developing meningococcal meningitis?

Data from the Centers for Disease Control and Prevention (CDC) have shown that, following infancy, there is a second peak in meningococcal disease incidence among adolescents and young adults between 16 and 21 years of age. Even though the disease is rare, it can result in severe, permanent disabilities and death, so it is important to take every precaution to help protect against it.

To help protect against meningococcal disease, the CDC's Advisory Committee on Immunization Practices (ACIP) recommends routine vaccination of adolescents 11 through 18 years of age (a single dose of vaccine should be administered at 11 or 12 years of age, with a booster dose at 16 years of age for children who receive the first dose before 16 years of age).

Getting the booster, which is recommended by the CDC but not required in many states, is a critical step when it comes to following the recommended vaccination schedule. The booster helps provide protection through adolescence into young adulthood, which is a time when the risk of meningococcal disease tends to increase.

Talk to your child's school nurse or health care provider about meningococcal meningitis prevention and visit www.Facebook.com/VoicesofMeningitis for more information.

Name	Job Title	Contact information Fall/Winter/Spring	Summer
Savita Sharma	Director	516-293-2016x5212 Fax: 516-719-8100 E-Mail: ssharma@ahrc.org	(518)263-4242 Fax: (518) 263-3861 E-Mail: ssharma@ahrc.org
Jerri Walker	Assistant Director	516-293-2016x5451 E-Mail: jwalker@ahrc.org FAX: 516-719-8100 Cell: 516-458-5837	(518)263-4242 E-Mail: jwalker@ahrc.org Fax: (518) 263-3861 Cell: 516-458-5837
Samantha Torres	Operational Manager	516-293-2016x5608 E-Mail: smtorres@ahrc.org Fax – 516-719-8100 Cell: 516-659-3476	(518)263-4242 Fax: (518) 263-3861 E-Mail: smtorres@ahrc.org Cell: 516-659-3476
Jo Ann Koelling	Business Manager	516-293-2016x5611 E-Mail: jkoelling@ahrc.org FAX: 516-719-8100 Cell: 516-524-5651	(518)263-4242 E-Mail: jkoelling@ahrc.org Fax: (518) 263-3861 Cell: 516-524-5651
Marissa Lamberg, RN	Nursing Manager Oversees the Health Center	516-293-2016x5623 E-Mail: mlamberg@ahrc.org FAX: 516-719-8100 Cell: 516-509-2725	(518)263-4242 x25 E-Mail: mlamberg@ahrc.org Fax: (518) 263-3911 Cell: 516-509-2725

SIGNATURE PAGE

I, _____ have read the Parent Handbook on behalf of camper(s)
Print Name

_____. I understand the policies and procedures outlined in
Print Name
this manual and will adhere to them. If I have any questions or concerns, I will contact the
Camp Office directly.

Parent/Guardian:

Sign name _____

Residential Manager:

Sign name _____

Please return signed copy to Camp Loyaltown, 115 East Bethpage Road, Plainview, NY 11803