

Camp Hopewell

**Summer Sessions for
Children and Youth with
Diabetes**

**Parent Handbook
2008**

www.camphopewell.com

Dear Parents,

We are so glad that you have decided to let your child join us at Camp Hopewell this summer. This will be a wonderful and fun learning experience for your child. We have fun and exciting activities planned, many of which will teach your child more about living with diabetes.

This handbook has been created to help you plan for camp, so that your child may have the best experience possible. It includes an overview of the diabetes session, the typical daily schedule for your child while at camp, an overview of check-in and check-out, tips for homesickness and packing, and emergency policies.

Remember, this is a very exciting time for your child. Please treat it as such. Thank you for allowing us to care for your child during this exciting experience!

Sincerely,

Rebecca P. Winsett

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Medical Staff Coordinator

HISTORY OF CAMP HOPEWELL

Camp Hopewell is located on 262 acres of forested land donated to the St. Andrew's Presbytery. The residential camp began over 50 years ago and has a long rich history of summer residential camping. After spending several summers at the East Tennessee Camp for Diabetic Children, and noting that the MidSouth area lacked a specialty needs camp, Dr. Burghen founded the diabetes sessions at Camp Hopewell in 1976. Through Dr. Burghen's commitment to camping and a core group of volunteers, the diabetes sessions have continued to offer an exceptional experience for children ages 7-16 with Type 1 diabetes.

PURPOSE

To offer children with diabetes a typical residential camp setting in which to grow and learn with people who have similar situations and challenges.

MEDICAL STAFF



Medical Director-George Burghen, MD

He is responsible for direct medical care of campers as well as reviewing and approving procedures, policies and manual for diabetes camp. The medical director has a year round view of diabetes camp.

Camp Physician

A camp physician is on-site most of the week. He/she is responsible for overseeing the healthcare of campers during diabetes sessions.

Camp Nurses

Each cabin is assigned a camp nurse to oversee the medical care of the children. Their roles include:

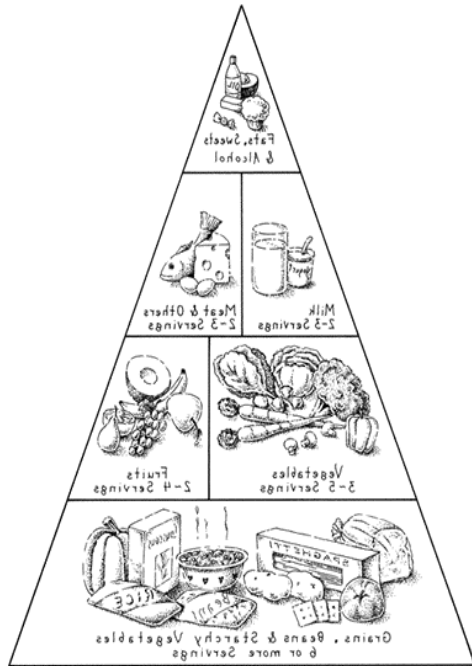
- Assist/facilitate blood glucose testing and ensure additional medication is taken appropriately
- Take a lead role in ensuring proper dose of insulin (in collaboration with the camp physician) and observe each injection
- Assess blood glucose levels for need for intervention per daily schedule
- Use teachable moment to correct poor habits or facilitates new learning experiences

All nurses carry an emergency fanny pack that includes Glucagon, but are asked to treat hypoglycemia as unobtrusively as possible.

Counselors with Diabetes (CWDs)

These counselors are 18 years of age with Type 1 diabetes. Each cabin has at least 1 CWD. They act as a role model for the children and insure the safety of the children with respect to blood glucose during all activities. The CWDs participate actively in cabin activities, and are able to recognize and treat hypoglycemia appropriately due to personal experience. Since they are part of the cabin, the CWDs are able to treat any hypoglycemia and continue with the activity instead of halting the activity to focus on hypoglycemia. This is a positive reinforcement for campers.

Nutritional Management while at Camp



Good nutrition starts with understanding what comprises a well-balanced and healthy diet. Foods are divided into 7 major groups: **fats/sweets, milk products, meats, fruits, vegetables, and grains/beans/starchy vegetables.** Whether you have diabetes or not, it is important to eat from each food groups in order to insure your body has all the nutrients it needs. The main nutrients found in foods are carbohydrates, proteins, fats, vitamins, and minerals.

At camp, we use both the **ADA exchanges** and **carb counting** (15 grams CHO = 1 carb) systems for teaching the campers about good nutrition and how to improve blood glucose control.

Mealtimes are at 8 am (Breakfast), 12 noon (Lunch), and 5:30 PM (Dinner). Meals are served **Family style**, where each table is set with serving dishes of each item from the menu. Portions are counted according to their meal card and menu or by carbohydrate counting. Portion control is encouraged! Campers sit with their cabin group. For each meal, campers are assigned as cruisers (one for each table). The **cruiser** is in charge of setting the table prior to mealtime, placing foods onto the table, replenishing foods as needed during meal, and cleaning the table. Meal plan with serving size and carb units are reviewed before a song and blessing is given before each meal. On each table are individualized **Meal Cards** for each of the campers. Campers are assisted with serving their plates with the proper amount of food. Campers on pumps participate in counting carbs and calculating boluses. Campers complete a carb counting worksheet after each meal.

Snacks are served at 10 AM and 3 PM in the Pavilion and at 8:30 PM in the Dining Hall.

Educational Offerings:

- Formal education sessions with Dietitians
- Fun games and activities
- Teachable moments, such as mealtimes and quiet time with cabin

DAILY SCHEDULE

7:00 am (or so) Depends on cabin group, age of campers, and complexity of preparation time

Blood glucose
Urine ketones
Insulin dose



8:00a Breakfast
Insulin dose

5:00p Blood glucose

9:30a Activity 1

5:30p Supper

10:30a Snack

6:45p All camp activity

10:45a Activity 2

8:30p Snack

12N Lunch

9:00p Blood glucose check
Bedtime insulin dose

1:30 Activity 3

10:00p Lights out

3:00 Snack

12:30a Cabin blood glucose checks

3:30 Activity 4

The cabin group chooses the activities for their week during the first day of camp. They include:

- Swimming
- Hiking
- Archery
- Field Games
- Canoeing
- Challenge course
- Arts & crafts



CAMPER CHECK-IN PROCEDURE

Campers with their parents check-in beginning at 2 pm on Sunday the first day of camp. Plan for 2 ½ hours.

NOTE: Parents are responsible for campers until turned over to cabin counselors.

Station 1 Camp Administrator and Financial Table

- Collection of remaining camp fees.

Station 2 Parent and child meet with Camp Nurse

- Verify insulin regimen on application (current type dose times)
- Give nurse additional medicines. **DO NOT** leave medications in camper's luggage. The exact amount of medication for the week of camp should be in the original bottle with the camper's name, dose to be taken, and schedule clearly marked.
- Share any recent illness (within past 7 days)
- Inform nurse of any severe hypoglycemia episodes (within past 30 days)

Station 3 Parent and child meet with Camp registered dietician

- Height and weight are recorded
- Verify calories, knowledge of CHO counting

Family session: Begins approximately 3pm and is located in the Dining Hall.

CAMPER CHECK-OUT PROCEDURE

Saturday at 10am

Plan on 1 hour

Camp Hopewell Camp Store will be open during and after checkout for families to purchase souvenirs.

Camp Medical Director and physicians will be available in Green Pavilion.

You are free to leave with your child after check-out is complete.

Please remember: Check-in and Check-out are ideal times to speak with the physicians, nurses, and counselors about your child's camp experience. Your camper is not permitted to drive personal vehicles nor is permitted to drive camp vehicles.

Early pick-up is not encouraged as cabin group cohesiveness is very important.

FAMILY EMERGENCY POLICY

If a family emergency occurs and you need to pick up your camper, please talk to camp staff first. You may:

Call (662) 234-2254 anytime during the day or night. Speak to the Hopewell Staff or leave a message. A staff member will return your call.

If coming to camp during a session, stop at the on-site Camp Office.

Do **NOT** go directly to cabins to pick-up child. This policy is in place for the safety of your child.

HOMESICKNESS

While staff is trained on how to deal with any homesickness that may arise, there are things that you, as parents, can do to make this time away from home seem less frightening.

- Letters from home need to focus on camp, not what is going on at home without your child.
- Remember that the first letter home is usually sad. The camper may have mixed emotions about being homesick. He/She is having a lot of fun, but writes home about loneliness. If you get a sad letter, call Camp Hopewell *first* to get a clear picture of what is happening to your child. Several children were astounded when family came to pick them up because of their sad letter, and cried because they were expected to come home.
- **Do** use questions/comments like:
Are you having fun?
Did you brush your teeth?
Which bunk are you sleeping in?
Name all of your cabin mates?
What is your counselor's name?
Be sure to take pictures so you can tell me all about the fun you had.
I am so glad you got to go to camp. You are really special.
- **Don't** use statements like:
All your cousins were over here today to celebrate grandma's birthday. Wish you were here. You know, she won't be with us much longer.
The dog is sick and we had to take him to the vet.
While you are away, we are all going on a great vacation to Disney world (favorite fishing hole, grandmother's, you get the idea)



If the medical staff is concerned about the extensiveness of homesickness, a call to the parent for consultation on how to best handle the situation will be done. With your help, we will work with your child. If a call to a parent was placed, the medical staff will follow up within 24 hrs to confirm with you on how your child is doing. Only if all attempts are unsuccessful, will we ask you to come get your child. Most campers, while extremely homesick at first, do end up having a great time.

If you wish to send a care package, we suggest sending items that can be shared with the whole cabin group, i.e. puzzles, pencils, silly erasers, autograph books, a cute poster for the cabin wall. Please do not send food or gum.

PARENTAL CONTACT

Visitation from parents during the week is discouraged.

Campers will not have access to phones.

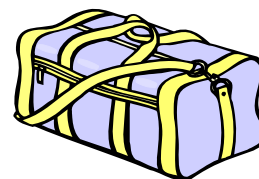
Medical staff determines if a call needs to be placed to parent for medical concerns, homesickness, or behavior problems.

Early pick-up is not encouraged.

PACKING TIPS



- **Label all items with your camper's full name.**
- It is recommended that you send items in a soft-sided bag rather than a hard suitcase, for the convenience of your camper.
- Do not send new or good clothes, because they will come back sweaty and dirty.



Suggested Items:

Toothbrush/paste

Soap/soap container

Deodorant

Bug repellent

Sunscreen

Kleenex

Flashlight

Pen/paper/stamps

Camera (optional)

Water bottle

Shampoo/rinse

Brush/comb

1 sheet set

1 sleeping bag

1 pillow

2 washcloths

2-3 bath towels

1-2 beach towels

Dirty clothes bag

Suggested Clothing:

7 shorts/tops

7 pr. Socks

7 pr. Underwear

1 pr. Long pants

1 sweatshirt

1 lightweight jacket

1-2 pr. Tennis shoes

1 set sleepwear

Optional:

Dance outfit

Goggles for pool

1 pr. Pool shoes

Swim suit

No need to send: syringes, insulin, meters, pets, candy, food, or money

Pumpers: Bring 6 complete infusion set changes, plus an inserter device (each set and device should be INDIVIDUALLY LABELLED).

Additional medicines: Please put all medications in individually labeled bottles in a plastic bag also labeled with your camper's name. Give medication bag to cabin nurse at check-in. **No medications are allowed in the cabin.**