MISSION STATEMENT

To enhance player development by providing basic through advanced hockey education and physical training. To promote the personal character and development of those players who wish to excel at the highest level of competition that USA Hockey offers. To provide an advanced hockey curriculum through top level certified coaches, to keep players constantly challenged, to assist and promote player advancement to the “next level”, and to seek out and aid players in finding educational opportunities for the student athlete.
**GENERAL**

1. The mandatory health form
2. Important water and hydration policies
3. The State of Massachusetts Rules and Regulations for Camps
4. Our school policies and procedures, including:

**1. FOR SUMMER CAMP:**

Please make sure you have completed the mandatory Health Form and have mailed or faxed it to our offices. The Health Form must be completely filled out and signed by your child’s physician.

PLAYERS WILL NOT BE PERMITTED ON THE ICE UNLESS WE HAVE A CURRENT, COMPLETED, AND SIGNED HEALTH FORM IN OUR POSSESSION.

You can download the Health Form from our web site located on our home page left nav.

**2. WATER HYDRATION POLICY:**

WE DO NOT PROVIDE WATER!

To maintain safe levels of hydration, and to help avoid the spread of germs, including Meningococcal Disease, students should bring their own water bottles, or money to purchase drinks at the arena, every day. We do not advise students to share personal drinks with other students. Water bottles are permitted on the ice and may be used when necessary.

Access the link below for more information about Meningococcal Disease:

http://www.mass.gov/dph/cdc/epii/menin/menin_info_waiver.htm

**3. THE STATE OF MASSACHUSETTS RULES AND REGULATIONS FOR CAMPS:**

http://www.mass.gov/eohhs/docs/dph/regs/105cmr430.pdf
4. POLICIES AND REGULATIONS:

- GOALS AND OBJECTIVES
- PURPOSE
- STAFF BACKGROUND INFORMATION
- DISCIPLINE
- CHECK IN / CHECK OUT PROCEDURES
- ATTENDANCE PLAN
- LOST PLAYERS SEARCH
- LOCATION OF PLAYERS
- RELEASE OF PLAYERS FROM CAMP
- PLAYERS ARRIVING LATE
- AGES OF PLAYERS
- HOURS OF OPERATION
- ILLNESS
- INCLEMENT OR EXCESSIVELY HOT WEATHER
- REGISTRATION OF CHILDREN
- PERSONAL BELONGINGS
- APPROPRIATE FOOTWEAR
- CHILDREN’S MONEY AT CAMP
- CHILDREN BECOMING ILL OR INJURED DURING CAMP HOURS
- IN CASE OF FIRE
- VISITORS
- MEDICATIONS
- SUNSCREEN
- MEALS AND SNACKS
- VIDEO/TELEVISION VIEWING
- MISCONDUCT
- LATE PICKUPS AND FAILURE TO PICK UP
- BABYSITTING
- REPORTING OF CHILD ABUSE
- EMERGENCY SITUATIONS
- FORMS
GOALS AND OBJECTIVES

Boston Junior Bruins Pre-Season Camp program is designed to foster self-esteem and build confidence for the coming hockey season. Creativity is encouraged in all aspects of games. Teamwork and self-control are stressed as vital parts of success.

PURPOSE

The Boston Junior Bruins provides a safe, healthy and fun recreational experience for all players. Working parents can feel confident that players are occupied by supervised activities in a relaxed social setting.

STAFF BACKGROUND INFORMATION

The Boston Junior Bruins Hockey Training Camp shall determine whether each staff person’s conduct, criminal or otherwise, shall disqualify that person from presence at the camp. In making that determination, we will consider the following:

- Application for volunteering
- Prior work history for previous five (5) years, including name, address and phone number of a contact person at each place of employment.
- Three (3) positive reference checks from individuals not related to the staff person.
- Self-reporting of any felony conviction.
- Criminal offender record information and juvenile report (CORI/Juvenile Report) from the Massachusetts Criminal History System Board (CHSB).
- Sex Offender registry Information (SORI) check from the Massachusetts Sex Offender Registry Board (SORI).

If the applicant is not a resident of Massachusetts, he or she must provide the following documentation:

- Prior work history for previous five (5) years, including name, address and phone number of a contact person at each place of employment.
- Three (3) positive reference checks from individuals not related to the staff person.
- Self-reporting of any felony conviction.
- Criminal offender record information and juvenile report (CORI/Juvenile Report) from the Massachusetts Criminal History System Board (CHSB).
- Sex Offender registry Information (SORI) check from the Massachusetts Sex Offender Registry Board (SORI).
- Criminal record check, or equivalent where practicable, from the staff person’s country of residence. Information will be obtained from the country’s criminal information system, local Chief of Police, or other local authority with relevant information.
**DISCIPLINE**

When a player does not observe the expected guidelines the summer day camp staff will discuss an appropriate plan of action that may include any or all of the following steps.

**Steps Taken:**

* Verbal warning from leaders
* Time out from activity (will be documented by counselors)
* Refocus in office, discussed with an adult at the time

Camper must show refocus sheet to parent at end of day if behavior continues, parents are notified of the situation and problem solving ideas are discussed. If a player has two refocuses in one week, notification is made that if negative behaviors continue, a contract will be made. Meet with parents to create a contract. Suspension from camp for 2-5 days (no refund)

Permanent suspension from camp

- Fighting in the locker room
- Swearing at staff members
- Stealing of money, equipment, etc.
- Continued inappropriate behavior

Prohibitions:

- Corporal Punishment, including spanking and touching; touching of participants is prohibited
- No camper shall be subjected to cruel and severe punishment, humiliation, or verbal abuse
- No camper shall be denied food or shelter as a form of punishment
- No child should be punished for soiling, wetting, or not using the toilet

Note: Depending on the severity of the situation, your child will start off with a clean slate each day, unless they have a contract.

Severity Clause: At the staff’s discretion, any consequence can by bypassed due to the severity of the behavior.
CHECK IN / CHECK OUT PROCEDURES

On Monday morning, please arrive one half hour (30 minutes) before the scheduled start time. All paper work must be submitted by this time, or your player will not be allowed to participate in the Pre-Season camp. This includes a signed Camp Registration Form, a completed Health Form, and any special permission you are giving to have your player picked up after camp by someone other than yourself. Each morning and afternoon, every player must check in and check out with the appointed staff member.

ATTENDANCE PLAN

Take Camper attendance each day in the morning and afternoon.

a. Report all arrivals and missing children to the director of the Boston Junior Bruins Pre-Season Camp by 9:00AM.
   b. Take attendance before leaving the rink to walk to lunch.
   c. Take a third attendance as campers are leaving for the day.

Attendee missing at any of the three checks during the day.

If an attendee is missing and you have checked with the on-sight director, on-sight athletic trainers and infirmary, start a LOST PLAYER SEARCH.
(See emergency plan below)

For unregistered children

If any attendee arrives who is not on the attendee list, the on-sight Director must be notified. These attendees must be kept out of all activities until the main office is positive all required documents are properly filled out and the parents of the attendee has made arrangements for prompt payment.

LOST PLAYER SEARCH

Every effort is made to keep all players safe. Day Camp staff has been given specific steps to follow when a child is missing from camp. These steps include: searching the area, retracing steps, and carefully questioning other players and staff members. Provision is made for notifying the police, the player’s parent, Boston Junior Bruins Administrative Office, the Massachusetts Department of Human Services and other proper authorities.
LOCATION OF PLAYERS

Players are required to tell the group leader that they are changing activities and which group they will join. Players then tell the new activity leader that he/she has joined the new group. Leaders are trained to keep a mental record of the number of players in any group and to count “heads” frequently.

RELEASE OF PLAYERS FROM CAMP

Players will be released to parents or persons designated on the emergency card only. Parents need to send a signed letter authorizing release of a player to anyone not listed on the emergency card.

PLAYERS ARRIVING LATE

Parents are encouraged to be familiar with the weekly schedule. A player can be signed in and join in an activity at any time during the day. The weekly schedule is posted on the bulletin board in the camp room and on Boston Junior Bruins website www.bostonjuniorbruins.org.

AGES OF PLAYERS

- Players must be pre-registered with the Boston Junior Bruins program prior to attending pre-season camp.

Players range in age from 6-18 years of age. The camp coordinator and/or director will talk to the parents of younger 6 year olds to decide if the facility and program are suitable for the player in question.

HOURS OF OPERATION

Boston Junior Bruins Pre-Season Camp is open from 7:45 A.M. to 6:00 P.M., Monday thru Thursday for a 2-week period.

ILLNESS

According to state licensing requirements and for the protection of all children, the Boston Junior Bruins Pre-Season camps cannot accept players with the following symptoms:
- Elevated temperature
- Diarrhea or vomiting
- Undiagnosed rash
- Sore or discharging eyes or ears, profuse nasal discharge.
- Diagnosed contagious diseases such as strep throat or chicken pox

Sick players will be provided with a place to rest comfortably until they go home. Parents will be notified to come and pick up their player within the hour.
Please notify the Boston Junior Bruins Pre-Season camp program if your player contracts a contagious disease, such as whooping cough, German or regular measles. It is a licensing requirement that signs be posted to notify families.

**INCLEMENT OR EXCESSIVELY HOT WEATHER**

During inclement weather the players will be kept inside the building. Alternate activities have been planned for these times and include games, etc.

In the event of excessively hot weather the players will be kept inside the building in a well ventilated area, or in the shade outside. All players shall be required to have a water bottle with them and apply sunscreen regularly. Physical activity will be limited during this time.

**REGISTRATION OF CHILDREN**

An orientation packet is mailed or given to the parents at the time of player registration with the Boston Junior Bruins Program. The packet includes forms for the child’s health history and emergency notification numbers and information about lunches and snacks. It also includes permission for Medication form for children requiring medication during camp hours.

Physicals will need to be within 12 months of camp admission. **NOTE:** Current camper immunization records, physician statement form, and emergency information MUST be given to camp staff before a child can attend camp.

**PERSONAL BELONGINGS**

Items brought to camp by the children should all be clearly marked with the child’s name. Each camper should have small bag to keep in their hockey bag to store belongings during the day. However, the hockey bags and locker rooms are not locked during the day,

The Babson Skating Rink Center is a public facility. Please encourage your players to leave valuable items at home for the Boston Junior Bruins are not responsible for lost or stolen items.

**APPROPRIATE FOOTWEAR**

Although players are not restricted in what they choose as everyday footwear, sandals are not appropriate for the camps outdoor activities. Players are asked to keep an inexpensive pair of sneakers at camp for use during outdoor team skills, pre and post ice sessions. Players are expected to participate in all activities regardless of their footwear.
CHILDREN’S MONEY AT CAMP

Please bring exact change. Players will only be allowed to visit the snack bar or vending machines at Babson Skating Rink with parents before and after camp. Please limit the amount of extra spending money your child brings to camp.

CHILDREN BECOMING ILL OR INJURED DURING CAMP HOURS

Emergency services will be obtained through 911 for any illness or injury the staff feels unable to handle with American Red Cross Standard First Aid training. Attempts to reach a parent or other person(s) designated on the emergency card will be continued until someone is reached. A parent or other designated person will be requested to come pick up a child who is ill or who has an injury requiring treatment by a physician. Parents are encouraged to make a habit of letting someone know where they can be reached when away from their desk or office. In the event in which the parent/guardian cannot be reached the emergency contact will be notified. Staff will document all injuries and illnesses.

IN CASE OF FIRE

Go over the procedures In Case of Fire which are posted in each building. All buildings have electronic fire and smoke detection equipment. An alarm will sound in any building that smoke or heat is detected by the sensors. Once the alarm has been pulled or gone off on its own, Public Safety and the Fire Department are automatically notified.

- Emergency exits for Reynolds, Trim, the Webster Center, Ice Rink must be reviewed at the beginning of each week.

Off-Ice Training Area (Side parking lot): lead your attendees out of the training area and meet at the side of the roped off parking lot on the side nearest Olin College. Please take a head count.

Ice Rink: attendees should leave the building by way of the nearest emergency and meet at the side of the roped off parking lot on the side nearest Olin College.

The Boston Junior Bruins Pre-Season Camp Counselors of each camp will designate staff members in advance to go room to room making sure everyone has vacated the building; other staff will be assigned to lead the attendees to the meeting area outside of the building and take head counts. The Boston Junior Bruins Pre-Season Director will be responsible for contacting Public Safety and the Summer Programs Office.

Do not re-enter the building until you have been given the OK by the Fire Department or Babson College Public Safety.
VISITORS

Parent support is critical to the success of the program. Parents are welcome to visit their players program. However, visitors will be allowed only with prior permission and consideration from the director. Visitors will be required to sign in on the visitors log located at the campsite and show identification and be provided a visitor’s badge.

MEDICATIONS

All medications needed by a player during camp hours must be delivered to a staff member in the original container that shows:

1. Prescription #,
2. Name of medication,
3. Date filled,
4. Physician’s name,
5. Player’s name, and
6. Directions for dosage.
7. A note with written consent signed by the parent AND doctor should accompany the medication telling the times medication should be given.

All medication will be stored in a locked area. Parents should reclaim medications daily. Only staff that has received the Medication Administration certification will be allowed to dispense meds, and this staff will obtain delegation for distributing meds annually by a registered nurse.

SUNSCREEN

Each player should have a container of sunscreen labeled with the first and last name. A paba-free sunscreen with SPF 15 or above is suitable for players. We recommend applying sunscreen to your player prior to arriving at camp.

MEALS AND SNACKS

Each player should bring a sack lunch and water bottle daily. No glass containers are allowed. Two snacks are provided daily for the players. A lunch will be provided for a player who forgets to bring one. Parents will be responsible for the cost of the meal. We encourage parents not to pack lunches that need heating up in a microwave. Do to the lack of microwaves this is a time consuming process and players do not have adequate time to enjoy their lunch.
**VIDEO/TELEVISION VIEWING**

Players, during the course of the two week camp may watch a training/skills video one morning each week. Videos selected are rated G or PG. Television broadcasts are not available for viewing.

**MISCONDUCT**

Players are instructed in and praised for appropriate behavior. Corrective methods chosen for inappropriate behavior will be constructive and educational. Discipline methods can include talking about the situation, separation from the situation and natural consequences such as cleaning up any messes resulting from the behavior.

**LATE PICKUPS AND FAILURE TO PICK UP**

Parents will be charged $1.00 for every minute a player is left at the center after 6:00 PM. At 6:15 PM staff members will begin calling those authorized to pick up the player and listed on the emergency card. If no one has arrived or been contacted by 6:45 PM, the Arvada Police Department will be called as the player will be considered an abandoned minor. Boston Junior Bruins staff member will be assigned to watch the player until a designated person assumes responsibility. The staff member will do as much as possible to comfort and reassure the player of his/her safety.

**BABYSITTING**

Staff and volunteers are not allowed to baby-sit or transport children at any time outside of the Boston Junior Bruins Programs. Please assist us by NOT requesting staff to baby-sit your child.

**REPORTING OF CHILD ABUSE**

Any staff member who has reasonable cause to know or suspect that a child has been subjected to abuse or neglect or who has observed the child being subjected to the circumstances or conditions which would reasonably result in abuse or neglect shall immediately report or cause a report to be made of such fact to the Department of Children and Family Services at 1-800-792-5200 and the local law enforcement agency.
EMERGENCY SITUATIONS

Please refer to the Day Camp Leaders Emergency Procedures sheet. Specific instructions have been listed for fire, tornadoes, hail, and police emergencies. Flood danger at the Babson Ice Center is minimal due to its elevation relative to the surrounding area. Parents are reminded not to call the Babson Ice Center due to news reports of an emergency in the area. Phone lines must be free for staff use. Parents may call Boston Junior Bruins office at (617)000-0000 for information during emergencies.

DISASTER PLANS FOR THE BOSTON JUNIOR BRUINS PRE-SEASON CAMP

1. The buildings in use for the Boston Junior Bruins Pre-Season Camp include but are not limited to the skating rink
2. Public Safety would assist in any and all situations that require evacuations from any building for any reason.
3. Each Boston Junior Bruins Pre-Season Camp counselor has a cell phone by which they can remain in contact with the director of the Boston Junior Bruins Pre-Season Camp. The director and on-sight coordinator has phone communication with the dispatcher of Public Safety.
4. In addition to the cell phones each building is equipped with land telephones with a direct line to public safety.

Tornado or High Winds

The attendees are always close to shelter. In the case of high winds or a tornado warning the attendees would be led to the closest building. Once safely in the building, a head count will be taken. The following procedures will be taken:

1. Immediately notify The Boston Junior Bruins Pre-Season Camp director, by phone, of the exact location. The Boston Junior Bruins Pre-Season Camp director will then notify Public Safety and the Babson Director of Summer Programs.
2. Go to the basement of the building or the lowest floor. Stay away from any glassed in areas or places with wide-span roofs if possible.
3. Have the attendees crouch down against the floor and cover their heads and neck with their hands.
4. Remain there until Public Safety or the Director of Summer Programs notifies you.
**Flash Floods**

There are no rivers, streams or bodies of water on campus that would be subject to flood. However if persistent rain requires a move inside, all attendees would be taken to the nearest building. Once inside, a head count will be taken and The Boston Junior Bruins Pre-Season Camp director will be notified of the count. The following procedures will be taken.

1. Notify The Boston Junior Bruins Pre-Season Camp Director and the On-sight coordinator as to which building you and your attendees have occupied.
2. The Boston Junior Bruins Pre-Season Camp office will notify Babson Public Safety.
3. Begin suitable indoor activities.
4. Remain inside until Public Safety or the Summer Programs office notifies you.

**Lightning**

The Babson Summer Programs office utilizes custom software to track and forecast approaching thunder and lightning strikes within a 100, 30 and 8 mile zone. The Babson Summer Programs office issues a possible storm warning through e-mail and face to face meetings each morning to The Boston Junior Bruins Pre-Season Camp directors. A conference call is scheduled for 7:45am if needed to coordinate movements of the attendees in and around the storms if required. When a storm is within 8 miles a warning is sent out to the directors to begin to seek shelter. Once in the building a head count is taken and The Boston Junior Bruins Pre-Season Camp director is notified of the count. The following procedures will be taken:

1. Notify The Boston Junior Bruins Pre-Season Camp as to which building they are in.
3. Remain in the building until cleared by Public Safety or the Summer Programs Director.

**REPORTING OF UNUSUAL ACTIVITY**

If you notice any situation which is out of the ordinary and or potentially dangerous, notify The Boston Junior Bruins Pre-Season Camp director or the Babson Public Safety officers. Examples include vehicles parked in non-designated areas, broken glass, smoke and strangers walking around camp.

If necessary, The Boston Junior Bruins Pre-Season Camp director or the Director of Summer Programs of Babson College will notify the proper authorities. Do not approach a parked car in any situation that you feel is out of the ordinary.

Call Babson Public Safety. (781)-239-5555
The Boston Junior Bruins Pre-Season Camp at Babson College
Organizational Chart
2014

**Greater Boston Junior Bruins Director**

Michael A. Cashman  
W (617)787-2947  
C (617) 990-4361  
mcashman@verizon.net

**Camp Directors**

Michael A. Cashman  
W (617)787-2947  
C (617) 990-4361  
mcashman@verizon.net

Edward Kesell  
C (617) 593-9454  
eck13@earthlink.net

**Medical Consultant**

Alan B. Ashare  
St. Elizabeth's Medical Center  
736 Cambridge Street  
Brighton, MA  02135  
Phone: 617-789-2828  
Fax: 617-562-7247

**Athletic Trainer**

Katherine H. Doherty  
14 Davis Street  
Woburn, MA 01801
The Greater Boston Junior Bruins
Medical Policies

Health Records

The healthcare supervisor shall maintain a health record for each Attendee which will note the Attendee: name address and telephone numbers of Attendee and parents and/or guardians; A written authorization for emergency medical care signed by parent or guardian; any travel locations and telephone numbers of the Attendee's family during the showcase; the name address and telephone numbers of the Attendee's pediatrician along with the name, phone number and appropriate policy numbers of the Attendee's health insurance; the health history and report of physical examination along with documentation of immunizations as required by the Commonwealth of Massachusetts.

The health history shall contain and be signed by a licensed health care provider:
- A health history
- A report of physical examination conducted during the preceding 24 months
- A certificate of immunization. [See Required immunizations)

Every Attendee shall provide prior to attending the camp:
- A certificate of immunizations. (See Required Immunizations)

The healthcare supervisor shall also note any prescribed medicines that are required to be taken during camp hours and request a written authorization to administer the medication signed by parent and/or guardian if the Attendee is a minor. All other prescribed medicines shall be noted.

The healthcare supervisor shall review each health record making note of any:
- Allergies
- Special medical needs
- Disabilities

The healthcare supervisor shall maintain a health record for each staff member which will note the staff members: name address and telephone numbers of staff and parents and/or guardians if under 18; A written authorization for emergency medical care signed by parent or guardian if under 18; any travel locations and telephone numbers of the staff members family during sessions; the name address and telephone numbers of the staff members physical along with the name, phone number and appropriate policy numbers of the staff members health insurance; the health history and report of physical examination along with documentation of immunizations as required by the Commonwealth of Massachusetts.

The health history shall contain and be signed by a licensed health care provider:
- A health history
- A report of physical examination conducted during the preceding 24 months
- A certificate of immunization. See Required immunizations}
Every Attendee shall provide three weeks prior to the start date of the camp:

- A current medical history which lists allergies, required medications and any health conditions or impairments which may affect the individual's activities while attending the program. The medical history shall be signed by a parent or guardian or by a licensed health care provider if the staff member is under 18.
- A certificate of immunizations. (See Required Immunizations)

The healthcare supervisor shall review each health record making note of any:

- Allergies
- Special medical needs
- Disabilities

All staff members are asked NOT to carry personal medicines on the person during camp hours and are encouraged to speak with the program director if circumstances require the staff member to do so.

If an Attendee or staff member has a religious objection to a physical examination or any of the required immunizations the documentation of such must be provided by the Attendee/staff member in accordance with the regulations of the Commonwealth of Massachusetts and kept on file with other appropriate health history documents.

Attendees' and staff members' health histories and the medical log shall be readily available to the healthcare supervisor and directors of The Skating Club of Boston. All medical records shall be available upon request to authorized representatives of the Massachusetts Department of Public Health and the Wellesley Board of Health.

Required Immunizations: (See Required Immunizations 430.152 on Following Pages).

**Injury Reports**

Injury reports shall be maintained by the healthcare supervisor on the prescribed Massachusetts Department of Public Health form. A report shall be completed for each fatality or serious injury, as a result of which an Attendee is sent home or is brought to the hospital or physician's office and where a positive diagnosis is made. Such injuries shall include but not be limited to those where a suturing or resuscitation is required, bones are broken, or the Attendee or staff is transported and/or admitted to a hospital. A copy of each injury report shall be maintained on file along with all other medical records. A copy shall go directly to the program director and athletic trainer assigned to the particular camp for review. A copy shall be available to the local public health offices and shall be sent directly to the Massachusetts Department of Public Health within seven (7) days of the occurrence.
Medical Log

The healthcare supervisor is responsible to maintain and review daily the medical log. The medical log shall list the date, time, name of Attendee or staff member, the complaint and the treatment. The medical log shall be a bound book with pre-numbered pages in sequential order and lined pages. No lines shall be skipped and all entries shall be in ink. Each treatment shall be signed by the healthcare team member administering the treatment and signed off by the healthcare supervisor. This log shall be maintained as a previously noted.

Infection Control

The healthcare supervisor shall be responsible for insuring that each case of any communicable disease occurring in a camp is immediately reported to the local Board of Health. The report shall be made by the healthcare supervisor after notification of the program director and will include the name and home address of any individual in the camp known to have or be suspected of having such disease. Until the healthcare supervisor has taken action on such cases, strict isolation shall be maintained. The healthcare supervisor shall also be responsible for insuring that each suspected case of food poisoning or any unusual prevalence of any illness in which fever, rash, diarrhea, sore throat, vomiting or jaundice is reported, these symptoms should be reported immediately to the local board of health and the Massachusetts Department of Public Health, verbally or by phone. The healthcare supervisor or the program director shall make this report.

The healthcare supervisor shall maintain that ALL BLOOD AND BODY FLUIDS WILL BE HANDLED USING UNIVERSAL PRECAUTIONS. The healthcare supervisor, nurse consultant and the program director shall also be responsible for teaching the staff, during orientation and ongoing as needed over the camp season, these procedures. This will include, but not limited to the care of mildly ill Attendees, administration of medication handling of biohazard material and common practice of safe and sanitary care of oneself and Attendees - i.e. good hand washing techniques.

Infirmary

The healthcare supervisor shall be responsible for the maintenance of the infirmary including, but not limited to, overseeing the cleanliness of the area. Maintaining adequate supplies and keeping the area well policed of people and equipment. The healthcare supervisor shall also allow for a space designated for the isolation of an Attendee or staff member suspected of a communicable disease or otherwise in need of quiet and rest, at a location suitable and separated from the regular infirmary area. This area will also insure both quiet to the Attendee/staff and safety to other persons seeking healthcare. This area shall be suitable equipped and not utilized for any other purpose. Any isolated Attendee or staff shall be provided with adequate adult supervision at all times.

First aid supplies shall be readily available to the healthcare team. First aid kits shall contain emergency first aid supplies to meet the needs of Attendees and staff. These kits will include such items as: Non-perfumed soap and/or waterless hand cleaner, sterile gauze squares,
compress, adhesive tape, bandage scissors, triangular and rolled bandages, a mask with a one-way valve (for CPR) and tweezers.

A backboard for transport of spine-traumatized injuries shall be readily available at designated places throughout the Babson campus for emergency use. Current sites include the trainer’s room in the Webster Athletic Center, the pool, the ice rink and through Public Safety and can be transported to the site of need.

The healthcare team shall be available during the day hours of the program. This will typically be from 8:00am to 4:30pm Monday through Friday. All communication of the healthcare team shall be through cell phones. All medical information must be communicated through secure phones.

In the event of an emergency the healthcare team member shall take appropriate action to secure the safety and well being of the injured. Public Safety is available as a first responder and will call the appropriate emergency personnel. **Public Safety can be reached at 781-239-5555.**

Only designated members of the healthcare team shall be responsible for the delivery of medical care to Attendees or staff.

**Transportation of Attendees**

No Attendee shall be transported in a camp vehicle (Gator or golf cart) for medical reasons. If an Attendee is unable walk to the infirmary, care shall be rendered at the site of the injury. If an Attendee is deemed to be too ill or injured to return to routine camp activities by the healthcare supervisor or program director the parents, guardians or emergency contact persons will be contacted to pick up the Attendee for the day. The call cannot be made without the direct verbal approval of the program director. A staff member of the medical team will stay with the Attendee until they are personally handed over to the parents, guardians or emergency contact persons as noted on the Attendees healthcare record. An Attendee over the age of 18 may not under any circumstances drive themselves home if deemed injured or too ill to continue with daily activities.

**Master List**

A master list of all of the medical needs shall be maintained by the program director. This person shall be responsible for the communication of medical details to the director of The Skating Club of Boston and health care supervisor. This person will also serve as a resource to the camp staff in the understanding of any medical terms, diagnosis or medication needs. The program director will be the primary contact with the parents or guardians of all Attendees with medical issues.

**HIPPA** guidelines shall be followed in regards to all medical records and information handled through and by all healthcare and camp staff.
Administration and storage of medication

All medication administration at camp shall follow these protocols:

Medication prescribed for Attendees shall be kept in the original containers bearing the pharmacy label which shows the: date of filling, the pharmacy name and address, the filling pharmacist's initials, the serial number of the prescription, the name of the intended user, the name of the prescribing practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in such a prescription as required by law, if tablets or capsules and the number of tablets or capsules in the container. All over the counter medications shall be kept in the original containers with the original label intact, which shall include directions for use. All medications prescribed for Attendees to be taken during the camp day shall be kept in a locked storage cabinet used exclusively for medication. This cabinet shall be kept locked except when opened to obtain the medication in need. The cabinet shall be substantially constructed and anchored securely to a solid surface. Medications requiring refrigeration shall be stored at temperatures of 38 to 42 degrees F in a locked box used exclusively for medications. The locked box must be physically affixed to the refrigerator. Refrigerator thermometers shall be checked and documented daily.

Medications shall only be administered by the healthcare supervisor or by a licensed healthcare professional authorized to administer prescription medications. If the healthcare supervisor is NOT a licensed healthcare professional authorized to administer prescription medications, the administration of medications shall be under the professional oversight of the healthcare consultant after specific training has been completed and shall be limited to the use of oral and topical medications only. This policy allows for the administration of Epi-pens or inhalers for Attendees with a known allergy or pre-existing medical condition for which the Epi-pen or inhaler has been prescribed. All medications administered at camp shall be subject to the above regulations and will have an

Authorization to administer medication to an Attendee form completed by the parent guardian for each medication and signed by the healthcare consultant.

Procedure: Each Attendee requiring medication administration while at camp shall be identified and taken to the healthcare supervisor who will ask the Attendee their name and if he/she recognizes the medicine in question. Prior to actually taking the medicine, the healthcare supervisor will state the Attendee's name one final time and receive an appropriate nod of the head or yes answer from the Attendee. If the Attendee arrives with a prescription inhaler and the Attendee is considered capable of self-medication and has the appropriate approvals for the use of these emergency devices (parent/guardian and Healthcare consultant's signatures and all appropriate documents completed), Attendees may be allowed to carry these devices with him/her at all times and to use them if so required. These instances of use MUST be documented per protocol below. Each Attendee requesting to hold their own inhaler shall be counseled by a member of the medical team in notifying them of the use of these emergency medicines.
If a diabetic child requires his/her blood sugar to be monitored during the day, or requires insulin injections and the appropriate written approvals have been obtained, the Attendee, who is deemed capable may be allowed to self-monitor and or self inject. Blood monitoring activities and self-injections must take place in the presence of the healthcare supervisor and or appropriate medical team member. All syringes shall be disposed of in compliance with MDPH regulations.

Recording medication given to Attendees shall be completed directly after the medication is administered on approved MDPH daily log for medication administration forms. Each form is to be fully completed for each and every medication administered while in camp. A full signature will accompany every set of initials of the person giving the medications. An explanation shall be noted, if a planned medication is missed. (Absent from camp, early dismissal, etc.) The healthcare consultant is to be notified immediately for any and all medication errors or effects.

Disposal: When no longer needed, medications shall be returned to a parent/guardian whenever possible. If the medication cannot be returned, it shall be destroyed as follows: The destruction of the prescription medication shall be accomplished by the healthcare supervisor and witnessed by a second person and recorded in a log maintained by the camp. This log shall include the name of the Attendee, the name of the medication, the quantity of the medication destroyed and the date and method of destruction.

Protection from the Sun

In order to reduce exposure to ultraviolet exposure from the sun, the staff shall encourage the use of sunscreen by including lotion/screen use in the morning announcements, at a break mid-day and after lunch. The staff should consider themselves role models to the Attendees and exhibit safe sun exposure behavior on a daily basis. The use of hats, long sleeve shirts and pants is encourages whenever applicable.

Suspected allergic reaction action plan

Attendee/staff member present with complaints of throat tightening, rash/hives that appears to be rapidly spreading, difficulty breathing or simply states they know they have come in contact with a known allergen.

VERIFY the Attendee/staff person's name

Contact via radio or cell phone to the healthcare supervisor that you suspect an allergic reaction to (state name of Attendee/staff) and you are about to administer an Epi-pen. The healthcare supervisor should then contact Public Safety (781-239-5555] and the director of The Skating Club of Boston. Appropriate emergency protocol to follow.
Epi-Pen Administration

Prepare to administer Epi-pen from Attendee/staffs personal medicine.

1. Grasp unit with the black tip pointing downward.
2. Form a fist around the auto-injector (Black Tip Downward.)
3. With our other hand, pull off the gray activation cap.
4. Hold black tip near outer thigh.
5. Swing and jab firmly into outer thigh so that the auto-injector is perpendicular to the thigh
6. Hold firmly in thigh for several seconds
7. Remove unit, massage injection area for several seconds.
8. Check Black Tip- if needle is exposed you administer the dose - If not repeat steps 4-8
9. Note: most of the liquid (About 90%) stays in the auto-injector and cannot be reused.
10. Bend the needle back against a hard surface
11. Carefully put the unit (needle first) back into the carrying tube.
12. Re-cap the carrying tube.
13. Save for inspection by Healthcare supervisor- to be disposed of in infirmary's bio-hazard box.

Any Attendee/staff who received an Epi-pen injection MUST be transported to the Emergency Room. This will be arranged by The Skating Club of Boston Director and Babson College Public Safety from your original transmission of the need to administer an epi-pen for suspected allergic reaction.

Action plan for use of inhaler (Asthma Attack)

When an Attendee/staff member approaches the Healthcare team member for their inhaler to be used, or if they are reporting that they just used their inhaler:

1. They will be asked their name and given their inhaler.
2. Inhaler usage shall be observed and documented. Any and all symptoms presented and or verbalized shall be noted. ("I feel tight")
3. The Attendee/staff member will be required to sit and be observed by the healthcare team for a minimum of 20 minutes. This time can be utilized for hydration, cool down, casual history taking and for documentation of the episode.
4. If the Attendee/staff member's respiratory status does not improve significantly, they will be allowed to utilize their inhaler a 2nd time. If this occurs, another 20 minute observation time will follow. (Non-active.)
5. If there is improvement in the respiratory condition, they will be escorted back to their group and the director will be informed of the need to utilize their inhaler. Director's input will be recorded. That Attendee/staff member may then resume normal activities but will be requested to return for further evaluation in 20 minutes.
6. If at any point there is not significant improvement in the Attendee/staff member's respiratory status or a decline in the overall status, the Athletic Trainer and the Healthcare supervisor shall be notified immediately.
7. Re-evaluation should also be documented. Any question, problems or other issues should be communicated to the Athletic Trainer or Healthcare Supervisor as soon as possible.
• A current medical history which lists allergies, required medications and any health conditions or impairments which may affect the individual’s activities while attending the camp. The medical history shall be signed by a parent or guardian or by a licensed health care provider.

________________________________________________________

MD Signature

________________________________________

Date
Medical staff Job Descriptions

Healthcare Consultant - Responsible for medical policy set by the state of Massachusetts. They must review all serious camper medical issues, contact the parents or guardian of the camper and write up an action plan for each camper to be followed by the medical staff (healthcare supervisor, trainer) on site. The healthcare consultant will work closely with the director of medical records and reports to the director of summer programs.

Athletic Trainer - Reports to the director of The Greater Boston Junior Bruins. Collaborates with the healthcare consultant and healthcare supervisor on the action plan for all serious medical issues that arise during the time period that summer camps are in session.

- Responsible for set-up of water stations, before the arrival of campers.
- Expected to be in the training room at 7:45 to open the room and check in all staff.
- Collaborates with healthcare supervisor regarding storage, distribution, administration and transportation of all medications throughout the day.
- Responsible for water at all stations during the day. The water is to be in place before the arrival of campers at 8:30am.
- Collaborates with healthcare supervisor for the set-up of visible first aid station(s).

Director of Medical Records - Reports to the director of summer programs. Is responsible for the medical records of all camp staff and enrolled campers. Upon receipt of the proper medical documents alerts the healthcare consultant of all serious medical issues. Meets with the Board of Health on a weekly basis to clear all staff and campers of the standards set forth by the State of Massachusetts and town of Wellesley. Also meets with the director on a daily basis regarding the status of all camper and counselor documents.

______________________________________
MD Signature
______________________________________
Date
The Greater Boston Junior Bruins at Babson College

Standing Orders 2014

1. The healthcare supervisor shall be the only personnel to provide the medical care, except in extreme emergencies. All medical care rendered shall be properly documented with the date, name of attendee/staff, time of injury and treatment rendered. Records of medical care shall be maintained in compliance with the current state and local regulations.

2. The administration of any medications shall be under the professional oversight of the healthcare supervisor in full compliance with the rules and regulations of the Commonwealth of Massachusetts.

3. All emergency incidents shall be dealt with using current accepted standards of care. Any attendee/staff in emergent situations will be stabilized by the medical staff and transported to the nearest acute care facility.

4. All emergency incidents of external programs shall be dealt with using current accepted standards of care. Any external staffer program attendee in emergent situations will be stabilized by the first responder on campus (Babson Public Safety) and transported to the nearest acute care facility.

5. Additional Health Services at Babson College will be available from 8:00am - 4:00pm Monday through Friday for consultation only.

6. Order of notification for The Greater Boston Junior Bruins as follows:
   a. Babson Public Safety notification as first responder.
   b. Contact is made with the on-campus healthcare supervisor of The Greater Boston Junior Bruins
   c. Contact is made with the director of The Greater Boston Junior Bruins
   d. Contact is made with further appropriate personnel both on and off campus.

7. Sunburns should be treated with a cool compress.

8. Only the medical staff shall handle bodily fluids, employing universal precautions.

____________________________________  ____________________  
M.D                                                               Date
Important Medical Information for Counselors

Please review the following information with your staff:

1. Do not administer medication of any kind to an attendee or staff member. Please contact the healthcare supervisor for assistance.

2. HIPPA regulations (Healthcare information Privacy Protection Act) are strictly followed by The Greater Boston Junior Bruins regarding all attendee and staff medical information.

3. Do not give medical care to any attendee no matter how minor it may seem. Seek out the healthcare supervisor. Above all keep the attendee safe; do not move an injured attendee or staff member if you suspect a head or neck/spine injury.

4. Most medication will be given out during lunch. Please bring your attendee to the healthcare supervisor to administer any medication.

5. Food from home is highly discouraged. If an attendee does bring food from home the contents of the lunch must be inspected by a member of the healthcare team or administrative staff. The Greater Boston Junior Bruins staff will make the necessary steps to insure the safety of all attendees.

6. All medications should go directly to the healthcare supervisor. Attendees are discouraged from keeping their own inhalers and/or Epi-pens. The healthcare supervisor will label all inhalers and Epi-pens and keep them available at all times.

7. If a group splits to multiple sights, the group coordinator will need to communicate with the healthcare supervisor to coordinate the transportation of the medications with the attendee.

8. Report any changes in an attendee's behavior to the healthcare supervisor. Pay close attention when moving from an air conditioned location to the outdoors.

____________________________________________
MD Signature

__________________________
Date
Suspected Allergic Reaction Action Plan

Attendee/staff member present with complaints of throat tightening, rash/hives that appears to be rapidly spreading, difficulty breathing or simply states they KNOW they have come in contact with a known allergen.

VERIFY the camper/staff person's name.

Contact via cell phone to The Greater Boston Junior Bruins healthcare supervisor that you suspect an allergic reaction to ______________ (state name of camper/staff) and you are about to administer an epi-pen. The Greater Boston Junior Bruins healthcare supervisor will then contact Babson Public Safety and the director of The Greater Boston Junior Bruins.

Appropriate emergency protocol to follow:

Epi-Pen Administration

1. Prepare to administer Epi-pen from attendee/staff person's personal medicine. Grasp unit with the black tip pointing downward.
2. Form a fist around the auto-injector (Black Tip Downward.)
3. With our other hand, pull off the gray activation cap.
4. Hold black tip near outer thigh.
5. Swing and jab firmly into outer thigh so that the auto-injector is perpendicular to the thigh
6. Hold firmly in thigh for several seconds
7. Remove unit, massage injection area for several seconds.
8. Check Black Tip- if needle is exposed you administer the dose - If not repeat steps 4-8
9. Note: most of the liquid (About 90%) stays in the auto-injector and cannot be reused.
10. Bend the needle back against a hard surface
11. Carefully put the unit (needle first) back into the carrying tube.
12. Re-cap the carrying tube.
13. Save for inspection by Healthcare supervisor- to be disposed of in infirmary's bio-hazard box.

Any attendee/staff who received an Epi-pen injection MUST be transported to the nearest emergency room. This will be arranged by The Greater Boston Junior Bruins healthcare supervisor and Public Safety of Babson College from your original transmission of the need to administer an Epi-pen for suspected allergic reaction.

__________________________________________________________________________       ___________________
MD Signature                                                         Date
Healthcare Team Medical Information and Guidelines

Points to be reviewed by The Greater Boston Junior Bruins Coaches and Directors prior to the first day of camp.

- Do not administer medications of any kind to an attendee or staff member. Please contact the healthcare supervisor regarding all matters related to medications.

- HIPPA regulations [Healthcare Information Privacy and Protection Act] are followed by The Greater Boston Junior Bruins regarding all camper and staff medical information.

- Do not give medical care to any attendee or staff member. Seek out a healthcare team member. Do not move an injured attendee or staff member. Stay with the camper and have another staff member call for help. All medical care will be administered by a member of the healthcare team.

- All medications must be administered by a member of the healthcare team. If an attendee approaches you regarding a medication point him in the direction of the healthcare supervisor. All medications administered will be processed through the healthcare supervisor stationed in the infirmary in Forest Hall for the overnight camp (where applicable) and the athletic trainers room for the day camp.

- Remind attendees and staff of the many allergies, most importantly, nut and tree nut allergies. Encourage all attendees and staff to be aware of food allergies and discourage the sharing of food whenever possible.

- All medication that needs to be administered by the health care team should meet with the healthcare supervisor.

- Attendees may keep their own inhalers on their person. Be sure to advise camp staff to keep an eye out for attendees sharing inhalers.

- Please report any changes in a camper's behavior or medical condition to a healthcare team member.
Guide for First Aid Kits

As stated in 430.161: Emergency/Medical Facilities and Equipment Section C. "First Aid kits shall contain emergency first aid supplies to meet the needs of attendees and staff, but not limited to:

- Non-perfumed soap
- Sterile Gauze Squares
- Compresses
- Adhesive Tape
- Bandage Scissors
- Triangular and Rolled Bandages
- A mask with a one way valve
- Tweezers
- Cold Pack
- Barrier Protection Gloves

Update May 1, 2014

____________________________________
MD Signature

___________________
Date
ANAPHYLAXIS

What are the common symptoms of a reaction?

Symptoms may include one or more of the following: a tingling sensation in the mouth, swelling of the tongue and the throat, difficulty breathing, hives, vomiting, abdominal cramps, diarrhea, drop in blood pressure, loss of consciousness, and even death. Symptoms typically appear within minutes to two hours after the person has eaten the food to which he or she is allergic.

Common Causes of Anaphylaxis

Food

Although any food can cause a severe reaction in someone allergic to it, peanuts, tree nuts (almonds, walnuts, etc.), shellfish, fish, milk, and eggs are the most common causes of food-induced anaphylaxis. Only a trace amount of a problem food is enough to cause a reaction in some people.

In the U.S., food-induced anaphylaxis is believed to cause about 50,000 trips to the emergency room, and 150 deaths each year. Individuals who are allergic to foods and also have asthma are believed to be at higher risk for developing an anaphylactic reaction than are those with food allergies but not asthma.

Two recent FAAN studies involving a total of 63 cases of fatal food-allergy-induced anaphylaxis showed that adolescents who have peanut and tree nut allergy and asthma, and who don't have quick access to epinephrine during a reaction, are at highest risk for a fatal reaction.

Strict avoidance of the allergen is necessary to avoid a severe reaction. Read food labels for every food each and every time you eat it, and ask questions about ingredients and preparation methods when eating away from home.

Medication

Anaphylactic reactions to medication typically occur within an hour after taking the drug but may occur several hours later. It is estimated that up to 1 percent of the population may be at risk for allergic reactions to medications.
According to literature from the American Academy of Allergy, Asthma & Immunology, "The chances of developing an allergic reaction may be increased if the drug is given frequently, or by skin application or injection rather than by mouth. Inherited genetic tendencies of the immune system to develop allergies may also be important. Contrary to popular myth, however, a family history of reaction to a specific drug does not mean that a patient has an increased chance of reacting to the same drug."

Recent research indicates that 90 percent of patients who have a history of allergic reactions to penicillin will be able tolerate the drug. Patients who need penicillin may be able to undergo a physician-supervised desensitization procedure in an effort to change their immune system response to the antibiotic. Those who are allergic to any antibiotic are more likely to react to other drugs than are patients who have no medication allergies.

If you experience symptoms of an allergic reaction after taking medication, speak to your doctor. If symptoms are severe, or if they resemble those of anaphylaxis, get emergency medical help immediately.

For additional information about medication allergy, visit The American Academy of Allergy, Asthma & Immunology.

Insect Sting

Honeybees, bumblebees, yellow jackets, hornets, wasps, and fire ants are the most common sources of insect stings in the United States. The symptoms of anaphylactic reactions to insect stings usually occur within minutes of the sting.

Insect sting reactions can range from local and mild to systemic and life-threatening. Local reactions can involve swelling of an area larger than the sting site (i.e., the entire arm can be swollen after a sting on the hand). This type of reaction may also include nausea and low-grade fever. Insect stings account for about 50 deaths each year in the U.S.

In some instances, insect sting allergy can be cured with immunotherapy, a process in which the doctor gradually administers stronger and stronger doses of the venom over a period of time.

To minimize the risk of an insect sting, avoid brightly colored clothing and scented cosmetics, perfumes, and so forth; avoid walking barefoot; use caution when cooking outdoors; avoid areas where stinging insects congregate; and keep insecticide handy when working outdoors.
**Latex**

Latex allergy is most commonly diagnosed in individuals who are exposed to latex frequently, such as those employed in the healthcare or rubber industry fields and children with spina bifida and other congenital diseases requiring multiple surgeries. An estimated 1 percent of the U.S. population has latex allergy, but the figure is much higher - between 10 percent and 17 percent - among those employed in health care occupations.

Some individuals with latex allergy will also develop reactions when eating foods that cross-react with latex, such as bananas, kiwi, avocados, European chestnuts, and, less commonly, potatoes, tomatoes, and peaches. plums, cherries, and other pitted fruits.
Extreme Heat: A Prevention Guide to Promote Your Personal Health and Safety

HIGHLIGHTS

• Elderly people (65 years and older), infants and children and people with chronic medical conditions are more prone to heat stress.

• Air-conditioning is the number one protective factor against heat-related illness and death. During conditions of extreme heat, spend time in locations with air-conditioning such as shopping malls, public libraries, or public health sponsored heat-relief shelters in your area.

• Get informed. Listen to local news and weather channels or contact your local public health department during extreme heat conditions for health and safety updates.

• Drink cool, nonalcoholic beverages and increase your fluid intake, regardless of your activity level.

Heat-related deaths and illness are preventable yet annually many people succumb to extreme heat. Historically, from 1979-2003, excessive heat exposure caused 8,015 deaths in the United States. During this period, more people in this country died from extreme heat than from hurricanes, lightning, tornadoes, floods, and earthquakes combined. In 2001, 300 deaths were caused by excessive heat exposure.

People suffer heat-related illness when their bodies are unable to compensate and properly cool themselves. The body normally cools itself by sweating. But under some conditions, sweating just isn't enough. In such cases, a person's body temperature rises rapidly. Very high body temperatures may damage the brain or other vital organs.

Several factors affect the body's ability to cool itself during extremely hot weather. When the humidity is high, sweat will not evaporate as quickly, preventing the body from releasing heat quickly. Other conditions related to risk include age, obesity, fever, dehydration, heart disease, mental illness, poor circulation, sunburn, and prescription drug and alcohol use.
Because heat-related deaths are preventable, people need to be aware of who is at greatest risk and what actions can be taken to prevent a heat-related illness or death. The elderly, the very young, and people with mental illness and chronic diseases are at highest risk. However, even young and healthy individuals can succumb to heat if they participate in strenuous physical activities during hot weather. Air-conditioning is the number one protective factor against heat-related illness and death. If a home is not air-conditioned, people can reduce their risk for heat-related illness by spending time in public facilities that are air-conditioned.

Summertime activity, whether on the playing field or the construction site, must be balanced with measures that aid the body's cooling mechanisms and prevent heat-related illness. This pamphlet tells how you can prevent, recognize, and cope with heat-related health problems.

**What Is Extreme Heat?**

Conditions of extreme heat are defined as summertime temperatures that are substantially hotter and/or more humid than average for location at that time of year. Humid or muggy conditions, which add to the discomfort of high temperatures, occur when a "dome" of high atmospheric pressure traps hazy, damp air near the ground. Extremely dry and hot conditions can provoke dust storms and low visibility. Droughts occur when a long period passes without substantial rainfall. A heat wave combined with a drought is a very dangerous situation.

**During Hot Weather**

To protect your health when temperatures are extremely high, remember to keep cool and use common sense. The following tips are important:

**Drink Plenty of Fluids**

During hot weather you will need to increase your fluid intake, regardless of your activity level. Don't wait until you're thirsty to drink. During heavy exercise in a hot environment, drink two to four glasses (16-32 ounces) of cool fluids each hour.  

**Warning:** If your doctor generally limits the amount of fluid you drink or has you on water pills, ask how much you should drink while the weather is hot.

Don't drink liquids that contain alcohol, or large amounts of sugar—these actually cause you to lose more body fluid. Also avoid very cold drinks, because they can cause stomach cramps.
Replace Salt and Minerals

Heavy sweating removes salt and minerals from the body. These are necessary for your body and must be replaced. If you must exercise, drink two to four glasses of cool, non-alcoholic fluids each hour. A sports beverage can replace the salt and minerals you lose in sweat. However, if you are on a low-salt diet, talk with your doctor before drinking a sports beverage or taking salt tablets.

Wear Appropriate Clothing and Sunscreen

Wear as little clothing as possible when you are at home. Choose lightweight, light-colored, loose-fitting clothing. Sunburn affects your body's ability to cool itself and causes a loss of body fluids. It also causes pain and damages the skin. If you must go outdoors, protect yourself from the sun by wearing a wide-brimmed hat (also keeps you cooler) along with sunglasses, and by putting on sunscreen of SPF 15 or higher (the most effective products say "broad spectrum" or "UVA/UVB protection" on their labels) 30 minutes prior to going out. Continue to reapply it according to the package directions.

Schedule Outdoor Activities Carefully

If you must be outdoors, try to limit your outdoor activity to morning and evening hours. Try to rest often in shady areas so that your body's thermostat will have a chance to recover.

Pace Yourself

If you are not accustomed to working or exercising in a hot environment, start slowly and pick up the pace gradually. If exertion in the heat makes your heart pound and leaves you gasping for breath, STOP all activity. Get into a cool area or at least into the shade, and rest, especially if you become lightheaded, confused, weak, or faint.

Stay Cool Indoors

Stay indoors and, if at all possible, stay in an air-conditioned place. If your home does not have air conditioning, go to the shopping mall or public library—even a few hours spent in air conditioning can help your body stay cooler when you go back into the heat. Call your local health department to see if there are any heat-relief shelters in your area. Electric fans may provide comfort, but when the temperature is in the high 90s, fans will not prevent heat-related illness. Taking a cool shower or bath or moving to an air-conditioned place is a much better way to cool off. Use your stove and oven less to maintain a cooler temperature in your home.
Use a Buddy System

When working in the heat, monitor the condition of your co-workers and have someone do the same for you. Heat-induced illness can cause a person to become confused or lose consciousness. If you are 65 years of age or older, have a friend or relative call to check on you twice a day during a heat wave. If you know someone in this age group, check on them at least twice a day.

Monitor Those at High Risk

Although anyone at any time can suffer from heat-related illness, some people are at greater risk than others.

- Infants and young children are sensitive to the effects of high temperatures and rely on others to regulate their environments and provide adequate liquids.
- People 65 years of age or older may not compensate for heat stress efficiently and are less likely to sense and respond to change in temperature.
- People who are overweight may be prone to heat sickness because of their tendency to retain more body heat.
- People who overexert during work or exercise may become dehydrated and susceptible to heat sickness.
- People who are physically ill, especially with heart disease or high blood pressure, or who take certain medications, such as for depression, insomnia, or poor circulation, may be affected by extreme heat.

Visit adults at risk at least twice a day and closely watch them for signs of heat exhaustion or heat stroke. Infants and young children, of course, need much more frequent watching.

Adjust to the Environment

Be aware that any sudden change in temperature, such as an early summer heat wave, will be stressful to your body. You will have a greater tolerance for heat if you limit your physical activity until you become accustomed to the heat. If you travel to a hotter climate, allow several days to become acclimated before attempting any vigorous exercise, and work up to it gradually.
Do Not Leave Children in Cars

Even in cool temperatures, cars can heat up to dangerous temperatures very quickly. Even with the windows cracked open, interior temperatures can rise almost 20 degrees Fahrenheit within the first 10 minutes. Anyone left inside is at risk for serious heat-related illnesses or even death. Children who are left unattended in parked cars are at greatest risk for heat stroke, and possibly death. When traveling with children, remember to do the following:

- Never leave infants, children or pets in a parked car, even if the windows are cracked open.
- To remind yourself that a child is in the car, keep a stuffed animal in the car seat. When the child is buckled in, place the stuffed animal in the front with the driver.
- When leaving your car, check to be sure everyone is out of the car. Do not overlook any children who have fallen asleep in the car.

Use Common Sense

Remember to keep cool and use common sense:

- Avoid hot foods and heavy meals—they add heat to your body.
- Drink plenty of fluids and replace salts and minerals in your body. Do not take salt tablets unless under medical supervision.
- Dress infants and children in cool, loose clothing and shade their heads and faces with hats or an umbrella.
- Limit sun exposure during mid-day hours and in places of potential severe exposure such as beaches.
- Do not leave infants, children, or pets in a parked car.
- Provide plenty of fresh water for your pets, and leave the water in a shady area.
Hot Weather Health Emergencies

Even short periods of high temperatures can cause serious health problems. During hot weather health emergencies, keep informed by listening to local weather and news channels or contact local health departments for health and safety updates. Doing too much on a hot day, spending too much time in the sun or staying too long in an overheated place can cause heat-related illnesses. Know the symptoms of heat disorders and overexposure to the sun, and be ready to give first aid treatment.

Heat Stroke

Heat stroke occurs when the body is unable to regulate its temperature. The body's temperature rises rapidly, the sweating mechanism fails, and the body is unable to cool down. Body temperature may rise to 106°F or higher within 10 to 15 minutes. Heat stroke can cause death or permanent disability if emergency treatment is not provided.

Recognizing Heat Stroke

Warning signs of heat stroke vary but may include the following:

- An extremely high body temperature [above 103°F, orally]
- Red, hot, and dry skin (no sweating)
- Rapid, strong pulse
- Throbbing headache
- Dizziness
- Nausea
- Confusion
- Unconsciousness
**What to Do**

If you see any of these signs, you may be dealing with a life-threatening emergency. Have someone call for immediate medical assistance while you begin cooling the victim. Do the following:

- Get the victim to a shady area.

- Cool the victim rapidly using whatever methods you can. For example, immerse the victim in a tub of cool water; place the person in a cool shower; spray the victim with cool water from a garden hose; sponge the person with cool water; or if the humidity is low, wrap the victim in a cool, wet sheet and fan him or her vigorously.

- Monitor body temperature, and continue cooling efforts until the body temperature drops to 101-102°F.

- If emergency medical personnel are delayed, call the hospital emergency room for further instructions.

- Do not give the victim fluids to drink.

- Get medical assistance as soon as possible.

Sometimes a victim's muscles will begin to twitch uncontrollably as a result of heat stroke. If this happens, keep the victim from injuring himself, but do not place any object in the mouth and do not give fluids. If there is vomiting, make sure the airway remains open by turning the victim on his or her side.

**Heat Exhaustion**

Heat exhaustion is a milder form of heat-related illness that can develop after several days of exposure to high temperatures and inadequate or unbalanced replacement of fluids. It is the body's response to an excessive loss of the water and salt contained in sweat. Those most prone to heat exhaustion are elderly people, people with high blood pressure, and people working or exercising in a hot environment.
Recognizing Heat Exhaustion

Warning signs of heat exhaustion include the following:

- Heavy sweating
- Paleness
- Muscle cramps
- Tiredness
- Weakness
- Dizziness
- Headache
- Nausea or vomiting
- Fainting

The skin may be cool and moist. The victim's pulse rate will be fast and weak, and breathing will be fast and shallow. If heat exhaustion is untreated, it may progress to heat stroke. Seek medical attention immediately if any of the following occurs:

- Symptoms are severe
- The victim has heart problems or high blood pressure

Otherwise, help the victim to cool off, and seek medical attention if symptoms worsen or last longer than 1 hour.

What to Do

Cooling measures that may be effective include the following:

- Cool, nonalcoholic beverages
- Rest
- Cool shower, bath, or sponge bath
- An air-conditioned environment
- Lightweight clothing
**Heat Cramps**

Heat cramps usually affect people who sweat a lot during strenuous activity. This sweating depletes the body's salt and moisture. The low salt level in the muscles may be the cause of heat cramps. Heat cramps may also be a symptom of heat exhaustion.

**Recognizing Heat Cramps**

Heat cramps are muscle pains or spasms—usually in the abdomen, arms, or legs—that may occur in association with strenuous activity. If you have heart problems or are on a low-sodium diet, get medical attention for heat cramps.

**What to Do**

If medical attention is not necessary, take these steps:

- Stop all activity, and sit quietly in a cool place.
- Drink clear juice or a sports beverage.
- Do not return to strenuous activity for a few hours after the cramps subside, because further exertion may lead to heat exhaustion or heat stroke.
- Seek medical attention for heat cramps if they do not subside in 1 hour.

**Sunburn**

Sunburn should be avoided because it damages the skin. Although the discomfort is usually minor and healing often occurs in about a week, more severe sunburn may require medical attention.

**Recognizing Sunburn**

Symptoms of sunburn are well known: the skin becomes red, painful, and abnormally warm after sun exposure.
**What to Do**

Consult a doctor if the sunburn affects an infant younger than 1 year of age or if these symptoms are present:

- Fever
- Fluid-filled blisters
- Severe pain

Also, remember these tips when treating sunburn:

- Avoid repeated sun exposure.
- Apply cold compresses or immerse the sunburned area in cool water.
- Apply moisturizing lotion to affected areas. Do not use salve, butter, or ointment.
- Do not break blisters.

**Heat Rash**

Heat rash is a skin irritation caused by excessive sweating during hot, humid weather. It can occur at any age but is most common in young children.
Crisis Management Plan

Overview

Introduction
The Greater Boston Junior Bruins have developed a detailed crisis management plan.

Purpose of the Crisis Management Plan

- To provide a prompt review and response of incidents and provide medical, psychological, counseling support services where appropriate.

- To recognize that a coordinated response to emergencies and crises is essential to a smooth resolution.

- To protect the privacy, dignity and self-respect of attendees, staff and guests.

- To recognize various divisions of The Greater Boston Junior Bruins’ and determine significant areas of responsibility.

A Crisis Situation Defined

- A crisis situation can be defined as one whose outcome has (or has the potential to have) serious consequences for members of the college community and/or attendees of the camp.

- It is not possible to prepare a detailed emergency plan that will cover every imaginable crisis. Good judgment and sensitivity to individual situations are the most important factors in an effective institutional response to crisis situations. Care should be taken not to magnify or overreact to events, but rather to approach them in a temperate manner.

Organization of Crisis Management for The Greater Boston Junior Bruins

- The Crisis Management program is organized to respond to incidents on and off the Babson campus in a coordinated, sensitive and time-responsive manner.

- The program is organized into two distinct units: The Crisis Response Team and the Crisis Information Team.
• The Crisis Response Team is comprised of individuals that provide front line support and leadership for a given crisis. In some instances, a secondary person has been identified to ensure that we have access to the necessary resources during a crisis situation. Michael Cashman, Executive Director of The Greater Boston Junior Bruins coordinates the Crisis Response Team. He will call upon those members of the team that are most appropriate to address the specific crisis. In some limited scenarios the entire Crisis Management Team may be convened but generally speaking, most crisis situations rely on select members of the Crisis Response Team.

• The Crisis Information Team consists of the Director and Assistant Director of The Greater Boston Junior Bruins on the Babson Campus. The leadership needs to be updated regularly on what has occurred and how to respond. As appropriate, additional team members may be called upon to make decisions which impact general Greater Boston Junior Bruins operations.

Media Relations Protocol

In order to avoid the possibility of misunderstood, misleading or libelous statements, the following general procedures should be followed in all crisis situations:

• All inquiries received regarding a crisis situation should be referred to the Executive Director of The Greater Boston Junior Bruins.

• The Executive Director of The Greater Boston Junior Bruins will be responsible for preparing and relaying all statements to print and broadcast media. If a member of the Crisis Management Team is contacted by the press, their inquiries should be immediately directed to the Executive Director of The Greater Boston Junior Bruins.

24/7 Support and Response Capability

• The Greater Boston Junior Bruins staff living on the campus (where applicable) are the key resources leveraged to coordinate a response twenty four hours a day, seven days a week. All staff members will share on-call rotation responsibilities which will provide for a swift response to any serious student or campus incident.

Babson Crisis Manual

• The Greater Boston Junior Bruins will coordinate with Babson College Crisis Management team for any incidents that may occur while on campus.
The Greater Boston Junior Bruins

Fire Evacuation Plan

The Greater Boston Junior Bruins owns and operates 1 camp at Babson College. This program is staffed by the employees of The Greater Boston Junior Bruins ranging in age from 18 - 65. The following is a list of our locations used at Babson College during our programs.

Staff will be assigned to lead the attendees to the meeting area outside of the building and take head counts. Do not re-enter the building until you have been given the OK by the Fire Department or Babson College Public Safety.

In Case of Fire

Skating Center:

- The side of the roped off parking lot on the side nearest Olin College.

All of the buildings used by The Greater Boston Junior Bruins are on the Babson College Campus. It is our assumption all buildings are equipped in the following manner: smoke detectors are located in every room and hallway as part of the early warning system. The room detectors are there to warn the occupants of a possible fire. The hallway detectors are tied into the main alarm system and when activated notify the Wellesley Fire Department and Babson Public Safety.

Fire drills will take place during the first day of the program. Directors will take time to go over fire drill procedures with staff and campers during the first session of classes.

When a fire alarm sounds all staff in a building should help guide the attendees to the nearest door and lead them to the designated rendezvous spot. As the attendees are lead out, staff members who were selected by the director will check the bathrooms for additional staff and campers. The Fire Department will then make certain nobody was left in the building. Once at the rendezvous area a head count will immediately be taken to make certain that everyone is accounted for. The director of The Greater Boston Junior Bruins will then notify Public Safety and the Summer Programs Office if not already contacted through the early warning detection system.

Do not under any circumstances re-enter the building unless you have permission from the Fire Department or Babson Public Safety.
FIRE DRILL CHECKLIST

Name of Building: __________________________________________

Building Address: __________________________________________

Name of Residential Camp: _________________________________

Drill Monitor: Title/Position: _________________________________

Fire Drill Location: _________________________________

Floor/Location to which occupants relocated: _______________

Method of activation of fire alarm: __________________________

Time fire alarm activated: _______am/pm

Time occupants vacated fire drill floor: _______am/pm
Floor Response Personnel

1. Evacuation Director present: No OK Unobserved
2. Assistant Evacuation Director (s) present: No OK Unobserved
3. Stair well monitors: No OK Unobserved
4. Elevator monitors: No OK Unobserved
5. Search monitors: No OK Unobserved
6. Assistants to the physically disabled and non-ambulatory: No OK Unobserved
7. Interior doors closed but not locked after searched. No OK Unobserved
8. Evacuation assistants checked rest rooms. No OK Unobserved
9. Overall response of floor response team. Satisfactory Unsatisfactory
Occumant Response

1. Occupant initial response on sounding of alarm.  
   Unsatisfactory  
   Satisfactory

2. Occupant noise level.  
   Unsatisfactory  
   Satisfactory

3. Occupants aware of location of stairwell.  
   Yes No Unobserved

4. Did evacuation proceed in smooth and orderly manner?  
   Yes No Unobserved

5. Did visitors to building participate in drill?  
   Yes No Unobserved

6. Overall response of occupants.  
   Unsatisfactory  
   Satisfactory

Drill Monitor Signature: ______________________________________________________________

Date of fire drill: ________________________________
The Greater Boston Junior Bruins
Criminal Offender Record Information Policy

Where CORI checks are part of a general background check for employment, volunteer work or licensing purposes, the following practices and procedures will generally be followed.

1. All CORI checks will be conducted as authorized by the Criminal History System Board (CHSB). All applicants will be notified that a CORI check will be conducted. If requested, the applicant will be provided with a copy of the CORI Policy.

2. The Greater Boston Junior Bruins will review all adverse records with legal counsel when deemed appropriate.

3. An adverse CORI will not automatically disqualify an applicant for employment. All determinations of employment suitability will be made consistent with this policy and any applicable laws or regulations.

4. If a CORI is returned showing a criminal record the director of The Greater Boston Junior Bruins will closely compare all information on the CORI request form with the information the applicant has provided to confirm the correct information has been obtained.

5. If it is determined by the appropriate members of the above mentioned departments that the CORI result may prohibit employment, the following steps will be followed.
   a. The Greater Boston Junior Bruins will provide the applicant with copy of the criminal record and the CORI policy.
   b. The Greater Boston Junior Bruins will explain the section or sections of the record that may prohibit employment.
   c. The applicant will have the opportunity to dispute the accuracy and relevance of the adverse CORI record.

6. If the applicant challenges the accuracy of the CORI record he/she will be provided with a copy of the CHSB "Information Concerning the Process in Correcting a Criminal Record" document.
7. If The Greater Boston Junior Bruins determines the record belongs to the applicant and is accurate based on the information provided in section 4 of this policy, then the determination of suitability for the position or license will be made. Unless otherwise provided by law, factors considered in determining suitability may include but are not limited to:

   a. Relevance of the crime to the position sought  
   b. The nature of the work to be performed  
   c. Time since conviction  
   d. Age of the candidate at the time of the offense  
   e. Seriousness and specific circumstances of the offense  
   f. The number of offenses  
   g. Whether the applicant has a pending charge  
   h. Any relevant evidence of rehabilitation or lack thereof  
   i. Any other relevant information, including information submitted by the candidate or  
   j. requested by The Greater Boston Junior Bruins

8. The Greater Boston Junior Bruins will notify the applicant of the decision and the basis of the decision in a timely manner.
Boston Junior Bruins Pre-Season Hockey Camp
Health & Consent to Treat Form

(You WILL NOT be admitted to camp without this completed form. Please bring this form day one at check-in.)

Player: ___________________________  DOB: ____________  Mom: ____________  Dad: ____________

Please Check Days player will be attending camp: Week 1  Monday __  Tuesday __ Wednesday __ Thursday __
Week 2  Monday __  Tuesday __ Wednesday __ Thursday __

Address __________________________________ City _______________________ St. _____ Zip __________

Contact Numbers:
Mom  Home: ____________________  Work: ____________________  Cell: ____________________
Dad  Home: ____________________  Work: ____________________  Cell: ____________________

Mom email: ____________________________________________________________
Dad  email: ____________________________________________________________

2014-2015 seasons' team and age group/Level: ______________________________

Emergency Contact Info:
Name: ______________________________________________________  Relation __________________________

Emergency Contact Numbers: (_____)_______________________________________________________________

HEALTH & GENERAL HISTORY
On the back of this sheet of paper, please answer the following questions, if applicable:
1. If the player should be restricted from any activity.
2. If the player will be taking medication during camp, (AUTHORIZATION TO ADMINISTER MEDICATION TO A CAMPER NEEDED)
3. Identify any medical conditions or medical history that would require special attention.

I hereby certify that the named player is physically able to participate in the Pre-Season Hockey Camp and that I know of no restrictions, physical impairments, or any other facts, which in any manner limit his/her participation in such a program:

Parental Signature: _______________________________________________________ Date: __________________

HEALTH INSURANCE INFORMATION
Carrier Name: __________________________________________  Policy Number: _________________________________
Policy Holder Name: _____________________________________  Policy Holder Date of Birth: ____________________

I, the parent (guardian) of _____________________________________________, give permission for the named player to receive emergency medical or surgical treatment and hospitalization if necessary. I understand that every attempt will be made to contact me, or the emergency contact named above, before taking this action. I hereby waive and release the Greater Boston Junior Bruins Program, its staff and employees, agents, management, coaches, and sponsors from any liability for any injury or illness incurred while participating in this Pre-Season Camp. I UNDERSTAND THAT THERE IS RISK OF INJURY TO THE NAMED PLAYER AS A RESULT OF THESE ACTIVITIES, AND KNOWINGLY AND VOLUNTARILY ASSUME ALL RISK OF SUCH INJURY. I will be financially responsible for any medical attention needed during the camp or resulting from an injury received at the camp. My medical insurance shall be the primary insurance coverage for any medical treatment needed. I further understand that the Greater Boston Junior Bruins Program retains the right to use, for publicity and advertising purposes, photographs of players taken at camp. I/we understand and acknowledge the risk upon entering events sponsored by Greater Boston Junior Bruins Program, I/we understand and appreciate that participation or observation of the sport constitutes a risk to me/us of serious injury, including permanent paralysis or death. I/we voluntarily and knowingly recognize, accept, and assume this risk and release Greater Boston Junior Bruins Program, Babson College, and/or lessees, their sponsors, event organizers and officials from any liability therefore.

Signed _______________________________________________________ Date: _________________________
BOSTON JUNIOR BRUINS PRE-SEASON CAMP
AUTHORIZATION TO ADMINISTER MEDICATION TO A CAMPER

(To be completed by parent/guardian)

Name of Player: __________________________ Age: ______

Food/Drug Allergies: __________________________

Diagnosis (at parent’s discretion): __________________________

Parent/Guardian Name: __________________________

   Home Telephone: __________________________
   Business Telephone: __________________________
   Emergency Telephone: __________________________

Name of Licensed Prescriber: __________________________

Business Telephone: __________________________ Emergency Telephone: __________________________

Name of Medication: __________________________ Dose given at camp: ______

Route of Administration: _________ Frequency: _________ Date Ordered: _________

Duration of Order: _________ Quantity Received: _________

Expiration date of Medications Received: _________ Special Storage Requirements: _________

Specific Directions (e.g., on empty stomach/with water): __________________________

Specific Precautions: __________________________

Possible Side Effects/Adverse Reactions: __________________________

Other medications (at parents’ discretion): __________________________

Location where medication administration will occur: __________________________

(Over)
Authorization to Administer Medication to a Camper (page 2)

I hereby authorize **BOSTON JUNIOR BRUINS PRE-SEASON CAMP** to administer,

to my child, (name of player) __________________________________________________

the medication(s) listed above, in accordance with 105 CMR 430.160.

105 CMR 430.160(A)
Medication prescribed for campers shall be kept in original containers bearing the pharmacy label, which shows the date of filling, the pharmacy name and address, the filling pharmacist’s initials, the serial number of the prescription, the name of the patient, the name of the prescribing practitioner, the name of the prescribed medication, directions for use and cautionary statements, if any, contained in such prescription or required by law, and if tablets or capsules, the number in the container. All over the counter medications for campers shall be kept in the original containers containing the original label, which shall include the directions for use.

105 CMR 430.160(C)
Medication shall only be administered by the health supervisor* or by a licensed health care professional authorized to administer prescription medications. The health care consultant shall acknowledge in writing the list of medications administered at the camp. If the health supervisor is not a licensed health care professional authorized to administer prescription medications, the administration of medications shall be under the professional oversight of the health care consultant. Medication prescribed for campers brought from home shall only be administered if it is from the original container, and there is written permission from the parent/guardian.

105 CMR 430.160(D)
When no longer needed, medications shall be returned to a parent of guardian whenever possible. If the medication cannot be returned, it shall be destroyed.

*Health Supervisor – A person who is at least 18 years of age, specially trained and certified in at least current American Red Cross First Aid (or its equivalent) and CPR, has been trained in the administration of medications and is under the professional oversight of a licensed health care professional authorized to administer prescription medications.

Parent/Guardian Signature: ___________________________ Date: ___________________________