



Howard County  
RECREATION & PARKS

# SUMMER CAMP

# STAFF MANUAL



2017



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HoCoParks  
APP

# MISSION

To responsibly manage natural resources; provide excellent parks, facilities, and recreation opportunities for the community; and ensure the highest quality of life for current and future generations.

# VISION

The Department of Recreation and Parks strives to deliver recreation and leisure opportunities that will improve the health and well-being of the community and to serve as model stewards of the environment by managing, protecting, and conserving our resources for a sustainable future.

# CORE VALUES

- Exceptional Customer Service
- Professionalism
- Accountability
- Knowledgeable, Well-trained Staff
- Teamwork
- Integrity
- Trend Setting



**Howard County**  
RECREATION & PARKS



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# Howard County

## RECREATION & PARKS

7120 Oakland Mills Road, Columbia, Maryland 21046

Laura T. Wetherald  
Bureau Chief of Recreation  
lwetherald@howardcountymd.gov

Phone: 410-313-4640 Fax: 410-313-1699  
www.howardcountymd.gov/rap Voice/Relay: 410-313-7275

Dear Summer Staff:

Welcome to Howard County Department of Recreation and Parks, and thank you for spending your summer in our employment. You were chosen for this position because of your commitment, interest and enthusiasm in working with children. Customer service remains very important to us, as well as your relationship with the patrons you serve and the staff with whom you work.

There are several things you can do to make a better camp experience for our registrants:

- Read your manual and be prepared by asking questions and getting invested into the program.
- Make sure all correspondence and program materials state “Howard County Recreation & Parks”—we want to promote awareness of our agency and get more folks involved.
- Keep your facility and site area clean, risk free, and above all SAFE!
- Offer the best programs you can and be creative and exciting for participants.
- Remember what you enjoyed as a camper yourself when you attended camp. Make great memories for your own campers!
- Keep your sense of humor and your professionalism in how you do your job; arrive early; be prepared in advance; SMILE...a lot; make contact with parents and guardians at both drop off and pick-up; and above all, be patient and responsive with all campers.

The Department is committed to being model stewards of the environment by managing, protecting, and conserving our resources. Staff must incorporate principles of sustainability and conservation into all its operations including recreation programs and activities as well as provide educational leadership to its participants and the community. All staff are expected to promote energy and water conservation, protection of green space, and increase waste management efforts. Recreation employees are responsible for; making sure there is a recycling bin at the camp site, reminding campers to use a reusable water bottle, encouraging shout-outs to those that are being environmentally responsible including bringing a reusable lunch bag, recycling, picking up trash, carpooling, etc.

This manual states our established policies and procedures for Summer 2017. Please read the manual and review it throughout the summer. We may not go over every policy in detail, **but you are expected to be familiar with all of these policies**. We also encourage you to offer suggestions for the improvement of our programs. Have a great summer!

Sincerely,

Laura T. Wetherald, CPRP  
Bureau Chief of Recreation

LTW/ld





**EMPLOYEE ORIENTATION CHECKLIST**

**Name of Employee:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Manager / Supervisor:** \_\_\_\_\_

The following should be reviewed with the new employee before the program begins. Once completed and signed, remove from the manual and submit to Program Supervisor for inclusion in employee personnel file.

- Distribute policies and procedures manual
- Issue photo ID badge and staff shirt (if applicable)
- Complete Contingent Employee Inventory Checklist (ID Badge)
- Discuss departmental mission statement and customer service philosophy
- Review emergency contact information (Emergency Phone Numbers) and if applicable, issue copy of school permit with school contact information
- Review staff chart and chain of command
- Job duties and expectations
- Staff Procedures:
  - \_\_\_ Work Hours
  - \_\_\_ Overtime Wage Exemption (FLSA)
  - \_\_\_ Absences
  - \_\_\_ Meetings
  - \_\_\_ Payment for Hours Worked:
    - \_\_\_ Time card procedure
    - \_\_\_ Time card submittal schedule
    - \_\_\_ Instructions for iPay
  - \_\_\_ Dress Code
  - \_\_\_ Howard County Ethics Code
  - \_\_\_ Child Protection – leader’s responsibility to report child abuse and neglect
  - \_\_\_ Supplies and Materials
- Program Policies and Procedures
  - \_\_\_ Registration Policy
  - \_\_\_ Participant Information Form
  - \_\_\_ Daily Attendance Records
  - \_\_\_ Daily Sign-in/Sign-out Procedures
  - \_\_\_ Late Pick-up Policy and Procedure
  - \_\_\_ Medication Authorization Form
  - \_\_\_ Camp Medical & Accommodation Chart
  - \_\_\_ Sunscreen Policy
  - \_\_\_ Participant Rules of Conduct and Guidelines for Participant Behavior
  - \_\_\_ Program/Participant Transportation
  - \_\_\_ Travel Permit
  - \_\_\_ Relationship with Park Personnel and HC Public School Staff
  - \_\_\_ Recreation and Parks Responsibilities for Building Use
  - \_\_\_ Howard County Public School Responsibilities

- Program Policies and Procedures (continued)
    - Howard County Public School System Weapons Policy
    - Phone Call Policy
    - Written Communication Policy and Social Media
      - Must be pre-approved, including e-mails
      - Signage at program site (must be computer generated). Calendars can be hand written.
      - Confidentiality/Not to Disclose
    - Public Relations
    - Handwashing Policy
  - Camp Set Up Procedures
  - Leadership Tips
  - Behavior Guidelines for Participants and Discipline Procedures
  - Identifying A Participant Who May Need Accommodations
  - Inclusion Overview
  - Roger Carter Recreation Center Pool Guidelines
  - Laurel Municipal Pool Information
  - Robinson Nature Center Field Trip Guidelines
  - Participant and Employee Accidents/Injuries
  - First Aid Procedures/Heat Related Illness
  - Health Procedures
    - Concussion Information
    - Rabies & Tick Information
    - Zika Virus Information
    - Allergy Action Points
    - Epi Pen Information
    - Bloodborne Exposure Incidents
  - Safety Procedures
  - Playground Safety & Supervision
  - Ozone Action Days Guidelines
  - Extreme Heat Plan
  - Weather Emergency Plan
  - Locating a Lost Child/Missing Participant Procedure***
  - Lost Child Quick Search/Contact Information Sheet***
  - Emergency Lock Down Plan
  - Emergency Quick Reference Information
  - Responding to Emergency Threats
  - General Security Plan
  - Risk Management Plan – Abridged Version
  - Camp Standards and Inspection Report
- 

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Manager / Supervisor Signature: \_\_\_\_\_

cc: Personnel file

# Staff Policies/Procedures

## Work Hours

- It is required that staff members arrive at a program site at least 15 minutes prior to scheduled opening time of program (or as determined by your Program Supervisor), and remain 15 minutes after scheduled closing time of the program, or until all participants are gone.
- Staff must check in with the Program Director upon arrival and must check out when leaving.
- Contingent (part-time non-benefited) employees are exempt from the overtime wage provisions of the Fair Labor Standards Act (FLSA) because of working at a program site that operates less than seven months of the year. You will be paid at your straight hourly wage for each hour that you work, even if those hours exceed 40 in a one-week period. For employees working in overnight camps, up to eight hours of sleeping time will be excluded from compensable working time. Part-time benefited employees may not work over 40 hours in a week unless prior approval is granted.
- All staff must remain on-site at all times. Staff may not leave the site for lunch or other reasons. Exceptions may be granted by the Program Supervisor.
- Absences: Absences of staff from an assigned activity/program without prior approval may result in dismissal. In case of illness or another emergency, you must contact your Program Supervisor immediately. If unable to reach your Program Supervisor, contact the Superintendent. Contingent staff are not entitled to either sick or vacation leave.
- Meetings: All staff members are expected to attend scheduled staff meetings.

## Time Cards/Pay Checks

- It is your responsibility to maintain accurate time records using the time card supplied to you by your Program Supervisor.
- Program directors must initial all time cards and, by doing so, are verifying the accuracy of the time card. Falsifying time cards is unlawful and could result in dismissal.
- Late timecards will not be accepted.
- Time cards must be turned in weekly to the Program Supervisor.
- Hours for Friday, Saturday, and Sunday should be projected on time card, when submitting on Thursdays. Corrections to projections must be reported prior to 10am the following Monday.
- Pending timely time card submittals, employees are paid bi-weekly by mail or direct deposit (no check pickups). Direct deposit is recommended. Allow two weeks for checks to be distributed.
- **Paycheck are mailed** unless enrolled in direct deposit. Ask your supervisor for a direct deposit authorization form and instructions on iPay.

### HOWARD COUNTY DEPARTMENT OF RECREATION AND PARKS TIME CARD

Name: Jane Doe Social Security No.: 1234

Pay Period: 7/10-7/14/17 Account No.: \_\_\_\_\_

DATE	DAY OF WEEK	NAME OF PROGRAM/LOCATION	COURSE NO.	HOURS WORKED	TOTAL HOURS
7/10/17	Mon	Junior Chefs Camp - Rockburn ES		8:30 AM - 1:00 PM	4.5
7/11/17	Tue	Junior Chefs Camp - Rockburn ES		8:45AM - 1:00 PM	4.25
7/12/17	Weds	Junior Chefs Camp - Rockburn ES		8:30 AM - 1:00 PM	4.5
7/13/17	Thurs	Junior Chefs Camp - Rockburn ES		9:00AM - 1:00 PM	4.0
7/14/17	Fri	Junior Chefs Camp - Rockburn ES		8:30 AM - 1:00 PM	4.5

TOTAL HOURS 21.75

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Coordinator's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Supervisor's Initials: \_\_\_\_\_ DISTRIBUTION: White-coordinator; Yellow-employee



# HOWARD COUNTY DEPARTMENT OF RECREATION & PARKS

7120 Oakland Mills Road

Columbia, Maryland 21046

410-313-4640

John R. Byrd, Director  
jbyrd@howardcountymd.gov

FAX 410-313-1699  
TDD 410-313-2323

## TIME CARD SUBMISSION SCHEDULE FOR SUMMER STAFF - 2017

Howard County Government has a bi-weekly payroll schedule; however, unless otherwise specified, your time cards are due to your Program Supervisor every week. **All paychecks will be mailed.** Direct deposit is available and strongly encouraged. Ask your supervisor for a direct deposit authorization form.

It is important that you register for *iPay* to obtain your W2 form next year and to access your pay statements. W2 forms will not be automatically mailed. Ask your program supervisor for an *iPay* Instruction Sheet.

PAY PERIOD (Monday-Sunday)	TIME CARD DUE TO SUPERVISOR (or as instructed by Supervisor)	PAY DATE
May 29-June 4 June 5-11	Thursday, June 1 Thursday, June 8	June 23
June 12-18 June 19-25	Thursday, June 15 Thursday, June 22	July 7
June 26-July 2 July 3-9	Thursday, June 29 Thursday, July 6	July 21
July 10-16 July 17-23	Thursday, July 13 Thursday, July 20	August 4
July 24-30 July 31-August 6	Thursday, July 27 Thursday, August 3	August 18
August 7-13 August 14-20	Thursday, August 10 Thursday, August 17	September 1



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We are pleased to announce ADP iPayStatements, a benefit for all employees. Through ADP, our payroll provider, we are able to offer you access to your Earnings Statements and W-2 forms 24 hours per day, 7 days a week.

### How to Register on ADP iPayStatements

1. Enter Address <https://ipay.adp.com/iPay/index.jsf> on your Web Browser (Internet Explorer)
2. Click on **“Register Now”**
3. Welcome page. Click on **“Register Now”**
4. Enter **howardco-payme** as the Self Service Registration Pass Code. *Click Next.*
5. Enter you name, Social Security Number (**any format**), date of birth. Then click **Next**.
  - After this information is entered, click **Next**.
6. Enter your contact information: This would be your business or personal email address (for notification purposes only. After confirming your email address, enter phone # (optional) then click **Next**.
7. Enter you security information:
  - City or town of birth
  - 2 security questions (Must pick 2 separate questions) Click **Next**.
8. **YOUR USER ID WILL NOW BE DISPLAYED!!!! YOU WILL NEED THIS EVERY TIME YOU LOG IN TO VIEW YOUR PAY STUB. \*\*PRINT THIS PAGE\*\***
  - SAMPLE USER ID’S (**jsmith@howardco, tjones@howardco**). These ID’s are **not** case sensitive!!!
9. Create an ADP Password. Your password must be at least 8 characters long and must contain at least 1 letter and either 1 number or 1 special character.
  - **YOUR PASSWORD IS CASE SENSITIVE**
10. Upon completing the registration process, you will need to log back into the system by using your user id and password that you just created. When you log on again, this will take you to the “Welcome Screen”. Make this a favorite so that you don’t have to key in the URL each time to access this site.
11. After logging back in, click on the **Resource Center** located on the right side of your Screen and go to the section titled: **“Things You Can Do”**
12. Click on **“Go Paperless”** and then select **“online access feature only”**.

**NOTE: Please be advised that you CAN print a copy of your statement.** The “Go Paperless” feature allows associates to view their statements online, without having to generate a printed copy, and helps in the effort to conserve and save energy.

13. Check the box that says, **“Access my pay statement online only”** feature and choose **“next”**. Then click on **“accept”**.
14. You will then be prompted to enter the confirmation number you see and choose **“save”** then choose **“done”**.
15. Remember to click on Logout (upper right corner) when you want to end your session.

Questions / concerns should be emailed to [payroll@howardcountymd.gov](mailto:payroll@howardcountymd.gov)

We hope you will enjoy this feature. We appreciate the opportunity to provide you with this exciting way of viewing your pay information.



## Dress Code

Employees must adhere to Howard County Recreation and Parks dress code as follows:

• **All staff are required to wear the following**

- Howard County name badge or temporary name badge
- Appropriate closed toed shoes for activities (no flip flops unless approved by Program Manager); no bare feet allowed unless at the pool
- If issued, a Department of Recreation & Parks staff shirt

• **Clothing not permitted include the following**

- Halter tops, spaghetti straps tops, tube tops, see-through tops
- Shorts inappropriate in length or cut off
- Shirts with bare midriffs
- Clothing promoting drugs, beer, alcohol, tobacco products or other things prohibited to children
- Undergarments cannot be shown

The Department recognizes that occasionally staff may wear their staff shirts outside of work hours. In most situations, the wearing of staff shirts may be a marketing advantage to Howard County; but beware that when attired in a County staff shirt during non-work periods, how you represent yourself can be detrimental to your employment status.

## Howard County Ethics Code

Contingent (non-benefitted) and part-time benefitted employees are subject to the Howard County Ethics Code. In general, employees are prohibited from soliciting and accepting any gift or compensation from a person whose interests are different from the public interest that could be affected by the employee's actions. Unsolicited gifts of nominal value that do not exceed \$20 in cost or trivial items of informational value are permitted.

## Child Protection - Reporting Suspected Child Abuse or Neglect

*Code of Maryland Regulations defines child abuse and child neglect in the following manner:*

1. An individual shall immediately report suspected child abuse or neglect to the local Department of Social Services, or report the suspected incident to a local law enforcement agency.
2. Health practitioners, educators, human service workers, and police officers are required to report, both orally and in writing, any suspected child abuse or neglect, with oral report being made immediately and the written report being made within 48 hours of the contact which disclosed the suspected abuse or neglect.
3. A report shall include:
  - a. The name and home address of the child and the parent or other individual responsible for the care of the child;
  - b. The present location of the child;
  - c. The age of the child;
  - d. The names and ages of other children in the home;
  - e. The nature and extent of injuries or sexual abuse or neglect of the child, including any information known to the individual making the report of previous possible physical or sexual abuse or neglect;
  - f. The information available to the individual reporting:
    - i. Which might aid in establishing the cause of the injury or neglect;
    - ii. About the identity of the individual or individuals responsible for abuse or neglect; and
  - g. If reporting abuse or neglect of a child involving mental injury, a description of the substantial impairment of the child's mental or psychological ability to function that was observed and identified, and why it is believed to be attributable to an act of maltreatment or omission of proper care and attention.
4. Reports of abuse shall be made to the local Department of Social Services or the appropriate law enforcement agency. Reports of neglect shall be made to the local Department of Social Services.
5. An employee of a local Department of Social Services who receives a report of suspected child abuse or neglect, shall report the information to the protective services unit within the local department at once so as to initiate prompt handling of the report of suspected child abuse or neglect.

Howard County Department of Social Services

Address: 7121 Columbia Gateway Drive, Columbia, MD 21046

Office: (410) 872-4203, After hours: (410) 313-2929 Police Dept.

FAX: (410) 872-4303






# Program Policies/Procedures

## Registration and Attendance

All program participants must be registered to attend a program. No participation is allowed without being registered for the program due to liability and safety issues. Registration can be completed on-line, by mail, fax, phone or walk-up at Howard County Department of Recreation and Parks, the Gary J. Arthur Community Center at Glenwood, the North Laurel Community Center, the Roger Carter Community Center and the Robinson Nature Center.

### Participant Forms

- The Participant Information Form should have been distributed to all children in pre-camp packets, or parents will receive the first day of camp.
- **Forms should be returned promptly. Children will not be allowed to attend any program if the form is not completed and signed by the parent/guardian.**
- The Participant Information Forms are to remain on-site during program operation and taken on all field trips. For adventure camps such as tubing or canoeing, the forms should be placed in a waterproof container.
- All Participant Information Forms (see below) must be completed, collected and filed on site in **alphabetical order**.
- Return the forms to the Program Supervisor at the conclusion of the program.

	Program Name: _____
	Program Location: _____
<b>PARTICIPANT INFORMATION FORM</b>	
<i>You must fill out both sides of this form and bring it with you on the first day of the activity.</i>	
<b>General Information: (Please Print)</b>	
Participant Name: _____	Date of Birth: _____
Address: _____	City: _____ Zip: _____
Home Phone: _____	Work Phone: _____
Cell Phone: _____	Grade entering in fall: _____
Email Address: _____	
<b>Parent/Guardian:</b>	
Name: _____	Relationship: _____ Emergency Phone: _____
Name: _____	Relationship: _____ Emergency Phone: _____
<b>Individual(s) to be contacted in case of emergency (if different from parent/guardian):</b>	
Name: _____	Relationship: _____ Emergency Phone: _____
Name: _____	Relationship: _____ Emergency Phone: _____
<b>Person (other than parent) authorized to drop off / pick up participant:</b>	
Name: _____	Relationship: _____
Home Phone: _____	Cell Phone: _____
Are there any custody issues we should be aware of? <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, attach a copy of court order)	
<b>Health issues and special accommodations:</b>	
Are there any health concerns that our staff should be aware of? (asthma, allergies, hypoglycemia, seizure disorder, etc.) <input type="checkbox"/> No <input type="checkbox"/> Yes (if yes, please specify) _____	
What symptoms would your child exhibit? _____	
Requested actions to be taken by staff: _____	
Please indicate any of the following health problems or disability: (please check all that apply)	
<input type="checkbox"/> Deaf / hard of hearing	<input type="checkbox"/> Vision impairment
<input type="checkbox"/> Seizures	<input type="checkbox"/> Uses mobility aids (i.e. wheelchair, braces, etc.)
<input type="checkbox"/> Development disability (i.e. autism, intellectual, etc.)	
<input type="checkbox"/> Other (i.e. behavioral / emotional disorder, etc.) _____	
Please explain any specific health issues or accommodations needed to participate in program:	
<input type="checkbox"/> Inclusion Companion	<input type="checkbox"/> Deaf interpretive services
<input type="checkbox"/> Other (please specify) _____	

<b>Medication:</b>
Is the participant taking any medication? <input type="checkbox"/> No <input type="checkbox"/> Yes
Will participant need to take medication during program hours? <input type="checkbox"/> No <input type="checkbox"/> Yes
(if yes, attach a Medication Authorization Form; available from HCRP office or online at <a href="http://www.howardcountymd.gov/rap/medicationform.pdf">http://www.howardcountymd.gov/rap/medicationform.pdf</a> )
<b>Sunscreen is considered a topical medication.</b>
Parents wishing their child to apply sunscreen at camp, complete information below:
Brand of sunscreen: _____
Specific directions for application: _____
<b>Information required by state regulations (for Summer Camps only):</b>
Child's School: _____ <input type="checkbox"/> MD Public/Private School <input type="checkbox"/> Other
My child's immunizations are up to date. <input type="checkbox"/> No <input type="checkbox"/> Yes
Date of last tetanus: _____ <input type="checkbox"/> Unknown
Participant's Primary Physician: _____ Physician's Phone: _____
<b>I understand:</b>
1. By registering for this program, I verify that my child's immunizations are up to date.
2. That there are inherent dangers in any recreational activity, program or camp.
3. That I must be aware of the hazards associated with each activity, such as use of equipment, slips and falls, personal level of fitness, training, and various athletic injuries.
4. I must read and understand all written material, which has been provided by the Howard County Department of Recreation and Parks.
5. The rules and regulations for each activity, as explained in any written materials and/or explained by staff.
6. That the possible consequences of participating in these activities include the possibility of serious injury.
<b>I agree:</b>
1. To obey the rules and regulations for each activity and to follow the directions of the staff.
2. To inform a staff member of any dangerous or potentially hazardous situation that I may observe.
3. That if I do not understand how an activity is performed or how a piece of equipment is to be used, I will ask a staff member prior to beginning that activity.
4. To inform a staff member if I have any problems meeting the physical requirements necessary for participation in any activities.
I am aware that while participating in a recreation activity or program arranged by the Howard County Department of Recreation and Parks, certain risks and dangers may be present, including but not limited to those generally associated with certain activities, the hazards of traveling the public highways, of accidents, of illness, and of those forces of nature.
I agree to indemnify and defend Howard County and hold it harmless from and against any and all claims, suits, damages, liabilities and expenses, including attorney's fees and the County's costs of defense, in connection with loss of life, personal or bodily injury and/or damage to or loss of property that arises from the participation of _____ (Name of Participant) in _____ (Name of activity or program), except to the extent that such loss or damage is occasioned by the negligent act or omission of the county, its officers, agents or employees and no negligence on the part of the Participant.
In <b>EMERGENCIES</b> requiring immediate medical attention, your child will be taken to the <b>NEAREST HOSPITAL EMERGENCY ROOM</b> . Your signature authorizes the responsible person at the program to have you or your child transported to that hospital.
Signature of Participant or Parent/Guardian if under 18: _____
Date: _____

*Attendance*

- Staff shall maintain daily attendance records using the attendance form generated by the registration management system and provided by the Program Supervisor.

*Sign-In/Sign-Out Sheet*

- This form must be signed by parent/guardian each day when they drop off and pick up their children. After a child is signed in, they are in our care and our responsibility.
- Parent/Guardian or person who is authorized to pick up the participant are required to show government or school-issued photo identification every day when picking up campers.
- Written authorization must be provided by a parent/caregiver if a child is to leave a program early.
- This form should be located near a leader to ensure that all parents sign in/out and that a staff member is aware when a child enters and leaves the program.
- A Camper Sign-In/Sign-Out Permission Form (see below) may be completed for a participant over the age of eight. This form is used for campers walking or biking to and from the program.



Howard County Department of Recreation & Parks  
7120 Oakland Mills Road, Columbia, MD 21046  
www.howardcountymd.gov/RAP



**PARTICIPANT SIGN-IN/SIGN-OUT PERMISSION FORM  
(for participants age 8 and above)**

The Howard County Department of Recreation & Parks requires that each participant be signed in and/or out each day by a parent/guardian or individuals designated on the Participant Information Form.

By signing below, you give your child permission to sign themselves in and/or out of the program thus releasing Recreation and Parks from any liability. Program participants must sign in and/or out at the scheduled start and end times of the program. Any exceptions must be made in writing.

**I understand that there are inherent risks when walking or biking to/from the program. By signing below, I hereby allow my child to sign himself/herself in and/or out of the program and agree to release Howard County, to indemnify and defend the County, and hold the County harmless from and against any and all claims, suits, damages, liabilities and expenses, including reasonable attorney's fees and the County's cost of defense, in connection with the loss of life, personal or bodily injury, and/or damage to or loss of property that arises from the participation of my child in this program, except to the extent that such loss, injury or damage is occasioned by the negligent act or omission of the County, its officers, agents or employees and not by negligence on the part of me or my child. I attest that I have reviewed and determined a safe route for my child to follow to and from the program location.**

Parent Name: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Program / Activity Name: \_\_\_\_\_ Location: \_\_\_\_\_

Participant Name: \_\_\_\_\_ Age: \_\_\_\_\_


Participant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Notes: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

## Late Pick-Up

- Should a parent/caregiver be late in picking up a participant, a minimum of two (2) Howard County Recreation and Parks staff must remain onsite until all participants have been picked up. Staff must attempt to contact the parent/caregiver and/or other contacts listed on the Participant Information Form, if the wait exceeds 15 minutes. If the wait reaches 45 minutes, contact your Program Supervisor, or if not available, contact his/her superior(s) to discuss possible police involvement.
- The Department does have a fee payment procedure for continued late pick-ups. A fee may be assessed if a child is not picked up at the close of the program (\$5 for the first 15 minutes then \$1 for each additional minute thereafter). Determine from your Program Supervisor if a Late Pick-Up Form (see below) should be completed.

	<b>Howard County</b> RECREATION & PARKS	<b>LATE PICK-UP FORM</b> Recreation Programs
<b>ON-SITE DOCUMENTATION</b>		
<b>SECTION A</b> <i>To be filled out by Program Director or Authorized On-Site Staff:</i>		
Program Name: _____		
Course/Section #: _____		
Location: _____		
Child's Name: _____		
Day/Date: _____		
Scheduled Pick-Up Time: _____		
Time of Late Pick-Up: _____		
Staff Present (Print Name): _____		
Staff Signature: _____		Date: _____
<b>SECTION B</b> <i>To be filled out by Parent/Guardian:</i>		
Parent/Guardian Name: _____		
Address: _____		
_____		
Per policy as stated in the Howard County Recreation & Parks Activity Guide, I understand that it is my responsibility to pick up my child from recreational programs promptly at the specified ending time. I am aware that I will be charged \$5.00 for the first 15 minutes I am late and \$1.00 for each additional minute thereafter (time is kept by the program director's timepiece). I am also aware that continued lateness may result in my child being suspended or dismissed from this or future programs.		
Parent/Guardian Signature: _____		Date: _____
<b>FOR OFFICE USE ONLY</b>		
<b>SECTION C</b> <i>To be filled out by Program Supervisor or Authorized Recreation &amp; Parks Personnel:</i>		
Amount to be Billed: _____		
Notes: _____		
Program Supervisor Signature: _____		Date: _____
<b>FEE PAYMENT PROCEDURE</b>		
An invoice for the late pick-up fee will be mailed. Please send the required payment within five (5) days of receiving an invoice to <b>Howard County Recreation &amp; Parks, Attn: Registration, 7120 Oakland Mills Road, Columbia, MD 21046-1677</b> . Make check payable to <i>Director of Finance, Howard County</i> . Failure to pay all late pick-up fees within 30 days of notification will result in suspension from the program, and/or suspension from future Howard County Recreation & Parks programs as deemed appropriate by the Program Supervisor. Thank you very much for your cooperation.		
White Copy – Registration	Yellow Copy – File	Pink Copy – Parent/Guardian

## Medication

There are two Medication Administration Authorization Forms. One is for RLC / licensed programs/camps, and one is for non-licensed programs/camps.

### Medication Form for Non-Licensed Camps

All prescriptive and over the counter (non-prescriptive) medication must be accompanied by the Medication Administration Authorization Form (see next page for form example). The following instructions must be followed:


1. This form is to be completed by the parent/guardian/caregiver and signed by the physician. Medications may not be given without completion of this form. It is recommended that the parent/guardian/caregiver contact the individual Program Supervisor prior to the start of the program to discuss any medication that will be brought to the program.
2. The Parent/Guardian/Caregiver is responsible for the following:
  - a. Complete and sign the Medical Administration Authorization Form and return to the program staff.
  - b. Provide medication in an original container with visible label including the name of medication, the date of expiration, and clear dosage amount and administration directions with the participant name CLEARLY INDICATED. Note: Inhalers outside the original package must be accompanied by a copy of the original package label noting the above information.
  - c. At least one dose of medication must be given at home prior to the child's arrival at the child care facility.
  - d. Provide new, labeled containers if/when medication changes are made.
  - e. A separate form is required for each medication and a new form is required for each camp a child is registered for.
  - f. Parents/Guardians/Caregivers must transport medication to program site and give directly to program staff.
  - g. Parent/Guardian/Caregiver must pick up medication at the end of each week/program from program staff. Medications not picked up at the end of 14 business days following the last day of participation in the program will be disposed of by the program staff.
  - h. For all medications: A signature from a licensed health practitioner is required. The medication must be administered according to the dosage and administration instructions on the original container. A staff may administer only one dose of non-prescription medication to a child per illness.
3. Recreation and Parks staff is responsible for the following:
  - a. Medication will only be administered if the Howard County Recreation and Parks Medication Administration Authorization Form is completed and in the possession of the Recreation & Parks staff.
  - b. All medication shall be administered according to the instructions on the Medication Administration Authorization Form.
  - c. All medication must be locked up in a lock box, unless otherwise specified. All staff should have access to the key or combination for the lock box.
  - d. A Recreation & Parks staff member will not give medication unless it is in an original container with appropriate medicine contained within, with a visible label including the name of medication, the date of expiration, clear dosage amount and directions with the participant's name CLEARLY INDICATED.
  - e. This form should be kept on file with the child's records and should not transfer to another program. Records must be stored at the conclusion of the program for the period mandated under the Participant Archives Policy, but if a child travels between program locations for child care purposes, the medication and authorization forms must travel with them. The parent/guardian/caregiver assumes the responsibility for returning the medication to the program the following day.
  - f. Each time medication is given, the date, time, dosage and signature of the person administering the medication must be recorded on the back of the form.
  - g. Medication container must match the medication order form information. If the information on the form doesn't match the container, the medication can't be given.
4. The Medication Administration Form (Log) should be completed by the staff at the program. To ensure understanding of the medication and procedures for administration.
  - a. These forms should be stored with the medication.
  - b. At the start of each camp program, when medication is initially delivered to camp, staff is responsible for inventory of medication and documenting quantity on the Medication Administration Form.
  - c. All medication should be returned to the parent at the completion of the program and the Medication Final Disposition Form completed with parent. (e.g. 1 week camp, the last day)
  - d. If after 1 week the medication is not retrieved by the parent/guardian it will be destroyed.
    1. Take medication to the Therapeutic Recreation/Accommodation Manager's office with form.
    2. Complete the Medication Final Disposition Form with the Therapeutic Recreation/Accommodations Manager when medication is destroyed.
5. Release and Waiver of Liability to Attend Without Medication: In the event a child arrives without medication to a program: The medication is considered an ADA accommodation and no participant may be refused access to a program solely for not having their medication on site or available. However, the participant's parent/guardian/caregiver must sign a waiver releasing the County from liability, and must provide instructions on an alternative treatment procedure.





## Camp Medical & Accommodation Chart

- This chart is to be filled out as a summary of all the medical and special accommodations needed for each session of campers.
- It is important to carefully review all Participation Information forms in addition to the Medication Authorization forms to acquire this information.
- Include the medical concern (i.e. asthma, peanut allergy, etc.) and the accommodations (i.e. give two puffs of albuterol inhaler).
- Children participating with an inclusion companion should be included on this chart.
- This chart should be secured for confidentiality and accessible to all staff such as taping it inside the top of your file box – it should be a quick reference.



**Camp Medical and Accommodation Chart**

Please fill out the following chart as a summary of all of the medical conditions and special accommodations needed for each session of campers. It is important to carefully review all Participant Information forms in addition to Medication Authorization forms to acquire this information. Include the medical concern (i.e. asthma, peanut allergy, etc.) and the accommodations (i.e. give two puffs of albuterol inhaler). Children participating with an inclusion companion should be included on this chart. This chart should be secured for confidentiality and accessible to all staff, such as taping it inside the top of your file box – it should be a quick reference.

Camp Name: \_\_\_\_\_ Week of: \_\_\_\_\_

Child's Name	Medical Concern	Accommodations To Be Made	Parent Phone Number (s)

## Sunscreen Policy

The Department of Recreation and Parks encourages all program participants to wear sunscreen. It is preferable that participants come to a program with the sunscreen already applied. Because sunscreen is considered a topical medication, parents/caregivers wishing to have sunscreen applied to their child must provide the proper information, (brand of sunscreen and any specific directions), on the Participant Information Form. The sunscreen must be clearly marked with the participant's name and cannot be shared with other participants.

## Staff & Participant Conduct

### Rules of Conduct

The following rules must be observed while participating in Recreation and Parks programs. Specific rules may be added for individual programs and needs.

- All tobacco products are prohibited in buildings, school property, or County parks
- No food or beverages in unauthorized areas; glass containers are prohibited.
- No soliciting or loitering
- No interference with employee or volunteer duties
- No harassment or inappropriate or indecent conduct, language or clothing
- No unauthorized use of drugs, intoxicants or weapons
- No parking in unauthorized areas or driving / parking on field areas
- No alteration or installation of equipment (such as basketball hoops, fences, lining)
- No defacing of property (indoors or outdoors)
- No conduct that may jeopardize the safety of others.

These Rules of Conduct are in conjunction with rules from the Howard County Public Schools.

**Personal and Participant Property:** The Department does not accept responsibility for personal jewelry or any other personal items that are brought to the program by the participant. If you accept a participant's personal belongings to hold during the program, you are responsible for the items. Howard County Department of Recreation and Parks is not responsible for lost, stolen or broken personal property.

## Guidelines for Participant Behavior

The following guidelines have been established to ensure successful program participation.

- Program expectations will be conveyed to the participants at the beginning of the program.
- Staff and volunteers will work cooperatively to create a positive climate, which minimizes the potential for inappropriate behavior.
- When misbehavior occurs, appropriate modification techniques will be administered.
- Under no circumstances are participants to be subjected to verbal or physical abuse by staff or volunteers.
- Parents/caregivers will be contacted if a participant's behavior persists.
- The Department of Recreation and Parks reserves the right to limit participation of, deny participation to or expel from participation any participant who presents a health/safety risk to themselves, other participants, staff, volunteers and/or the public. Decisions of this nature may be based on:
  - Repeated and unresolved disciplinary issues that require excessive staff intervention
  - Involvement in any activity that is not recommended/contraindicated for medical reasons
  - Behavior that hinders the safe operation of a vehicle

## Evaluations

Evaluations are an important part of our programs. At the completion of a program, the following evaluations will be required:

### Program Participant Evaluation

Completed by a participant evaluating the program. Your Program Supervisor will provide information about how/when these are distributed. Many are completed online using Survey Monkey.




### Staff Performance Evaluation

Completed by the Program Director for all staff and given to the Program Supervisor at the end of a program. See below for example.

### Junior Counselor Evaluation

Completed by the Program Director and signed by both the Program Director and the Junior Counselor at the end of their assignment to a program. Completed forms are submitted to the Volunteer Program Coordinator.

HOWARD COUNTY DEPARTMENT OF RECREATION AND PARKS PART-TIME EMPLOYEE EVALUATION						
NAME: _____	PROGRAM: _____					
EVALUATION PERIOD: FROM _____ TO _____	POSITION: _____					
Rating factors: 5 = excellent, 1 = needs improvement						
<b>1. Personality and Attitude</b>	5	4	3	2	1	N/O
A. Cheerful and friendly with everyone						
B. Motivated and alert to new experiences						
C. Cooperative attitude towards fellow workers, supervisors and participants						
D. Loyalty to supervisors/co-workers						
E. Is polite and interacts well with parents						
<b>2. Administrative Ability</b>	5	4	3	2	1	N/O
A. Plans and carries out suggested programs to full extent of ability and facilities						
B. Shows originality and initiative in program planning and conduct of activities						
C. Submits quality plans/reports/timesheets on time						
<b>3. Leadership</b>	5	4	3	2	1	N/O
A. Ability to provide leadership; motivates staff and participants						
B. Communicates well with staff, participants and parents						
C. Receptive to suggestions and criticism from others						
D. Seeks to improve the program						
E. Uses previous skills and knowledge to help enrich the program						
F. Understands and implements behavioral modification techniques when appropriate						
<b>4. Reliability</b>	5	4	3	2	1	N/O
A. Is punctual in meeting all time schedules						
B. Accepts full share of responsibility						
C. Adheres to all program policies and procedures						
<b>5. Appearance</b>	5	4	3	2	1	N/O
A. Presents a good personal appearance						
B. Wears required attire to their work site each day						
<b>6. Safety/Responsibility</b>	5	4	3	2	1	N/O
A. Keeps program area in a safe condition						
B. Keeps supplies and equipment in safe condition						
C. Understands and implements proper safety techniques for participants and staff						
COMMENTS/SUMMARY: _____						
SUGGESTIONS FOR EMPLOYEE IMPROVEMENT: _____						
Recommend for re-employment in this program? YES _____ NO _____						
IF "NO", evaluation must be reviewed by supervisor and employee.						

  				
Junior Counselor (Please print full name): _____				
Camp: _____		Date: _____		
This is the Jr. Counselor's 1 <sup>st</sup> 2 <sup>nd</sup> 3 <sup>rd</sup> or 4 <sup>th</sup> year in the program. (Circle one)				
Exceeds: Performance is routinely above job requirements Meets: Performance is regularly competent and dependable Needs Improvement: Performance effort needs improvement				
1. Engagement with Staff (Teamwork)	Exceeds Standards	Meets Standards	Needs Improvement	Not Observed
A. Works cooperatively and cheerfully provides assistance where needed				
B. Accepts supervision with a positive and appropriate attitude				
C. Communicates effectively; shares ideas and seeks guidance when needed				
2. Engagement with Campers (Leadership)	Exceeds Standards	Meets Standards	Needs Improvement	Not Observed
A. Enthusiastically participates in camp activities				
B. Communicates effectively; listens to and provide campers guidance when needed				
C. Maintains a patient and caring attitude when interacting with campers				
D. Seeks to engage campers and cheerfully provides encouragement when needed				
E. Gives instructions with a positive and appropriate attitude				
F. Shows good character and inspires campers to do right				
G. Exercises caution and care toward safety of self and all campers				
3. Self Responsibility	Exceeds Standards	Meets Standards	Needs Improvement	Not Observed
A. Performs required duties without reminders				
B. Anticipates what needs to be done and does it				
C. Accepts responsibility for own behavior				
D. Reports to camp on time and prepared				
E. Obtains camp director's contact information, communicates absences according to policy				
F. Completes time-tracker daily				
G. On a weekly basis, submits time tracker to camp director for approval/signature				
H. Follows dress code and name badge policies				
I. Follows policies regarding cell phones				
Please comment on strength(s) that the Junior Counselor exhibited: _____				
Please indicate area(s) that the Junior Counselor could improve: _____				
Junior Counselor's Signature: _____		Director's Signature: _____		Date: _____
Original-Volunteer Coordinator		Yellow Copy-Junior Counselor		

## **Transportation**

USE OF YOUR PERSONAL VEHICLE TO TRANSPORT PROGRAM PARTICIPANTS (INCLUDING JUNIOR COUNSELORS) IS NOT PERMITTED AND MAY RESULT IN DISMISSAL.

### *Mileage*

Seasonal staff are not reimbursed for private car mileage.

### *County Vans*

Certain programs may require the use of vans. Staff driving County vans must be 21 years or older. Staff driving rental vans must be 25 years or older. Employees driving County vehicles must provide a certified copy of their driving record, complete a County Driver's Vehicle Use Form, and complete a certified van driving course provided by Howard County Recreation and Parks. Staff must complete the Accessible Van Training to be able to drive an accessible van.

### *Campers Traveling Off-Site*

Your Program Supervisor will advise you of all necessary travel paperwork and procedures to be followed.

## **Communication & Considerations**

### *Relationship with Park Personnel*

All program staff must become acquainted with park personnel at their respective sites. Report any damage, trash, etc. to the park staff. The program staff is responsible for the permitted area of the park.

### *Relationship with the Howard County Public Schools/School Staff*

- Staff should become acquainted with the office staff of a school building and the Building Services Manager and learn about school policies, restrictions, emergency procedures and responsibilities.
- Check with your Program Supervisor regarding air conditioning agreement.
- The program staff is responsible for the permitted area of the facility.
- Every effort must be made to assure that no damage is done to the facility or grounds. Contact your Program Supervisor immediately if damage occurs.
- If the facility is locked when you arrive, the Program Director should contact the Program Supervisor. If unable to reach the Program Supervisor, call the Department of Recreation & Parks at 410-313-4620 or the Superintendent (phone numbers listed on the staff chart).
- Howard County Public Schools equipment should not be used by Recreation and Parks programs unless authorized by the school and your Program Supervisor.
- At all times, the use or sale of tobacco in any form is prohibited in school buildings and on school grounds.

### *Department of Recreation and Parks Responsibilities*

- Ensure that areas used are in safe and usable condition.
- Clean up in a timely fashion, i.e. wet mop when spills occur, wipe tables after use, remove paper from floor, put trash in proper receptacles.
- Provide a period within the time allocated to the program to accomplish appropriate maintenance.
- Remain with participants until all have left the facility, including late pick-ups.
- Bring any unsafe/dangerous condition to the attention of school personnel.

### *Howard County Public Schools Responsibilities*

- Restroom facilities in the area assigned will be cleaned, sanitized and stocked daily.
- Carpeted and tiled floors will be vacuumed/swept daily.
- Trash will be emptied daily.
- Water fountains will be cleaned and sanitized daily.
- Should parents/caregivers be late in picking up a participant, school personnel will remain on site and allow HCRP staff to remain inside until all participants have left.
- Provide Recreation and Parks staff with mops and buckets, brooms, dust mops etc. when needed.

# Howard County Public School System Weapons Policy

(excerpts from HCPSS Policy No. 9250; <http://www.hcpss.org/f/board/policies/9250.pdf> )

- It is a violation of this policy for any person other than a law enforcement agent to carry or possess any weapon on school property, on a school bus, in a vehicle located on school property, or at school-sponsored activities.
- Definition of a Weapon – Object or implement capable of causing harm to another or used in such a way as to cause harm to another. The term weapon can include:
  - gun
  - firearm
  - knife
  - chemical spray
  - poison
  - taser
  - martial arts weapon (e.g., throwing star, nunchakus)
  - explosive devices
  - any implement, visible or concealed, possessed under a circumstance that would reasonably lead a person to believe it was a weapon or would be used as a weapon.
- Unless used to threaten or harm another, the following are not considered weapons:
  - Tools and materials used by employees in their normal duties.
  - Any antique firearm rendered permanently inoperable.
  - Permanently inoperable rifles used by JROTC cadets during instructional time and at other times when under the direct supervision of JROTC instructors.

## Phone Calls

Personal telephone calls, use of a cell phone and texting for personal use are not permitted during working hours. Cell phones must be silenced. Exceptions must be approved by the Program Supervisor.

## Fund Raising

Fund-raising is not permitted in Howard County Department of Recreation and Parks Programs.

## Written Communications & Social Media

All newsletters, letters, e-mails, or other notifications to parents/participants must be pre-approved by the Program Supervisor before printing or sending. Sufficient time should be allowed to receive approval. If e-mailing, the Supervisor must be "cc" on the actual e-mail going to parents. Any signage needs to display Howard County Recreation and Parks official logo and be computer generated. Calendars can be hand written. See your Program Supervisor for logo or letterhead.

## Confidentiality/Not To Disclose

Staff understands that in the performance of their duties they will have access to certain sensitive and confidential information about participants that may be or is protected by both State and Federal law. For that reason, it is the policy of Recreation and Parks that all information obtained about a participant is confidential and may not be mentioned, shared, or otherwise disclosed for any reason other than when required by the job responsibilities assigned by the County. Further, such information may only be released to authorized individuals.

Prohibited activities include, but are not limited to, mentioning, showing, or otherwise disclosing the following information about a participant:

- Participant's name
- Behavior incident or accident
- Accommodations or adaptations
- Medical information
- Photographs, whether taken on a cell phone or otherwise, that are not authorized for program publication purposes (example: taking a photo of a participant on a cell phone and placing on a personal social media site such as Facebook is not allowed).

Staff further understands that if they wrongfully disclose confidential information, they may be subject to disciplinary action by the County up to and including dismissal.

## **Public Relations**

- As a member of the Howard County Department of Recreation and Parks staff, you represent Howard County Government. Certain requirements and behavior are expected of you, as well as favorable public relations with participants, parents, community members, the general public and other County departments.
- Personal appearance, mannerisms and preparation greatly influence the success of your program. You will be setting an example and directing activities of others; hence, your appearance and conduct must be professional.
- Keys to establishing well developed and successful public relations:
  - Be informed about the Recreation and Park's policies and operations so you can communicate this information to parents/caregivers and participants.
  - Appropriately respond to criticism by individuals who may be misinformed about the Department and, within your ability, try to rectify any problems that may occur.
  - Help establish Recreation and Parks as an important asset in community life and encourage a greater appreciation of recreation.
  - Keep the lines of communication open.
  - Develop the best program possible; have participants leave the program satisfied.
  - Be proud of your program; share the highlights with others.
  - Whenever a staff or volunteer is approached by the media, (newspaper, TV, radio, etc.), direct all inquiries to your Program Supervisor immediately.

## **Hand-Washing Policy**

All staff and participants are required to wash their hands prior to handling any food. In the absence of hand-washing facilities, use antibacterial wipes or a non-water antibacterial soap.

***THINK IN POSITIVE TERMS. THINK SUCCESS.***

# Camp Set-Up Procedures

- Prior to the start of camp – meet and facilitate introductions between camp staff and appropriate facility staff (office, custodial, park, and/or community/recreation center staff).
- Check of buildings and grounds (daily). May use the Building Security Checklist when checking in and out of a facility. (Page 51)
- Inspect fields, courts, pavilions, playgrounds, rooms and other space and locations to ensure safe conditions (i.e. glass, bees, poison ivy, etc.).
- Check and arrange permitted space and/or locations for appropriate set up (tables, chairs, supplies, sports equipment and open space).
- Mitigate safety issues as they are discovered. Work with facility staff to get safety issues resolved. If necessary, close off unsafe areas. Report any concerns to your Program Supervisor.
- Inspect restroom facilities to ensure they are safe, clean and well stocked.
- Review rosters and accommodation plans.
- Review the Camp Standards Inspection Form (Page 67) to ensure compliance.
- Designate location of first aid kit, medication lock box, lock box keys, camp box and participant information storage.
- Designate a secure location for camp issued snack and food (if appropriate).
- Designate an area to store camper lunches and snacks (if appropriate).
- All staff should complete the Camp Staff Emergency Information Form (Page 10).
- Collect Minor Consent Form(s) from staff who are minors for treatment at Patient First and Concentra (if applicable).
- Develop and post Emergency Evacuation Plan (Page 51).
- Post emergency phone numbers.
- Prepare sign in/out areas and parent information areas if appropriate.
- Review attendance taking procedures.
- Bring any concerns to your Supervisor's attention prior to leaving the site.

## *First Day of Camp*

- Post computer-generated camp name and directional signs with HCRP Logo. Other directional signage must be approved by your Supervisor.
- Wear your name badge.
- Camper sign in/sign out area should be easily accessible.
- Activities should be available for children as they arrive.
- Staff should be designated to greet parents, take attendance, direct the participant sign-in process and collect the COMPLETED AND SIGNED Participant Information Form (Page 14).
- All medication must be in the original container and accompanied by a COMPLETED AND SIGNED Medication Administration Authorization Form (Page 18). Store medicine in the medication lock box.
- Fill out the Camp Medical and Medication Accommodation Chart, (Page 20) summarizing medical concerns of all campers. Tape this chart to the inside of your camper file box or other accessible, yet confidential, area.

# Leadership/Behavior Management Guidelines

## Leadership

You have been hired to act in the role of leader and youth mentor. This position should not be taken lightly as it is a big task. You will have an opportunity to impact the youth of Howard County in a positive manner. In order to prepare you for this task and role, we have prepared some tips on leading groups and setting the stage for activities.

### *Leading a Group*

- Leaders should have played or watched games and activities before they are leading them. This will ensure the leader understands the rules for safety.
- Ensure the play areas are free of hazards before participants gather. Remove all potential hazards.
- Warn and remind participants of potential hazards they may encounter.
- If you need to adapt a game; ensure that you think through the possible hazards or problems. Try it out with friends.
- Keep the atmosphere/competition fun and friendly, don't allow rough play.
- Balance skills, abilities, and physical maturity in order to avoid creating unbalanced teams.
- Be very cautious in mixing age groups. As the leader, you will need to set rules to maintain safety.
- Have a first aid kit on hand and be prepared to respond to emergencies.
- Have all of your equipment ready before you group arrives.
- Have several activities prepared and have a written plan to follow.

### *Steps for Leading Activities and Games*

- Know the activity or game and the rules.
- Have the attention of the participants prior to giving instructions.
- Have a catchy name for the activity.
- Have participants grouped for the activity or how they will play the game if possible.
- Explain or demonstrate the game or skills they will be using.
- Practice the actual movement of the skills or rules (If requires equipment, practice without and with equipment.).
- Clearly explain the rules and review them as necessary.
- Start the game gradually adding rules for more complex games.
- Stop the activity before it becomes boring.

## Behavior Guidelines for Participants

Guidelines are rules for the staff to keep in mind when handling discipline problems. They are intended to help provide a safe and fair atmosphere for all program participants. As a staff member you should try to make these guidelines a part of your daily routine. As a Director, you should train new staff members and teach them these guidelines in order to promote a consistent program. Staff should discuss behavior guidelines and expectations with campers on the first day of camp.

The Department of Recreation and Parks is interested in the welfare of all children. Participants in the program are expected to follow the rules of conduct and obey the directions of the staff. The Department's rules of conduct are in conjunction with the Howard County Board of Education and must be observed while participating in Recreation and Parks programs. Specific rules may be added for individual programs and needs.

1. Structure is key! Without a structured environment, staff is going to have behavior issues. Unless staff are prepared and ready to lead a structured activity, children will create their own activities out of boredom.
  - Have a schedule and stick to it!
  - Get participants into a routine. If they know what comes next they are more likely to stay on task.
  - Transitions can be hard, make sure you are providing enough time to transition from activity to activity.
  - Don't be tempted to just color or go to the gym. This lacks structure.
2. Set up an environment that supports self-control:
  - If several children are getting in trouble for running, maybe the room could use more natural barriers to control this urge or, perhaps there is a lack of structure in your program.
  - Some problems are easier to head off before they occur. Anticipate problem areas.

3. Build self-esteem in children:

- Behavior is a clue to a child's self-image.
  - High self-esteem = friendly, happy, outgoing
  - Low self-esteem = annoying, detrimental behavior
- Be a positive role model to the children in your program. Children derive their sense of self from the attitudes reflected by those who are important to them.

4. Treat children with respect. Allow children to solve some of their own problems:

- Remember they have the same feelings as you.
- Do not command, embarrass, belittle or yell at them.
- Do not threaten to take privileges away. Don't make empty threats or consequences you can't carry out.
- Be aware of jumping in when it is not necessary to do so.

5. Offer choices:

- Offering choices promotes responsibility and exercises a sense of control.
- You can also give two or more positive choices that are better than the behavior that you are observing. This procedure is known as "redirection."  
Example: "John, right now you have a choice of this art project or that game, but you cannot run inside right now."

6. Be fair and be consistent:

- Fairness is the trait kids feel is the most important for a leader to have.
- Explain consequences in advance.
- "Because I said so" is not reasonable and usually will not invoke a child's cooperation.
- Try not to overreact or say "no" without a reason. Explain the reason.
- Never let an issue become a power struggle. If children are made to feel powerless, they may become bitter, retaliatory, sneaky, and defiant.

7. Involve children in setting program rules:

- Children who are involved in setting rules are more likely to follow them.
- Hold them accountable to their rules.

8. Reward appropriate behavior. Make sure privileges are earned:

- Try to catch kids doing something right.
- Do not reward misbehavior with time and attention; children repeat behavior that wins time and attention and eliminate those that don't.
- Learn the "art of silence." Children are bored with words and quickly learn to tune-out lectures.  
Consequences for behavior are better teachers than lectures, especially for younger children.

9. Look for reasons behind children's behaviors

- Knowing the "why" behind the behavior will sometimes lead you to a better understanding of how to solve a particular problem.
- Look at the environment. Is there structure? Is the child ill? Are there other issues?

10. Hold private conversations when you need to discuss a child's behavior:

- Behavior problems are not the business of other children or parents (be careful of giving someone information which they can turn around at some other time.).
- Embarrassing someone in front of his or her peers is rarely a way to achieve cooperation.
- Pull a parent aside or into another room to converse about a problem. The child may or may not be invited depending on the circumstance.
- *When talking to parents, do not give out the names of other children involved.*
- *Do not foster a situation where one parent confronts another due to their child's behavior. Assure a parent that you will speak with other parents about the problem.*

11. Limit consequences to a daily basis:

- Children have a hard time remembering what happened yesterday.
- Consequences/discipline should be appropriate to the problem.
- Address a problem immediately. Disciplinary action that occurs in the a.m. period should not be carried over into the p.m. period the same day.

12. Address dangerous and detrimental behavior:

- Learn to "tune out" behavior that is merely "annoying."
- Address dangerous and detrimental behavior quickly and with little time and attention.
- Use "Time Out" only when necessary.
- Talk with a child after they have cooled down.

## **Discipline Guidelines**

As a team, all programs must follow the same disciplinary procedures. This is essential in order to provide a consistent environment for all program participants and for staff members who may be substituting.

### ***The discipline procedure is a simple three-step process***

1. Verbal warning
2. Appropriate consequence or "time out"
3. Incident Report and parent conference

### ***What are consequences?***

Consequences focus on a problem behavior and are appropriate to that behavior. A consequence should immediately follow the problem in order to create a positive result. In most cases, consequences are simpler and more effective than "time out." It is better to save time outs for really serious problems, such as fighting, and use consequences to solve more frequent and less serious problems.

### ***Examples of "fair" consequences include the following***

- Running- someone running in an area where they shouldn't, could be made to simply "go back and walk" rather than sit out.
- Bothering or touching someone- a child bothering another could simply be made to move away or even sit alone for a period of time.
- Someone with an inappropriate object- The object can be taken away and given to the parent at the end of the day. This is a more effective consequence than repeating an order to put something away or sitting someone out.

### ***Guiding children's behaviors involves the following***

- Providing an environment that encourages self-discipline.
- Using positive methods to guide individual children.
- Helping children understand and express their feelings in acceptable ways.

### ***Guidelines for Timeout***

#### ***When should time out be used?***

Time out should be used only for behaviors serious enough to merit that form of discipline. Suggested behaviors include acts of physical aggression, destructiveness, or tantrums that cannot be ignored.

#### ***For what age should time out be used?***

Time out is appropriate for children three years and older.

#### ***Where does time out take place?***

The major requirement of a time out spot is that it be very dull. It should isolate the child from activities and attention and it should be safe.

#### ***How is time out used?***

When the child is misbehaving, they should be given a warning that if the behavior continues, time out will follow. If the behavior continues, time out automatically follows. Children between 3 and 5 years of age go to time out for 5 minutes. Children older than 5 get one minute for each year of their age.

#### ***What do I do when time out is over?***

When the time is up, the child can leave time out. Once time out is over, the discipline is over.

A good guideline to use is that the staff person who sits a child out is the only one who may let the child up. Afterwards, the staff member should talk to the child and make sure that he/she knows what they did wrong.

#### ***What if the child refuses to go to time out?***

This is the most common difficulty staff encounter when using time out. Once you send someone to time out do not allow debate or allow the child to talk you out of it. If the child doesn't cooperate the staff member should begin adding additional minutes until the child makes the decision on their own to go to time out. After a period of 15 to 20 minutes is reached, the punishment can be "bumped up" to step three which is a parent conference. Give the child advance notice of this and then give one final warning.

#### ***Is there anything else I need to know about time out?***

Yes. As a discipline that reduces misbehavior, time out can be quite effective. But it does not, on its own, teach a child to replace bad actions with better ones. Therefore, it is only half of the total approach needed for improving behavior problems. The other half involves positively reinforcing a child's good behavior. Remember to always give the child the ability to get out of trouble. Added minutes can be earned back with proper behavior. You may find yourself saying something like, "You have been really good for the last 5 minutes, so I am going to take off the other 2 minutes and you can get up now." Even a parent conference can be earned back on some occasions. Remember to give the child some control over their situation. Never let a time out situation become a power struggle.

## ***Incident Reports***

A notice is typically given to a parent under the following circumstances:

1. A behavior occurs which a parent needs to be notified.
2. Repeated misbehavior of a similar nature.
3. A repeated behavior after a child has had proper redirection and served a "time out."
4. A child exhibits a behavior that the staff deems as unsafe and inappropriate to themselves, other participants or staff.
5. Physical fighting, cursing, spitting at or attacking another person, or other unacceptable, disrespectful behavior.

## ***Attention Getting***

All staff members of a program, including substitutes, must use the same attention-getting device. It is the Director's responsibility to choose one that works and to make sure all staff members are aware of what it is.

Some attention-getting devices are better than others. Make sure you use one that works consistently in all areas of the program and one that does not send mixed messages to the children. Whatever device you use at your site, it should be used consistently by the staff at all times. Another helpful hint is to model your attention-getting device after the one used by the teachers at your school.

## ***Good attention-getting devices***

- The five-second countdown: This is a five second countdown beginning at five. By the time a director/leader reaches 0 everyone in the program (including leaders) should be trained to get quiet. This is important for making announcements or explaining rules to activities. It is fair to expect participants to listen for brief periods however, children as a group should not be expected to sit quietly for extended periods of time.
- Signs up: Make the announcement "signs up" and hold up a peace sign. All children and leaders should then hold up the same sign and stop talking, in that order.
- Any type of hand clapping or rhyme repeats: Be careful of sending mixed signals. If you are trying to get children quiet, are you sure it makes sense to use a device that involves making noise? Such devices send mixed messages to children and many will continue to talk despite the device.

## ***Poor attention-getting devices***

- Flipping lights on and off: This often causes more noise as children begin screaming and making "ghostlike" noises. Also, do you always have access to the light-switch at your site, even outside?
- Yelling "Quiet": This is often used and causes more noise and is disrespectful as well as can be interpreted as threatening.

# **Identifying a Participant Who May Need Accommodations**

*Below are the steps that are taken to request accommodations.*

- A parent/caregiver/individual may call or contact the Department requesting accommodation for their family member or self in a program due to a disability. This is typically done at the registration process.
- If a request is not made by the parent/caregiver/individual, what should program staff do?
  - Not everyone requires or needs accommodations due to their disability. Information may have been provided to you as just that, information.
  - If you have a participant who is experiencing difficulty in your program with socializing, staying on task with multiple prompts, needs close supervision, difficulty with transitions and/or you are having to spend an enormous amount of time with them, they may need extra support. Here are your Action Steps:
    1. Document any incidents that occur on an Incident Report Form. If it is not written, it did not happen.
    2. Contact your Program Supervisor.
    3. The Program Supervisor will then contact the TR/Inclusion Team and notify them of the concerns you are having with the participant.
    4. The TR/Inclusion Team will take the necessary steps to assist you.
    5. It is NOT your job to diagnose the participant or tell the parent he/she needs a companion.
- Through observation by program instructors, managers, or Therapeutic Recreation and Accommodations staff.
- Based on the observation or referral, Accommodation Staff will conduct an assessment of the abilities and needs of the participant in order to gain an understanding on how to best support that individual in the program.
- The decision is then made to provide the individual with support staff, if necessary.

# Recreation Inclusion Overview

## *What is a Disability?*

A basic definition of a person with a disability is anyone who has a physical or mental impairment which substantially limits one or more major life activities (Dattilo, p. 4). Major life activities include seeing, hearing, speaking, walking, dressing, feeding oneself, working, learning, recreating, and other daily physical or mental activities (ibid).

## *Inclusion*

The act of being included (inclusion, n.d.). Individuals with disabilities are incorporated in all programs, classes and summer camps; with or without a companion. Inclusion includes physical, functional and social components.

The Howard County Department of Recreation and Parks encourages individuals with disabilities to participate in recreation programs. These programs include, but are not limited to, camps, sports, outdoor and adventure programs, special events, trips and tours, and general recreation classes.

As a recognized recreation industry leader, Howard County Department of Recreation and Parks is pleased to comply with the Americans with Disabilities Act (ADA) regulations. Reasonable accommodations for participation are made on an individual basis.

The term "INCLUSION" means that individuals with disabilities are "included" in all programs, classes and summer camps.

When an individual with a disability registers for a program and requests special accommodations, the Therapeutic Recreation Manager follows several steps to ensure that successful and reasonable inclusion and/or accommodations are made such as:

- Accessibility at site
- Adaptive equipment
- Specific training for staff
- Interpreter
- Companion

"Inclusion does not mean that individuals with disabilities will become normal, but rather that they will be given every opportunity to fit into society to the greatest extent possible and that society will be more accepting of them." (Gunn, p 42)

## *Companion*

An individual whom assists a person with a disability as necessary and helps integrate them into a program, class or camp.

## *ADA*

The Americans with Disabilities Act – passed by Congress in 1990, required that the federal mandate for access to public accommodations and programs be extended to the private sector (Dattilo, Glossary).

## *Physical Inclusion*

An individual has the right to access buildings and attend recreation programs. This level of inclusion was the focus of the architectural barriers act of 1968, which mandated that all buildings receive federal funding to be made architecturally accessible to people with disabilities. (<http://ncaonline.org/leisureed/inclusion2.html>)

## *Functional Inclusion*

An individual should have the opportunity to be successful within a given environment. This level of inclusion was mandated by the ADA and requires that recreation programs provide accommodations for people with disabilities to give them the same enjoyment and success as those without disabilities. (<http://ncaonline.org/leisureed/inclusion2.html>)

## *Social Inclusion*

One's ability to participate in positive interactions with peers through making friendships during recreation activities is internally motivated and it is only by embracing inclusion as a value that this level can be achieved. Social inclusion cannot be mandated. (<http://ncaonline.org/leisureed/inclusion2.html>)

## ***Recreation***

An activity developed and accepted by a society that is designed for the primary reasons of fun, enjoyment and satisfaction (Dattilo).

## ***Expectations & Responsibilities***

HCRP expects its staff to be completely professional (prompt, courteous, responsive, and respectful) creative, and aggressively hospitable (proactively striving to exceed expectations) at all times. We are looking for people who:

- Naturally smile all of the time
- Have a friendly nature
- Have an upbeat, positive attitude

Not everyone has this type of personality, and not everyone is suited for this type of work.

As an inclusion companion and/or interpreter you are put in a very special position. Your participant(s) (and others) will look to you for guidance and as a role model. You will be expected to teach/interpret skills effectively and nourish the enthusiasm of the participant(s).

HCRP staff is expected to be prepared, neat, and well-groomed. They are expected to constantly strive to keep HCRP's programs clean, safe, conducive to learning, and most of all fun! Our staff is always striving to do their very best.

## ***Inclusion Companion/Interpreter Expectations***

Your role as an inclusion companion/interpreter is to assist the individual taking part in a program. Arrive early the first day and introduce yourself to the program director and other HCRP staff. Be open to any guidance and/or direction from the site staff regarding the operations of the program.

- First priority is the participant to whom you are assigned; it may take a few hours or even a day before you know how much attention the participant needs.
- Attend trainings and/or orientations as necessary deemed appropriate by TR supervisor.
- Understand on-site supervision will be under the on-site program director.
- Be positive and encourage the participant 100% of the time.
- Maintain respect for the participant in your speech and actions.
- In case of emergencies, refer to the on-site program director for guidance.

## ***On-Site Program Director Expectations***

The Program Director is responsible for the day-to-day supervision of the program and staff; this includes the inclusion companion/interpreter.

Regarding expectations specifically directed to the inclusion companion/interpreter, the Program Director is expected to:

- Include the companion/interpreter as part of the staff; however, do not include him or her in the ratio of instructor to participant.
- Understand their first priority is the participant to whom they are assigned.
- Complete evaluation reports on the companion/interpreter when necessary.
- Collect the companion/interpreter's time card.
- Any questions or concerns, please call the Therapeutic Recreation Manager/Program Supervisor.

## ***Inclusion Companion/Interpreter Essential Duties***

- Actively and responsibly supervise the person/persons to whom assigned .
- Coordinate with the program director/leaders to adapt activities when necessary.
- Contact the parent/guardian/counselor/participant prior to the start of the program to obtain additional information if necessary (i.e. medication needs, seizure disorders, etc...).
- Assist the individual with the disability to access all facets of the program.
- Maintain proper behavior protocols when necessary and enforce all rules.
- Use a task analysis approach to activities when necessary.
- Communicate daily/weekly with parents or counselors.
- Assist in basic program duties when possible .
- Complete all necessary paperwork and turn in on time.
- Attend mandatory staff meetings and trainings.

***When should I arrive each day?***

Always arrive 15 minutes prior to the start of the program. This will give you a chance to talk with the parent/guardian/participant and obtain any additional information if necessary.

***What do I do if my participant is absent?***

If your participant is not present on a given day, notify the TR manager.

***What if I am unable to work on a given day?***

If you are unable to work a program due to illness or unforeseen circumstances, you must notify the TR Manager as soon as possible. If you are in an RLC Center, you must additionally notify the RLC Program Supervisor. Your assistance in finding a sub may be required; remember your first priority is to your participant.

***When can I leave?***

Stay with your participant until he/she is picked up. If you are waiting longer than 15 minutes, notify the TR Manager and Program Supervisor. DO NOT offer to escort the participant home.

***Where are the Policy and Procedures?***

All policies and procedures outlined in the Part-Time Staff Manual are applicable to you. Please review them thoroughly.

- For a complete Job Description, please see the TR Manager.

***On-Site Planning Considerations***

1. GET TO KNOW THE PARTICIPANT WELL. This is when parents, guardians and/or counselors can supply information on:

- Emergency contact number if the participant is injured.
- Name and phone number of the participant's physician.
- Any medication required by the participant.
- Any allergies or seizures.
- Use of a hearing aid, glasses, walking braces, wheelchair, or any other equipment
- Any needs for aid in daily functioning.

2. MAINTAIN SAFETY WHEN OFF THE PREMISES

- Know who requires medication, who has allergies, etc.
- Know how to handle equipment, i.e. wheelchair lift, etc.
- Above all, allow participants the dignity of risk while maintaining safety.

3. MAINTAIN AN ATTITUDE OF ACCEPTANCE

- Be aware that individuals may be considered different by others because of physical appearance, behavior, deficits in self-care skills, etc.
- Choose activities that are not only appropriate to the skill level of the individual but also to their age.
- Utilize the option of partial participation.
- Plan for an environment of acceptance (e.g. leader chooses the teams).
- Avoid over-protection and over-help and instead facilitate and encourage the participant to do the activity himself.
- Give the participants the right to choose their own activities.
- You, as a leader, are a role model; your behavior affects the behavior of the children.

4. SPECIAL PLANNING CONSIDERATIONS

- Plan to have everyone involved (i.e. as a spectator, scorekeeper, or active player).
- Outline plans on how you will adapt activities (e.g. when going on a field trip, plan for wheelchair accessibility)

### ***Methods for Promoting Acceptance***

Developing an awareness of the barriers faced by individuals with disabilities is an important step in correcting and eliminating these negative attitudes and barriers. However, it is important not only to eliminate this type of negative thinking patterns, but to replace negative attitudes and barriers with positive attitudes of acceptance.

Following are "The Ten Commandments" for building positive attitudes concerning individuals with disabilities that will enhance the development of an accepting environment (Hutchison).

1. View an individual who is disabled as "a developing human being" (Hutchison).
2. Recognize the person with a disability as a person first and foremost.
3. Accept the fact that a disability exists, and allow the needs of the individual to be met.
4. Understand that a disability in one area does not mean a disability in all areas.
5. Observe the abilities and strengths of the individual and encourage them.
6. Promote the active participation of the individual with a disability in all aspects of the activity.
7. See the needs of the individual as opportunities for interaction rather than impositions on your time and energy.
8. Think creatively to introduce simple adaptations that will enhance the individual's participation.
9. Create occasions that promote positive attitude building among the able-bodied community.
10. Remember that individuals with disabilities "are more similar to you and me than dissimilar because...we are people!" (Alberta).

### ***When You Meet A Person Who Has A Disability. . .***

- First, of all, remember that a person with a disability is a person. They are like everyone else, except for the special limitation of the disability.
- Be yourself when you meet a person with a disability.
- Talk about the same things as you would with anyone else.
- Help the person only if it is requested.
- Be patient. Let the individual set their own pace.
- Don't be afraid to laugh with the individual.
- Don't stop and stare when you meet a person with a disability.
- Don't be over protective or over solicitous.
- Don't ask embarrassing questions.
- Don't offer pity or charity. The person with a disability wants to be treated as an equal.
- Don't make up your mind ahead of time about the person with a disability. You may be surprised how wrong you are in judging their interests and abilities.
- Talk to a person with a disability in a mature voice. They may look little or young, but intellectually they may be functioning at a very high level.
- Enjoy your friendship with the individual with a disability. Many times, they will be an inspiration to you.

*Burkhour, C. & Crawford, T. Access Recreation Group*

# Swim/Safety Guidelines

## Roger Carter Community Center Pool Guidelines

### *Arrival Procedures*

- Upon arriving to the pool, campers should be lined up in the lobby but not blocking the entrance. On the first visit a lifeguard will go over the pool rules and the swim test guidelines with campers and staff before entering the pool. If campers and junior counselors wish to go past 4 feet, they must take the swim test.
- Camp staff is required to take attendance upon arriving as well as before leaving the pool.
- A member of the camp staff will check-in with the staff at the front desk, giving the number of campers and staff present that day.
- Camps should place belongings in one general area of the pool, designated to them upon arrival.
- Before entering the swimming pool, everyone wishing to use the pool must shower in the locker room.
- Camps will be allowed onto the pool deck at their scheduled times only.

### *Expectations of Camp Staff*

- To work with lifeguards in enforcing pool rules.
- To remain attentive to and be interactive with their campers.
- To remain responsible for their campers while at the pool; lifeguards are responsible for the prevention of accidents and responding to those that occur.
- No lounging. If camp staff appears to be “lounging” or not attentive to the campers, the Pool Manager/Aquatics Director will contact the Program Supervisor of the camp to handle the situation.
- Document any incidents/accidents concerning their campers.

### *Pool Rules*

1. Alcoholic beverages and smoking are not permitted at any time on Howard County property.
2. Running is not permitted on the pool deck, locker rooms or down the beach entry. Only two steps may be taken before entering the pool, no running approaches.
3. Horseplay such as dunking, chicken fighting, throwing or pushing other people in, grabbing heads, necks or shoulders, unwanted splashing and carrying people on shoulders is not permitted.
4. Diving is only permitted off the diving board and in the diving area when the diving board has been closed. Only one person is allowed on the board at a time and must wait until the well is clear to jump.
5. Foul language, verbal or physical confrontations will not be tolerated.
6. There is no climbing on or swimming under the rail in the beach entry.
7. Patrons must jump into the pool facing forward; no backwards jumping or flipping.
8. Only Coast Guard approved lifejackets are permitted. No personal flotation devices including pool noodles, rafts, swimmies, etc.
9. All chairs must be kept at least 5 feet away from the edge of the pool. Chaise lounges must remain on the outside sun deck.
10. Beverages and food are permitted but must be kept at least 5 feet away from the pool edge. Lifeguards may have a beverage in the chair on extremely hot days. Glass containers are not permitted on indoor or outdoor deck at any time.
11. No chewing gum.
12. There is no climbing on the lifeguard chairs, fences, tables or exit gate.

13. **Lap Lane:** At least one lap lane will be kept available during public swim time. The lap lane is for continuous lap swimming and swimming tests only. There is no diving into the lap lane, crossing through it or standing in it.
14. **Adult Swim:** An adult swim will be called every hour on the hour for a period of 15 minutes at the discretion of the Aquatics Director or Manager on Duty. The only people allowed in the pool at this time are those 18 years or older and those 5 years or younger within arm's reach of an adult. Reasons for adult swim are: for adults to enjoy the pool by themselves or with preschool children and provide breaks for the staff and patrons' safety.
15. **Discipline:** Only a member of the pool management team can suspend a pool patron from use of the center. If a patron is asked to leave an incident report must be completed.
16. Small toys are permitted at the discretion of the lifeguard and manager. All toys over 12 inches and hard balls are prohibited.
17. Proper swim attire containing no cotton must be worn. Non-traditional, modest swimwear must be made of the same material as bathing suits (lycra, nylon, spandex or polyester). Cloth or regular diapers are not permitted. Children who are not toilet trained must wear swim diapers or rubber pants with elastic around the waist and legs along with proper swim wear.
18. **Age Restrictions:** To enter the pool alone, children must be at least 16 years of age and have passed the RCCC swimming test. Parents or guardians 18 years or older must accompany children who do not meet these requirements. Children who do not pass the swimming test must remain in the roped shallow area of the pool. Children under 10 must have a parent on the interior pool deck at all times. Children under 5 must have a parent within 5 feet. Toddlers 3 and under must have a parent within arm's reach at all times.
19. **Diving Board Use:** Adults and those who have passed the swim test have free use during designated board time. The board may be closed and the diving well opened at the discretion of the lifeguard.
20. Only staff may open the doors at the discretion of the manager.

**\*Violation of any pool rule may result in dismissal for the day and any future pool visits.**

#### **Swim Test**

Campers must pass a two-part swim test to swim in the deep end of the pool or use the diving board.

#### **Lap Test**

Campers will line up at the shallow end of the lap lane to begin the swim test. To pass the lap test, campers must swim one length of the pool on their front and at the surface of the water (25 yards) without assistance or touching the wall or lane line. After completing the lap test, campers will sit on the edge of the diving area for the tread test.

#### **Tread Test**

When 10-15 campers have completed the lap test, the tread test will be conducted. To pass the tread test, campers must tread water, keeping their head above water at all times, in the deep well for 30 seconds without assistance or grabbing the wall. After the tread test is completed, the lap test will resume.

If a camper does not pass the first time, he/she may re-take the test the following day.

#### **Splash Pad Rules**

1. All persons using the splash pad do so at their own risk. There are no lifeguards on duty.
2. Children 5 years and under must be within an arm's reach of an adult at all times.
3. Water shoes are suggested. No street shoes are allowed on the splash pad.
4. No running, rough play or climbing on fixtures.
5. Food and beverages are not permitted within 5 feet of the splash pad.
6. No smoking, alcoholic beverages, or glass containers permitted on the premises.
7. Electrical and battery-run appliances must be kept 5 feet from the splash pad.
8. Do not sit, stand or cover fixtures or drains.
9. Do not drink the water. The water is chlorinated and re-circulated through a filtration system.
10. Non-potty trained children must wear a swim diaper and tight-fitting rubber pants. Please do not change diapers on splash pad or deck.
11. Appropriate swim attire is required at all times.
12. Pool furniture must be kept off splash pad.
13. All furniture, chairs, umbrellas, coolers, etc. must be kept at least 5 feet from the blue pad.

# Laurel Municipal Pool

Several of the camps will be using the Laurel Municipal Pool this summer. Camp participants who are under the age of 12 and wish to use the diving well/slide, must take a swimming test before they will be permitted to swim in that area. Parents must review, consent and sign the forms below and return it prior to their child's camp visit to the pool.



**MAYOR AND CITY COUNCIL OF LAUREL  
DEPARTMENT OF PARKS & RECREATION**

8103 Sandy Spring Road • Laurel, Maryland 20707 • (301) 725-7800  
Internet Address <http://www.laurel.md.us> • E-mail: [parks@laurel.md.us](mailto:parks@laurel.md.us)

Dear Parents,

As part of our continuing service to the City of Laurel, pool patrons and to promote a safe swimming environment for children using the diving board and slide, the City will be administering swimming tests for children 12 years of age and under who wish to use the diving well during the summer season.

If you wish to allow your child to use the diving well and diving board/slide during the summer season, please complete the other side of this letter and have your child return it to the pool prior to his/ her testing.

If you have any questions, please do not hesitate to contact the pool office at 301-776-7419.

Thank you for your patronage,  
Laurel Municipal Pool Staff

**TESTING INFORMATION**

- Children 12 years of age and under must wear Identification Bracelets (ID bracelets) when using the diving well.
- ID bracelets will be issued to children who, under staff supervision, swim two (2) lengths of the lap pool and tread water without stopping for a predetermined amount of time.
- One reusable ID bracelet will be issued free of charge to a child upon passing the test.
- Replacement ID bracelets will cost \$2.00 whether it is lost/stolen or left at home.
- Diving privileges will be revoked if an ID bracelet is transferred to another individual.

I have read the above information.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

(Please see other side)

**Laurel Municipal Swimming Pool  
9<sup>th</sup> and Main Streets  
Laurel, Maryland 20707  
(301) 776-7419**

Child's Name \_\_\_\_\_ Age \_\_\_\_\_

Address \_\_\_\_\_ DOB \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

\_\_\_\_\_  
Parent/Guardian Name

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell/Work Phone

\_\_\_\_\_  
Emergency Contact  
(Other than Parent)

\_\_\_\_\_  
Home Phone

\_\_\_\_\_  
Cell/Work Phone

The emergency contact will only be used if a parent cannot be reached in an emergency. The emergency contact must be different than the parent/guardian.

If the bracelet is lost/stolen or left at home a new bracelet must be purchased for \$2.00. No exceptions will be made.

I give permission for my child to use the diving well at the Laurel Municipal Pool, subject to Pool Rules and Regulations. I will not hold the City of Laurel, Department of Parks and Recreation or any person connected with the operation of the Laurel Municipal Pool, liable in case of an accident.

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date (Year 1)

\_\_\_\_\_  
Signature of Parent/Guardian

\_\_\_\_\_  
Date (Year 2)

OFFICE USE ONLY

DATE TESTED \_\_\_\_\_ Tested By \_\_\_\_\_

PLEASE CIRCLE: PASSED FAILED

# Robinson Nature Center Field Trip Guidelines

## *Arrival Procedure*

- Large groups of campers should be assigned to smaller groups by camp staff prior to arrival at the Center. The number of smaller groups into which your field trip will be divided is noted on your field trip schedule.
- Buses should pull in to the circle in front of the Nature Center.
- Upon arrival, Robinson staff will board each bus and direct campers and camp staff to a staging area where campers will be asked to divide into their smaller groups and will receive a brief orientation on rules and what to expect for their day.
- Parking is available in the circle (with the exception of the designated fire lane painted in red), and in the rear of the parking lot to the right of the entrance.

## *Expectations of Camp Staff*

- Work with Robinson staff to enforce Center rules.
- Remain attentive and be interactive with their campers.
- Remain responsible for campers while at the Center; Robinson staff is responsible for teaching participants and leading them along the trails while camp staff is expected to supervise camper behavior management.
- Be prepared for the 30 minute, self-guided portion of the field trip in which camp staff supervises campers as they walk through the exhibits. Campers can touch and interact with all parts of the exhibits, but please ensure that they treat the exhibits gently.
- If choosing to stay for lunch, campers and camp staff are expected to clean up after themselves. Both recycling and trash receptacles will be available. Please separate and dispose properly of all trash and recyclables.

## *Weather Policy*

- Field trips will be held rain or shine. Though some alternative indoor activities may be incorporated on rainy days, most field trips will still include an outdoor component. Campers and camp staff should bring rain gear. The Nature Center will have a limited number of ponchos to loan, but not enough for every camper.
- In the case of a weather emergency (severe storms, tornado, hurricane, etc.) field trips will be cancelled. If you are questioning the weather, please call the Nature Center at 410-313-0400 the morning of the field trip for confirmation.

## *What to Wear/Bring*

- **Footwear:** Campers and Camp staff will be walking along dirt trails and must be appropriately attired. Comfortable footwear, such as sneakers or closed-toed sandals, is essential. Please do not wear flip-flops, open-toe sandals or heels.
- **Clothing:** Campers and camp staff should dress in weather-appropriate and comfortable clothing. A light-colored cotton t-shirt and loose cotton pants or shorts are recommended. Bring rain gear if there is a chance of rain.
- **Miscellaneous**
  - Camper medications and forms (camp staff responsible for)
  - A (reusable) bottle of water for use on the trails (water fountains are available in the building)
  - Rain gear (if it is raining or there is a chance of rain)
  - Camera and/or binoculars (optional)
  - If staying for lunch, we recommend bringing a waste-free lunch: <http://www.epa.gov/wastes/education/lunch.htm>
- Please make sure campers do not bring any hand-held video games (Gameboy, etc.), music players or cell phones that could be lost or damaged.
- Please note that any cell phones necessary for camp staff to bring need to be set to vibrate during their visit.

***Robinson Nature Center Field Trip Checklist:***

***Prior to Your Field Trip***

- Submit your field trip request form no less than 4 weeks in advance of the field trip. For staffing purposes, we need all field trips to submit requests. Field trip request forms are online at: <https://robinsonnaturecenter.wufoo.com/forms/sunka6c0mj2oer/>. The Field Trip Coordinator will receive your request form and send you a confirmation and schedule for your trip.
- Review your schedule and the Robinson Nature Center Field Trip Guidelines on the previous page.

***The Friday Before***

- Contact the Nature Center. Please call 410-313-0410 to confirm numbers and notify us of any changes.  
*\*Please note that Nature Center staff is not in the building on Mondays to receive calls, so you must call the Friday prior to your Tuesday field trip.*
- Make copies of your field trip schedule for your staff.

***The Day Before***

- Assign your campers to their groups. Larger field trip groups will be divided for their field trip. Your field trip schedule will indicate into how many smaller groups your group has been divided. At least one adult from your center should be assigned to each group.
- If possible, make name tags for campers and chaperones to wear on the day of the field trip indicating their first names and their group number (if applicable).

***The Day of***

- Review with campers the group numbers to which they have been assigned prior to arrival.
- Please note, all field trips begin at 10 AM. Please do not arrive more than 10 minutes early as staff will not be available to welcome your group until this time.
- Notify us if you are running late by calling 410-313-0400. If your bus is going to be more than five minutes late, please call us.
- If arriving via school bus, please direct the bus drivers to pull into the circle in front of the building. Robinson staff will board each bus to greet everyone and give directions from there.

# Participant and Employee Accidents/Injuries

- Each program must have, at all times, a First Aid Kit that includes an adequate supply of bandages, tape, gauze pads, ice packs and gloves. This kit must be kept in an easily accessible location and should be replenished whenever supplies run low.
- Staff must contact their supervisor via phone when an injury occurs.
- See specific instructions below for Participant and Employee Injuries.

## Participant Accidents/Injuries

### *Minor Accidents*

- Administer first aid (See Section: Basic First Aid Procedures for Some Common Injuries (p.42). As a Howard County Department of Recreation and Parks employee, you are not allowed to administer any internal or external medicines or apply soaps or cleaning aids for scratches, etc. Apply only water, band-aids, gauze or ice when needed.
- Complete an Incident Report/Participant Accident/Injury Form even if a child refuses first aid (see instructions below and example of form on the following page).

### *Serious Accidents*

- Administer first aid. Treat first for breathing, serious bleeding and poisoning.
- Send a responsible person to call the ambulance at 911 and give the proper information (name, location, type of injury and need for special equipment). The name of the facility and exact address should be kept directly over the phone at all times.
- Notify the child's parents or other person listed on the Participant Information Form.
- Notify the Program Supervisor as soon as possible after the occurrence of the accident.
- If transportation to a hospital is required, find out where the child will be going and put the parent in touch with the ambulance crew or hospital to give permission for treatment. A staff person MUST accompany the child to the hospital. Be sure to take the accident report with you.
- Staff is not to give anyone, except their immediate supervisor, any information relative to the circumstances surrounding the accident.
- The Incident Report/Participant Accident/Injury Form must be in the Program Supervisor's office within 24 hours of the injury.
- Reports must also be faxed to the Department Headquarters (410-313-1699) and Risk Management Office (410-313-6399), or email to [RISK@HOWARDCOUNTYMD.GOV](mailto:RISK@HOWARDCOUNTYMD.GOV).

## INSTRUCTIONS TO FOLLOW WHEN COMPLETING ACCIDENT REPORTS

All accidents/injuries, whether minor or major, (first aid for bee stings, cuts, bumps to the head, etc.) require the completion of an Incident Report /Participant Accident/ Injury Form (see example that follows) and serious incidents/accidents must be submitted to the Program Supervisor no later than 24 hours following the injury. This form is considered an internal document and should not be given to parent; however, parent must be notified of the incident. When writing an accident/injury report, adhere to the following guidelines:

- Describe the nature of the accident /injury as you saw it. Document all factual details on this form and complete all information required, including names and phone numbers of witnesses.
- Keep it simple. Add details as necessary to remember what happened.
- All individuals involved in the incident must be named in the report.
- Forms must be completed and contain correct names, times, addresses and signatures. Remember this can be used as a legal document.
- Parents/guardians must be notified of the incident. The name of the parent/guardian notified must be written in the Incident Report. If possible, notification of parent must be witnessed by two employees and those two employees should sign the form as verification of parent notification. Programs operating without department employees would require the volunteer or contractor to verify parent notification.
- Place the pink copy in the child's file (if applicable), and turn in the yellow and white copy to your Program Supervisor.
- Accidents of a serious nature require a phone call to your Program Supervisor and a report to be handed in the same day. Reports must also be faxed to the Department Headquarters (410-313-1699) and Risk Management Office (410-313-6399), or email to [RISK@HOWARDCOUNTYMD.GOV](mailto:RISK@HOWARDCOUNTYMD.GOV).
- For serious participant injuries that involve medical attention (examples include all ambulance calls and when parent indicates a doctor visit) injury reports must be faxed within 24 hours to the Department Headquarters (410-313-1699) and Risk Management Office (410-313-6399), or email to [RISK@HOWARDCOUNTYMD.GOV](mailto:RISK@HOWARDCOUNTYMD.GOV).
- All Incident Report/Participant Accident/Injury forms must be numbered and kept at the program site. This form should be distributed as follows:
  - White Copy – forward to Program Supervisor within 24 hours of accident
  - Yellow Copy – forward to Program Supervisor
  - Pink Copy – keep on site
- Insurance: If an accident or injury occurs, insurance coverage is not provided for program participants.

Copy to Risk Management? Yes \_\_\_ No \_\_\_ By Whom? \_\_\_\_\_

Attach Fax Confirmation Please

Bureau Chief's Initials \_\_\_\_\_

**HOWARD COUNTY - DEPARTMENT OF RECREATION & PARKS  
INCIDENT REPORT/PARTICIPANT ACCIDENT/INJURY FORM**

Page 1 of \_\_\_ pages

# \_\_\_ - \_\_\_\_\_

Year Report #

**PRINT PLEASE**

REPORTED BY:	DAY/DATE OCCURRED:	DATE REPORTED:
SITE/LOCATION:	TIME OCCURRED: AM/PM	TIME REPORTED: AM/PM

ORGANIZATION/PROGRAM:

PERSONAL INJURY       OTHER \_\_\_\_\_       VANDALISM       PROPERTY DAMAGE

NAME OF PERSON INJURED, VANDALISED, ETC.:

ADDRESS:      AGE (or estimate approximate):

TELEPHONE:      EMAIL:

Body Part Injured (indicate left, right, back, front, etc.):

Abdomen \_\_\_\_\_       Ear \_\_\_\_\_       Foot \_\_\_\_\_       Mouth \_\_\_\_\_       Stomach \_\_\_\_\_  
 Ankle \_\_\_\_\_       Elbow \_\_\_\_\_       Hand \_\_\_\_\_       Neck/Throat \_\_\_\_\_       Teeth \_\_\_\_\_  
 Arm \_\_\_\_\_       Eye \_\_\_\_\_       Head\* \_\_\_\_\_       Nose \_\_\_\_\_       Toes \_\_\_\_\_  
 Back \_\_\_\_\_       Face \_\_\_\_\_       Knee \_\_\_\_\_       Scalp \_\_\_\_\_       Wrist \_\_\_\_\_  
 Chest/Ribs \_\_\_\_\_       Fingers/Thumb \_\_\_\_\_       Leg \_\_\_\_\_       Shoulder/Collar Bone \_\_\_\_\_  
 Other: \_\_\_\_\_      \*Is this a possible concussion?     Yes  No

Name of Staff Person taking Action:      Action Taken:

Ambulance called      Hospital/Medical Contact:

Officer's Name:      Police IR Number:

**Witness 1** – Name:      Address:  
Telephone Number:      Email Address:

**Witness 2** – Name:      Address:  
Telephone Number:      Email Address:

Description of Incident/Accident/Injury (in detail, facts only): Attach Additional Sheet if necessary. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Action by Staff/Follow-up:

Vehicle Tag No:      YR      MAKE      Model      Color:

Description of Damage (Property Damage/Vandalism):      Estimated Cost of Repairs:      \$

Parent/Guardian Notified (Minors only - under 18):

Parent/Guardian Name: \_\_\_\_\_  in person  by phone  other Date/Time \_\_\_\_\_

Parent/Guardian Name: \_\_\_\_\_  in person  by phone  other Date/Time \_\_\_\_\_

Employee/Volunteer's Signature \_\_\_\_\_ Date \_\_\_\_\_ PHONE: \_\_\_\_\_

2<sup>nd</sup> Employee/Volunteer's Signature (if available) \_\_\_\_\_ Date \_\_\_\_\_ PHONE: \_\_\_\_\_

Supervisor's Signature \_\_\_\_\_ Date \_\_\_\_\_ PHONE: \_\_\_\_\_

**SERIOUS ACCIDENT: FAX REPORTS TO DEPT. HEADQUARTERS, 410-313-4646 & RISK MGMT 410-313-6399**

Attachments \_\_\_\_\_

## Employee Accidents/Injuries

- If a staff member is injured, contact the Program Supervisor immediately.
- For serious injuries, transport to a hospital.
- For injuries requiring medical attention, but not emergencies, staff should seek treatment from Concentra Medical Center or Patient First. Information and an authorization for treatment form as well as specific reporting instructions are located in the EMPLOYEE INJURY REPORT KIT which must be kept at every site.
- Treatment of Minors
  - Concentra: Minors need parental consent to be treated at Concentra by completing the Concentra Medical Authorization Minor Child Consent Form (example following).
  - Patient First: Patient First can treat minors by calling their parents from the center at the time of the visit or by filling out the Patient First Consent to Treatment of Minor Patients form (example following)
- These forms should be completed at the beginning of employment so they will be on hand if needed for a work-related injury not requiring emergency/hospital care.
- An Employee Incident/Injury Report Form must be completed within 24 hours. Call the Risk Management office at 410-313-6390 for very serious or urgent matters.
- If an injury occurs to a paid staff person, this form must be completed immediately and submitted to your Program Supervisor by the end of the program day.

### *What Should I Do If I Am Hurt on the Job?*

- Report the incident immediately to your Program Supervisor.
- Complete the Employee Incident/Injury form as soon as possible and give it to your Program Supervisor.
- If medical attention is necessary, we encourage all employees to go to Concentra Medical Center or Patient First (unless the hospital is more appropriate). Obtain an authorization form (see below) from your Program Supervisor for treatment and seek treatment from:

#### **Concentra Medical Center (Columbia)**

6656 Dobbin Road  
410-381-1330  
Monday-Friday, 8am – 5pm

#### **Concentra Medical Center (Arbutus)**

1419 Knecht Avenue, Baltimore  
410-247-9595  
Monday, 7am (24 hours)-Saturday, 7am-12pm

#### **Any Patient First Location – Howard County Locations are as follows:**

**Patient First (Columbia)**  
5900 Cedar Lane  
443-718-4067  
Monday-Sunday, 8am-10pm

**Patient First (Laurel)**  
3357 B Corridor Marketplace  
301-497-1820  
Monday-Sunday, 8am-10pm

- As long as you go to Concentra or Patient First for initial treatment of work related injury, payment will be guaranteed for that visit.
- Keep your Program Supervisor advised of your medical and work status.
- Minors need parental consent to be treated at Concentra or Patient First. These consent forms (Medical Authorization – Minor Child) should be completed at the beginning of employment so they would be on hand if needed. Certainly, the decision as to where to treat the minor is up to the parent.
- If it is an emergency, go to the nearest hospital.

### *What is the Reporting Process?*

- Your Program Supervisor will complete the appropriate section of the Employee Incident/Injury Report form and fax or email it to the Risk Management Office within 24 hours.
- For serious injuries, your Program Supervisor will also contact Risk Management by phone and advise them of the incident and any need for medical treatment.
- Risk Management will forward the information to the Corvel Corporation to process the claim.
- The claims adjuster may contact you to see how you are and ask about the injury.
- The claims adjuster will review the incident report and contact your doctor for information about your injury and treatment.
- The claims adjuster will gather all information on your claim and will notify you of your eligibility for benefits and assist you through the process.
- You, your Program Supervisor, Risk Management staff, and your claims adjuster will work together closely to ensure that you are receiving the proper treatment and that all the facts regarding the incident are gathered in a quick, efficient manner.

Sample Employee Incident/Injury Report

Location Code: _____	OSHA 300 Log Case No: _____	Claim No: _____ <small>Risk Management Use Only</small>
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**HOWARD COUNTY  
EMPLOYEE INCIDENT/INJURY REPORT**

INSTRUCTIONS: This form must be completed immediately for all job-related injuries or infectious material exposures. Please print and answer all questions completely. If you do not understand the questions or need help completing this form, ask your supervisor for assistance. After you have completed Section I, return the form to your supervisor to complete Section II.

Notice of employee injuries must be faxed to Risk Management (410) 313-6399 within 24 hours. Do not delay notification if information is incomplete. Call Risk Management at once if injury is serious (410) 313-6390.

**SECTION I - Employee Information:**

Dept: Recreation & Parks Division: Sports & Adventure Job Title: Adventure Leader

Full Name: John C. Doe (Male/Female) Social Security # 7213

Date of Birth: 4/8/1983 Home Phone: 410-585-2369 Work Phone: n/a

Home Address: 1714 Beach Ave, Columbia, MD 21046  
(Include Street, City, State, Zip Code)

Date of Incident: 7/22/2017 Date Hired: 3/3/2016 Wage/Salary: \$ 10.00

Time Employee Began Work Day: 8:30 (AM/PM) Time of Incident: 1:15 (AM/PM)

Location of Incident (Be Specific): Sugarloaf Mountain

Describe in detail what happened. Include work activity being performed and what caused the incident:  
John was walking down the trail while on the hike. As he was walking, his foot slipped off a rock. John turned his ankle and fell to the ground instantly. Jake and Amanda looked at his ankle & helped him into the camp vans. They elevated his ankle and applied ice to it.

Names of persons who witnessed the incident: (If not a County employee, include address and phone #)

Name: Jake Smith Dept: Recreation Parks Phone # 410-555-4819

Name: Amanda Johnson Dept: Recreation Parks Phone # 410-554-4656

Injured Part of Body and Type of Injury? (List all that apply) Sprained right ankle

When did you report the incident? 1:45 pm Who did you report it to? Julia Sajauskas (supervisor)

Did you seek medical treatment?  Yes  No Where were you treated? Concentra

EMPLOYEE SIGNATURE: John Doe DATE: 7/22/17

This form is for Howard County internal use only; it does not constitute filing a claim with the Maryland Workers' Compensation Commission.

(Over)

**Section II - Supervisor Information:**

Supervisor's Name: Julia Sajauskas Division: Sports & Adventure

Job Title: Recreation Coordinator Phone: 410-313-4719 Fax: 410-313-4646

Description of Incident (facts as you know them; do not make assumptions): While returning from the hike, John turned his ankle on a rock. The other staff (Jake & Amanda) helped him back to the camp vehicle. They elevated his ankle and applied ice.

List all witnesses, in addition to those listed in Section I: camp participants

When were you informed of the incident: 1:45 pm

How were you informed: Amanda called my cell phone after they applied ice

Was the incident the result of defective equipment or the action of non-county employees? (Please describe, preserve evidence and take photographs) no

Please list what object or substance directly harmed the employee and the corrective action to prevent further incidents and expected completion dates: the trail and the rock. John needs to keep a closer look to where he is walking.

What safety procedures or personal protective equipment were not in use at time of incident?  
n/a

Has employee returned to work?  Yes  No If so, when? 7/23/17

Was there any lost time from work?  Yes  No If so, how long? \_\_\_\_\_

If the employee died, when did death occur? n/a


SUPERVISOR'S SIGNATURE: J. Sajauskas DATE: 7/23/17

Fax this form immediately to Risk Management (410-313-6399). Serious injuries must be called in at 410-313-6390. Send original to Risk Management: 6751 Columbia Gateway Drive, Columbia, MD, 21046. Keep a copy for Department file.

Form RM-1  
Revised (1/02)

Sample Authorization Forms Patient First/Concentra

**Authorization for Examination or Treatment**



www.patientfirst.com

Please check off services needed for your employee's visit.

<b>Patient Information:</b>		
Company Name: _____	Date of Birth: _____	I.C. #: _____
Patient Name: _____	SS#: _____	

**Work Related:**  
 Injury  Illness Date of Injury: \_\_\_\_\_

**Physical Examination:**


DOT: <input type="checkbox"/> Pre-employment <input type="checkbox"/> Recertification	NON-DOT: <input type="checkbox"/> Pre-employment
--	---

<b>Substance Abuse Testing:</b>	<b>Special Procedures:</b>
<b>Urine Drug Screens:</b>	<input type="checkbox"/> PPD Placement
<input type="checkbox"/> DOT (5-panel)	<input type="checkbox"/> Chest X-ray
<input type="checkbox"/> Non-DOT (10-panel)	<input type="checkbox"/> Hepatitis B
<input type="checkbox"/> Instant Drug Screen (5-panel)	<input type="checkbox"/> Flu vaccination
<b>Alcohol Screens:</b>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Breath test (EBT)	
<input type="checkbox"/> Blood test	

**Special Instruction / Comments**

<b>Authorization:</b>	
Phone: _____	Date: _____
Printed Name: _____	Signature: _____

Form#: 629 Rev. 02/12



(Patient Must Present Photo ID at Time of Service)

**Authorization for Examination or Treatment**

Patient Name: \_\_\_\_\_ Social Security Number: \_\_\_\_\_

Employer: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Street Address: \_\_\_\_\_ Location Number: \_\_\_\_\_

Temporary Staffing Agency: \_\_\_\_\_

<b>Work Related</b>	<b>Physical Examination</b>
<input type="checkbox"/> Injury <input type="checkbox"/> Illness	<input type="checkbox"/> Preplacement <input type="checkbox"/> Baseline <input type="checkbox"/> Annual <input type="checkbox"/> Exit
Date of Injury: _____	<b>DOT Physical Examination</b>
<b>Substance Abuse Testing*</b> (check all that apply)	<input type="checkbox"/> Preplacement <input type="checkbox"/> Recertification
<input type="checkbox"/> Regulated drug screen <input type="checkbox"/> Breath alcohol	<b>Special Examination</b>
<input type="checkbox"/> Collection only <input type="checkbox"/> Hair collect	<input type="checkbox"/> Asbestos <input type="checkbox"/> Respirator <input type="checkbox"/> Audiogram
<input type="checkbox"/> Non-regulated drug screen <input type="checkbox"/> Rapid drug screen	<input type="checkbox"/> Human Performance Evaluation*
<input type="checkbox"/> Other _____	<input type="checkbox"/> HAZMAT <input type="checkbox"/> Medical Surveillance
<b>Type of Substance Abuse Testing</b>	<input type="checkbox"/> Other _____
<input type="checkbox"/> Preplacement <input type="checkbox"/> Reasonable cause	<b>Billing</b> (check if applicable)
<input type="checkbox"/> Post-accident <input type="checkbox"/> Random	<input type="checkbox"/> Employee to pay charges
<input type="checkbox"/> Follow-up	

Special instructions/comments: \_\_\_\_\_


Authorized by: \_\_\_\_\_ Title: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

Concentra now offers urgent care services for non-work related illness and injury. We accept many insurance plans.  
*(Copies of this form are available at www.concentra.com)*

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Sample Medical Authorization for Minor Child Concentra/Patient First



**Medical Authorization – Minor Child**

I hereby warrant and certify that I am the parent, guardian, or legally responsible party for \_\_\_\_\_ who is a minor child. I hereby authorize \_\_\_\_\_ *Name of Minor Child* that \_\_\_\_\_ *Name of Employer* has my permission to seek medical treatment for \_\_\_\_\_ *Name of Minor Child* In the event the need arises for such Treatment due to an accident, injury or illness while employed by or participating in volunteer activities for \_\_\_\_\_ *Name of Employer*

I further authorize that in the event medical treatment is necessitated as a result of a work related injury or illness or for purposes of a pre-placement examination that a collection of a specimen(s) for drug/alcohol screening may be done during such time as medical treatment is administered or the examination is conducted and that the results be released to \_\_\_\_\_ *Name of Employer*

I release \_\_\_\_\_ Concentra Medical Centers, Inc. Its physicians, nurses, technicians, and any other employees or agents involved with such substance abuse testing from any/all liabilities, claims, or causes of action that may result from the disclosure of those test results.

This authorization shall remain in force until one of the following occurs:

- (i) minor child to whom this authorization applies leaves the employ of or terminates volunteer services with \_\_\_\_\_ *Name of Employer*
- (ii) authorization is rescinded in writing by legal responsible party -or-
- (iii) \_\_\_\_\_ *Name of Minor Child* reaches majority age.

Signed this \_\_\_\_\_ numeric Day of \_\_\_\_\_ Month 20 \_\_\_\_\_ yr .  
By: \_\_\_\_\_ *Signature of Parent of Legal Guardian*

Consent to Treatment of Minor Patients

The undersigned certifies as follows:

1. I am the parent or legal guardian of \_\_\_\_\_ [print child's name].
2. I hereby authorize **Patient First** to provide my above-named child with medical treatment and services for (i) work-related injuries or illnesses, or (ii) work-related pre-placement examinations (including the collection of specimens for drug/alcohol screening), together with any follow-up or related health care service or urgent or emergent medical care that **Patient First** may, in the exercise of its health care providers' professional judgment, deem necessary or appropriate.
3. I further authorize representatives of \_\_\_\_\_ [EMPLOYER] to accompany my above-named child during the treatment described in paragraph 2, above.
4. This authorization shall remain valid through \_\_\_\_\_, 2016.

Signed: \_\_\_\_\_ [Signature of Parent or Legal Guardian]  
Print Name: \_\_\_\_\_  
Date: \_\_\_\_\_, 2016

## Basic First Aid for Some Common Injuries

### Cuts and Scrapes

Thoroughly cleanse area with water only and apply band aid or gauze.

### Nose Bleeds

If the bleeding is slight, place person in a chair with their head slightly forward and loosen clothing around their neck. Pinch their nostrils and apply a cold compress. If the bleeding is severe, place person on the side the nose is bleeding to allow for blood drainage out of the nose; apply a cold compress and pressure.

### Fainting

Have individual lie on their back with feet elevated 6 to 8 inches. Never give liquids to a semi-conscious or totally unconscious person.

### Bruises, Sprains, Strains

Apply ice and elevate the injured area; contact parent.

### Burns

Apply a dry dressing and cold compress; contact parent.

### Fractured/Dislocated Bones

Call 911 immediately; contact parent

### Poisoning

Call Poison Control Center immediately (1-800-222-1222); contact parent

### Shock

Symptoms of shock are rapid but weak pulse, pale, cold, clammy skin. Call 911 immediately. Have participant lie down and elevate feet; contact parent

## **Severe Bleeding**

"I.C.E."

- Ice – apply ice to injured area
- Compression – provide direct pressure to slow/stop flow of blood
- Elevate – elevate the injured area
- Contact parent.

Rule of Thumb: If a person's face is flushed, elevate head and keep cool. If a person is pale, treat for shock. "If face is red, raise head. If face is pale, raise tail."

## **Heat-Related Illnesses**

Treatment will depend upon symptoms. Seek medical attention immediately.

- **Heat Cramps Symptoms:** Muscle cramps, often in abdomen or legs; heavy perspiration; lightheadedness; weakness.  
**Treatment:** Provide cool environment and apply ice packs to face, arms and lower extremities. Keep the participant quiet. Drink fluids.
- **Heat Exhaustion Symptoms:** Cool, pale or red, moist skin; dilated pupils; headache; extreme thirst; nausea and vomiting; irrational behavior; weakness; dizziness; unconsciousness.  
**Treatment:** Stop activity; provide cool environment and apply ice packs to face, arms and lower extremities. Keep the participant quiet. Drink fluids. Contact parent.
- **Heat Stroke Symptoms:** Raised body temperature (above 102 degrees); dry, hot, red skin; dark urine; small pupils; rapid, weak pulse; rapid, shallow breathing; extreme confusion; weakness; seizures; and/or unconsciousness.  
**Treatment:** Call 911 immediately; move to shaded, cool area; place ice packs or cool/cold water in and under armpits, around neck, and in both left and right groin areas; keep participant quiet and allow them to sip water if able. Contact parent.

Follow Universal Precautions at all times! Infection control is an important and ongoing concern in recreation programming. By following these simple steps, you can reduce the threat of spreading infection and germs. Strict adherence to universal precautions prevents exposure to blood-borne pathogens including HIV and hepatitis B.

**Hand Washing:** Hand washing is the cornerstone of infection control. Good practice mandates that staff members always wash their hands:

- After using the toilet
- After helping a child with toileting or diapering
- After wiping runny noses
- When preparing to assist with eating or feeding
- After accidental contact with blood or blood-tinged fluids

**Use a Barrier:** When providing first aid, assisting with toileting, feeding or coming in contact with bodily fluids, staff must always have some type of barrier between their skin and the participants.

- Wear latex or non-latex gloves.
- Wash hands after discarding the gloves
- Properly dispose of contaminated materials exposed to blood, such as needles or soiled first aid materials.

**Exposures:** If a child presents with an exposure or illness, the Director must be notified immediately. Parent must be contacted and participant isolated from other staff and participants. Participant may not return to the program until he/she had a doctor's clearance that this is not contagious. Staff must follow the same procedures.

# Concussion Information

[www.howardcountymd.gov/concussion](http://www.howardcountymd.gov/concussion)

## What is a concussion?

A concussion is a type of brain injury that changes the way the brain normally works. A concussion is caused by a bump, blow, or jolt to the head. Concussions can also occur from a blow to the body that causes the head and brain to move rapidly back and forth. Even what seems to be a mild blow to the head can be serious.

## What are some warning signs of a concussion? — For Immediate Attention Call 911

### Signs Observed by a Parent/Guardian

- Appears dazed or stunned
- Is confused about assignment or position
- Forgets sports plays
- Is unsure of game, score, or opponent
- Moves clumsily
- Answers questions slowly
- Loses consciousness (even briefly)
- Shows behavior or personality changes
- Can't recall events prior to hit or fall
- Can't recall events after hit or fall

### Signs Reported by the Athlete

- Headache or "pressure" in the head
- Nausea or vomiting
- Balance problems or dizziness
- Double or blurry vision
- Sensitivity to light
- Sensitivity to noise
- Feeling sluggish, hazy, or groggy
- Concentration or memory problems
- Confusion
- Does not "feel right"

## What should you do if you think a concussion has occurred?

### 1. Seek medical attention right away.

A health care professional will be able to decide how serious the concussion is and when it is safe to return to play.

### 2. Legally, you must keep your child out of play until medically cleared by a qualified health care provider.

Concussions take time to heal. Don't let your child return to play until a health care professional says it's ok. Children who return to play too soon, while the brain is still healing, risk a greater chance of having a second concussion. Second or later concussions can be very serious. They can cause permanent brain damage, affecting your child for a lifetime.

### 3. Inform all coaches about any recent concussions.

Coaches should know if your child has had a recent concussion. Your child's coach may not know about a concussion your child received in another sport or activity unless you tell them.

### 4. Help your child return to sports safely after a concussion.

As symptoms decrease, the extra help or support can be removed gradually. Children and teens who return to activities after a concussion may need to

- Take rest breaks as needed
- Spend fewer hours at activities
- If in doubt, sit it out!

## Consider getting a baseline test performed before a concussion occurs.

Righttime Medical Care, HeadFirst Sports Injury and Concussion Care is an innovative community program for young athletes, their families, physicians, coaches and athletic trainers in the education and evaluation of concussions, baseline testing and navigation to appropriate care in the unfortunate event a young athlete sustains a Traumatic Brain Injury.

One tool that assesses the symptoms of concussion is the ImPACT (Immediate Post Concussion Assessment and Cognitive Testing) test. ImPACT is a computerized exam that measures cognitive brain function and reaction time of athletes 10 years of age and older. It can be administered to student athletes before an injury occurs to assess pre-injury cognitive function and reaction time. It's also used to measure the impact a concussion has on areas of brain function after an injury. Essentially, the ImPACT test is a preseason physical of the brain.

HeadFirst offers ImPACT baseline testing. This non-invasive test is set up in "video-game" style and takes about 25 minutes to complete. Righttime Medical Care's HeadFirst program also offers free baseline tests to athletes ages 10 & up who currently participate in Howard County Recreation & Parks programs. ImPACT testing is offered by appointment at the following locations. Info/appointment: 888-808-6483 or [www.myheadfirst.com](http://www.myheadfirst.com).  
6334 Cedar Lane, Columbia, MD 21044  
18045 Georgia Avenue, Olney, MD 20832  
2401 Brandermill Boulevard, Gambrills, MD 21054

# Health Procedures

## Rabies Information

A deadly disease caused by a virus that attacks the nervous system of animals and humans. In humans, the virus causes fever, headaches, unusual tingling sensation, confusion, tightening of the throat muscles, hydrophobia (fear of water), and seizures. The disease rapidly progresses to paralysis, coma, and death. In animals, it causes paralysis and changes in behavior. Animals may become very aggressive or unusually friendly. Muscles of the throat and jaw may become paralyzed and cause drooling.

- Most often found in: raccoons, skunks, foxes, cats, bats, groundhogs and dogs, ferrets, and farm animals if they are not vaccinated.
- Rarely reported in rabbits and small rodents.
- Rabies is usually spread to humans through the bite of an infected (“rabid”) animal. Other possible exposures include getting infected saliva from a rabid animal into an open wound or in the eyes, nose, or mouth. Rabies is not spread by petting a rabid animal or contact with blood, urine, or feces (stool).
- Rabies in humans can be prevented by getting rabies shots. Rabies shots given soon after an exposure will prevent rabies.
- Exposure to rabies can be prevented: Do not approach, handle, or feed wild or stray animals. Teach children to stay away from wild animals or animals that they do not know. Cover garbage cans tightly.
- If you are bitten by or exposed to an animal that may be rabid, you should:
  - Immediately wash the wound well with soap and water; if available, use a disinfectant to flush the wound. Get prompt medical attention.
  - Immediately report the exposure to your local animal control agency, health department, or police.  
Howard County Health Department 410/313-6300 (weekdays) or 410/313-2929 (weekends or evenings).
  - Consider treatment if a bat was present and exposure cannot be reasonably ruled out.

### *To report animal bites*

Weekdays: 410-313-1773, Weekends/Evenings: 410-313-2929

### *To report a stray, trapped or dead animal*

410-313-2780

### *For help with domestic animals, or violations of animal control laws*

410-313-2780 (Animal Control Office), TTY: 410/313-2323

## Tick Information

Ticks live in moist and humid environments, particularly in or near wooded or grassy areas. You may come in contact with ticks during outdoor activities. Walk in the center of trails to avoid ticks.

### *What to Do If a Participant is Bitten by a Tick*

Do not attempt to remove the tick. Contact parents/caregiver immediately. Participant should watch for signs of illness such as rash or fever, and see a health care provider if these develop.

### *General Tick Information*

- Use a repellent with DEET (on skin or clothing) or permethrin (on clothing) and wear long sleeves, long pants and socks. Always follow product instructions! For detailed information about using DEET, see West Nile Virus: What You Need to Know about Mosquito Repellent. (See Addendum Section)
- Tuck your pant legs into your socks so ticks cannot crawl up in your pant legs. Ticks can crawl into shoes and are small enough to crawl through most socks.
- Wear light-colored clothing, which allows you to see ticks on your clothing.
- Perform daily tick checks
- Use a hand-held or full-length mirror to view all parts of your body and remove any tick you find.  
Check these parts of your body for ticks:
  - Under the arms
  - In and around the ears
  - Inside belly button & around the waist
  - Back of the knees & between the legs
  - In and around the hair

### *Centers for Disease Control and Prevention*

800-CDC-INFO (800-232-4636); TTY: 888-232-6348, 24 Hours/Every Day; [cdcinfo@cdc.gov](mailto:cdcinfo@cdc.gov)

## About Zika Virus

Zika virus disease (Zika) is a disease caused by the Zika virus, which is spread to people primarily through the bite of an infected *Aedes* species mosquito. The most common symptoms of Zika are fever, rash, joint pain, and conjunctivitis (red eyes). The illness is usually mild with symptoms lasting for several days to a week after being bitten by an infected mosquito. People usually don't get sick enough to go to the hospital, and they very rarely die of Zika. For this reason, many people might not realize they have been infected. However, Zika virus during pregnancy can cause a serious birth defect called microcephaly, as well as other severe fetal brain defects. Once a person has been infected, he or she is likely to be protected from future infections.

*Steps to prevent Zika and mosquito bites can be found at the following link:* <http://www.cdc.gov/zika/prevention/index.html>

*Centers for Disease Control and Prevention:* <http://www.cdc.gov/zika/about/index.html> and <http://www.cdc.gov/zika/symptoms/index.html>

## Allergy Action Points

Allergic reactions may occur with exposure to a variety of environmental substances. Exposure can occur by direct contact, ingestion of a substance and/or inhalation of air borne particles of a substance.

Types of reactions to allergens can vary from mild to severe or life-threatening.

### *Typical Allergy Symptoms:*

- Skin: Hives, swelling, itchy red rash, eczema flare
- Stomach: Cramps, nausea, vomiting, diarrhea, gas
- Respiratory: Itchy, watery eyes; runny or stuffy nose; sneezing; coughing; itching/swelling of lips, tongue and throat; change in voice; difficulty swallowing; tightness of chest; wheezing; shortness of breath; repetitive throat clearing
- Cardiovascular: Reduced blood pressure; increased heart rate; shock
- Neurological: Weakness

For some individuals, the reaction begins slowly and gradually gets worse. For others, it develops more quickly and can become life-threatening within a few minutes. All reactions should be taken seriously and treated promptly. Contact parent and supervisor immediately when a child is having an allergic reaction.

The most serious type of reaction is anaphylaxis which can result in death. It is commonly caused by food allergy, stinging insects and medications. Anaphylaxis, or anaphylactic shock, is an allergic reaction that can be fatal within minutes, either through swelling that shuts off airways or through a dramatic drop in blood pressure. Rapid response to such reaction is critical.

### *Program Considerations:*

- Review all participant files upon receipt, paying close attention to any medical concerns.
- If there is a participant with an allergy, ask the parent/caregiver to provide information on the allergy, including how it affects the participant and what action should be taken.
- Inform the Therapeutic Recreation Office, (410-313-4628), as soon as possible with the information provided by the parent/caregiver so appropriate accommodations can be made.
- Create a list of participants with any type of allergy by the end of the first day of camp. Post the list on the inside of the snack cabinet or file box. Remember to keep all participant information confidential.
- Review allergy information with all staff members and ensure that they are comfortable with the procedures they must follow with any participant with an allergy. If a participant uses an Epi-Pen, all staff must be trained to administer the Epi-Pen if needed.
- Be sure to monitor what the participants are exposed to both on and off site during the day.

### ***Food Considerations:***

- No outside food should be given to a participant with a food allergy, and there should be no sharing of straws and/or food. Outside food can be defined as, products from home with the intent to share such as cupcakes for a birthday, lunch items from staff or other participants. The Program Supervisor/Program Director of each program is responsible for informing parents of the “no outside food” policy in person and through camp communications.
- Talk with the parents/caregivers about the snacks that are served. If their participant cannot eat a particular snack, try to offer an alternate snack for the entire class that their child can eat, or arrange to have the parent/caregiver provide an appropriate alternative for their participant.
- When serving food, always read the ingredients if available. If in doubt, DO NOT serve the food to the participant.
- Please remind parents that no refrigeration is available at camp, however, they may put ice packets in their child’s lunch box if they are providing some sort of perishable food. The Recreation Superintendent may make an exception for a specific camp session if the Camp Director demonstrates that no campers have a peanut allergy.
- NO peanut products may be brought to camp. It is recommended at sign-in to verify that participant has not brought peanut products. If they have, the food should be returned to the parent, if present, for them to exchange for/bring back a non-peanut product. If that is not possible, arrange for a “peanut table/area” away from the other participants, where the child may consume the peanut product without putting any other participants in danger of an allergic reaction.
- Peanut allergies can cause severe allergic reactions. Peanuts are NOT a nut; they are in the same family as peas and soybeans. Ingredients that could indicate the presence of peanut protein include hydrolyzed vegetable protein, peanuts, peanut oil, peanut powder, peanut flour, peanut butter, cold pressed peanut oil, mixed nuts, ground nuts and beer nuts.
- Reactions can occur from the SMELL, TOUCH or INGESTION of trace amounts of peanut.
- Peanut protein can remain on a surface for up to 6 months. All surfaces must be cleaned appropriately and regularly to avoid contamination.
- Foods that contain peanut products include chili, egg rolls, soups, sauces, desserts, pastries, baking products, sweets and ice cream. Also, butter spreads, gravy and flavorings. This is not an all-inclusive list and ingredients should always be checked. If in doubt, DO NOT SERVE.

## **Epi-Pen Information**

Anaphylaxis is a potentially life threatening emergency that occurs with individuals with severe allergies to insect bites, bees, food, etc. The Epi-Pen is an instrument, shaped like a pen that is prescribed by a doctor for a child and or adult with severe allergies to insect bites, bees, food, etc. The Epi-Pen can be used in conjunction with Benadryl and other medications that a doctor might prescribe. The Epi-Pen contains a drug called epinephrine that will help counteract the allergic reaction. Use of an Epi-Pen is generally perceived as an emergency treatment in a potentially life-threatening situation and does not eliminate the need for continued medical intervention.

- When a Program Director is notified that a participant may require the use of an Epi-Pen, the Director is responsible for gathering a completed, signed and dated Medication Authorization Form from the parent/caregiver. In this manual, there are two different medication authorization forms. One is to be used for licensed programs (Recreational Licensed Child Care, Summer Blast, Summer Blast PLUS), and the other for non-licensed (self-regulated) programs. The Program Director must notify the Therapeutic Recreation Office (410-313-4628) if a participant may require the use of an Epi-Pen to ensure proper accommodations and training of staff.
- The Medication Authorization Form must include specific instructions on when to use the Epi-Pen, what reactions are typical for the participant when they come into contact with an allergic substance and the type and proper storage procedures for the Epi-Pen.
- The parent/caregiver is strongly encouraged to provide two Epi-Pens, in their original prescriptive containers.
- Anaphylactic shock training is required and made available at no cost to Recreational Licensed Childcare staff, summer camp staff, trip leader volunteers, fitness/exercise instructors, facility building attendants, and other staff or volunteers on an as-needed basis. Anaphylactic shock training can be made available when deemed needed to volunteer coaches, contractors and payroll instructors at the discretion of their Program Supervisor, and will be based on risk assessment of that particular activity and the enrolled participant’s accommodation needs. In the event that trained personnel are absent when an allergic reaction occurs, staff should administer the Epi-Pen immediately as a lifesaving intervention and should take all reasonable steps until trained personnel arrives.
- Epi-Pens must be kept in a locked medication box, and must accompany participants when the program travels off-site or not close to a facility. Epi Pens may be carried with the participant in some circumstances.
- In the event a participant requires the administration of an Epi-Pen, 911 emergency system will be activated, and he/she will be transported to a hospital. Parents/caregivers will be notified as soon as possible after 911 has been contacted. Emergency contacts listed on the Participant Information Form, must be contacted in the event a parent/caregiver cannot be reached.
- When administering an Epi-Pen, remember the time at which you gave the medication and provide that information to emergency personnel. The Epi-Pen medication only lasts for approximately 15 minutes. If emergency personnel cannot get to your site within the 15-minute window, you may have to administer a second Epi-Pen.
- After emergency personnel have assumed responsibility for the participant and parents/caregivers have been notified, the Program Director must contact their Program Supervisor immediately and submit a completed Incident Report / Participant Accident/Injury Form within 24 hours.

# Bloodborne Exposure Guidelines

## *Exposure Incident*

- If you have a possible exposure to bloodborne pathogens while at work, please follow the recommendations below. Contact County Risk Management at 410-313-6390 with any questions during any part of this process. If your department has special protocol, please follow those instructions.
- Exposure incident means a specific eye, mouth, other mucous membrane, non-intact skin, or parenteral (taken into the body or administered in a manner other than through the digestive tract, as by intravenous or intramuscular injection) contact with blood or other potentially infectious materials that results from the performance of an employee's duties.
- Intact Skin: Determine if the source material is blood, bloody fluid, other potentially infectious material (OPIM), or an instrument contaminated with one of these substances. If not, no follow up care may be necessary. If an exposure has occurred determine the type of exposure. If intact skin only, no follow up care may be necessary if the exposure is a small amount, (few drops, short duration). Contact with intact skin is not normally considered a risk for disease transmission. However, if the exposure was to blood and the circumstance suggests a higher volume exposure (i.e. an extensive area of skin was exposed or there was prolonged contact with blood) the risk for disease transmission should be considered. Skin integrity is considered compromised if there is evidence of chapped skin, dermatitis, abrasion or open wound.

## *Employee Guidelines*

1. The guidelines below shall be followed by the employee when an exposure or suspected exposure occurs.  
It is essential that this evaluation take place within **2 hours of the exposure**.
  - i. If exposed, thoroughly flush effected eyes, nose, mouth or skin with water as soon as possible.
  - ii. Allow wounds to bleed freely at first, then clean thoroughly, apply disinfectant and follow with dressing and bandage.
  - iii. Notify a supervisor, personally or through another employee, that a possible exposure has occurred.
  - iv. As soon as possible, report to a qualified medical provider for assessment and/or treatment.
2. The Concentra Medical Center Clinics have trained staff in infectious disease protocol and have a supply of the required medication on hand. Records are maintained confidentially.
  - i. The Clinic located at 6656 Dobbin Road, Columbia, MD 21045 (410) 381-1330 is used most frequently.
  - ii. The Arbutus Clinic located at 1419 Knecht Avenue, Baltimore (Arbutus), MD 21227 (410) 247-9595 is open 24 hours/7days a week.
  - iii. After these hours, a physician on call at (410) 331-4098 will direct the employee to the nearest hospital for emergency treatment and will facilitate the employee's care at the hospital.
3. Initial treatment and/or follow-up with Concentra Medical Center are recommended under the following circumstances:
  - i. The employee is not taken to the hospital for treatment of other injuries;
  - ii. If initial post-exposure prophylaxis (PEP) medication is prescribed at Howard County General Hospital and follow up by a physician is required;
  - iii. To fill the prescription provided by the emergency room physician which can be difficult because the drugs may not be readily available at local pharmacies; or
  - iv. If the employee learns of the exposure well after the fact through notification by other sources.
4. Proceed directly to Howard County General Hospital, 5755 Cedar Lane, Columbia, MD 21044 for treatment of any serious injuries OR if incident occurs when the Arbutus Clinic is closed. (See "B" above for recommended telephone contact with Concentra after hours). The emergency room staff will provide initial treatment and evaluation of the exposure, which will include recommendations for future treatment. After evaluating the incident, if the attending physician believes that a true exposure has occurred, he/she will:
  - i. If the physician believes that the best course of action is to have the employee begin the post-exposure prophylactic medication, the physician will give the first dose of medication at the hospital and will provide a prescription for follow up medication. The employee has the right to request the medication even if the physician recommends against it.
  - ii. With consent, test the employee to rule out pre-existing disease. It is important that the employee be able to rule out pre-existing conditions if a workers' compensation claim is later filed.
5. Follow up as soon as possible with completion of the Howard County Employee Incident/Injury Form (RM-1).
6. Post-exposure counseling for the employee, spouse or significant others may be obtained directly and confidentially by the employee through the County's Employee Assistance Plan.

## *Supervisor's Guidelines*

1. The supervisor will contact County Risk Management (410) 313-6390 to advise them of the exposure by telephone or fax (410) 313-6399 by the end of the shift on which the exposure occurs. This is important so that proper treatment can be authorized for the exposed employee without undue delay.
2. The supervisor will follow up with the employee to assure that follow up care, if warranted, has been completed to their satisfaction.

# Safety Procedures

## General Camp Safety Procedures

Making recreation facilities and programs as safe as possible is a primary responsibility of every staff member. The best preventive measure is to establish rules and regulations at the beginning of your program. Strict enforcement at all times is essential.

### *General Rules of Safety*

- Organize and lead activities which suit the ability of all participants as well as constraints of the facility.
- Provide adequate supervision at all times for activities. Never leave participants unsupervised.
- Restrict activities to assigned areas.
- Try to anticipate and avoid dangerous situations prior to beginning an activity.
- Inspect the activity area and all equipment each day prior to opening of the program. Complete a Building Security Checklist (see next page) if required. Use only facilities and equipment which have been checked and cleared of hazards. Upon inspection of the activity area, if evidence of criminal behavior is found, secure the area and notify your supervisor and the Howard County Police Department. Do not touch any evidentiary items.
- Know how to properly use all equipment.
- “Spot” participants if the activity is new or there is a risk of falling.
- Clear all floor and playground surfaces of any stones, glass, etc.
- Clear water fountains of all debris.
- Keep all chemicals (cleaners, paint thinners, etc.) in a locked area.
- Keep participants out of equipment storage areas at all times.
- Place emergency phone numbers in an accessible location.
- Notify your Program Supervisor if any equipment or program area presents a hazard or unsafe condition.
- You are required to have a posted (where applicable) written Emergency Evacuation Plan (see below) that must include:
  - Procedures for evacuating the site.
  - Designated meeting place.
  - Procedures for verifying location of all participants.
  - Location(s) where 911 emergency systems can be contacted.
- You must conduct at least one emergency drill per camp session. Record date and time of the drill on form supplied by your Program Supervisor.
- Participants must wear appropriate footwear for the planned activities.



# Playground Safety & Supervision

## *Conditions to Look for During a Pre-Play Site Inspection*

### 1. Environmental Hazards

#### a. Weather

- i. Is there any impact from rain, snow, wind or excessive heat?
- ii. Is all equipment, including slides a reasonable temperature?

#### b. Foreign Materials

- i. Playground is free from animals, nests and animal droppings
- ii. Playgrounds should be free from trash, broken glass, rocks and branches. All bodily fluids and accidents are properly and safely cleaned up.

#### c. Surfaces

- i. Sidewalks and pavement game areas are free from loose particles such as sand, gravel, mulch and shredded rubber.
- ii. Safety surfacing is intact with no ruts or deep depressions.
- iii. Improper Protective Surfacing: The surface or ground under and around the playground equipment should be soft enough to cushion a fall.

### 2. Playground Equipment Hazards

#### a. Broken, missing or damaged parts

- i. Playground equipment is free from conditions that may pose danger to a child.
- ii. A protrusion hazard is a component or piece of hardware that may be capable of impaling or cutting a child if a child should fall against the projection. Some protrusions are also capable of catching strings or items of clothing worn around a child's neck, possibly causing strangulation.

#### b. Missing or loose hardware

#### c. Movement

- i. Some play components have flex built into their design. If you notice increased movement in these components, check for secure hardware and intact parts to determine if the flex is normal or abnormal (hazardous).

#### d. Swings:

- i. Because of the frequency of use and the movement of swings, they wear out more frequently than other types of equipment.

## *On the Playground, Pay Close Attention to*

### 1. Children getting on and off the play equipment.

### 2. Young children, who may not have fully developed motor skills.

- a. It is imperative that a playground supervisor understands the abilities of the children that he or she will be responsible for supervising. The physical, cognitive, communicative, sensory, and social/emotional abilities of children on the playground may vary and playground supervisors should be familiar with the skills and needs of the children in order to best support their development.
- b. Always supervise young children closely when they attempt to use upper body equipment.

### 3. Children displaying lack of caution

- a. Nearly 1/3 of all playground injuries are self-inflicted.
- b. Discourage running on and around the playground equipment.

### 4. Overcrowding on play activities, such as slide entrances

- a. Be aware of overcrowding especially in the first few minutes of recess as children often rush to their favorite activity. If a component is frequently overcrowded due to its popularity, consider developing guidelines that ensure that all children have a chance to use the equipment.

5. Items brought into the play environment that could become strangulation hazards.
  - a. Require children to remove helmets and other strangulation hazards (items around the neck such as jump ropes, mittens, scarves, dog leashes, long necklaces and canteens) before using equipment.
6. Children interacting with playmates
  - a. Over half of playground injuries are caused by children's interaction with others.
  - b. By knowing the temperaments of the children in your care, learn to be proactive and intervene if necessary.
7. Falls
  - a. Falls are the number one cause of playground injury.
  - b. Approved safety surfacing should be maintained under and around the playground equipment.
  - c. Trip hazards are created by play structure components or items on the playground. Exposed concrete footings, abrupt changes in surface elevations, containment borders, tree roots, tree stumps and rocks are all common trip hazards that are often found in play environments.
8. Risk Taking Behaviors
  - a. Peer pressure can often increase dangerous risk taking behavior. While often positive, risk taking behaviors may occur both on and off the equipment that may endanger a child.
9. Aggressive Behaviors & Bullying and Conflict Resolution
  - a. Children's emotions are sometimes acted out in non-preferred ways.
  - b. Watch for aggressive behavior towards both other children and inanimate objects like playground equipment.
  - c. Provide plenty of choices, activities, and developmentally appropriate playground equipment activities so that children do not wait to play and there is something for everyone to enjoy.

***Simple ways to make your supervision efforts more effective***

It is estimated that over forty percent of all playground injuries are directly related to lack of supervision.

1. Move with the body. Scan with the eyes.
2. Observe children's behavior to anticipate dangerous situations.
3. Avoid distractions.
4. Position supervisors near challenging components.
5. Often times, a supervisor can stop a situation from getting out of hand by simply moving physically closer to the children involved or by looking directly at them.

Ask the children to help you develop rules that will promote safety and fun on the playground

## Ozone Action Day Guidelines

Program Supervisor will notify camp staff of Ozone Action Days.

### *Orange Alert*

- Air Quality: Approaching unhealthful conditions.
- Weather Conditions:
  - Temperature 86-95 degrees
  - Light winds
  - Slow moving high pressure system with sunny skies
- Recommended Actions:
  - Use caution when participating in outdoor activities.
  - Take frequent breaks for rest and fluids.
  - Avoid caffeine and drink plentiful amounts of water before, during and after activities.
  - Be alert for signs of heat-related illnesses (i.e. nausea, headache, excessive sweating, etc.).

### *Red Alert*

- Air Quality: Unhealthful.
- Weather Conditions:
  - Hot (94-100+ degrees) hazy, humid.
  - Stagnant air; little or no wind.
  - Little chance of rain.
  - Stationary high pressure system with sunny skies.
- Recommended Actions:
  - Children and elderly individuals should restrict outdoor activities especially between 10 a.m. and 3 p.m.
  - Healthy individuals should limit strenuous outdoor activities; schedule low-level activities with breaks every 10-15 minutes and provide access to fluids.
  - Individuals with heart or respiratory ailments, emphysema, asthma or chronic bronchitis should limit outdoor activities.
  - If breathing becomes difficult, move indoors.
  - Drink fluids as frequently as every 15 minutes and avoid caffeine.
  - Observe all participants for signs/symptoms of heat-related illnesses.

## Extreme Heat Guidelines

Howard County Department of Recreation and Parks recognize the importance of taking precautions in extreme heat situations. The Department will prepare and place into effect precautionary measures when the National Weather Service announces a Heat Advisory or Heat Warning. In the following guidelines, "Activity" means programs, classes, leagues, daycare, concerts, and all types of recreation activities; and, "Facilities" means inside and outside facilities. This plan will be reviewed annually.

### *Standard Procedures & Protocols*

- In situations with advance notice of advisories and/or warnings during normal business hours, the Department will assess activities known to be scheduled in county facilities as well as those teams and programs representing the Department with games or activities scheduled outside the county.
- The Director has the option to cancel all activities in County facilities on the advice of Emergency and Health Officials if they determine it is in the best interest of individuals and/or staff participating in activities. The Public Information Office (PIO) and our Department's marketing staff would be notified and all public media would be notified and closure implemented.
- Divisions are to implement program specific adjustments as precautionary methods such as alerting key program coordinators of their on-call status, alerting those involved to contact the status lines, arrangements for water, ice buckets, cooling areas, cooling devices, options for activity-specific rule modifications, temporary postponements, curfew extensions, and if deemed feasible, arranging of staffed medical tents, etc.
  - Some programs (example - Community Sports with the additional resources), have more specific procedures and protocols in place for HI (heat indices) of 105 up to 115 degrees.
  - Participants of Howard County sponsored activities that are involved in a program not under department jurisdiction have the authority to accept a forfeit if they feel it is in the best interest of their players from a health perspective.
  - On-site staff of activities that take place on artificial turf need to consider the additional impact of added heat on artificial turf. Clouds, breezes, and moisture can minimize the additional heat; but on-site staff should monitor activity closely if they find the conditions are significantly hotter at waist level.

- Program Coordinators in consultation with onsite program resources have the authority to make program-wide modifications, postponements, or cancel activities if they feel precautionary measures in place aren't satisfactory or if the participants desire to end the activity.
- On location, unless otherwise determined via pre-advisory/warning instructions, Event Directors, Field Marshals, Leaders, and Officials have the authority to modify, postpone or stop any activity if they feel precautionary measures in place aren't satisfactory or if the participants desire to end the contest, event or activity. Program Coordinators must be notified of such action at first opportunity. Except for typical league games or practices, some activities (camps, tournament games, etc.) must obtain the approval of the program coordinator for final cancellation of activity.
- Some organizations (internal or external) may prefer to cancel their activity in the event of an extreme heat episode. An option to accommodate individuals displaced by the cancellation of an activity may be to offer program credits (i.e., pavilion picnic users) or an alternate date and time if feasible. This accommodation would also include league teams working out scenarios with a sports manager.
- Alerts to Howard County Fire & Rescue Department as to significant activities scheduled that could benefit from an increased presence are made as practical.
- Department forced cancellation of any non-sponsored activity (SAC tournament, pavilion rental, etc.) due to heat concerns requires the approval of the Director of Recreation and Parks or designee as the appointing authority. Park Rangers and specific Park Operations staff shall be notified of such instances.

**Communications / Public Relations:**

Similar to other weather and emergency incidents, the standard Status Lines are utilized. Opening statement on such recordings for outdoor activities is as follows:

*The following activity cancellations or adjustments have been determined as of xxx pm. Please consult this line one hour before your activity or at intervals indicated in this recording for updates. All participation today in outdoor activities is voluntary and those with specific health conditions should refrain from participation today. Now for the schedule adjustments...*

The standard response options to the media questions include the following:

**Standard Response**

*At this time, Parks are open for activities and services. Coordinators of Department activities are assessing precautionary heat measures in place. Participants are directed to the appropriate status line for the latest decisions on activity modifications. These decisions may change with conditions. During this Heat Advisory Warning, personnel directing activities reserve the right to change rules of play and make other modifications to mitigate heat conditions. All participation is voluntary and those with specific health conditions should refrain from participation today."*

**Extreme Measure Response**

*At this time, the County has deemed a health emergency until x pm. Howard County Recreation and Parks outdoor events and activities have been canceled and sports fields are closed. Participants should contact the appropriate status line for re-start information on activities."*

**Summary of Heat Advisory/Warning**

Below are key markers that kick in the Extreme Heat Plan preparation and discussions.

Heat Index Forecast	Summary Plan
<b>105°+</b>	Mobilizes the Community Sport plan utilizing Field Marshals and others equipped with cell phone applications. Alert reminder to program staff of on-call expectations. 115° heat index is the maximum temperature for cancellation per the Health Department.
<b>94°+</b>	Automatically kicks in the discussion phase of Extreme Heat Plan Guidelines and begins preparation for additional activity specific pre-cautionary measures as well as provides flexibility to onsite personnel and officials to institute activity or rule modifications. Reminder - individual participants who choose not to participate in these conditions will not be penalized.
<b>84°-93°</b>	Coaches, leaders, event directors, officials observe participants carefully for signs of heat injuries or exhaustion. Assure and schedule participants for water breaks. Water is to be available at all times. Individual participants are not required to participate in these conditions.

# Weather Emergency Plan

iNWS: A free service by the National Weather Service that delivers immediate messages to you via text and email.

Sign-up and create a customized profile at <https://inws.ncep.noaa.gov/>

## *Thunder and Lightning Storm Action*

1. Listen for National Weather Service information and be alert for signs that the weather is deteriorating (e.g. storm clouds or darkening skies).
2. If participants are in the water, have them move quickly to shore and shelter.
3. If inside shelter, keep participants away from windows, doors and water (sinks and faucets).
4. If participants are caught in a car or bus, have them remain there until the storm passes.
5. If participants are caught outside away from shelter, have them head for a clump of short trees. Stay away from tall trees, hilltops, open fields, pools or other bodies of water, evergreens, metal objects (bicycles, fishing rods, cameras, fences, etc.), large metal fixtures (flag poles, ski lifts, utility poles, etc.).  
If participants are caught in an open field, have them spread out and crouch low to the ground (hands on knees to minimize contact points with the ground).
6. After the storm passes, check staff and participants for injuries and administer first aid as needed. Contact emergency services as needed.
7. Listen to the radio for updated emergency information.
8. Watch for fire hazards such as downed electrical lines or leaking gas. Evacuate the site as required.

## *Lightning Guidelines for Outdoor Activities*

If thunder/lightning can be heard and/or seen, STOP YOUR ACTIVITY AND SEEK PROTECTIVE SHELTER IMMEDIATELY.

In situations where thunder and/or lightning may or may not be present yet you feel your hair stand on end and skin tingle, immediately assume the following position:

- Drop to your knees, place your hands/arms on your legs, and
- Lower your head. Do NOT lie flat on the ground.

In the event that either situation occurs, allow 30 minutes to pass after the last sound of thunder and/or lightning prior to resuming play.

The National Weather Service has stated that lightning can strike up to a distance of 10 miles with storms traveling at a speed of 50-miles per hour. However, thunder can be heard only within a distance of 8 miles. Therefore, if you hear thunder and/or see lightning, you are in immediate danger and should seek protective shelter in an indoor facility AT ONCE. An indoor facility is recommended as the safest protective shelter; however, if an indoor facility is not available, an automobile is a relatively safe alternative.

Otherwise, the following guidelines are recommended:

- Avoid standing under large trees and telephone poles.
- If the only alternative is a tree, choose a small tree in a wooded area that is not on a hill.
- As a last alternative, find a ravine or valley.
- In all instances outdoors, assume a crouched position, and avoid standing water and metal objects.

The most dangerous storms give little or no warning; you may not hear or see thunder or lightning. Up to 40% of all lightning is NOT accompanied by thunder, and 20% to 40% of all thunder cannot be heard because of atmospheric disturbances—thus the term “Silent Killer”. At times the only natural warning that precedes a strike is feeling your hair standing on end and skin tingling.

If this occurs, you are in immediate danger of being struck by lightning and should drop to the ground immediately. Assume a crouched position—in the event of a ground strike, lying flat would increase the body surface area that would be exposed to the current traveling through the ground.

If you see lightning coming, you will not have time to act before it strikes—the lightning we see flashing is actually the return stroke flashing upward from the ground to the clouds. When you see lightning strike, it has already hit. You will never see the bolt that hits you. Use this information to minimize the risk of injury or death from a strike!

## *Tornado Action*

1. Listen for National Weather Service information and be alert for signs that the weather is deteriorating (storm clouds or darkening skies).  
Tornadoes can develop from severe thunderstorms and can be accompanied by lightning, heavy rain and hail.
2. If participants are outside, move them indoors to the lowest part of the building (a basement if possible). Have them stay in an enclosed space (closet, bathroom, hallway) in the center of the building and move under something sturdy (desks, tables) for head protection.
3. If participants are caught outside or in a car or bus away from shelter, have them lie down in a ditch or low-lying area with their hands over their heads.
4. After the tornado passes, check staff and participants for injuries and administer first aid as needed.
5. Contact emergency services as needed.
6. Listen to the radio for updated emergency information.
7. Watch for fire hazards such as downed electrical lines or leaking gas. Evacuate the site as required.

# Security & Safety Procedures

## Locating a Lost Child/Missing Participant

### Who is a lost child?

When a child fails to report as required to a designated location, or when a child is reported lost by the group to whom he/she was assigned.

### The following procedures must be followed:

1. The onsite Program Director shall be notified immediately.
2. Conduct a brief, five-minute search to include the bathroom areas, parking lots and playground areas; however, a staff member must be assigned to remain with the other children during the initial search. Every effort should be made to check all areas quickly and should include calling out the child's name and using signaling device (certain adventure programs). Ask campers/participants and staff where and when the child was last seen. Check back with the group. Depending on the type of camp and the size of the staff, an outside search can be conducted simultaneously.
3. After 5 minutes, contact in the following order: 1) the local police/park rangers/security; 2) the Superintendent or designee at 410-313-4620 or 410-313-4645 or 410-313-1679\* during office hours (8:00 AM – 5:00 PM) or Manager/Superintendent from staff list in manual if after 5:00 PM or before 8:00 AM ; 3) the parent/guardian (should be contacted by director on site). \* If 313-1679 goes to voice mail, do not leave a message, call 410-313-4640.
4. The Program Director or highest ranking staff shall be the staff member who speaks with the police at the scene unless another staff member has additional information relating to the child. The police will then take over the search.
5. Within 24 hours or after the child is located (whichever occurs first), an Incident Report MUST be completed and submitted to the Superintendent's Office. The Department Director or his designee will handle any inquiries from the media. If during normal working hours, the Superintendent and/or Bureau Chief should call the Office of Risk Management to let them know of the incident. (Lynne Levin, 410-313-6396, immediately if possible.)
6. The lead staff (Recreation or Program Manager) on the incident should create a Time Line (below) with a detailed account documenting information pertinent to the incident and submit it to the Division Superintendent and Bureau Chief within 48 hours.
7. The Recreation or Program Manager will contact the parent/guardian later in the evening and the next day for follow-up. Division Superintendent, Bureau Chief, and Director of the Department may also contact parent/guardian depending on the situation.

### LOCATING A LOST CHILD QUICK SEARCH SHEET

1. Notify on-site Program Director **IMMEDIATELY**
2. **Conduct brief 5-minute search** (include bathroom areas, parking lots and playground areas). **Make sure a staff member is assigned to stay with other children.**
3. After 5 minutes, the followings steps should be taken in this order:
  - 1) Contact police/park rangers/security
  - 2) Contact the Superintendent or designee at 410-313-4620, or 410-313-4645, or 313-1679\* during office hours (8:00 AM – 5:00 PM) or Manager/Superintendent from staff list in manual if after 5:00 PM or before 8:00 AM. \* If 313-1679 goes to voice mail, do not leave a message, call 410-313-4640.
  - 3) Contact the parent/guardian (should be contacted by the director on site)
4. The program director or highest ranking staff will speak to the police. The police will then take over the search.
5. Within 24 hours or after the child is located, an Incident Report must be completed and submitted to the Superintendent's office. If during normal working hours, the Superintendent and/or Bureau Chief should call the Risk Management Office.
6. The lead staff (Recreation or Program Manager) on the incident should create a Time Line with a detailed account documenting information pertinent to the incident and submit it to the Division Superintendent and Bureau Chief within 48 hours.
7. The Recreation or Program Manager will contact the parent/guardian later in the evening and the next day for follow-up. The Division Superintendent, Bureau Chief, and Director of the Department may also contact parent/guardian depending on the situation.

### TIMELINE

\_\_\_\_\_ Time of Child Lost  
\_\_\_\_\_ Time of Notifying On-Site Director  
\_\_\_\_\_ Time of Notifying Police  
\_\_\_\_\_ Time of Notifying Main Office  
\_\_\_\_\_ Length of Time Child Missing  
\_\_\_\_\_ Notification of Parent/Guardian  
Who Reached Parent/Guardian and took lead: \_\_\_\_\_  
\_\_\_\_\_ Time of Notification of Office of Director and Bureau Chief (if went beyond 5 minute mark)  
\_\_\_\_\_ Notification of Phone Call to Risk Management to inform of coming paperwork  
\_\_\_\_\_ Incident Report completed and submitted to Recreation or Program Manager / Program Supervisor within 24 hours

## CONTACT INFORMATION

<u>Title</u>	<u>Name</u>	<u>Work Phone</u>	<u>Work Cell</u>
<b>Recreational Licensed Childcare Superintendent</b>	Nicola Morgal	410-313-4723	410-245-2009
<b>Sports and Adventure Services Superintendent</b>	Allan Harden	410-313-4652	410-804-7668
<b>Recreation Services Superintendent</b>	Phil Bryan	410-313-1668	443-506-0543
<b>Natural Resources Acting Superintendent</b>	Dan McNamara	410-313-4725	410-707-8185
<b>Park Operations Superintendent</b>	Heather Johannes	410-313-1690	443-977-0863
<b>Bureau Chief of Recreation</b>	Laura Wetherald	410-313-4661	410-218-5427
<b>Bureau Chief of Parks</b>	John Marshall	410-313-1081	410-733-6470
<b>Director</b>	John R. Byrd	410-313-4640	410-979-2807
<b>Police, Fire, Rescue: 911</b>			
<b>Park Rangers on Duty</b>		410-245-1410	410-245-1410
<b>Park Ranger Supervisor</b>	Kevin Vest	410-313-4679	443-717-1771
<b>Risk Management</b>	Lynne Levin	410-313-6396	
<b>After Hours On Call</b>	Ask for Supervisor On Call	410-313-2929	

### *Prevention Tips*

The Department of Recreation and Parks will make every effort to ensure the safety and health of each camper during program hours.

1. In accordance with current guidelines, attendance is taken at the beginning of each program. Each program may set up their own attendance routine, with Manager approval. The routine should remain constant during the program. Periodically do a head count of campers/program registrants. Children should be instructed at the beginning of each program to remain with the staff and group at all times. In addition, they should be told that if they become separated from the group, they should remain in place rather than attempt to find the staff or other children. For non-communicative children, be cognizant of verbal, written and gesture communication to share information to meet accommodation needs.
2. If the program travels off site via approved transportation, attendance shall be taken as the vehicle is loaded and verified again before departure. At the conclusion of the trip, attendance will be taken again prior to returning to the origination site. On trips, if separating into groups, develop a set of check-ins at specific times in designated areas. Rotate a staff member in the designated area in case of emergencies.
3. If there is a discrepancy in attendance, a predetermined warning signal shall be used as soon as it is determined a child is missing. The group should gather at the original meeting place and a quick five-minute check should be taken to locate the child. Then, follow protocol.

## Emergency Lockdown Plan

Prior to camp/program opening day, the Program Director and Program Supervisor will meet and discuss the plan for “lock down”. If your camp is located in a school, find out the lock-down procedures for your school.

1. Identify emergency situations, including but not limited to, intruder with weapons and without, bomb threat, natural disaster (i.e., hurricane, flood, severe thunderstorm), domestic terrorism, chemical hazards and weapons of mass destruction.
2. Identify an appropriate pre-determined or safe meeting space for each threat and how to “shelter in place”.
3. Identify appropriate methods to inform participants if needed to not increase alarm or scare participants.
4. Determine the best ways to communicate with chain of command, cell phone, land line, text. What if no communication is available?
5. Review with all staff in advance the process for each threat and run mock drills.
6. In some emergency situations, “Incident Command” will direct them and they are to follow their instructions.

### *In a camp/program situation*

7. Director or other counselor will denote the presence of an emergency situation.
8. A member of the camp staff will alert the campers (i.e., whistle, announcement) to the situation and organize campers at a pre-determined meeting point or safe area.
9. Director will alert chain of command and facility/park staff to the presence of an emergency and the precaution that the camp will be taking.
10. Concurrently, a member of the camp staff will be conducting an attendance check on the campers using the daily attendance sheet.
11. For outdoor camps- Once all campers and camp staff have been accounted for in a safe area the camp will move to the closest shelter or into the provided transportation that is a safe distance from the emergency.
12. Camp staff must contact the Program Supervisor immediately upon conclusion of steps 7-11, to confirm the results of attendance taking and confirm exact location of their final safe area. Camp is to wait in safe area for further instructions from chain of command.
13. Director must complete an Incident Report Form (Page 39) and submit it to the Program Supervisor within 24 hours.

Training Reference: Run/Hide/Fight - Active Shooter Safety (Homeland Security) <http://www.youtube.com/watch?v=1ESNae7OoyM>

## Howard County Recreation & Parks - Emergency Reference

	Duck, Cover and Hold On	Lock Down	Modified Lock Down	Shelter in Place
When Used	<ul style="list-style-type: none"> <li>❖ Earthquake</li> <li>❖ Explosion</li> <li>❖ Terrorism Incident</li> <li>❖ Tornado or Severe Winds</li> <li>❖ Other situations that may cause significant structural damage</li> </ul>	<ul style="list-style-type: none"> <li>❖ Criminal activity</li> <li>❖ Extreme Violence</li> <li>❖ Shots Fired</li> </ul> <p style="text-align: center;"><i><b>This is the most severe – happening right here, right now!</b></i></p>	<ul style="list-style-type: none"> <li>❖ Criminal Activity</li> <li>❖ Violence</li> </ul>	<ul style="list-style-type: none"> <li>❖ Hazardous Materials Releases</li> <li>❖ Nearby Fires</li> <li>❖ Bioterrorism</li> <li>❖ Chemical Terrorism</li> </ul>
Actions to take Inside Classes/Camps	<ul style="list-style-type: none"> <li>• Upon the command "DUCK, COVER AND HOLD ON", participants/volunteers/staff are to immediately drop to the floor, get under their desk and hold-on. Desks should be arranged so that they do not face windows.</li> <li>• As soon as the incident has subsided all building occupants should evacuate.</li> </ul>	<p><b>Evacuate (RUN)</b></p> <ul style="list-style-type: none"> <li>• Have an escape route and plan in mind. When possible, warn others and help others escape.</li> <li>• Leave your belongings behind</li> <li>• Keep your hands visible</li> </ul> <p><b>Hide Out (HIDE)</b></p> <ul style="list-style-type: none"> <li>• Hide in an area out of the active shooter's view</li> <li>• Block entry to your hiding place and lock the doors</li> <li>• Silence your cell phone and lower the volume on your radio so that only you can hear it</li> </ul> <p><b>Take Action (FIGHT)</b></p> <ul style="list-style-type: none"> <li>• As a last resort and only when your life is in imminent danger</li> <li>• Attempt to incapacitate the active shooter</li> <li>• Act with physical aggression and throw items at the active shooter</li> </ul>	<ul style="list-style-type: none"> <li>• All exterior doors are locked and main doors monitored with access restricted. Identification required for anyone entering the building.</li> <li>• Account for all participants/volunteers/staff.</li> <li>• Outdoor activities cease immediately and do not resume until further notice.</li> <li>• If the situation warrants, blinds and shades are drawn and lights are off.</li> <li>• Normal activity continues within the building.</li> <li>• Participants/Volunteers/Staff are to remain in Modified Lockdown until notice to resume normal routine is given by Incident Command.</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• All Participants/Volunteers/ Staff report to their pre-determined location as quickly as possible.</li> <li>• Move Participants/Volunteers/ Staff outside the building into the main building.</li> <li>• Staff and volunteers should immediately shut doors and windows.</li> <li>• Account for participants/ volunteers/staff.</li> <li>• Shut down the HVAC system.</li> <li>• Place "Sheltering-in-Place" sign on the main door.</li> <li>• Participants/Volunteers/Staff are to remain inside the building until advised by emergency responders or Incident Commander to do otherwise.</li> </ul>
Actions to take Outside Classes/Camps	<ul style="list-style-type: none"> <li>• Upon the command "DUCK, COVER AND HOLD ON", participants/volunteers/staff and staff should immediately move away from buildings and other objects; DROP to the ground and COVER their head.</li> <li>• After the incident has subsided all students and staff should assemble in their assigned evacuation area and follow the evacuation procedure.</li> </ul>	<p><b>Evacuate (RUN)</b></p> <ul style="list-style-type: none"> <li>• Have an escape route and plan in mind. When possible, warn others and help others escape.</li> <li>• Leave your belongings behind</li> <li>• Keep your hands visible</li> </ul> <p><b>Hide Out (HIDE)</b></p> <ul style="list-style-type: none"> <li>• Hide in an area out of the active shooter's view</li> <li>• Silence your cell phone and lower the volume on your radio so that only you can hear it</li> </ul> <p><b>Take Action (FIGHT)</b></p> <ul style="list-style-type: none"> <li>• As a last resort and only when your life is in imminent danger</li> <li>• Attempt to incapacitate the active shooter</li> <li>• Act with physical aggression and throw items at the active shooter</li> </ul>	<ul style="list-style-type: none"> <li>• Outdoor activities cease immediately and do not resume until further notice.</li> <li>• Leave open area immediately. Seek shelter at closest building, vehicle, restroom, pavilion, wooded area, tree line, etc.</li> <li>• If first responders arrive, follow their instruction</li> <li>• Participants/Volunteers/Staff are to remain in Modified Lockdown until notice to resume normal routine is given by Incident Command.</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• All Participants/Volunteers/ Staff report to their pre-determined location as quickly as possible.</li> <li>• Account for participants/ volunteers/staff.</li> <li>• Participants/Volunteers/Staff are to remain at their pre-determined location until advised by emergency responders or Incident Commander to do otherwise.</li> </ul>

	<b>Duck, Cover and Hold On</b>	<b>Lock Down</b>	<b>Modified Lock Down</b>	<b>Shelter in Place</b>
<b>Actions to take Outside Classes/Camps with no Inside Alternative</b>	<ul style="list-style-type: none"> <li>• Upon command "Duck, Cover, and Hold on"</li> <li>• Lie down in a ditch or lowest lying area until imminent threat has subsided</li> <li>• Account for all Participants/Volunteers/Staff</li> </ul>	<p><b>Evacuate (RUN)</b></p> <ul style="list-style-type: none"> <li>• Have an escape route and plan in mind. When possible, warn others and help others escape.</li> <li>• Leave your belongings behind</li> <li>• Keep your hands visible</li> </ul> <p><b>Hide Out (HIDE)</b></p> <ul style="list-style-type: none"> <li>• Hide in an area out of the active shooter's view</li> <li>• Silence your cell phone and lower the volume on your radio so that only you can hear it</li> </ul> <p><b>Take Action (FIGHT)</b></p> <ul style="list-style-type: none"> <li>• As a last resort and only when your life is in imminent danger</li> <li>• Attempt to incapacitate the active shooter</li> <li>• Act with physical aggression and throw items at the active shooter</li> </ul>	<ul style="list-style-type: none"> <li>• Outdoor activities cease immediately and do not resume until further notice.</li> <li>• Leave open area immediately. Seek shelter at closest building, vehicle, restroom, pavilion, wooded area, tree line, etc.</li> <li>• If first responders arrive, follow their instruction</li> <li>• Participants/Volunteers/Staff are to remain in Modified Lockdown until notice to resume normal routine is given by Incident Command.</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• All Participants/Volunteers/ Staff report to their pre-determined location as quickly as possible.</li> <li>• Account for Participants/ Volunteers/Staff.</li> <li>• Participants/Volunteers/Staff are to remain at their pre-determined location until advised by emergency responders or Incident Commander to do otherwise.</li> </ul>
<b>Actions to take Inside Competitions, Practices, Events</b>	<ul style="list-style-type: none"> <li>• Upon the command "DUCK, COVER AND HOLD ON", Participants/ Volunteers/Staff are to immediately drop to the floor, get under their desk and hold-on. Desks should be arranged so that they do not face windows.</li> <li>• As soon as the incident has subsided all building occupants should evacuate.</li> </ul>	<p><b>Evacuate (RUN)</b></p> <ul style="list-style-type: none"> <li>• Have an escape route and plan in mind. When possible warn others and help others escape.</li> <li>• Leave your belongings behind</li> <li>• Keep your hands visible</li> </ul> <p><b>Hide Out (HIDE)</b></p> <ul style="list-style-type: none"> <li>• Hide in an area out of the active shooter's view</li> <li>• Block entry to your hiding place and lock the doors</li> <li>• Silence your cell phone and lower the volume on your radio so that only you can hear it</li> </ul> <p><b>Take Action (FIGHT)</b></p> <ul style="list-style-type: none"> <li>• As a last resort and only when your life is in imminent danger</li> <li>• Attempt to incapacitate the active shooter</li> <li>• Act with physical aggression and throw items at the active shooter</li> </ul>	<ul style="list-style-type: none"> <li>• All exterior doors are locked and main doors monitored with access restricted. Identification required for anyone entering the building.</li> <li>• Account for all participants/volunteers/staff.</li> <li>• Outdoor activities cease immediately and do not resume until further notice.</li> <li>• If the situation warrants, blinds and shades are drawn and lights are off.</li> <li>• Normal activity continues within the building.</li> <li>• Participants/Volunteers/Staff are to remain in Modified Lockdown until notice to resume normal routine is given by Incident Command.</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• All Participants/Volunteers/Staff report to their pre-determined location as quickly as possible.</li> <li>• Move Participants/Volunteers/Staff outside the building into the main building.</li> <li>• Staff and volunteers should immediately shut doors and windows.</li> <li>• Account for Participants/Volunteers/Staff.</li> <li>• Shut down the HVAC system.</li> <li>• Place "Sheltering-in-Place" sign on the main door.</li> <li>• Participants/Volunteers/Staff are to remain inside the building until advised by emergency responders or Incident Commander to do otherwise.</li> </ul>
<b>Actions to take Outside Competitions, Practices, Events</b>	<ul style="list-style-type: none"> <li>• Upon command "Duck, Cover, and Hold on"</li> <li>• Seek shelter if available (stay outside during earthquake)</li> <li>• Lie down in a ditch or lowest lying area until imminent threat has subsided</li> <li>• Account for all Participants/Volunteers/Staff</li> </ul>	<p><b>Evacuate (RUN)</b></p> <ul style="list-style-type: none"> <li>• Have an escape route and plan in mind. When possible, warn others and help others escape.</li> <li>• Leave your belongings behind</li> <li>• Keep your hands visible</li> </ul> <p><b>Hide Out (HIDE)</b></p> <ul style="list-style-type: none"> <li>• Hide in an area out of the active shooter's view</li> <li>• Silence your cell phone and lower the volume on your radio so that only you can hear it</li> </ul> <p><b>Take Action (FIGHT)</b></p> <ul style="list-style-type: none"> <li>• As a last resort and only when your life is in imminent danger</li> <li>• Attempt to incapacitate the active shooter</li> <li>• Act with physical aggression and throw items at the active shooter</li> </ul>	<ul style="list-style-type: none"> <li>• Outdoor activities cease immediately and do not resume until further notice.</li> <li>• Leave open area immediately. Seek shelter at closest building, vehicle, restroom, pavilion, wooded area, tree line, etc.</li> <li>• If first responders arrive, follow their instruction</li> <li>• Participants/Volunteers/Staff are to remain in Modified Lockdown until notice to resume normal routine is given by Incident Command.</li> </ul>	<ul style="list-style-type: none"> <li>• Call 911</li> <li>• All Participants/Volunteers/Staff report to their pre-determined location as quickly as possible.</li> <li>• Account for Participants/ Volunteers/Staff.</li> <li>• Participants/Volunteers/Staff are to remain at their pre-determined location until advised by emergency responders or Incident Commander to do otherwise.</li> </ul>

# How to Recognize and Report Suspicious Situations or Persons

Suspicious people may often be identified by their behavior. While no one behavioral activity is proof that someone is planning to act inappropriately or commit a crime (and many of the following behavioral indicators are perfectly consistent with innocent behavior), these factors can help you assess whether someone poses a threat. Behavioral factors to watch for include:

- Nervousness, nervous glancing, sweating or other signs of mental discomfort
- Repeated muttering
- Repeated entrances and exits from the building or facility
- Inappropriate, oversized, loose-fitting clothes (e.g., a heavy overcoat on a warm day)
- Constantly favoring one side or one area of the body as if wearing something unusual/uncomfortable (e.g., a holster). Pay attention to a person constantly adjusting waistbands
- Someone who offers children (e.g. food, candy, toy, ride) to gain favor
- Someone who has child or adult pornography
- Any act of indecent exposure (the crime of intentionally showing one's sexual organs in public)
- Inappropriate touching (Good touch can be explained as a way for people to show they care for each other-examples include hugging, holding hands, or a parent changing a diaper) (Bad touch can be explained as the kind you don't like and would want to stop right away, such as hitting, kicking or touching private parts)

## *Reporting suspicious persons or situations*

Your safety is paramount, at any time if you feel unsafe; remove yourself from the area, or situation. Always be aware of your environment, people and your surroundings. Do not put yourself in harm's way or engage a suspect to gather more details about the situation.

Be a Good witness by doing the following:

1. Call 911.
2. Notify your Supervisor and Park Rangers; After calling 911. Park Ranger Duty Phone 410-245-1410.

Relay the following information to the 911 operator:

- Where - location matters. Provide a physical address (1234 Rainbow Ave) or specific streets or intersections whenever possible. If the location is in a large area such as a park, provide a landmark within that location where the incident occurred (e.g. at Centennial Park West area, next to the restrooms). Include the last known direction that the suspicious person was headed.
- Who - Give a full description, if possible of the person, people, or vehicles involved. Include as many details as possible - age, height, weight, hair color / style, clothing, identifiable marks, race and sex. For vehicles, obtaining a license plate number is very helpful. In addition, also note the following: color of vehicle, condition and anything that may stand out like damage to the vehicle, stickers or other vehicle modifications.
- What - Focus on the behavior that raised your suspicion? Describe the potentially criminal or suspicious activity you observed or experienced - what the person was doing, what they said (if they spoke to you). Also report any weapons (e.g. gun, knife, bat, aggressive dog).
- When - Time of the incident or when the suspicious person or persons were observed.

## **SALUTE**

An easy way to remember what information is helpful when calling 911.

- S** - Size (Jot down the number of people, gender, ages and physical descriptions)
- A** - Activity (Describe exactly what they are doing)
- L** - Location (Provide exact location)
- U** - Uniform (Describe what they are wearing)
- T** - Time (Provide date, time and duration of activity)
- E** - Equipment (Describe vehicle, make, color, etc., license plate, or weapons)

## *Other Safety Tips*

- Let children know, that it's OK to yell, or scream at an unknown person if they feel scared.
- Try making a group code word (e.g. "I want ice cream!") to let your staff know that something isn't right.
- Ensure your staff always carries cell phones to immediately call for assistance. If their cell phone has a camera, take a picture to report a suspicious vehicle or person.
- Let campers know whom they can talk to if they feel unsafe. (Ensure your staff is clearly identifiable.)
- Be visible to parents and spectators.
- The most important thing is to be observant.
- Don't become a victim, be a good witness.
- If you see something, say something.

## Responding to Emergency Threats

Outside of planning for the natural disasters- hurricanes, earthquakes, floods and threatening human behavior, Recreation and Parks agencies are now preparing for terrorism, chemical hazards and the threat of weapons of mass destruction. These threats are real in today's world and given the close proximity our agency has the Washington DC and the Port of Baltimore, the potential for such an emergency is possible. This section is a guide for staff in responding to these threats.

In the immediate area of a threat event, you would need to rely on police, fire and other officials for instructions. This is known as Incident Command System (ICS).

This system responds to emergencies and is activated quickly. It will be your job to ensure specific information about your size of your group, location, medical needs and other important information be made available so that ICS can assist you getting out of the threat area, medical attention and so on.

### ***Terrorism***

Terrorism is the use of force or violence against persons or property in violation of the criminal laws of the United States for purposes of intimidation, coercion or ransom. Terrorists might target large public gatherings, water and food supplies, utilities, and corporate centers. You can prepare in much the same way you would prepare for other crisis events.

#### **Preparing for Terrorism**

- Wherever you are, be aware of your surroundings.
- Take precautions when traveling on field trips.
- Do not be afraid to move or leave if you feel uncomfortable or something does not seem right.
- Learn where emergency exits are located in buildings you frequent.
- Be familiar with different types of fire extinguishers and how to locate them.

### ***Bomb Threats***

If you receive a bomb threat, get as much information from the caller as possible.

- Ask:
  - When is it going to explode?
  - Where is it located?
  - Would you describe it?
  - What kind of device is it?
  - Did you place it? Why?
  - What is your name and address?
- Write down as much information as you can and the exact words.
- Try describing the caller's voice.
- Listen and list any background sounds you can recognize.
  - Keep the caller on the line and record everything that is said.
  - Then notify the police and the location management.

If you are notified of a bomb threat, do not touch any suspicious packages.

- Clear the area around suspicious packages and notify the police immediately.
- DO NOT go near it, attempt to open it, or move it.
- Call 911 immediately and report the incident to Police.
- Pull the Emergency Alarm. If the package in question is located in the exit access route, direct employees to an alternate exit. If other exits may lead employees into the area, have someone station themselves at that exit to direct employees to another exit.

### ***Suspicious Parcels and Letters***

Be wary of suspicious packages and letters. They can contain explosives, chemical or biological agents. Be particularly cautious at your place of employment. Don't touch suspicious envelopes or packages in a plastic bag or some other type of container to prevent leakage of contents. Never sniff or smell suspect mail.

### ***What To Do If There Is an Explosion***

Leave the building as quickly as possible. Do not stop to retrieve personal possessions or make phone calls. If things are falling around you, get under a sturdy table or desk until they stop falling. Then leave quickly, watching for weakened floors and stairs and falling debris as you exit.

- If there is a fire:
  - Stay low to the floor and exit the building as quickly as possible.
  - Cover your nose and mouth with a wet cloth.

### ***Chemical and Biological Weapons***

In case of a chemical or biological weapon attack near you, authorities will instruct you on the best course of action. This may be to evacuate the area immediately, to seek shelter at a designated location, or to take immediate shelter where you are, and then seal the premises. The best way to protect yourself is to take emergency preparedness measures ahead of time and to get medical attention as soon as possible, if needed.

### ***Nuclear and Radiological Attack***

Nuclear explosions can cause deadly effects – blinding light, intense heat (thermal radiation), initial nuclear radiation, blast, first started by the heat pulse, and secondary fires caused by the destruction. They also produce radioactive particles called fallout that can be carried by wind for hundreds of miles.

*(Taken from FEMA “Are you Ready”)*

## **General Security Plan – Abridged Version**

### ***Warehouse***

The warehouse located at 7120 Oakland Mills Road, Columbia, MD is on a 9 master key system that is separate from all other parts of our Department complex. Along with the key system, we have a 24-hour silent alarm system that is monitored by Central Communications.

### ***Main Office Complex***

The main office complex is also located at 7120 Oakland Mills Road, Columbia, MD. The complex is on a 6 master key system. The building is protected by a 24-hour silent alarm system with both motion and contact sensors to recent intrusion. Like the warehouse, it is connected to Central Communications. The complex also has security cameras located throughout for added protection.

### ***Park Security***

Specific procedures are followed for opening and closing of the Department’s regional parks. The majority of regional parks have lighted fields so staff is on site until 11pm to monitor activities. Incident reports are filled out for all situations of vandalism within all regional, community, and neighborhood parks.

### ***Park Ranger Program***

The Bureau of Parks has twelve Park Rangers. Their main function is the regulation enforcement for Recreation and Parks for active and passive parkland.

### ***Athletic Complex***

The Department of Recreation and Parks has one athletic complex, the Meadowbrook Athletic Complex. The athletic complex is on an alarm system by contacts linked directly to Central Communications.

### ***Community Centers***

The Department of Recreation and Parks has three community centers: Roger Carter Community Center, Gary J. Arthur Community Center at Glenwood and the North Laurel Community Center. All are on an alarm system by contacts linked directly to Central Communications.

### ***Kiwanis-Wallas Hall***

The Department of Recreation and Parks has one hall, the Kiwanis-Wallas Hall. The Kiwanis-Wallas Hall is on an alarm system by contacts linked directly to Central Communications.

### ***Nature Center***

The Department of Recreation and Parks has one nature center, Robinson Nature Center. The nature center is on an alarm system by contacts linked directly to Central Communications.

### ***Heritage Sites***

The Department of Recreation and Parks has 25 heritage sites. A few are on an alarm system linked directly to Central Communications. Contact Caitlin Chamberlain for specifics.

### ***Belmont Manor and Historic Park***

Belmont Manor is on an alarm system by contacts linked directly to Central Communications. Contact Facility Manager for specifics.

### ***Special Events***

Recreation and Parks schedules multiple special events during the course of a year. Before each major event, the Program Supervisor files an Assembly Permit (when necessary) notifying the Howard County Police of dates, times, and number of people for our program. A security plan is then constructed by the Police Department for crowd control, street crossings, and general overall security.

### ***On-Call***

There are management staff within the Department who are on-call year round for situations and emergencies that involve Department facilities and programs outside of business hours. Typical emergencies that arise involve after hours security breaches of Department buildings, including the Department’s headquarters building. If you have a non 911 emergency and need assistance on-site, contact 410-313-2929 to locate the on-call supervisor for that week.

## **Risk Management Plan – Abridged Version**

It is the basic purpose of the Howard County Department of Recreation and Parks to establish, improve, manage, finance, operate, and maintain a comprehensive recreation and park system. We are committed to a philosophy that will provide these services at the highest level possible. We pledge our support to using only qualified and trained leaders in accord with the best and most reasonable standard of care possible. To that end we endorse the establishment and maintenance of an extensive Risk Management Plan to manage risk safely within the organization without compromising the quality of the recreational experience.

### **1. Purpose of the Risk Management Plan**

- a. Identify safety related issues and concerns that could impact employees and the public and present a reasoned course of action for their prevention or resolution.
- b. Coordinate a multidisciplinary approach to planning and delivery of services with visitor safety in mind.
- c. Establish an ongoing organizational structure for decision making to minimize risk for activities, and keep all stakeholders actively involved.
- d. Evaluate and monitor existing measures for effectiveness and efficiency.
- e. Identify service delivery mechanisms, costs and opportunities for cost savings.

### **2. Stakeholders**

- a. Contractors
- b. Permanent Employees and Contingent Staff
- c. Concessionaires and Other Contractors
- d. Emergency Response Agencies
- e. Local Employers
- f. Recreation Clubs and Associations
- g. Other Government Agencies
- h. Public

### **3. Guiding Principles**

- a. Recognize the importance of understanding the factors that contribute to risk exposure and analyze those factors within a risk assessment.
- b. Communicate information about visitor risks as well as effective safety measures to staff and the public.
- c. Share the responsibility for visitor safety among all staff and clearly define their respective roles and expectations.
- d. Encourage and explore partnerships with other agencies for the delivery of services with safety as a key element without compromising the quality of the recreational services offered to the public.
- e. Provide clients with quality prevention and response services that correspond with services delivered by similar recreation management agencies.
- f. Implement a comprehensive and structured safety and loss control program to reduce the frequency and severity of visitor accidents and employee injuries.
- g. Provide professional response to situations involving lost, trapped, injured or otherwise threatened visitors.
- h. Actively encourage and promote visitors to be self-reliant, commensurate with the degree of difficulty that they pursue as part of their recreation experience.
- i. Develop a visitor safety program that recognizes and supports other fundamental goals at the site, including enhancement of visitor experiences.
- j. Encourage consistency in applying loss control measures throughout similar settings within a site, or within a specific zone.
- k. The historic value of cultural resources shall not be diminished when public safety can be achieved by other means.
- l. Design and implement loss control measures that are effective and not a duplication of similar services.

#### 4. Methodology

##### a. Operational Policies

1. Park staff shall take a proactive approach to identifying hazards and the means to prevent damages and injuries.
2. Risk management programs for the safety of visitors shall be developed and implemented.
3. Consideration for safety of the public shall be built into the processes for planning and design of programs and facilities.
4. Priority is placed on prevention, education and information programs.
5. Visitors will be made aware of activity and situational risks and their responsibility for considering this information in planning their activities.
6. Park staff shall be trained to recognize, document and resolve any risk issue associated with sites to ensure that none are overlooked.

##### b. Safety Management for the Public

1. A high priority is placed on identification and prevention of accidents and injuries.
2. Park staff will provide visitors with the information they need to protect themselves and offer advice and warnings to park users
3. Park staff must anticipate mishaps ahead of time and take reasonable steps to prevent these events.

##### c. Responsibilities of Park Users

1. Assume a degree of responsibility for their own safety commensurate with the activities they undertake.
2. Be properly equipped and have levels of knowledge, skill and physical fitness required for chosen activities.
3. Be aware of and follow the rules.

##### d. Responsibilities of Managers/Staff

1. Place a high priority on providing comprehensive prevention programs to minimize the potential for accidents and injuries.
2. Inform and advise park users of risk reduction measures when selecting and planning recreational activities.
3. Consider visitor safety in the planning and delivery of programs.
4. Prepare a Risk Assessment based on an analysis of existing information and incorporate results into the park management planning process.
5. Maintain a record of the decisions to document how risk related issues are being addressed.
6. Develop a Safety Plan for employees and the public and update it annually.

##### e. Emergency Planning

1. Contingency or response planning shall be developed for all types of emergencies that may arise. The events or emergencies could be natural in origin (weather) and/or human-induced (chemical spills, fires, etc.).
2. Managers of individual areas must identify potential emergencies and organizations that may be required to respond and identify the types of cross section of potential emergencies.
3. The types of emergency plans required, depends on the potential events.

##### f. Visitor Management

1. The safety of the public demands that field staff understand the expected usage of the part and the types of activities that will occur there.
2. To effectively assess visitor risks, managers should draw from the practice of a "visitor management" approach to planning and service deliver that considers the visitor's needs, expectations and satisfaction including lack of experience or willingness to take some risks during his or her visit.
3. Visitor management offers insight on how best to manage settings, target the delivery of services and facilities and protect visitors from the unexpected hazards they may encounter.

# Camp Standards

## Howard County Recreation and Parks 2017 Camp Standards Inspection Report

Camp Name/Location \_\_\_\_\_ Staff Interviewed \_\_\_\_\_

Inspector's Name \_\_\_\_\_ 1<sup>st</sup> Insp. Date/Time \_\_\_\_\_ 2<sup>nd</sup> Insp. (If Appl.) Date/Time \_\_\_\_\_

Y = Yes | N = No | NA = Not Applicable | NO = Not Observed | Staff = Howard County R & P Employees and Contractual Personnel

### PERSONNEL

A min of 2 staff must be present at camps more than 150 minutes long at all times (2.01.5)	Y	N		
Staff meet age requirements (2.02.1-2.05)	Y	N		
At least two staff present at all times must have current CPR & First Aid certification (5.01.7)(5.01.8)	Y	N		
Staff Emergency Forms complete on all staff members and volunteers (5.01.11)	Y	N		

### FACILITY AND SITE

Appropriate space for type of activities (4.01.1)	Y	N		
Access to drinking facilities or drinking water (4.01.2)	Y	N		
Access to bathroom facilities (4.01.2)	Y	N		NO
Hand washing facilities in close proximity to bathroom areas (4.01.6)	Y	N		NO
Soap, paper towels/hand dryer or waterless hand sanitizer available (4.01.6)	Y	N		NO
Telephone/cell phone available for emergency use (4.01.8)	Y	N		
Visual Check performed for safety hazards (indoor & outdoor) (4.01.10)(4.01.13)	Y	N		NO
Staff monitors trash removal to ensure sanitary conditions (4.01.12)	Y	N		NO
Emergency numbers posted/accessible (5.01.2)	Y	N		
Guidelines posted/accessible for locating a missing child (4.01.9) (5.02)	Y	N		
Written emergency evacuation plan/Emergency Reference Sheet posted/accessible (4.01.7)	Y	N		

### HEALTH AND SAFETY

Participant Information Form complete on all children (5.01.16)(5.01.16.1)	Y	N	NA	NO
Emergency drill completed and documented once during each camp session (4.01.7)	Y	N	NA	NO
Attendance is taken daily; records maintained on site (5.01.16.2)	Y	N	NA	NO
Sign in and sign out procedures are in place (initials not accepted) (5.01.16)	Y	N	NA	NO
First Aid kit complete and available to all staff (5.01.9)	Y	N	NA	NO
Accident/Injuries recorded and kept in chronological file (5.01.4) (5.01.4.1)	Y	N	NA	NO
Children with significant health issues have detailed emergency plan (5.01.3)	Y	N	NA	NO
Medication stored in a locked container (5.01.6.2)	Y	N	NA	NO
Complete, written parent & physician authorization on medication administration form (5.01.6.1)	Y	N	NA	NO
Medication properly dispensed and recorded (5.01.6.3)	Y	N	NA	NO

### POLICIES REVIEWED/DISPLAYED IN STAFF / CONTRACTOR MANUAL

Staff receive information on signs/symptoms of rabies (5.01.12)	Y	N		
Staff receive information on recognizing allergic reactions (5.01.13)	Y	N		
Letter for parents stating no refrigeration available (3.01)	Y	N	NA	
Letter for public facilities documenting compliance with codes (4.01.2)	Y	N	NA	
Private systems meet local and state standards	Y	N	NA	
If received by Dept, Copy of DHMH Acceptance letter posted at each site or available upon request (4.01.14)	Y	N	NA	
Letter documenting Health Department's designee of a health officer (5.01.1)	Y	N		
Copy of DHMH Communicable Diseases Summary on site (5.01.15)	Y	N		

### ADDITIONAL PERSONNEL (ON SITE OR ON FILE AT RECREATION & PARKS HEADQUARTERS)

Proof of CBC and CPS background clearance on file for all payroll staff (2.01.1) (2.01.8)	Y	N	NA	
Contractual Service Providers must provide proof of CBC onsite (2.01.1)	Y	N	NA	
Certified copy of driving record on file for all van drivers (2.01.4)	Y	N	NA	
Registry ID cards displayed for HCRP Sports Camps Directors (2.01.7)	Y	N	NA	

### MISCELLANEOUS

Water Safety: Swimming instructors possess formal training (6.03.1.1)	Y	N	NA	
Water Safety: Appropriate ratio (1 to 25) is kept for all swimmers (6.03.1.2)	Y	N	NA	
Water Safety: Rescue equipment available if needed (6.02.2)	Y	N	NA	

### ADDITIONAL COMMENTS/DISCUSSION

ALL STANDARDS MET ON: \_\_\_\_\_

Date / Time

White Copy: Supervisor

Yellow Copy: Site

Pink Copy: Inspector

## RELEVANT CAMP STANDARDS FROM INSPECTION REPORT

- 2.01.1 Program Supervisors must have criminal background check on file for all HCRP camp employees. All contractual agreements must include the family law act verbiage requiring criminal background checks on their staff per Family Law Article 5-550-5-559.
- 2.01.4 Staff assigned to drive a county vehicle and / or passenger van must have a certified copy of their driving record on file. Staff must have successfully completed HCRP Driver's training. Documentation to be kept on file.
- 2.01.7 HCRP Sport Camp directors and leadership staff must be members of the Coaches and Administrators Registry.
- 2.01.8 Background Clearance Request Form (DHR/SSA 1270) from Child Protective Services (CPS) must be completed, signed and notarized for all HCRP Camp Employees- Will be kept on file at the main office.
- 2.01.5 A minimum of two staff must be present at all times and every camp at camps more than 150 minutes long.
- 2.02.1 Camp Director must be at least 20 years old and must have a minimum of high school diploma or GED and experience working with either the age group specified or the activity specified. Must also possess overall knowledge of activities being offered at the camp (i.e. arts, crafts, nature, sports, wilderness related activities). Specific information should be verified through application, interview and/or resume.
- 2.03.1 Camp Specialty Instructor must be at least 18 years old and must have documented experience indicating knowledge and skill in teaching and supervision specific to the activity conducted.
- 2.04.1 Camp Leader must be at least 18 years old or high school graduate and must have experience with children, and possess knowledge in activities being offered at the camp.
- 2.05 HCRP Camp Aide Qualifications must be at least 16 years old and prefer aide to have experience working with children in either paid or volunteer position.
- 3.01 Campers when and where applicable are instructed to bring a non-perishable lunch and drink. Refrigeration is not provided. Parent and guardians must be informed through camp literature that no refrigeration is available (if applicable).
- 4.01.1 Adequate facilities must be available and accessible to and for the program staff and participants. Actual program space is determined by the needs of the program.
- 4.01.2 Must have access to adequate bathroom facilities, adequate supplies and water fountains or drinking water. Evidence demonstrating that sites meet local water, sewage, electrical and fire safety codes must be on file.
- 4.01.6 Hand washing facilities should be in close proximity to bathroom areas and accessible to all children and staff. Soap and paper towels or hand dryer must also be available. Disposable washcloths and / or waterless hand sanitizers may be substituted for soap and towels in areas where formal bathroom facilities are not available
- 4.01.7 All camps must have a written emergency action plan and Emergency Reference sheet or have them easily accessible in offsite locations. The emergency action plan includes procedures for evacuating site; a designated meeting place; procedures for verifying location of all participants and a location where 911 emergency systems can be called The Emergency Quick Reference sheet further defines actions to take in the event of an earthquake, explosion, terrorism incident, tornado, severe winds, or other situations that may cause significant structural damage.. Each camp must conduct at least one emergency drill during each camp session with the date and time of the drill recorded on the evacuation plan. This plan needs to be in place the first day of camp.
- 4.01.8 A telephone or other means of communication is accessible in case of an emergency.
- 4.01.9 Must have in writing and posted (if applicable), guidelines to locate a missing or potentially lost child.
- 4.01.10 Visual check of indoor area must be conducted and problems reported to custodian, park manager, and/or Program Supervisor.
- 4.01.12 In all camp facilities, a daily visual inspection is to be conducted by the camp director to ensure that garbage and trash are being collected throughout the building. Any unsafe conditions or overflowing trash containers must be reported to appropriate staff.
- 4.01.13 Directors must conduct visual outdoor check to determine if safety hazards exist. In the event any hazards are discovered, the area will not be utilized until the hazard is corrected. To ensure that facilities are maintained to minimize the entry of insects, rodents and other vermin, a daily visual inspection is to be conducted by the camp director / contractor. Any unsafe conditions are to be reported to the Program Supervisor.
- 4.01.14 If received by Department, Directors must post the Department of Health & Mental Hygiene's Acceptance letter at each site. For outdoor or travel camps, the letter must be presented upon request (if available)
- 5.01.1 Howard County Health Officer will serve as the camp health supervisor and be available throughout the summer for consultation. A letter asking for their review of the standards and acknowledging that HCRP will utilize their office for consultation on health matters will be documented on site.
- 5.01.2 Phone numbers for Emergency Medical Services, Child Protective Services and Animal Control should be posted or easily accessible to staff.
- 5.01.3 Each camper with significant health issues as identified by parent/guardian shall have written details of care or emergency procedure on site.
- 5.01.4 All injuries/accidents must be recorded on the Department's accident/injury form.
- 5.01.4.1 One copy of each form shall be maintained on site number and in chronological order by the date and time of the occurrence in a file labeled "Injuries/Accidents".
- 5.01.6.1 Parent, guardian and physician signatures are required for the dispensing of either prescribed or non-prescription medications.
- 5.01.6.2 Appropriate secured storage of all medication unless authorized for both self-administration and self-carry.
- 5.01.6.3 Maintain daily records of distribution for each child-indicating time and who dispensed (Medication Order Form).
- 5.01.7 Each camp shall have at least two staff member present at all times certified in CPR by an approved authority (Red Cross, National Safety Council, American Heart Association). Documentation in program supervisor's file at office.
- 5.01.8 Each camp shall have at least two staff member present at all times certified in First Aid by an approved authority (Red Cross, National Safety Council, etc.). Documentation in program supervisor's file at office.
- 5.01.9 Each camp must have access to a first aid kit. This kit includes, but is not limited to, latex gloves, ice pack, gauze, band-aids, tape, and other items deemed necessary by the Program Supervisor.
- 5.01.11 Emergency contact and medical information must be maintained on site for all camp staff and volunteers.
- 5.01.12 Camp staff will receive information on recognizing signs and symptoms of rabies and understand precautions to take in the event staff encounters an animal showing sign of rabies.
- 5.01.12.1 Staff will report the presence of any stray animals to Animal Control.
- 5.01.12.2 Staff will immediately report any animal bites to the Howard County Health Department at 410-313-1773.
- 5.01.12.3 Camp operators must ensure that all cats and dogs on site have a current rabies vaccination.
- 5.01.13 Camp staff will receive information on recognizing allergic reactions and understand precautions to take in the event staff encounters an allergic reaction situation.
- 5.01.15 A copy of the Maryland Department of Health and Mental Hygiene's, November 2011 *Communicable Disease Summary: Guide for Schools, Child Care and Youth Camps* will be located at each site for more details concerning the communicable diseases listed above. Follow the specified exclusion and control measures if you believe a camper is affected with a communicable disease to prevent the illness from being communicated to another.
- 5.01.16 All participants must be registered in the program. A Participant Information Form completed by the parents of all campers must be maintained on site before a camper can participate in activities. This form must include:
  - 5.01.16.1 Camper's name, address, age, telephone numbers for parent or guardian, school name (if any), state of residency, and program name; Name and phone number of primary care physician; Any chronic / special health issues or special accommodations requested such as interpreter, companion for individual with disability; verification by school attendance or parental verification that all immunizations are up to date.
  - 5.01.16.2 Each camp shall maintain a daily attendance record. Parents/guardian or authorized person must sign in and sign out campers every day. Authorized person must show government or school-issued identification when picking up camper. Written authorization must be provided by parent/guardian if camper is to leave program early. Signatures are required (initials not accepted) of the parent/guardian/family friend that is authorized to pick up a child early.
- 5.02 Locating a Lost Child
  - 6.03.1.1 When swimming instruction is given, an instructor who possesses the training and experience as stated in Regulation .3B(12) is on duty at the swimming site
  - 6.03.1.2 The minimum number of staff on duty during swimming activities at a swimming site is at least two individuals
  - 6.02.2 First Aid and rescue equipment is available for all aquatic programs

# CAMP STANDARDS 2017

## HOWARD COUNTY DEPARTMENT OF RECREATION & PARKS

### 1.00 Scope

- 1.01 These standards include required health and safety guidelines for all Howard County Department of Recreation and Parks non-OCC (Office of Childcare) licensed summer camp activities.
- 1.02 The Howard County Department of Recreation and Parks offers camp programs through two means, “HCRP Camps” and “Contractual Camps”.
- 1.03 The term “HCRP Camps” refers to programs offered by the Department using Howard County contingent employees. These employees are trained each summer using the Department’s Summer Staff Manual as an important source of departmental policies, procedures, and other important information.
- 1.04 The term “Contractual camps” refers to programs offered by the individuals or business entities operating camps through Howard County Recreation and Parks Camp Service Agreement. These contractors receive the Department’s Summer Contractor Manual, an important source of Departmental policies, procedures and other important information.
- 1.05 The Department has a Camp Standards Inspection Form to be utilized by program supervisors and State inspectors when visiting a program for compliance.
- 1.06 The “Program Supervisor” is the Howard County Recreation & Parks professional staff responsible for the operations of a specific camp or group of camps.
- 1.07 The “Personnel Administrator” is the Howard County Recreation & Parks professional staff responsible for maintaining background clearance documentation.
- 1.08 Inspections will include an office visit with the Program Supervisor and an onsite visit to the program.

### 2 Staffing Requirements

#### 2.01 General Requirements.

- 2.01.1 Program Supervisors must have criminal background check on file for all HCRP camp employees at the main office. All contractual agreements must include the family law act verbiage requiring criminal background checks of their staff per Family Law Article, 5-550-5-559. Contractual service providers must have results of Criminal Background Check onsite for their onsite staff.
- 2.01.2 All contract agreements and employee paperwork will be maintained at main office.
- 2.01.3 Contract agreements require vendors to use qualified and competent staff. The Program Supervisor may specify a minimum age requirement for a Camp Director.
- 2.01.4 Staff assigned to drive a county vehicle and / or passenger van must have a certified copy of their driving record on file. Staff must have successfully completed HCRP Driver’s training. Documentation to be kept on file.
- 2.01.5 A minimum of two staff must be present at all times and every camp. For optimal custodial care during emergencies, a minimum of two staff must be present at all times for camps that meet for more than 150 consecutive minutes per day unless the location / facility is designed specifically for the activity where there is other activity occurring simultaneously where other adult staff is readily available to assist in an emergency (examples include the Columbia Gymnastics and Timbers of Troy Golf Course). Program Supervisors / Coordinators wishing to seek this exception must obtain a written statement from the facility / location manager accepting this option. This

statement must be reviewed and approved by the Division Superintendent. Companions cannot be included in above requirement of two staff.

2.01.6 Volunteer leaders must be a minimum of 13 years of age. Participant information, including emergency contact information for each volunteer must be maintained on site.

2.01.7 HCRP Sport Camp directors and leadership staff must be members of the Coaches and Administrators Registry.

2.01.8 Background Clearance Request Form (DHR/SSA 1270) from Child Protective Services (CPS) must be completed, signed and notarized for all HCRP Camp employees. After completion, the form will be sent to the Department of Human Resources, In-Home Services, Social Services Administration, 311 W Saratoga Street, Room 553, Baltimore, MD 21201. Copies of the forms submitted to Child Protective Services indicating the background clearance as well as results of the clearance will be kept on file at the main office.

2.02 HCRP Camp Director Qualifications: The Director assumes overall responsibility of the camp.

2.02.1 Must be at least 20 years old and must have a minimum of high school diploma or GED and experience working with either the age group specified or the activity specified. Must also possess overall knowledge of activities being offered at the camp (i.e. arts, crafts, nature, sports, wilderness related activities). Specific information should be verified through application, interview and/or resume.

2.02.2 Prefer director to have courses or training in related fields such as recreation, education, child development, special education, psychology, outdoor education, therapeutic recreation, or fields related to camp content.

2.03 HCRP Camp Specialty Instructor Qualifications

2.03.1 Must be at least 18 years old and must have documented experience indicating knowledge and skill in teaching and supervision specific to the activity conducted.

2.03.2 Specialized instructors must possess written proof of formal training in the designated activity, such as instructor's certificate, a transcript, a certificate of proficiency or a letter of reference from a national organization, school or certified instructor.

2.04 HCRP Camp Leader Qualifications

2.04.1 Must be at least 18 years old or high school graduate and must have experience with children, and possess knowledge in activities being offered at the camp.

2.05 HCRP Camp Aide Qualifications must be at least 16 years old and prefer aide to have experience working with children in either paid or volunteer position.

### 3 Food Service

3.01 Campers when and where applicable are instructed to bring a non-perishable lunch and drink. Refrigeration is not provided. Parent and guardians must be informed through camp literature that no refrigeration is available (if applicable).

3.02 Outdoor sites will provide a shaded area for lunches.

3.03 No peanut or nut products may be brought to camp. The Program Supervisor may make an exception for a specific camp session if the camp director can demonstrate that no campers, staff or volunteers have a peanut allergy. The snack policy printed in the camp guide states, "Most of our activities request that you supply a snack for your child. Due to health concerns, nut products are not served or permitted."

### 4 Facility / Site Requirements

4.01 Department programs may be offered in indoor and/or outdoor locations.

4.01.1 Adequate facilities must be available and accessible to and for the program staff and participants. Actual program space is determined by the needs of the program.

- 4.01.2 Must have access to adequate bathroom facilities, adequate supplies and water fountains or drinking water. Evidence demonstrating that sites meet local water, sewage, electrical and fire safety codes must be on file.
- 4.01.3 The Bureau Chief of Recreation will send a letter to the Bureau of Parks and Howard County Public Schools informing both that their sites for camps must meet the local regulations of the following codes (the water supply, sewage disposal systems, fire codes and electrical systems); if they do not, they must notify the Department. Documentation on site.
- 4.01.4 The Program Supervisor using other locations that use private water and sewage systems must provide evidence that systems meet local and state standards (Documentation must be on site). In addition, camps using other locations than schools or parks must provide evidence that all fire safety and electrical codes are in compliance with local regulations. Documentation on site.
- 4.01.5 Camps using portable solutions for water and sewage must use a vendor approved by the Office of Purchasing.
- 4.01.6 Hand washing facilities should be in close proximity to bathroom areas and accessible to all children and staff. Soap and paper towels or hand dryer must also be available. Disposable washcloths and / or waterless hand sanitizers may be substituted for soap and towels in areas where formal bathroom facilities are not available.
- 4.01.7 All Camps must have a written emergency action plan and Emergency Reference sheet or have them easily accessible in offsite locations. The emergency action plan includes procedures for evacuating site; a designated meeting place; procedures for verifying location of all participants and a location where 911 emergency systems can be called The Emergency Quick Reference sheet further defines actions to take in the event of an earthquake, explosion, terrorism incident, tornado, severe winds, or other situations that may cause significant structural damage. Each camp must conduct at least one emergency drill during each camp session with the date and time of the drill recorded on the evacuation plan. This plan needs to be in place the first day of camp.
- 4.01.8 A telephone or other means of communication is accessible in case of an emergency.
- 4.01.9 Must have in writing and posted (if applicable), guidelines to locate a missing or potentially lost child (located in section 5.02 below).
- 4.01.10 Visual check of indoor area must be conducted and problems reported to custodian, park manager, and/or Program Supervisor.
- 4.01.11 In the event a camp meets at a park facility, the campers must have access to covered shelter in case of inclement weather. If necessary, children will be bussed to an inclement weather shelter as determined by the Camp Director and Program Supervisor.
- 4.01.12 In all camp facilities, a daily visual inspection is to be conducted by the camp director to ensure that garbage and trash are being collected throughout the building. Any unsafe conditions or overflowing trash containers must be reported to appropriate staff.
- 4.01.13 Directors must conduct visual outdoor check to determine if safety hazards exist. In the event any hazards are discovered, the area will not be utilized until the hazard is corrected. To ensure that facilities are maintained to minimize the entry of insects, rodents and other vermin, a daily visual inspection is to be conducted by the camp director / contractor. Any unsafe conditions are to be reported to the Program Supervisor.
- 4.01.14 If received by the Department, Directors must post the Department of Health & Mental Hygiene's Acceptance letter at each site. For outdoor or travel camps, the letter must be presented upon request.

## 5 Health and Safety Requirements

### 5.01 The health and safety program includes:

- 5.01.1 The Howard County Health Officer or designee will serve as the camp health supervisor and be available throughout the camp for consultation. The Recreation Bureau Chief or designee will forward the camp standards and a cover letter to the Howard County Health Officer asking for their review of the standards and acknowledging that Howard County Recreation and Parks will utilize their office for consultation on health matters throughout the camp season. Documentation of this letter is to be kept on site.
- 5.01.2 Phone numbers for Emergency Medical Services, Child Protective Services and Animal Control should be posted or easily accessible to staff

- 5.01.3 Each camper with significant health issues as identified by parent/guardian shall have written details of care or emergency procedure on site.
- 5.01.4 All injuries / accidents must be recorded on the Department's incident report/participant accident/injury form.
- 5.01.4.1 One copy of each form shall be maintained on site number and in chronological order by the date and time of the occurrence in a file labeled "Injuries/Accidents".
  - 5.01.4.2 Injuries or illness requiring professional medical attention (Care by a physician, dentist or nurse; treatment, laboratory analysis or x-ray; or admission to a medical facility) must be reported to the Program Supervisor as soon as possible, no later than one hour from the incident. If the Program Supervisor is unavailable, camp staff will contact the main office, Recreation Superintendent or Bureau Chief.
  - 5.01.4.3 The Accident/Injury report form must be completed and submitted to HCRP office as soon as possible, no later than 24 hours after the incident.
  - 5.01.4.4 Upon review of the report by Recreation and Park officials; Recreation and Park officials must fax copy to the Office of Risk Management.
  - 5.01.4.5 Reports for minor injuries (those treated with band-aids, water, icepacks, etc.) will be submitted to the office no later than two weeks from the injury or illness.
  - 5.01.4.6 Accident Injury Files will be maintained at the main office for a minimum of three years.
  - 5.01.4.7 Any injury or illness which results in death or which requires CPR or admission to a hospital, or an illness suspected by a physician to present a danger to other participants, must be reported to the Department of Health & Mental Hygiene at 410-767-8417 (8 a.m.-5 p.m.) verbally within 24 hours of the incident and in writing within one week. These types of occurrences must be reported to the Department Headquarters immediately at 410-313-4640 during normal working hours and to Division Superintendents and supervisors after normal working hours. Injury treated at off-site medical facility with positive diagnosis or medication error must be submitted to DHMH within four weeks.
- 5.01.5 A written plan of action in case of serious accident/injury/illness.
- 5.01.6 Medication Policy:
- 5.01.6.1 Parent, guardian and physician signatures are required for the dispensing of either prescribed or non-prescription medications.
  - 5.01.6.2 Appropriate secured storage of all medication unless authorized for both self-administration and self-carry.
  - 5.01.6.3 Maintain daily records of distribution for each child indicating time and the printed name of the staff member who dispensed (Medication Authorization Form).
  - 5.01.6.4 Medication must be in childproof container, which includes pharmacy label (drug name) indicating prescription number, date filled, expiration date, physician's name, patient's name and clear concise directions for taking medication. Contraindications should be noted on prescription container.
  - 5.01.6.5 Children requiring emergency medication (i.e. inhalants for asthma, EPI-Pen for bee stings) may self-administer and self carry. The Medical Authorization for Self Carry section (section III) of the medical authorization form must be completed and signed by both parent and prescriber. Note: if participant is unable to self-administer, camp staff will assist as needed and should be familiar with the process and also know who has authorization to self carry.
  - 5.01.6.6 All medication must be returned to the parent/guardian or be disposed of properly at the conclusion of the program.
- 5.01.7 Each camp shall have at least two staff members present at all times certified in CPR by an approved authority (Red Cross, National Safety Council, American Heart Association). For programs with one staff per 2.01.5, one staff member with CPR is required. Documentation in program supervisor's file at office.
- 5.01.8 Each camp shall have at least two staff members present at all times certified in First Aid by an approved authority (Red Cross, National Safety Council, etc.). For programs with one staff per 2.01.5, one staff member with CPR is required. Documentation in program supervisor's file at office.

- 5.01.9 Each camp must have access to a first aid kit. This kit includes, but is not limited to, latex-free gloves (vinyl, nitro, etc.), ice pack, gauze, band-aids, tape, and other items deemed necessary by the Program Supervisor.
- 5.01.10 Children's medical files are confidential and are not to be released to anyone other than Emergency Medical Personnel, parents/guardian or Dept. of Recreation & Parks professional staff.
- 5.01.11 Emergency contact and medical information must be maintained on site for all camp staff and volunteers.
- 5.01.12 Camp staff will receive information on recognizing signs and symptoms of rabies and understand precautions to take in the event staff encounters an animal showing sign of rabies.
- 5.01.12.1 Staff will report the presence any stray animals to Animal Control.
- 5.01.12.2 Staff will immediately report any animal bites to the Howard County Health Department at 410-313-1773.
- 5.01.12.3 Camp operators must ensure that all cats and dogs on site have a current rabies vaccination.
- 5.01.13 Camp staff will receive information on recognizing allergic reactions and understand precautions to take in the event staff encounters an allergic reaction situation.
- 5.01.14 Below is a listing of Communicable Diseases per the Maryland Department of Health and Mental Hygiene's, November 2011 *Communicable Disease Summary: Guide for Schools, Child Care and Youth Camps*. Staff shall report the diseases that are marked with a "Yes" or "Yes-Immediately" to the Howard County Health Department ( 410-313-1412):

Communicable Disease	Contact Health Department (Yes/No/Immediately)
Bites, Animal	Yes – Immediately
Bites, Human	No
Chlamydia	Yes
CMV	No
Common Cold	No
Conjunctivitis Infectious	No
Diarrheal Illnesses:	
Unknown Cause	Yes (outbreak to be reported)
Campylobacter	Yes
E. Coli 0157	Yes
Giardia	Yes
Norovirus	Yes (outbreak to be reported)
Rotavirus	Yes (outbreak to be reported)
Salmonella	Yes
Shigella	Yes
Diphtheria	Yes – Immediately
Fifth Disease	Yes (outbreak to be reported)
Gonorrhea	Yes
Haemophilus Influenze type B (HIB) Disease*	Yes – Immediately
Hand, Foot and Mouth Disease (various Coxsackie- viruses)	Yes (outbreak to be reported)
Hepatitis A	Yes
Hepatitis B	Yes
Hepatitis C	Yes
Herpes Simplex Virus (cold sores, fever blisters, genital herpes sores, skin lesions)	Yes
HIV infection, includes AIDS	No
Influenza (Seasonal)	Yes (outbreak to be reported)
Impetigo	No

Communicable Disease	Contact Health Department (Yes/No/Immediately)
Roseola	Yes (outbreak to be reported)
RSV	Yes (outbreak to be reported)
Rubella (German Measles)	Yes – Immediately
Scabies	Yes (outbreak to be reported)
Staphylococcal Infection (“Staph”, Impetigo)	Yes (outbreak to be reported)
Streptococcal Infection (Strep Throat, Scarlet Fever, Impetigo)	Yes (outbreak to be reported)
Syphilis	Yes
Tickborne Illnesses (Anaplasmosis, Ehrlichiosis, Lyme Disease, Rocky Mountain Spotted Fever, etc.)	Yes
Tuberculosis (TB)	Yes – Immediately
Typhoid Fever	Yes – Immediately
Varicella Zoster Virus: Chickenpox	Yes
Varicella Zoster Virus: Shingles	Yes
Lice	Yes (outbreak to be reported)
Measles (Rubeola)*	Yes – Immediately
Meningitis, Viral or Aseptic	Yes
Meningitis, Bacterial	Yes
Meningococcal Disease*	Yes – Immediately
Molluscum Contagiosum	Yes (outbreak to be reported)
Mononucleosis, Infectious	Yes (outbreak to be reported)
MUMPS	Yes
Pertussis (Whooping Cough)	Yes – Immediately
Pinworms	No
Pneumococcal Disease (Streptococcus pneumonia)	Yes
Polio	Yes - Immediately
Rabies (and Rabies Exposure)	Yes – Immediately (See 5.01.12)
Ringworm of Scalp	No
Ringworm of Skin or Body	No

5.01.15 A copy of the Maryland Department of Health and Mental Hygiene’s, November 2011 *Communicable Disease Summary: Guide for Schools, Child Care and Youth Camps* will be located at each site for more details concerning the communicable diseases listed above. Follow the specified exclusion and control measures if you believe a camper is affected with a communicable disease to prevent the illness from being communicated to another.

5.01.16 All participants must be registered in the program. A Participant Information Form completed by the parents of all campers must be maintained on site before a camper can participate in activities. This form must include:

5.01.16.1 Camper's name, address, age, telephone numbers for parent or guardian, school name (if any), state of residency, and program name; Name and phone number of primary care physician; Any chronic / special health issues or special accommodations requested such as interpreter, companion for individual with disability verification by school attendance or parental verification that all immunizations are up to date.

5.01.16.2 Each camp shall maintain a daily attendance record. Parents/guardian or authorized person must sign in and sign out campers every day. Authorized person must show government or school-issued photo identification when picking up camper. Written authorization must be provided by parent/guardian if camper is to leave program early. Signatures are required (initials not accepted) of the parent/guardian/family friend that is authorized to pick up a child early.

- 5.02.1 Lost Child is defined as a child who fails to report as required to a designated location, or when a child is reported lost by the group to whom he/she was assigned.
- 5.02.2 Procedures for location at a lost child as follows:
  - 5.02.2.1 The program director shall be notified immediately.
  - 5.02.2.2 Conduct a brief, five-minute search to include the bathroom areas, parking lots and playground areas; *however, a staff member must be assigned to remain with the other children during the initial search.* Every effort should be made to check all areas quickly and should include calling out the child's name and using signaling device (certain adventure programs). Ask campers and staff where and when the child was last seen. Check back with the group. Depending on the type of camp and the size of the staff, an outside search can be conducted simultaneously.
  - 5.02.2.3 After 5 minutes, contact in the following order: 1) the local police/park rangers/security; 2) the Superintendent or designee at 410-313-4620 or 410-313-4645 or 410-313-1679 during office hours (8:00 AM – 5:00 PM) or Manager/Superintendent from staff list in manual if after 5:00 PM or before 8:00 AM; 3) the parent/guardian (should be contacted by director on site).
  - 5.02.2.4 The program director or highest ranking staff shall be the staff member who speaks with the police at the scene unless another staff member has additional information relating to the child. The police will then take over the search.
- 5.02.3 Within 24 hours or after the child is located (whichever occurs first), an Incident Report MUST be completed and submitted to the Superintendent's Office. The Department Director or his designee will handle any inquiries from the media. If during normal working hours, the Superintendent and/or Bureau Chief should call the Office of Risk Management to let them know of the incident (Lynne Levin, 410-313-6396) (immediately if possible)
- 5.02.4 The lead staff (Recreation or Program Manager) on the incident should create a Time Line (below) with a detailed account documenting information pertinent to the incident and submit it to the Division Superintendent and Bureau Chief within 48 hours.  
The time line should contain the following: 1) Time of child lost; 2) time of notifying on-site director; 3) time of notifying police; 4) time of notifying main office; 5) length of time child missing; 6) notification of parent/guardian; 7) who reached parent/guardian and took lead; 8) time of notification of Office of Director and Bureau Chief (if went beyond 5 minute mark); and, 9) notification of phone call to Risk Management to inform of coming paperwork. Incident Report completed and submitted to Recreation or Program Manager/Program Supervisor within 24 hours.
- 5.02.5 The Recreation or Program Manager will contact the parent/guardian later in the evening and the next day for follow-up. Division Superintendent, Bureau Chief, and Director of the Department may also contact parent/guardian depending on the situation.

## 6 Aquatic Programs

- 6.01 A pool operator shall ensure that:
  - 6.01.1 A director / leader is present at a camp during hours of operation.
  - 6.01.2 Before participating in water activities, a camper is evaluated and classified as to swimming ability and other appropriate aquatic skills and assigned to areas, equipment, facilities, and activities commensurate with the camper's abilities.
  - 6.01.3 Water activity equipment and facilities are maintained in good working condition; and,
  - 6.01.4 A safety system is in effect that enables guards to account quickly for all campers during all water activities.
- 6.02 Emergency and First Aid
  - 6.02.1 Post in a conspicuous place a list of emergency procedures and if a phone is provided, a list of emergency telephone numbers; and
  - 6.02.2 Provide first aid and rescue equipment.
- 6.03 Swimming
  - 6.03.1 A pool operator shall ensure that:
    - 6.03.1.1 When swimming instruction is given, an instructor who possesses the training and experience as stated in Regulation.03B(12) is on duty at the swimming site; and

6.03.1.2 The minimum number of staff on duty during swimming activities at a swimming site is at least two individuals who are:

- 6.03.1.2.1 One advanced rescuer (i.e. lifeguard) who is Red Cross, Boy Scouts, or YMCA certified of their equivalent, for each 25 swimmers or fewer in the water,
- 6.03.1.2.2 One designated watcher for each 25 swimmers or fewer in the water,
- 6.03.1.2.3 One certified pool operator who meets the requirements of COMAR 10.17.04.01H, who may be one of the personnel required above and who is not required at natural bathing areas,
- 6.03.1.2.4 Two individuals certified in first aid and CPR and who may be any of the above, and
- 6.03.1.2.5 One counselor or assistant counselor for each 10 individuals or fewer and who may be any of the above.
- 6.03.1.2.6 Pool and Equipment. An operator shall ensure that the swimming pool facility and equipment meets the requirements of COMAR 10.17.01 and are maintained in good condition.

6.03.1.3 For a youth camp that has natural diving and swimming areas, the Department shall select areas that have an up-to-date permit per COMAR 26.08.09.

6.04 Activities Involving the Use of Watercraft. An operator shall ensure that:

- 6.04.1 Watercraft is equipped with U.S. Coast Guard approved personal flotation devices of Types I, II, or III, as prescribed for the specific type of craft and number and age of occupants;
- 6.04.2 An occupant of a watercraft wears a U.S. Coast Guard approved personal flotation device;
- 6.04.3 An individual using a watercraft has been given training in boarding, debarking, and safety procedures for the craft;
- 6.04.4 An instructor as defined in 2.03 is present during the activity;
- 6.04.5 An individual holding certification in first aid and CPR is present during each water activity
- 6.04.6 A counselor or an assistant counselor is on duty for each 10 campers or fewer and who may be any of the above.

## 7 Specialized Camps

7.01 Specialized camps offering such activities such as rock climbing, tubing, archery, biking, etc. will follow safety procedures outlined in the Adventure Camp Staff Manual.

The above listed guidelines are minimum standards. It is our philosophy to continually strive to offer the highest quality program possible as well as go beyond the minimum standards to maximize the experiences.



# Howard County

## RECREATION & PARKS

7120 Oakland Mills Road, Columbia, Maryland 21046

Laura T. Wetherald  
Bureau Chief of Recreation  
lwetherald@howardcountymd.gov

Phone: 410-313-4640 Fax: 410-313-1699  
www.howardcountymd.gov/rap Voice/Relay: 410-313-7275

***SUBJECT: 2017 Health Officer Memorandum***

DATE: May 5, 2017

TO: Dr. Maura J. Rossman, Director  
Community Health

FROM: Laura T. Wetherald, Chief  
Bureau of Recreation

Attached is our 2017 Summer Camp Staff Manual along with a copy of our camp standards. The combination of this manual, the 2017 Camp Standards, and our extensive summer staff training properly prepares staff to handle camp issues throughout the summer.

Please note that we have continued our practice (per 5.01.1 of the 2017 Camp Standards) to mention your office as our camp health officer. This practice has worked very well in the past and assures that this department can provide the safest possible camps from a health perspective. The phone number of your office will be posted in the inside front of the manual and at sites where possible.

Please feel free to contact me at 410-313-4661 if you have any questions, concerns or comments regarding either the standards or the manual.

cc: John Byrd  
John Marshall  
Allan Harden  
Phil Bryan  
Nicola Morgal  
Dan McNamara  
Karen Potter  
File

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# Howard County

## RECREATION & PARKS

***SUBJECT: Verification of Local Standards Compliance for 2017 Camps***

**TO:** John Marshall, Chief  
Bureau of Parks

Larry Phillips, Manager of Custodial Services  
Howard County Public Schools

**FROM:** Laura Wetherald, Chief  
Bureau of Recreation

**DATE:** May 12, 2017

Howard County is again excited to provide quality summer recreation to over 8,000 youngsters in a variety of camp settings. To assure the health and safety of the 8,000 plus children attending our camps this summer, Howard County with help from the local health department has set minimum standards for all camp programs. Among these standards is the requirement that all water supply, sewer disposal, fire and electrical systems meet all local regulations.

Since your operations are open year round, we would assume that all systems are regularly checked to assure local regulations are met. At this time, we are asking you to inform us of any contradictions that would make specific parks or school locations ineligible for a camp.

Please reply, in writing to the address below by May 12, 2017 of any possible program locations that do not meet local regulations. Otherwise, the Bureaus of the Department assume that all locations under your domain meet these standards. In addition, during the summer period, we ask that you notify us immediately of any changes that would result in unsanitary conditions for our camps.

Thank you for your cooperation on this child safety matter. Please feel free to contact me at 410-313-4661 if you have any questions.

cc: John Byrd  
Allan Harden  
Phil Bryan  
Nicola Morgal  
Dan McNamara  
Karen Potter  
Dave Brown

LTW/ld

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## Howard County Workplace Harassment Policy

The County is committed to maintaining a work environment in which all individuals are treated with respect and dignity. Employees have the right to work in an atmosphere which promotes equal opportunities and prohibits discriminatory practices, including harassment.

Harassment, whether verbal, physical, non-verbal or visual, arising in County owned facilities, at work assignments outside of County owned facilities, or at County sponsored or endorsed functions, including social functions, is unacceptable and will not be tolerated. Such harassment is also illegal. Normal, courteous, mutually respectful, non-coercive interaction between employees that is acceptable to and welcomed by both parties, however, is not to be considered harassment under the terms of this policy.

**The County encourages employees to promptly report all information concerning workplace harassment without regard to the identity of the harasser or victim. The County is committed to promptly and thoroughly investigating all complaints of harassment and to taking prompt and effective remedial action to stop such conduct from occurring.**

### DEFINITIONS

#### Workplace Harassment

Workplace harassment consists of unwelcome conduct that is based on an individual's status (such as race, creed, religion, physical or mental disability, color, sex, national origin, age, occupation, marital status, political opinion, sexual orientation, gender identity, personal appearance, familial status, or any other group status), and that results in a tangible employment action, or is severe or pervasive enough that it unreasonably interferes with an individual's work performance or otherwise creates an intimidating, coercive, hostile, or offensive working environment.

#### Sexual Harassment

Sexual harassment is a specific type of workplace harassment that consists of behavior of a sexual nature which is not welcome or is personally offensive, and that debilitates morale and interferes with the work performance and effectiveness of its victims. Sexual harassment can occur between members of the same or opposite sex. Unwelcome or unwanted sexual advances, requests for sexual favors, and other verbal, physical or non-verbal visual conduct of a sexual nature constitute harassment when:

1. Submission to or rejection of this conduct is used explicitly or implicitly as a factor for decisions affecting hiring, evaluation, promotion or other tangible employment actions. This is sometimes referred to as "quid pro quo" harassment; or
2. Such conduct is severe or pervasive enough to interfere with an individual's work performance or otherwise render the workplace intimidating, coercive, hostile or offensive to the reasonable person. This is sometimes referred to as "hostile environment" harassment.

## **TYPES OF HARASSING CONDUCT**

### **Verbal Harassment**

For purposes of this policy, “verbal harassment” may include, but is not limited to: unwanted sexual advances or propositions; demands for sexual favors; unwelcome jokes, “kidding” or “teasing”; unwelcome epithets, slurs or negative stereotyping; unwelcome vulgar, offensive or obscene language; unwelcome verbal commentary about an individual’s body, sexual prowess or sexual deficiencies; certain types of whistling; and unwelcome telephone calls, voice-mails or e-mails of a vulgar, offensive and obscene nature.

### **Physical Harassment**

For purposes of this policy, “physical harassment” includes, but is not limited to: leering or staring in an offensive or inappropriate manner; touching, pinching, massaging or grabbing; assaulting; or engaging in coerced sexual acts.

### **Non-Verbal Visual Harassment**

For purposes of this policy, “non-verbal or visual harassment” includes, but is not limited to, creating, possessing, sending or displaying words, jokes, photographs, pictures, cartoons, objects or gestures of a vulgar, offensive, obscene or sexual nature.

## **INVESTIGATION OF COMPLAINTS**

### **PERSONS COVERED BY THIS POLICY**

- **Employees:** This policy shall apply to all officials and employees. The County will not tolerate harassment, whether engaged in by co-workers, supervisors, or elected or appointed officials.
- **Non-Employees:** This policy also covers non-employees who conduct business with the County or on County premises. For example, the County will not tolerate harassment engaged in by a vendor, supplier, or visitor to County premises to the extent that it affects any employee of the County while they are at work. The County will, to the extent practicable, investigate any incident of alleged harassment by a non-employee and will take any action which is necessary and appropriate after evaluating all the circumstances, including terminating a non-employee’s relationship with the County where appropriate. The County thus encourages the reporting of all incidents of harassment, regardless of who the offender may be, in accordance with the complaint reporting procedures established in this policy.

### **COMPLAINTS**

- **Informal Procedure**  
The County encourages individuals who believe they are being harassed (“Reporting Individual(s)”) to directly and promptly notify the harasser or offender that his or her behavior is unwelcome. If for any reason a Reporting Individual does not wish to approach the harasser or offender directly, or if such discussion does not successfully end the harassment, the Reporting Individual should notify either the Human Resources Administrator or any Human Resources professional, the Appointing Authority for his/her department, or his/her supervisor, for purposes of speaking with the alleged

harasser. While this informal procedure is encouraged, it is not a required first step for a Reporting Individual wishing to report an incident of harassment using the formal complaint procedure outlined below. If the Human Resources Administrator, or the Reporting Individual's Appointing Authority or supervisor is successful in informally resolving a report of harassment, a written report summarizing the complaint made and resolution achieved shall be promptly forwarded to and maintained by the Human Resources Administrator.

- **Formal Procedure**

In the event that a Reporting Individual does not wish to pursue the informal procedure described above, or in the event that the informal procedure does not produce a result satisfactory to a Reporting Individual, the following steps should be followed to report the harassment complaint:

1. A Reporting Individual who believes he or she has been subjected to harassment should promptly report the incident to the Human Resources Administrator or his/her designee.
2. A Reporting Individual also has the option of reporting an incident of harassment to the Reporting Individual's Appointing Authority, or the individual's immediate supervisor. When a report of harassment is made to either an Appointing Authority or supervisor, the Appointing Authority or supervisor must immediately file with the Human Resources Administrator a written report of the complaint, as the Office of Human Resources is responsible for overseeing harassment investigations.
3. All complaints of harassment must be reduced to writing by either the Reporting Individual or the individuals designated above who are authorized to receive complaints. The written Complaint is to contain a detailed record or account of the behavior found objectionable, and shall be signed by the Reporting Individual.
4. The prompt reporting of harassment complaints is strongly encouraged by the County. While the County will investigate all complaints of harassment, the late reporting of complaints or information may affect the County's ability to conduct a thorough investigation, and may thereby impair the County's ability to take effective remedial action. Additionally, and while the County has chosen not to impose a specific time frame in which to report harassment complaints, a Reporting Individual should be aware that applicable statutes of limitation may constrain the time for instituting outside legal action.

## INVESTIGATION

- **Confidentiality**

An allegation of harassment brought to the attention of the Human Resources Administrator will be promptly investigated. Confidentiality will be maintained throughout the investigatory process to the extent practicable and appropriate under the circumstances. To the extent that the nature of the complaint and the investigation permits, only those involved in the investigation process, including the alleged harasser or any witnesses, may be informed of the alleged victim's identity or the nature of the complaint. It is possible, however, that information regarding the complaint and the investigation will be revealed during the course of legal proceedings.

- **Investigators**

Complaints will be initially investigated by the Human Resources Administrator or his/her designee, unless the Personnel Officer determines another person should be the investigator.

- Investigation Process

During an investigation, an investigator will ordinarily:

1. Confirm the name and position of the Reporting Individual;
2. Identify the alleged harasser;
3. Ascertain all facts in connection with the alleged harassment, by first interviewing the Reporting Individual and the alleged harasser;
4. Determine the frequency of the alleged harassment and the dates and locations where the alleged harassment occurred;
5. Determine the identity and names of witnesses observing the alleged harassment and, when the Reporting Individual and the alleged harasser present conflicting versions of the facts, interview all pertinent witnesses;
6. Determine how the Reporting Individual responded to the alleged harassment and determine what efforts, if any, of informal resolution of the matter were made;
7. Determine whether the Reporting Individual consulted anyone else about the alleged harassment, noting who else was advised of the alleged harassment and the response, if any, to the disclosure;
8. Determine whether the Reporting Individual knows of or suspects that there are other individuals who may have been harassed by the alleged harasser;
9. Determine whether the Reporting Individual informed other employees of the situation and what response, if any, was received from other individuals;
10. Remind all persons of the County's policy against retaliation for making a complaint of harassment;
11. Identify changes, if any, which occur in the workplace during the course of the investigation; and
12. Keep the Reporting Individual informed as to the status of the investigation.

## COMPLAINT RESOLUTION

Unless another procedure is provided by law or determined to be appropriate by the Personnel Officer upon the facts and circumstances presented in a particular case, upon completing the investigation, the Human Resources Administrator will report to the Personnel Officer. The Personnel Officer will review the investigation, make findings and determine the appropriate action to be taken. The Personnel Officer will communicate his/her findings and the intended actions to the Reporting Individual, except that a Reporting Individual may not be advised of the specific discipline, if any, to be imposed against an alleged harasser, and to the Appointing Authority of the alleged harasser for action. The Appointing Authority of the alleged harasser will communicate the Personnel Officer's findings and complaint resolution decision to the alleged harasser. If the Personnel Officer finds that harassment has occurred, the harasser will be subject to appropriate discipline, as listed below.

## DISCIPLINE

Individuals found to have engaged in misconduct constituting harassment as defined by this policy shall be promptly disciplined. Appropriate sanctions will be determined by the Personnel Officer. In addressing incidents of harassment, the County's response, at a minimum, will include reprimanding the offender and preparing a written record. Additional action may include: referral to counseling, withholding of a promotion; demotion; reassignment; suspension without pay; suspension of leave accrual; or discharge from employment.

## APPEALS

- Appeal to the Personnel Officer

If a Reporting Individual is dissatisfied with the conduct of an investigation, or if a Reporting Individual believes the complaint resolution decision has failed to alleviate the conditions or circumstances which gave rise to the complaint, the Reporting Individual has the right to appeal the complaint resolution decision. Likewise, if an alleged harasser or other person receiving discipline under this policy is dissatisfied with discipline imposed or specific actions taken as a result of the complaint resolution decision, such person has the right to appeal the discipline imposed or actions taken. The dissatisfied party, in either case, should submit written comments indicating the reasons for their dissatisfaction to the Personnel Officer within fifteen days of receiving the complaint resolution decision of the Personnel Officer. The Personnel Officer will then review the dissatisfied party's appeal and the entire investigative record, and may, at the discretion of the Personnel Officer, grant a hearing. The Personnel Officer will present written findings within thirty days of receiving the appeal or within thirty days of any hearing where a hearing is granted.

- Appeal to the Personnel Board

If a Reporting Individual or person receiving discipline under this policy is dissatisfied with the decision of the Personnel Officer upon an appeal, the dissatisfied individual has the right to appeal the decision to the Howard County Personnel Board utilizing the procedures set forth in Section 1.500 of the Code.

## GENERAL PROVISIONS

- The County has developed this policy to ensure that all of its employees may work in an environment free from harassment. This policy is to be given to all employees and disseminated to all work locations. All members of management shall conduct informational sessions concerning this policy, so as to ensure that all employees understand the County's commitment to eliminating harassment in the workplace, are familiar with the policy and know that any complaint received will be investigated and appropriately resolved.
- Intimidating, coercing, threatening, taking reprisal or discriminating against any employee for complaining or providing any information about harassment as defined in this policy is strictly prohibited. The County will not retaliate against an individual who makes a report or provides information about harassment, nor permit any employee to do

so. Retaliation for filing a complaint or providing information about harassment itself constitutes a violation of this policy and should be reported immediately. Any individual found to have retaliated against an individual for reporting or providing information about harassment, or against anyone participating in the investigation of a complaint, will be subject to the discipline described in this policy.

- Grievances that arise independently of a complaint of harassment made pursuant to this policy shall be reviewed by the Appointing Authority to determine whether referral to the Human Resources Administrator is appropriate. The Human Resources Administrator or his/her designee must attend any hearing containing an issue of harassment as an advisor to the department, and to ensure that all appropriate laws, policies and procedures are followed.

## **SIGNS AND SYMPTOMS OF CHILD ABUSE, NEGLECT, AND MENTAL INJURY**

The following information is provided to familiarize you with physical and behavioral indicators that are often associated with child abuse, neglect, and mental injury. Please note that the list is not inclusive. Nor does the presence of any of these indicators necessarily mean that a child is being abused, neglected or is a victim of mental injury. However, the repeated occurrence of an indicator, the presence of several indicators or combination, or the appearance of serious injury or harm should alert you to the possibility of abuse or neglect.

### **Possible Indicators of Child Physical Abuse Include:**

#### **Physical Indicators**

- Unexplained welts or bruises (especially facial bruises on infants), burns, fractures, lacerations, abrasions, human bite marks
- Appearance of injuries after school absences, weekends, or vacation
- Absence of hair and/or hemorrhaging underneath the scalp due to vigorous hair pulling
- Cigar or cigarette burns especially on feet, hands, or buttocks
- Burns or cuts patterned like an electric burner, iron, belt buckle, etc.
- Immersion burns indicating dunking in hot liquid (glove like or sock like burns on hands or feet, doughnut shaped burns on buttocks)
- Rope burns that indicate confinement (on arms, legs, neck, and torso)

#### **Behavioral Indicators**

- Way of physical contact indicated by parents or anyone else
- Apprehensive when adults approach another crying child
- Constantly on the alert for danger, is guarded and distrustful
- Destructive to self or others
- Extremes of behavior-aggressive and withdrawn
- Runaway or delinquent behavior
- Reporting unbelievable reasons for injury
- Cautious when asked about the sudden appearance of an injury, looks at parent for an answer
- Wears clothing that is clearly meant to cover the body when it is not appropriate
- Seems afraid or reluctant to go home
- Easily frightened or fearful of adults and parents

### **Possible Indicators of Child Sexual Abuse Include:**

#### **Physical Indicators**

- Difficulty in walking or sitting
- Torn, stained or bloody underwear
- Vaginal itching, pain, swelling, or bleeding or burning

- Frequent urinary track or yeast infections
- Venereal disease
- Pregnancy
- Frequent psychosomatic illnesses

#### **Behavioral Indicators**

- Depression
- Extreme fear for no apparent reason
- Inability to trust
- Anger and hostility
- Inappropriate sexual behavior
- Guilt or shame
- Sudden drop in school performance
- Somatic complaints

- Sleep disturbances (nightmares, bed wetting, sleeping in clothing)
- Eating disorders
- Withdrawal, fantasy, or infantile behavior
- Suicidal gestures or statements
- Running away (especially for females)
- Fire setting, fascination with fire

### Possible Indicators of Child Neglect

#### **Physical Indicators**

- Poor growth pattern
- Constant hunger, malnutrition
- Poor hygiene, body odor, or lice
- Clothing inappropriate or inadequate for weather condition
- Constant fatigue
- Constant lack of supervision especially for long periods or in dangerous conditions
- Unexplained bruises or injuries as a result of poor supervision
- Unexplained physical problems or medical needs such as lack of proper immunizations, gross dental problems, needs glasses/hearing aids

#### **Behavioral Indicators**

- Developmental lags
- Begs or steals food, forages through garbage, always hungry
- Destructive to self and/or others
- Extremes in behavior, aggressive and withdrawn
- Assumes adult responsibilities
- Exhibits infantile behavior
- Delinquent behavior
- Depressed/apathetic, states “no one cares”
- Frequent school absences or chronic tardiness
- Seeks attention
- Hypochondria

### Possible Indicators of Child Mental Injury Include:

#### **Physical Indicators**

- Non-organic failure to thrive
- Accident prone
- Small abrasions on limbs that heal slowly
- Self-destructive both physically and socially
- Eating disorders, anorexia, bulimia, obesity
- Gastrointestinal and bowel problems
- Reduced energy level, lethargy

#### **Behavioral Indicators**

- Extreme fear for no apparent reason
- Inability to trust
- Anger and hostility, tantrums
- Inappropriate sexual behavior
- Depression
- Guilt or shame
- School learning problems
- Lack of exploration and curiosity
- Lying for no apparent reason, stealing, cheating

## 40 Developmental Assets® for Early Childhood (ages 3 to 5)

Search Institute® has identified the following building blocks of healthy development—known as **Developmental Assets**®—that help young children grow up healthy, caring, and responsible.

<b>External Assets</b>	<b>Support</b>	<p>1. <b>Family support</b>—Parent(s) and/or primary caregiver(s) provide the child with high levels of consistent and predictable love, physical care, and positive attention in ways that are responsive to the child’s individuality.</p> <p>2. <b>Positive family communication</b>—Parent(s) and/or primary caregiver(s) express themselves positively and respectfully, engaging young children in conversations that invite their input.</p> <p>3. <b>Other adult relationships</b>—With the family’s support, the child experiences consistent, caring relationships with adults outside the family.</p> <p>4. <b>Caring neighbors</b>—The child’s network of relationships includes neighbors who provide emotional support and a sense of belonging.</p> <p>5. <b>Caring climate in child-care and educational settings</b>—Caregivers and teachers create environments that are nurturing, accepting, encouraging, and secure.</p> <p>6. <b>Parent involvement in child care and education</b>—Parent(s), caregivers, and teachers together create a consistent and supportive approach to fostering the child’s successful growth.</p>	
	<b>Empowerment</b>	<p>7. <b>Community cherishes and values young children</b>—Children are welcomed and included throughout community life.</p> <p>8. <b>Children seen as resources</b>—The community demonstrates that children are valuable resources by investing in a child-rearing system of family support and high-quality activities and resources to meet children’s physical, social, and emotional needs.</p> <p>9. <b>Service to others</b>—The child has opportunities to perform simple but meaningful and caring actions for others.</p> <p>10. <b>Safety</b>—Parent(s), caregivers, teachers, neighbors, and the community take action to ensure children’s health and safety.</p>	
	<b>Boundaries &amp; Expectations</b>	<p>11. <b>Family boundaries</b>—The family provides consistent supervision for the child and maintains reasonable guidelines for behavior that the child can understand and achieve.</p> <p>12. <b>Boundaries in child-care and educational settings</b>—Caregivers and educators use positive approaches to discipline and natural consequences to encourage self-regulation and acceptable behaviors.</p> <p>13. <b>Neighborhood boundaries</b>—Neighbors encourage the child in positive, acceptable behavior, as well as intervene in negative behavior, in a supportive, nonthreatening way.</p> <p>14. <b>Adult role models</b>—Parent(s), caregivers, and other adults model self-control, social skills, engagement in learning, and healthy lifestyles.</p> <p>15. <b>Positive peer relationships</b>—Parent(s) and caregivers seek to provide opportunities for the child to interact positively with other children.</p> <p>16. <b>Positive expectations</b>—Parent(s), caregivers, and teachers encourage and support the child in behaving appropriately, undertaking challenging tasks, and performing activities to the best of her or his abilities.</p>	
	<b>Constructive Use of Time</b>	<p>17. <b>Play and creative activities</b>—The child has daily opportunities to play in ways that allow self-expression, physical activity, and interaction with others.</p> <p>18. <b>Out-of-home and community programs</b>—The child experiences well-designed programs led by competent, caring adults in well-maintained settings.</p> <p>19. <b>Religious community</b>—The child participates in age-appropriate religious activities and caring relationships that nurture her or his spiritual development.</p> <p>20. <b>Time at home</b>—The child spends most of her or his time at home participating in family activities and playing constructively, with parent(s) guiding TV and electronic game use.</p>	
	<b>Internal Assets</b>	<b>Commitment to Learning</b>	<p>21. <b>Motivation to mastery</b>—The child responds to new experiences with curiosity and energy, resulting in the pleasure of mastering new learning and skills.</p> <p>22. <b>Engagement in learning experiences</b>—The child fully participates in a variety of activities that offer opportunities for learning.</p> <p>23. <b>Home-program connection</b>—The child experiences security, consistency, and connections between home and out-of-home care programs and learning activities.</p> <p>24. <b>Bonding to programs</b>—The child forms meaningful connections with out-of-home care and educational programs.</p> <p>25. <b>Early literacy</b>—The child enjoys a variety of pre-reading activities, including adults reading to her or him daily, looking at and handling books, playing with a variety of media, and showing interest in pictures, letters, and numbers.</p>
		<b>Positive Values</b>	<p>26. <b>Caring</b>—The child begins to show empathy, understanding, and awareness of others’ feelings.</p> <p>27. <b>Equality and social justice</b>—The child begins to show concern for people who are excluded from play and other activities or not treated fairly because they are different.</p> <p>28. <b>Integrity</b>—The child begins to express her or his views appropriately and to stand up for a growing sense of what is fair and right.</p> <p>29. <b>Honesty</b>—The child begins to understand the difference between truth and lies, and is truthful to the extent of her or his understanding.</p> <p>30. <b>Responsibility</b>—The child begins to follow through on simple tasks to take care of her- or himself and to help others.</p> <p>31. <b>Self-regulation</b>—The child increasingly can identify, regulate, and control her or his behaviors in healthy ways, using adult support constructively in particularly stressful situations.</p>
		<b>Social Competencies</b>	<p>32. <b>Planning and decision making</b>—The child begins to plan for the immediate future, choosing from among several options and trying to solve problems.</p> <p>33. <b>Interpersonal skills</b>—The child cooperates, shares, plays harmoniously, and comforts others in distress.</p> <p>34. <b>Cultural awareness and sensitivity</b>—The child begins to learn about her or his own cultural identity and to show acceptance of people who are racially, physically, culturally, or ethnically different from her or him.</p> <p>35. <b>Resistance skills</b>—The child begins to sense danger accurately, to seek help from trusted adults, and to resist pressure from peers to participate in unacceptable or risky behavior.</p> <p>36. <b>Peaceful conflict resolution</b>—The child begins to compromise and resolve conflicts without using physical aggression or hurtful language.</p>
		<b>Positive Identity</b>	<p>37. <b>Personal power</b>—The child can make choices that give a sense of having some influence over things that happen in her or his life.</p> <p>38. <b>Self-esteem</b>—The child likes her- or himself and has a growing sense of being valued by others.</p> <p>39. <b>Sense of purpose</b>—The child anticipates new opportunities, experiences, and milestones in growing up.</p> <p>40. <b>Positive view of personal future</b>—The child finds the world interesting and enjoyable, and feels that he or she has a positive place in it.</p>

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## 40 Developmental Assets® for Children Grades K–3 (ages 5–9)

Search Institute® has identified the following building blocks of healthy development—known as **Developmental Assets**®—that help young people grow up healthy, caring, and responsible.

<b>External Assets</b>	<b>Support</b>	<ol style="list-style-type: none"> <li><b>Family Support</b>—Family continues to be a consistent provider of love and support for the child’s unique physical and emotional needs.</li> <li><b>Positive Family Communication</b>—Parent(s) and child communicate openly, respectfully, and frequently, with child receiving praise for her or his efforts and accomplishments.</li> <li><b>Other Adult Relationships</b>—Child receives support from adults other than her or his parent(s), with the child sometimes experiencing relationships with a nonparent adult.</li> <li><b>Caring Neighborhood</b>—Parent(s) and child experience friendly neighbors who affirm and support the child’s growth and sense of belonging.</li> <li><b>Caring School Climate</b>—Child experiences warm, welcoming relationships with teachers, caregivers, and peers at school.</li> <li><b>Parent Involvement in Schooling</b>—Parent(s) talk about the importance of education and are actively involved in the child’s school success.</li> </ol>
	<b>Empowerment</b>	<ol style="list-style-type: none"> <li><b>Community Values Children</b>—Children are welcomed and included throughout community life.</li> <li><b>Children as Resources</b>—Child contributes to family decisions and has opportunities to participate in positive community events.</li> <li><b>Service to Others</b>—Child has opportunities to serve in the community with adult support and approval.</li> <li><b>Safety</b>—Parents and community adults ensure the child’s safety while keeping in mind her or his increasing independence.</li> </ol>
	<b>Boundaries &amp; Expectations</b>	<ol style="list-style-type: none"> <li><b>Family Boundaries</b>—The family maintains supervision of the child, has reasonable guidelines for behavior, and always knows where the child is.</li> <li><b>School Boundaries</b>—Schools have clear, consistent rules and consequences and use a positive approach to discipline.</li> <li><b>Neighborhood Boundaries</b>—Neighbors and friends’ parents help monitor the child’s behavior and provide feedback to the parent(s).</li> <li><b>Adult Role Models</b>—Parent(s) and other adults model positive, responsible behavior and encourage the child to follow these examples.</li> <li><b>Positive Peer Influence</b>—Parent(s) monitor the child’s friends and encourage spending time with those who set good examples.</li> <li><b>High Expectations</b>—Parent(s), teachers, and other influential adults encourage the child to do her or his best in all tasks and celebrate their successes.</li> </ol>
	<b>Constructive Use of Time</b>	<ol style="list-style-type: none"> <li><b>Creative Activities</b>—Child participates weekly in music, dance, or other form of artistic expression outside of school.</li> <li><b>Child Programs</b>—Child participates weekly in at least one sport, club, or organization within the school or community.</li> <li><b>Religious Community</b>—Child participates in age-appropriate religious activities and caring relationships that nurture her or his spiritual development.</li> <li><b>Time at Home</b>—Child spends time at home playing and doing positive activities with the family.</li> </ol>

<b>Internal Assets</b>	<b>Commitment to Learning</b>	<ol style="list-style-type: none"> <li><b>Achievement Motivation</b>—Child is encouraged to remain curious and demonstrates an interest in doing well at school.</li> <li><b>Learning Engagement</b>—Child is enthused about learning and enjoys going to school.</li> <li><b>Homework</b>—With appropriate parental support, child completes assigned homework.</li> <li><b>Bonding to School</b>—Child is encouraged to have and feels a sense of belonging at school.</li> <li><b>Reading for Pleasure</b>—Child listens to and/or reads books outside of school daily.</li> </ol>
	<b>Positive Values</b>	<ol style="list-style-type: none"> <li><b>Caring</b>—Parent(s) help child grow in empathy, understanding, and helping others.</li> <li><b>Equality and Social Justice</b>—Parent(s) encourage child to be concerned about rules and being fair to everyone.</li> <li><b>Integrity</b>—Parent(s) help child develop her or his own sense of right and wrong behavior.</li> <li><b>Honesty</b>—Parent(s) encourage child’s development in recognizing and telling the truth.</li> <li><b>Responsibility</b>—Parent(s) encourage child to accept and take responsibility for her or his actions at school and at home.</li> <li><b>Self-Regulation</b>—Parents encourage child’s growth in regulating her or his own emotions and behaviors and in understanding the importance of healthy habits and choices.</li> </ol>
	<b>Social Competencies</b>	<ol style="list-style-type: none"> <li><b>Planning and Decision Making</b>—Parent(s) help child think through and plan school and play activities.</li> <li><b>Interpersonal Competence</b>—Child seeks to build friendships and is learning about self-control.</li> <li><b>Cultural Competence</b>—Child continues to learn about her or his own cultural identity and is encouraged to interact positively with children of different racial, ethnic, and cultural backgrounds.</li> <li><b>Resistance Skills</b>—Child is learning to recognize risky or dangerous situations and is able to seek help from trusted adults.</li> <li><b>Peaceful Conflict Resolution</b>—Child continues learning to resolve conflicts without hitting, throwing a tantrum, or using hurtful language.</li> </ol>
	<b>Positive Identity</b>	<ol style="list-style-type: none"> <li><b>Personal Power</b>—Child has a growing sense of having influence over some of the things that happen in her or his life.</li> <li><b>Self-Esteem</b>—Child likes herself or himself and feels valued by others.</li> <li><b>Sense of Purpose</b>—Child welcomes new experiences and imagines what he or she might do or be in the future.</li> <li><b>Positive View of Personal Future</b>—Child has a growing curiosity about the world and finding her or his place in it.</li> </ol>

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Search Institute® has identified the following building blocks of healthy development—known as **Developmental Assets®**—that help young people grow up healthy, caring, and responsible.

<b>External Assets</b>	<b>Support</b>	<ol style="list-style-type: none"> <li>1. <b>Family support</b>—Family life provides high levels of love and support.</li> <li>2. <b>Positive family communication</b>—Parent(s) and child communicate positively. Child feels comfortable seeking advice and counsel from parent(s).</li> <li>3. <b>Other adult relationships</b>—Child receives support from adults other than her or his parent(s).</li> <li>4. <b>Caring neighborhood</b>—Child experiences caring neighbors.</li> <li>5. <b>Caring school climate</b>—Relationships with teachers and peers provide a caring, encouraging environment.</li> <li>6. <b>Parent involvement in schooling</b>—Parent(s) are actively involved in helping the child succeed in school.</li> </ol>
	<b>Empowerment</b>	<ol style="list-style-type: none"> <li>7. <b>Community values youth</b>—Child feels valued and appreciated by adults in the community.</li> <li>8. <b>Children as resources</b>—Child is included in decisions at home and in the community.</li> <li>9. <b>Service to others</b>—Child has opportunities to help others in the community.</li> <li>10. <b>Safety</b>—Child feels safe at home, at school, and in his or her neighborhood.</li> </ol>
	<b>Boundaries &amp; Expectations</b>	<ol style="list-style-type: none"> <li>11. <b>Family boundaries</b>—Family has clear and consistent rules and consequences and monitors the child’s whereabouts.</li> <li>12. <b>School Boundaries</b>—School provides clear rules and consequences.</li> <li>13. <b>Neighborhood boundaries</b>—Neighbors take responsibility for monitoring the child’s behavior.</li> <li>14. <b>Adult role models</b>—Parent(s) and other adults in the child’s family, as well as nonfamily adults, model positive, responsible behavior.</li> <li>15. <b>Positive peer influence</b>—Child’s closest friends model positive, responsible behavior.</li> <li>16. <b>High expectations</b>—Parent(s) and teachers expect the child to do her or his best at school and in other activities.</li> </ol>
	<b>Constructive Use of Time</b>	<ol style="list-style-type: none"> <li>17. <b>Creative activities</b>—Child participates in music, art, drama, or creative writing two or more times per week.</li> <li>18. <b>Child programs</b>—Child participates two or more times per week in cocurricular school activities or structured community programs for children..</li> <li>19. <b>Religious community</b>—Child attends religious programs or services one or more times per week.</li> <li>20. <b>Time at home</b>—Child spends some time most days both in high-quality interaction with parents and doing things at home other than watching TV or playing video games.</li> </ol>

<b>Internal Assets</b>	<b>Commitment to Learning</b>	<ol style="list-style-type: none"> <li>21. <b>Achievement Motivation</b>—Child is motivated and strives to do well in school.</li> <li>22. <b>Learning Engagement</b>—Child is responsive, attentive, and actively engaged in learning at school and enjoys participating in learning activities outside of school.</li> <li>23. <b>Homework</b>—Child usually hands in homework on time.</li> <li>24. <b>Bonding to school</b>—Child cares about teachers and other adults at school.</li> <li>25. <b>Reading for Pleasure</b>—Child enjoys and engages in reading for fun most days of the week.</li> </ol>
	<b>Positive Values</b>	<ol style="list-style-type: none"> <li>26. <b>Caring</b>—Parent(s) tell the child it is important to help other people.</li> <li>27. <b>Equality and social justice</b>—Parent(s) tell the child it is important to speak up for equal rights for all people.</li> <li>28. <b>Integrity</b>—Parent(s) tell the child it is important to stand up for one’s beliefs.</li> <li>29. <b>Honesty</b>—Parent(s) tell the child it is important to tell the truth.</li> <li>30. <b>Responsibility</b>—Parent(s) tell the child it is important to accept personal responsibility for behavior.</li> <li>31. <b>Healthy Lifestyle</b>—Parent(s) tell the child it is important to have good health habits and an understanding of healthy sexuality.</li> </ol>
	<b>Social Competencies</b>	<ol style="list-style-type: none"> <li>32. <b>Planning and decision making</b>—Child thinks about decisions and is usually happy with results of her or his decisions.</li> <li>33. <b>Interpersonal Competence</b>—Child cares about and is affected by other people’s feelings, enjoys making friends, and, when frustrated or angry, tries to calm her- or himself.</li> <li>34. <b>Cultural Competence</b>—Child knows and is comfortable with people of different racial, ethnic, and cultural backgrounds and with her or his own cultural identity.</li> <li>35. <b>Resistance skills</b>—Child can stay away from people who are likely to get her or him in trouble and is able to say no to doing wrong or dangerous things.</li> <li>36. <b>Peaceful conflict resolution</b>—Child seeks to resolve conflict nonviolently.</li> </ol>
	<b>Positive Identity</b>	<ol style="list-style-type: none"> <li>37. <b>Personal power</b>—Child feels he or she has some influence over things that happen in her or his life.</li> <li>38. <b>Self-esteem</b>—Child likes and is proud to be the person that he or she is.</li> <li>39. <b>Sense of purpose</b>—Child sometimes thinks about what life means and whether there is a purpose for her or his life.</li> <li>40. <b>Positive view of personal future</b>—Child is optimistic about her or his personal future.</li> </ol>

Search Institute® has identified the following building blocks of healthy development—known as **Developmental Assets®**—that help young people grow up healthy, caring, and responsible.

<b>External Assets</b>	<b>Support</b>	<ul style="list-style-type: none"> <li>1. <b>Family support</b>—Family life provides high levels of love and support.</li> <li>2. <b>Positive family communication</b>—Young person and her or his parent(s) communicate positively, and young person is willing to seek advice and counsel from parents.</li> <li>3. <b>Other adult relationships</b>—Young person receives support from three or more nonparent adults.</li> <li>4. <b>Caring neighborhood</b>—Young person experiences caring neighbors.</li> <li>5. <b>Caring school climate</b>—School provides a caring, encouraging environment.</li> <li>6. <b>Parent involvement in schooling</b>—Parent(s) are actively involved in helping young person succeed in school.</li> </ul>
	<b>Empowerment</b>	<ul style="list-style-type: none"> <li>7. <b>Community values youth</b>—Young person perceives that adults in the community value youth.</li> <li>8. <b>Youth as resources</b>—Young people are given useful roles in the community.</li> <li>9. <b>Service to others</b>—Young person serves in the community one hour or more per week.</li> <li>10. <b>Safety</b>—Young person feels safe at home, school, and in the neighborhood.</li> </ul>
	<b>Boundaries &amp; Expectations</b>	<ul style="list-style-type: none"> <li>11. <b>Family boundaries</b>—Family has clear rules and consequences and monitors the young person’s whereabouts.</li> <li>12. <b>School Boundaries</b>—School provides clear rules and consequences.</li> <li>13. <b>Neighborhood boundaries</b>—Neighbors take responsibility for monitoring young people’s behavior.</li> <li>14. <b>Adult role models</b>—Parent(s) and other adults model positive, responsible behavior.</li> <li>15. <b>Positive peer influence</b>—Young person’s best friends model responsible behavior.</li> <li>16. <b>High expectations</b>—Both parent(s) and teachers encourage the young person to do well.</li> </ul>
	<b>Constructive Use of Time</b>	<ul style="list-style-type: none"> <li>17. <b>Creative activities</b>—Young person spends three or more hours per week in lessons or practice in music, theater, or other arts.</li> <li>18. <b>Youth programs</b>—Young person spends three or more hours per week in sports, clubs, or organizations at school and/or in the community.</li> <li>19. <b>Religious community</b>—Young person spends one or more hours per week in activities in a religious institution.</li> <li>20. <b>Time at home</b>—Young person is out with friends “with nothing special to do” two or fewer nights per week.</li> </ul>

<b>Internal Assets</b>	<b>Commitment to Learning</b>	<ul style="list-style-type: none"> <li>21. <b>Achievement Motivation</b>—Young person is motivated to do well in school.</li> <li>22. <b>School Engagement</b>—Young person is actively engaged in learning.</li> <li>23. <b>Homework</b>—Young person reports doing at least one hour of homework every school day.</li> <li>24. <b>Bonding to school</b>—Young person cares about her or his school.</li> <li>25. <b>Reading for Pleasure</b>—Young person reads for pleasure three or more hours per week.</li> </ul>
	<b>Positive Values</b>	<ul style="list-style-type: none"> <li>26. <b>Caring</b>—Young person places high value on helping other people.</li> <li>27. <b>Equality and social justice</b>—Young person places high value on promoting equality and reducing hunger and poverty.</li> <li>28. <b>Integrity</b>—Young person acts on convictions and stands up for her or his beliefs.</li> <li>29. <b>Honesty</b>—Young person “tells the truth even when it is not easy.”</li> <li>30. <b>Responsibility</b>—Young person accepts and takes personal responsibility.</li> <li>31. <b>Restraint</b>—Young person believes it is important not to be sexually active or to use alcohol or other drugs.</li> </ul>
	<b>Social Competencies</b>	<ul style="list-style-type: none"> <li>32. <b>Planning and decision making</b>—Young person knows how to plan ahead and make choices.</li> <li>33. <b>Interpersonal Competence</b>—Young person has empathy, sensitivity, and friendship skills.</li> <li>34. <b>Cultural Competence</b>—Young person has knowledge of and comfort with people of different cultural/racial/ethnic backgrounds.</li> <li>35. <b>Resistance skills</b>—Young person can resist negative peer pressure and dangerous situations.</li> <li>36. <b>Peaceful conflict resolution</b>—Young person seeks to resolve conflict nonviolently.</li> </ul>
	<b>Positive Identity</b>	<ul style="list-style-type: none"> <li>37. <b>Personal power</b>—Young person feels he or she has control over “things that happen to me.”</li> <li>38. <b>Self-esteem</b>—Young person reports having a high self-esteem.</li> <li>39. <b>Sense of purpose</b>—Young person reports that “my life has a purpose.”</li> <li>40. <b>Positive view of personal future</b>—Young person is optimistic about her or his personal future.</li> </ul>

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# Staff Chart

If illness or an emergency will cause you to miss a program, it is imperative that you contact your immediate supervisor. If you are unable to reach him/her, please call one of the Division Superintendents or the Bureau Chief.

John R. Byrd, Director, Recreation and Parks.....	410-313-4640
Laura T. Wetherald, Chief, Bureau of Recreation.....	410-313-4640
John Marshall, Chief, Bureau of Parks & Program Services.....	410-313-1081
Mike Milani, Chief, Bureau of Administrative Services.....	410-313-4629
Raul Delerme, Chief, Bureau of Capital Projects, Park Planning & Construction.....	410-313-4689

## Department Facilities

### *Gary J. Arthur Community Center at Glenwood*

Stephanie Simon, Center Manager.....	410-313-4844; cell, 443-831-2925
Heather Sites, Assistant Center Manager.....	410-313-4845; cell, 410-428-2133
Matt Zervas, Program Coordinator.....	410-313-4835; cell, 301-525-9790
General Information.....	410-313-4840

### *Meadowbrook Athletic Complex*

Matthew Knoerlein, Facility Manager.....	410-313-1163; cell, 443-928-7977
Gregory Meyd, Program Coordinator.....	410-313-1162; cell, 410-935-0312
General Information.....	410-313-1161

### *North Laurel Community Center*

Matthew Madera, Center Manager.....	410-313-0456; cell, 443-280-2803
Tessa Hurd, Assistant Center Manager.....	410-313-0457; cell, 443-812-0433
Ashley Jones, Program Coordinator.....	410-313-0459; cell, 410-591-8849
General Information.....	410-313-0390

### *Robinson Nature Center*

Stacey Yankee, Center Director.....	410-313-0404; cell, 248-535-1410
Meagan Downey, Program Manager.....	410-313-0405; cell, 301-974-7789
Katie Peet, Naturalist.....	410-313-0407; cell, 586-604-4010
Brian Campbell, Volunteer & Events Coordinator.....	410-313-0406; cell, 443-618-0267
Kevin Costin, Field Trip & Rentals Coordinator.....	410-313-0410; cell, 443-829-3192
General Information.....	410-313-0400

### *Roger Carter Community Center*

Julija Sajauskas, Center Manager.....	410-313-2722; cell, 443-794-8717
Stacey Tozaki, Assistant Center Manager.....	410-313-2765; cell, 301-401-1055
Montrez Brown, Program Coordinator.....	410-313-2748; cell, 443-527-0206
General Information.....	410-313-2764

## Recreation Services Division

Phil Bryan, Division Superintendent..... 410-313-1668; cell, 443-506-0543  
Kathy Kemp, Office Assistant..... 410-313-4620

### *Art, Drama and Character Camps*

Danielle Bassett, Recreation Manager..... 410-313-4634; cell, 410-790-3986  
Karen Bradley-Ehler, Recreation Supervisor..... 410-313-4635; cell, 443-822-7946

### *Early Childhood and Youth Programs*

Adam Wienckowski, Recreation Manager..... 410-313-4714; cell, 410-340-2315  
Melissa Calleri, Recreation Supervisor..... 410-313- 4721; cell, 443-420-7344  
Cindy Ochs, Recreation Supervisor..... 410-313-4681; cell, 410-340-7372  
Scott Corning, Recreation Coordinator..... 410-313-4622; cell, 443-492-9241

### *Volunteers, Junior Counselors*

Shawnte Berry, Recreation Manager..... 410-313-4624; cell, 443-271-9444  
Linda DiPanfilo, Recreation Coordinator..... 410-313-4704; cell, 410-935-5789

## Recreational Licensed Child Care & Community Services

Annex Office: 410-313-3706; Fax: 410-313-4722

Nicola Morgal, Division Superintendent..... 410-313-4723; cell, 410-245-2009  
Kathie Williams, Office Assistant..... 410-313-3706

### *Licensed Before and After Care; Summer Blast, Mini Scholars and Teen Blast Camps*

Joyne! Young, Recreation Manager..... 410-313-2637; cell, 410-530-0835  
Stephanie Wise, Recreation Manager..... 410-313-4712; cell, 301-233-7841  
Claudia Charity, Recreation Supervisor..... 410-313-4636; cell, 443-979-0627  
Shavon Gordon, Rec. Supervisor..... 410-313-4633; cell, 443-370-9908  
Ryan McFarland, Recreation Supervisor..... 410-313-4713; cell, 484-651-7729  
Donna Jackson-Parker, Rec. Coordinator..... 410-313-1696; cell, 443-562-7808  
Julia Martin, Recreation Coordinator..... 410-313-1687; cell, 410-718-6756  
Brian Murphy, Recreation Coordinator..... 410-313-4797; cell, 410-446-0156  
Lakisha Major, Recreation Coordinator..... 410-313-4717; cell, 443-741-0288

### *Teen Programs, Science and Technology Camps*

Holly Harden, Recreation Manager..... 410-313-4625; cell, 410-804-6635  
Jennene Blakely, Recreation Supervisor..... 410-313-1693; cell, 410-357-1693  
William Banks, Recreation Coordinator..... 410-313-4609; cell, 410-971-2620

### *Therapeutic Recreation and Accommodation Services*

Susan Potts, Recreation Manager..... 410-313-4628; cell, 410-615-0339  
Ruth Coleman, Recreation Coordinator..... 410-313-4708; cell, 301-466-0630  
Chloe Hodge, Recreation Coordinator..... 410-313-1671; cell, 301-928-5048

## Sports & Adventure Services Division

Allan Harden, Division Superintendent.....	410-313-4652; cell, 410- 804-7668
Bryan McCormick, Office Assistant.....	410-313-4711

### *Adventure, Nature & Outdoor Camps*

Dawn Thomas, Recreation Manager.....	410-313-1754; cell, 410-274-6252
Matt Medicus, Recreation Supervisor.....	410-313-1769; cell, 410-303-1734
Adventure Shack & Rentals.....	410-313-7303

### *Sports Camps*

Mike Blevins, Recreation Manager.....	410-313-1691; cell, 443-527-8340
Derek Ludlow, Recreation Manager.....	410-313-4706; cell, 443-848-8503
Amy Patton, Recreation Manager.....	410-313-4718; cell, 410-553-9905
Mark Pendleton, Recreation Manager.....	410-313-4703; cell, 443-845-1457
Amanda Bartell, Recreation Supervisor.....	410-313-1694; cell, 724-584-0366
Will Dunmore, Recreation Supervisor.....	410-313-1697; cell, 410-262-3409
Sandra Lambert, Recreation Supervisor.....	410-313-4715; cell, 443-878-2643
Susan Markovitz, Recreation Supervisor.....	410-313-4674; cell, 301-404-3685
Patrick McGinnis, Recreation Supervisor.....	410-313-4716; cell, 410-409-3474
Carson Nickell, Recreation Supervisor.....	410-313-4720; cell, 240-431-3024
Krista Billingsley, Recreation Supervisor.....	410-313-4637; cell, 479-264-1046
Brian Wyman, Recreation Supervisor.....	410-313-4705; cell, 443-864-3470
Ray Hall, Recreation Supervisor.....	410-313-1689; cell, 443-621-1664
Derrick Thompson, Recreation Supervisor.....	410-313-4736; cell, 240-620-7995

## Natural Resources Division

Dan McNamara, Superintendent.....	410-313-4725; cell, 410-707-8185
Erika Vogan, Division Assistant.....	410-313-1636
Antonio Zarro, Office Assistant.....	410-313-1679

### *Heritage and Historic Camps*

Caitlin Chamberlain, Heritage Manager.....	410-313-0420; cell, 240-486-9780
Jamie Wilder, Heritage Coordinator.....	410-313-0419; cell, 301-741-2869

## **Park Operations – Regional Parks**

Heather Johannes, Division Superintendent..... 410-313-1690; cell, 443-977-0863  
Donna Szyman, Office Assistant..... 410-313-4647

### Zone 1

#### *Cedar Lane Park*

Pat Wiebking, Operations Manager..... 410-313-7398; cell, 410-984-7054  
Todd Holmes, Operations Supervisor..... 410-313-7285; cell, 443-629-9999

#### *Savage Park*

John Riggelman, Operations Supervisor..... 410-880-5858; cell, 443-865-9440

### Zone 2

#### *Centennial Park*

John Peach, Operations Manager..... 410-313-0418; cell, 443-520-4360  
James Reed, Operations Supervisor..... 410-313-7271; cell, 443-521-8701

#### *Blandair Park*

Dave Benedictis, Operations Supervisor..... 410-313-7271; cell, 410-746-5935

### Zone 3

#### *Schooley Mill Park*

Rick Femiano, Operations Manager..... 410-313-6133; cell, 410-493-0265  
Kevin Naecker, Operations Supervisor..... 410-313-6132; cell, 443-538-5184

#### *Western Regional Park*

Jim Craft, Operations Supervisor..... 410-313-5497; cell, 410-336-5087

### Zone 4

#### *Rockburn Branch Park,*

Steve Schwarzman, Operations Manager..... 410-313-5132; cell, 410-440-6624  
Mark Fisher, Operations Supervisor..... 410-313-5131; cell, 443-977-0863

#### *Troy Park*

Mark Fisher, Operations Supervisor..... 410-313-5131; cell, 443-977-0863

#### *Belmont Manor and Historic Park*

Cathy Allen, Belmont Manager..... 410-313-4632; cell, 301-807-4089  
Jessica LaPota, Assistant Manager..... 410-313-1686; cell, 602-510-0793

# Emergency Phone Numbers

Ambulance, Police, Fire Department	Dial 911 (9+ 911 if dialing from a 313 extension)
Non-Emergency Police Assistance	410-313-2200
HC Police to Report Confirmed or Suspected Drug Activity	410-290-DRUG
Howard County Park Rangers	410-245-1410 (Ranger Crew on Duty)
Child Protective Services (CPS) Report Line	410-872-4203
Poison Control Center	1-800-222-1222
Howard County Health Officer	410-313-6363
Howard County Animal Control	410-313-2780
Howard County General Hospital	410-740-7670 (Information Desk) 410-740-7777 (Emergency Room)
Concentra Medical Center – Columbia	410-381-1330
6656 Dobbin Road Monday-Friday 8 a.m. -5 p.m.	
Concentra Medical Center – Arbutus	410-247-9595
1419 Knecht Avenue Open 7 a.m. Monday continuously (24 hours) through 12 noon on Saturday	
Patient First – Columbia	443-718-4067
5900 Cedar Lane Monday – Sunday 8 am. – 10 p.m.	
Patient First – Laurel	301-497-1820
3357 B Corridor Marketplace Monday – Sunday 8 am. – 10 p.m.	

**NOTE: Some Howard County program phones may be on the 313 exchange so you will only need to dial the last four digits of the number.**

## IN AN EMERGENCY, NOTIFY YOUR IMMEDIATE MANAGER AND/OR MAIN OFFICE

**Main Office:** Howard County Department of Recreation and Parks  
7120 Oakland Mills Road  
Columbia, Maryland 21046-1677  
410-313-4700 (Receptionist)  
410-313-4620 (Monday-Friday 8 a.m.-5 p.m.)  
410-313-7275 (Registration Office)  
Fax: 410-313-1699

Building Locked: Contact your Program Supervisor at 410-313- \_\_\_\_\_  
(Supervisor will provide phone number during orientation.)

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## Who to Call in an Emergency:

Program Supervisor: \_\_\_\_\_

TR Manager (if accommodation has been provided): \_\_\_\_\_