



TORONTO ANAPHYLAXIS EDUCATION GROUP

MEETING MINUTES - Tuesday, January 21, 2014

TOPIC: Summer Camp for Allergic Kids

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Icebreaker:

In light of the recent ice storm, the icebreaker activity was “Emergency Preparedness”. Sheets were distributed at sign-in, and members were asked to find people who had done various things to prepare for emergencies (i.e. prepared an emergency kit to last 72 hours, updated their emergency kits in the last year, had medication in their emergency kits, etc.). People with food allergies may not be able to eat food supplied in emergency shelter, and should have food on hand in case of an emergency.

The sheets also included information from the Government of Canada’s “Be Prepared” website (<http://www.getprepared.gc.ca/>) .

Click “[Mix and Chat – Emergency Kit](#)” for icebreaker sheet

Camp Discussion

Panel Members:

NAME	TITLE	CAMP
Lewis Sohinki	Director	Camp Northland (overnight)
Patti Nashman	Director	Camp Wahanowin (overnight)
Tan Robertson	Assistant Director	Camp Wahanowin (overnight)
Rebecca Wood	Director	Mrs. Park's Summer Fun Camp (day camp)
Shari Cogan	Mother to a child with multiple food allergies (Eggs, Fish and all Nuts)	Camp Walden (overnight)
Karen Machtinger	Mother to a child with multiple food allergies (peanuts, tree nuts, fish, shellfish, eggs and soy)	Camp Northland (overnight)
Samantha Steiner-Mayman	Allergic teen (peanuts, mustard, and kiwi)	Various day camps Camp Timberlane (overnight)

What measures do you take to make camp safe for allergic kids?

PATTI:

Tan is a key member of our team. She is responsible for all of the food in camp, so she discusses the allergies and specific needs of any camper with their family before camp starts.

TAN:

The whole camp is peanut & tree nut safe. All the kids are individuals, so even if 2 kids have the same allergy, I speak to each family about the menu. What is safe and not safe for their child. What products are safe, what needs to be replaced, what needs to be made in-house. This may be a quick conversation, or hours of conversation, depending on the family and the situation. We discuss the food in the main dining hall, in the tuck shop, on canoe trips.

We also keep EpiPens in various locations around the camp, including in the dining hall. We have a doctor & nurses on staff at all times. Our camp is located 15 mins away from the hospital in Orillia.

BECCA:

In a day camp, we focus on staff training: how to recognize an allergic reaction and how to use an EpiPen. I usually ask an allergy parent to do the training, and make sure all staff and CITs are present.

The camp is peanut/ tree nut safe, but all campers bring their own lunches, so we provide information to parents about what's allowed and the counsellors check the lunches daily to make sure they are safe. We remove any items that aren't safe (e.g. a bag of almonds) and send a note to the parent asking them not to send that any more.

We serve snacks to campers, so I make sure they are safe for everyone at camp.

Our campers are very young (3-6 yrs), so we make plans about carrying their auto-injectors, rather than expecting them to carry it themselves.

LEWIS:

Camp has to be safe. I want to know what a family's standards are at home and recreate them at camp.

We make sure the Health Centre and Kitchen staff are all aware of all the allergies at the camp. All of our staff are trained in how to use an EpiPen, and we have EpiPens located all over camp.

SAM:

When I went to day camp, it was easier, b/c everyone brought their own lunch, so I just brought things that were safe for me.

I started going to overnight camp at Camp Timberlane 5 yrs ago. The first few years, we would meet with the camp director every year to go over my needs. Now the camp knows my situation very well, so they just e-mail the menus to my family before camp and we discuss what accommodations are needed. There is someone in the kitchen who supervises the preparation of all the alternate meals – so not mixed up with the “regular” food. They bought a special frying pan just for me, so that they can make safe things in it.

I had a problem with misplacing EpiPens at camp, b/c I was in and out of the water for various activities. I learned to leave them on my towel, so that I would know where they were and wouldn't forget them. Now that I'm older and my counsellors don't usually have to get in the water with us, the counsellor carries my EpiPen for me during water activities. There are also extras at the Health Centre and at various stations around camp, so I feel very safe.

There is a rule that no food is allowed into my cabin, to keep me & other kids with allergies safe. I am also allergic to sunscreen, so everyone has to put sunscreen on outside.

KAREN:

My son Jackson started going to camp at 7 yrs old and has lots of allergies. My husband & I had both attended Northland as campers, so we were very comfortable with the camp. We were confident the camp would take good care of him. When we went up on Visitor's Day the first year, I was surprised that everyone there knew my son.

My husband has multiple food allergies (now nuts & soy, but had more as a kid), and back then allergies weren't very common. He started attending Northland as a 6 yr old, and remembers there being peanut butter on every table, so he had lots of mild reactions when he was a camper. He asked Jackson how many times he had been to the infirmary, and Jackson hasn't been once in 3 summers.

They have been very good at preparing safe food for him, there is always an option for him. If he doesn't like it, he can always go to the kitchen and ask for something else.

SHARI:

My daughter was in grade 3 when she started going to camp. I met with the Director and the person in charge of food ordering and the kitchen manager to make sure they could keep her safe. The kitchen is a very busy place, so it's important to make sure there is someone responsible for making the allergy meals separately, to avoid mistakes.

A few things I would recommend parents look into before sending their kids to camp:

- Canoe trips: I'm personally not comfortable with sending my daughter out on a canoe trip, so she hasn't gone. I'm interested to know what other parents/ camps do about this.

- Food service: is it family style trays that are shared by everyone at the table (higher risk of cross-contamination) or tray service with everyone getting their own meal. Can/ will they do tray service for an allergic child as an exception?
- Policy on Substitutions: find out what the camp will do if they are serving something that isn't safe for your child e.g. if they are having chicken fingers that aren't safe, will they make special chicken fingers that are safe just for her? Can the parent recommend/ send up safe ones that they can serve her instead?
- Candy: teach your child NO SHARING. But find out what the camp's policy is about having candy/ snacks in the cabin. Some will allow food in the cabin (esp. after visitor's day). Determine if you are comfortable with this policy.

BECCA:

I'm supervising very young children, so I always bring a lunch that doesn't have any of their allergens in it, so that I know my hands are clean if they need help. Also, we eat lunch picnic style on a tarp. One camper was getting hives b/c it was hard to wipe down the tarp properly, so I asked his family to send a beach towel for him to sit on, so he had a safe spot but was still eating with the other kids.

SHARI:

I tell my daughter to sit at the end of the table, so she is not in between all of the food.

SAM:

Other campers are pretty considerate about not exposing me to my allergens. We'll change seats if I don't want to be next to what they are eating.

Also, about the treats from home: at my camp, we have a party with the treats on the 1st night and on Visitor's Day. We separate out the foods that are safe for me and another camper with celiac, and make sure those don't get cross-contaminated.

How do you talk to other campers about allergies and accommodating campers with allergies (such as the changing places and separating out food that Sam just mentioned)?

SAM:

I think it's a good idea to go to camp with a few friends in general, but it's especially important when you have food allergies.

When I was younger, the counsellors would monitor compliance: no food sharing, hand washing, etc. Now that I'm older, I'm more confident, so I can take care of myself, and others are more mature & understanding.

PATTI:

There's no stigma attached to having an allergy. There are so many allergies at camp. It's really beautiful to see other cabin-mates support each other and look out for each other. They remind each other to be safe and to keep their allergic cabin-mate safe.

TAN:

Everyone can be eating a different meal at the same table: vegan, vegetarian, kosher, allergy-safe, etc. so there's no stigma in having "different" food. Also, I try to buy things that cover as many bases as

possible (vegan, gluten-free, allergy-safe, kosher, etc.) so lots of campers with different dietary needs may be eating the same thing.

LEWIS:

Camp teaches many skills, but the social ones are the most important. It's very important to teach kids how to advocate for themselves, how to be considerate of others, etc.

I am a former counsellor and staff member at overnight camp. I was head of canoe trips. I know that staff, esp. younger staff, are not always responsible. How do you handle canoe trips? How do you handle staff who come back from "Town Night" drunk, bring outside food back into their cabins, or make other bad decisions that put campers at risk?

SAM:

The whole cabin doesn't go on canoe trips at one time, only 6 people at a time. I've never gone on a canoe trip b/c I don't feel comfortable.

BECCA:

At a day camp, we have CITs and very young counsellors. They can go out for lunch, and potentially bring allergens back. In my experience, the younger staff has a higher level of fear about allergies, they are not at all blasé about it. I teach them how to prevent reactions, how to recognize signs of a reaction, how use an EpiPen. If anything, my most difficult task is to teach them how to stay calm.

LEWIS:

I focus on staff training. All of our staff are either 18 yrs old or high school graduates. Most of them have gone through Northland as campers, so we know them quite well. Now, we have a new 2 year training program for anyone who wants to be on staff at Northland. They have to apply and interview. In the 1st year, they learn about the camp facilities, the ages & stages of child development, etc. In the 2nd year, they learn how to be leaders, how to keep kids safe and help their development.

Of course, you have to deal with the "one of" situations, when the staff get drunk, when they come back to the cabins with forbidden foods, etc. The important part is how you deal with it.

KAREN:

I know that there will be Visitor's Day, camp trips, etc. where people will have access to food. But I know that the camp staff is diligent about removing unsafe foods.

As a parent, I make sure that my allergic child knows not to share food. I make it easier for him by making sure that he has enough safe junk food that he feels included in the party even if he's not having the same treats that the other kids are having.

PATTI:

I would make sure to put more mature staff in charge of campers with health issues. I wouldn't have junior counsellors in charge of a cabin with campers with allergies, diabetes, epilepsy, etc. Also, the senior staff (directors and unit heads) do periodic raids on the staff & campers to make sure there is no contraband food in the cabins.

TAN:

People are going to bring junk food into camp; the important part is to make sure it is safe. For staff, we have a “junk night” in the dining hall so they aren’t tempted to have it in their cabins.

We are a peanut/ tree nut safe environment. Staff bringing peanuts or tree nuts into camp is a fireable offence.

At Wahanowin, we want all kids to go on a canoe trip. Generally, the peanut/ tree nut allergic kids will go. The parents of kids with other food allergies may be more cautious. This past summer, 2 allergic kids went on canoe trips. They were allergic to sesame & mustard, so I just planned meals without these things for everyone on the trip. Also, to keep everyone safe on canoe trips: they never go more than 30 mins from the drop-off location, they always carry a satellite phone, and we have a detailed itinerary of where they will be.

In the camp kitchen, we prepare special diets separately. We don’t use the same fryer, we buy special pans, etc. We started offering a whole gluten-free diet recently, so we bake our own bread and make lots of things in house to accommodate the various diets.

PATTI:

Our camp is only 1.5 hrs from Toronto. Sometimes the parents come up with their kids during training to meet the directors, kitchen staff, counsellors, etc.

BECCA:

Communication is key. Remember that the staff is nervous too, and wants to keep the child safe. If they feel comfortable calling the parent to ask questions or check ingredients, it’s better for everyone.

SHARI:

It’s important to educate your child first: educate them, empower them, teach them the rules (don’t share food), talk about responsibility, etc.

How do you prepare a child for camp?

LEWIS:

Lots of camps have an “intro to camp” a weekend or few day session to get the kids used to being there, or a “family camp” where parent s& kids can go together.

We think in terms of a long-term investment in campers. Come for 4 days to try it out.

We also try to keep the parents engaged & informed. We post between 100-1300 pictures on our website every day. I send a nightly newsletter to the parents about what happened at camp that day. For new campers, we contact the parents within 24 hrs of the child’s arrival at camp to let them know how they are settling in. Parents can email or contact any staff member any time with concerns or questions.

PATTI:

We have a 1 day, 3 day or family weekend so you can come up while the camp is running and see what it’s like. We have a short 10 day session to ease kids in. We have a day camp partner, so kids go to the day camp for a week and then come up to camp with the same counsellors for 5 days.

It’s normal for kids to feel anxiety when they are away from home for the first time. We try to manage that anxiety and make the transition easier for them.

What cleaning procedures do you have in place for cleaning the buses?

PATTI:

We have our own camp bus for getting people into town or to inter-camp events, which is cleaned. But we hire coach buses to bring everyone to and from camp. Those are rented, and I have no idea about their cleaning procedures. I would have to ask the company. But that's a good point, I never thought of it. You might want to give your kids some wipes to clean their seat before the trip.

(PARENT: I sent my child to camp for 6 days and sent her with a pack of hand wipes to clean the bus seat, the dining hall table, etc.)

Are there counsellors on a day camp bus?

BECCA:

Yes, there is always a counsellor on the bus, and they would know all the campers on the bus.

You've all spoken about the preparation & training that you do before camp, which is very impressive. But we all know that systems fail. Can you tell us how often there has been an allergic reaction at your camp & what was done?

BECCA:

I've worked at day camps for 15 years and experienced only one allergic reaction at camp during that time. The camp was for 3-6 yr olds and we had a costume bin, where the kids could pick out a costume & put it on. One of the children broke into hives around his mouth after putting on a costume. It didn't seem to be a serious reaction, so we called the parent who came quickly and determined that he just needed Benedryl. We think that the child that wore the costume previously probably had milk on his face, which rubbed onto the costume when he was pulling it on or off, and then that rubbed onto the allergic child when he put it on. But I wouldn't have thought that a costume could cause a reaction.

SHARI:

I know that they administered an EpiPen to my niece at Walden when she had a reaction to a bee sting. The staff administered the EpiPen and took her to the hospital.

PATTI:

Most overnight camps have a doctor on staff. We have a doctor plus 3 other health care workers, so there is medical staff available on site 24/7.

We have had a few allergic reactions to bee stings over the years. We administered an EpiPen and took them to the hospital.

Have any of you had an allergic reaction to food at camp?

(everyone on panel shakes heads no)

TAN:

No, none. We have EpiPens in the kitchen, in first aid kits, near the campfire site, on canoe trips, etc. We've never had to use one for food.

BECCA:

Remember that camps aren't regulated like schools & day cares. You should check to see what their policy is about Epipens.

PATTI:

Most big camps are accredited by the Ontario Camp Association, which has certain standards to be accredited.

(Parent: Not all camps are accredited. You should research any camp you're considering to see if they are.)

Be sure to create open lines of communication.

Empower kids to ask questions, to enquire about and answer questions about ingredients

Check about cell phone receptions, onsite medical care, and proximity to hospital.

Can you please give some general information about the staff: camper ratio at your camps?

Wahanowin:

We have 400-450 campers, age 7-15 yrs old.

For grades 1-2, 2 staff for 4 campers. For older kids, 2 staff plus 2 specialists (e.g. swim instructors, sail instructors who sleep in the cabin) for 8-12 campers.

Timberlane:

Largest 4 staff for 16 campers (at older ages)

Northland:

500 campers, 6-16 yrs old

For young kids: 6-8 campers with 2-4 staff

(missed older kids ratio, sorry)

Ratio at free time: 1:2 or 1:4

Meeting wrap up: Thank you to all our panelists on behalf of TAEG!

My Action Plan – from TAEG meeting discussion

I plan to create/update (circle one) my emergency kit by:
_____ (specify date)

The additional items I need to include in my family emergency kit are:

Mix and Chat – Emergency Kit

Welcome to TAEG!

Let’s talk emergency preparedness. Chat with others in the group and find people who meet the criteria listed. Write their names in the spaces below.

Find someone who...	Name (no repeats please)
... has an emergency kit	
... has updated their emergency kit in the past year	
... has used their emergency kit in an emergency	
... has used items from their emergency kit in a non-emergency situation 😊	
... has additional epi pens in their emergency kit	
... bought their emergency kit ready made - where did they buy it?	
... put together their emergency kit themselves	

Emergency Kit Checklist - from www.getprepared.gc.ca

In an emergency you will need some basic supplies. Be prepared to be self-sufficient for at least 72 hours. These items may not apply to every situation or every person; refer to the appropriate section in this guide for additional recommended items and select them according to your own needs. Check your kit twice a year to ensure contents are up to date. Restock as needed.

Basic emergency kit checklist

- Water – at least two litres of water per person per day. Include small bottles that can be carried easily in case of an evacuation order
- Food that won't spoil, such as canned food, energy bars and dried foods (replace food and water once a year)
- Manual can-opener
- Wind-up or battery-powered flashlight (and extra batteries)
- Wind-up or battery-powered radio (and extra batteries)
- First aid kit
- Special items such as prescription medications, MedicAlert® bracelet or identification
- Extra keys to your car and house
- Cash in smaller bills, such as \$10 bills and change for payphones
- Special items according to your needs (i.e., prescription medication, infant formula, special equipment, pet food and water, etc)
- A copy of your emergency plan and contact information
- Other: _____

Recommended additional items checklist

- Two additional litres of water per person per day for cooking and cleaning
- Candles and matches or lighter (place candles in sturdy containers and do not burn unattended)
- Change of clothing and footwear for each household member
- Sleeping bag or warm blanket for each household member
- Toiletries, hand sanitizer, utensils
- Garbage bags for personal sanitation
- Toilet paper
- Minimum of a week's supply of prescription medications
- Household chlorine bleach or water purifying tablets

- Basic tools (hammer, pliers, wrench, screwdrivers, work gloves, dust mask, pocket knife)
- Small fuel-operated stove and fuel (follow manufacturer's directions and store fuel properly)
- A whistle (in case you need to call for help)
- Duct tape (i.e., to tape up windows, doors, air vents)
- Detailed list of all special needs items, in the event that they need to be replaced

Tip: Have a phone at home that does not require electrical power to work (i.e., a corded phone or a TTY).

Non-Visible Disabilities – from www.getprepared.gc.ca

Individuals with non-visible disabilities may have difficulty performing some tasks even though their condition is not apparent. Non-visible disabilities can include communication, cognitive, sensory, mental health, learning or intellectual disabilities which may impair an individual's response to an emergency. Conditions can include allergies, epilepsy, diabetes, pulmonary or heart disease, and/or dependency on dialysis, different supplies, etc.

Your emergency plan

- Keep an emergency contact list on your person. This list should note key people that are aware of your special needs.
- Inform your designated support network of where you store your medication.
- Consider wearing a MedicAlert® bracelet or identification to help notify emergency responders about your special needs.
- Request that a panic push-button be installed in your work and living areas so that in an emergency you can notify others of your location and that you need special assistance.

Recommended additional items checklist

- Supply of food items appropriate to your dietary restrictions
- List of instructions that you can easily follow in an emergency
- Personal list and minimum one-week supply of all needed medications, medical supplies and special equipment (i.e., ventilator for asthma, nitro lingual spray for a heart condition, an epinephrine pen against allergic reactions or anaphylactic shock, etc.)
- Detailed list of all prescription medications
- MedicAlert® identification
- Other: _____