State Camp Safety Advisory Council (SCSAC)
October 29, 2014 Meeting Minutes

Members Present: Jordan Dale, George G. Coleman, Eric Bacon, Dawn Ewing, Gordon Felt, Meir Frishman, Robert Scheinfeld, Dr. Thomas Welch

Members Absent: Douglas Pierce

Department of Health Staff Present: Michael Cambridge, Timothy Shay, Brian Miner, James Maurer, and Lauren Townley

Chairperson Jordan Dale called the meeting to order at 10:32 a.m., at the New York State Museum, Conference Room A/B, 260 Madison Avenue, Albany, New York. Doug Pierce was absent. A quorum was present.

Council Administrative Business

Mr. Shay updated the Council regarding membership appointments and reappointments. Eric Bacon, Meir Frischman, and Rob Scheinfeld were re-appointed. George Coleman’s reappointment is still in process. Dr. Thomas Welch was appointed to the vacant position on the Council representing Children’s Interests. The Council approved the minutes from the last Council meeting held on April 30th with some minor edits.

Youth Mental First Aid

Nanci Kennedy and Julie Glaber of Westchester Jewish Community Services gave a presentation on a Youth Mental Health First Aid (YMHFA) certification course. The course is administered by the National Council for Behavioral Health. The purpose of this 8 hour training is to prepare non-mental health professionals (teachers, camp counselors, etc.) that interact with adolescents (ages 12-18) to act as first responders when a child is experiencing a mental health crisis. Over 20% of youth aged 13-18 have a mental disorder (anxiety, behavior, mood, or substance use disorder) with severe impact. Though mental health problems are common, the negative stigma and lack of knowledge about mental disorders impedes the delivery of adequate support. This youth mental first aid training helps to develop the skills needed to identify atypical adolescent behavior and intervene in situations where immediate action is needed. Though the training course is not intended to replace professional diagnosis and treatment, those certified can connect adolescents in need with appropriate professional help.
Overall, the Council expressed support for this course. It was agreed that it would be ideal to incorporate the youth mental first aid training components into existing CPR/First Aid certification programs in order to reduce the burden of obtaining an additional certification. The Council discussed possible ways to introduce the training to camps, including offering the training at the American Camp Association (ACA) Tri-State Conference and adding information in the camp safety plan template. Mr. Shay agreed that the Department could update the camp safety plan template with this information.

**Parental Access to Camper Records**

Mr. Shay presented the Council with a complaint that was received this summer from a parent. A father had tried to access his daughter’s medical records on file at the camp she was attending and was denied access. The mother and father are separated, but the father provided documentation showing equal custodial rights. The father asked the Department to add a requirement to the children’s camp regulation similar to the School Age Child Care (SACC) regulation 414.15(a)(8)(I) that allows parents unlimited and on demand access to written records concerning their child, unless otherwise restricted by law. Mr. Shay asked the Council for their recommendation regarding a possible amendment to the children’s camps regulations. The Council discussed the issue and determined that though it is a difficult situation that can be frustrating for parents, it is not a health issue. Other agencies (i.e. family courts) are better suited to deal with this problem on a case by case basis. Camps are bound by applicable law, and it was felt that the laws that are already in place are sufficient to address this issue. The Council did not recommend any changes to the camp regulations.

**Justice Center/Status of Amendments to Subpart 7-2 - Update**

Mr. Shay reported that emergency amendments to Subpart 7-2 of the State Sanitary Code, which were developed as a result of the Justice Center legislation, were approved again by the Public Health and Health Planning Council (PHHPC) on October 2, 2014. There have been no changes made to the emergency amendments since they were initially passed in June, 2013. Emergency amendments are valid for up to 90 days. The Department is waiting for the Justice Center to finalize their regulations prior to moving forward with permanent regulations to Subpart 7-2 to ensure consistency.

At the last meeting, Mr. Shay conveyed the PHHPC’s concern regarding the application of Section 7-2.25 only to camps with 20% or more campers with a developmentally disability. The PHHPC asked the Department to re-consider the 20% threshold and make the requirements applicable to any camp that enrolls developmentally disabled campers. Mr. Shay had requested advice from the Council regarding the applicability of the additional requirements and to consider the appropriateness of the current 20% threshold for future amendments. The Council had requested additional time to consider the matter.
Mr. Shay asked the Council if they could now provide their recommendations for making the additional requirements applicable to any camp that enrolls developmentally disabled campers. Several concerns were raised by the Council. One concern was that imposing the additional requirements on camps with even one developmentally disabled camper would be burdensome and may lead to campers being excluded from camp. A second concern was that there could be unintended consequences for applying the regulations to all camps with disabled campers. A third concern was the financial burden that the additional requirements would place on camp operators. Also there was concern with the current definition in the regulation of a developmental disability. The Council felt that the definition would apply to campers with minor disabilities that would not require additional safeguards (i.e. campers with seizure disorders). The Council determined that the current definition should be reviewed and a new definition be included in the regulation. Mr. Felt was asked and agreed to draft a new definition for a developmental disability. The Council agreed that the 20% threshold should be reviewed, though it was recognized that this review process could not be completed before the next PHHPC meeting in January.

The Council reviewed each of the requirements in Section 7-2.25 and identified a few requirements that they felt were not too burdensome and could be applied to all camps accepting developmentally disabled campers. However, a majority of the requirements were highlighted as being too burdensome or as needing more thorough assessment before a recommendation could be made.

A motion was passed unanimously to formally agree to and accept the recommendation from the PHHPC that the 20% threshold for the additional requirements at camps with developmentally disabled campers should be reviewed and, in addition, the definition of a developmentally disability should be reviewed, but that the Council needs more time to ensure no unintended consequences from the regulation.

**Mandatory Training for Camp Operators**

Mr. Shay presented the requested topic of mandatory trainings for camp operators. Several county health departments require camp operators to complete an annual training prior to being issued a permit. The training is not currently a State requirement. Pete DeLucia from Westchester County Department of Health spoke about his county’s required training program. The annual training is used to disseminate new code changes and guidance. There is also a continuing education component with presentations on topics of interest to the camp operators. This allows camp operators that are not able to attend national conferences to be kept up to date on current topics. The Council felt the trainings provided a good opportunity to create a positive working relationship between operators and local health departments. Concerns were raised regarding the ability of counties to fund the trainings and the ability of counties with a small number of camps to develop a useful training program. It was suggested by the Council that workshops could be done regionally or in combination with multiple jurisdictions to address these
concerns. Mr. Cambridge agreed to bring the topic up for discussion at the next Conference of Environmental Health Directors to get local health departments’ view and concerns with a requirement for mandated operator training.

**Supervision of Boating Activities**

Mr. Shay reported that guidance developed by the Council on supervision of boating activities was included in the spring 2014 program issues memo to local health departments. A draft fact sheet has been developed based on this guidance and is almost ready for internal Department review. It is hoped that the guidance will be ready to be distributed to local health departments prior to the next camp season.

**2014 Overview**

Mr. Shay reported on significant incidents that occurred during the summer of 2014. There were two camper fatalities. One camper fatality was a nine year-old female camper that died as a result of an undiagnosed medical condition that led to a cardiovascular event and brain death. The second fatality was a 23 year-old developmentally disabled camper that died as a result of a pre-existing medical condition. In both cases, no deficiencies in protocol were found and the emergency response was adequate.

There continues to be large illness outbreaks at camps associated with gastrointestinal viruses. One case in 2014 involved an outbreak at a camp with over 120 cases. It was found that the camp was not following adequate isolation procedures. In contrast, an influenza type b outbreak that occurred at a large camp was limited to just 2 cases. In this case, the camp followed proper isolation procedures and were able to keep the outbreak contained. Mr. Shay asked the Council for suggestions on ways to disseminate proper isolation procedures to camps in order to increase consistent compliance. It was suggested that guidance be provided at a less busy time of year (possibly the fall) when more attention can be given to the issue. In addition, it was suggested that covering illness response procedures during annual camp operator trainings would be an effective mechanism.

The 2011 Summary Report of injury and illnesses has been completed and was provided to the Council prior to the meeting. The 2012 Summary Report is completed and will going through internal review. The 2013 Summary Report will be completed in the next few months. Both the 2012 and 2013 reports will be provided to the Council when they are finalized.

**Amusement Devices**

Mr. Shay presented an update on amusement device oversight. A fact sheet and guidance on implementing the DOH and Department of Labor (DOL)
Memorandum of Understanding was sent to local health departments prior to the operating season. Between 650 and 700 devices were inspected this year by 32 local health departments at over 200 camps. Mr. Shay requested feedback from the Council on implementation. The Council reported that they have heard feedback from camp operators that local health departments were applying the requirement for professional engineering designs for new rope/challenge courses inconsistently and there was confusion as to when engineering designs are required. Mr. Shay clarified that professional engineering designs were only required for newly constructed devices and not required for existing devices. Several audience members, who are camp operators, expressed concern that the requirements were restrictive and expensive, to the point where these devices would become cost prohibitive. Their main issue was with the requirement for an engineer to design new rope/challenge courses. Operators are having difficulty finding an engineer experienced and willing to design the elements through trees. It was emphasized that the Association for Challenge Course Technology (ACCT) already has industry operational and structural standards for these types of devices that they agree should be followed. Mr. Shay commented that he inquired with the New York State Education Department, who licenses engineers, and they concurred that design of a high ropes/challenge course would fall under the purview of a licensed engineer. Dr. Welch commented that he has authored an article regarding high ropes/challenge course injuries and no injuries were found to be associated with structural failure of an element. It was also noted that the DOL is not requiring engineered plans for ropes/challenge courses they are overseeing. Depending on the device, local building enforcement codes would also apply. The Department agreed to look into the requirement for a professional engineer designs for new ropes/challenge course.

**Local Health Department Permit Fees**

Mr. Shay presented a follow up to previous discussions regarding local health departments charging more than the camp permit fee allowed by statute. Mr. Cambridge commented that the Department reviews all codes before they are adopted. If permit fees are inconsistent with Public Health Law (PHL), the Department will notify the jurisdiction of the inconsistency for correction. Audience member Gene DeSantis commented that he has heard from several camp operators within two separate jurisdiction that higher fees are being charged. The Department said they would follow up with those jurisdictions to notify them of the amount allowed by PHL. The Council requested a letter from the Department specifying that the camp permit fee set by statute should not be exceeded by local health departments. The Department agreed to follow up with its legal Counsel to determine if a letter can be sent to the Council.

**Next Meeting/Adjournment**

The Council adjourned after tentatively scheduling the next Council meeting for Tuesday, March 11, 2015. Subsequent to the meeting, the DOH identified schedule conflicts and the meeting was rescheduled for March 24, 2015.