

Camp Mosh Health Protocols



Staff Role in Health Care

Our infirmary is staffed 24/7 by two RNs, either licensed in Maryland or in a nursing compact state. We have a consulting physician who our nurses and Camp Director can access with any medical questions. A staff medic supports the nursing staff.

The majority of staff are certified in First Aid, CPR, and AED. The camp requires a staff member certified in first aid and CPR/AED is on duty at all times when campers are present.

Mashatz (Unit heads) will run an evening meeting, *yeshivat laila*, for each *tzevet katan* (unit staff). At this meeting, they will go over every child in the age group, checking in about their physical, mental, emotional, and social health, and making plans to address any challenges.

During staff orientation, the camp staff are trained in the following:

- the role and responsibilities of staff in recognizing illnesses & injuries.
- the use of healthcare supplies and equipment.
- identify those situations that should be attended to only by a designated healthcare provider.
- detailed information about their specific campers' medical needs, including diet, allergies, etc.
- attention to camper hygiene.
- proper camp cleaning practices.

Cleaning

The *Rashei Mitbach* (kitchen managers) are ServSafe certified and ensure that all kitchen activity is compliant with food safety standards. We pass and remain in compliance with our annual state kitchen inspection.

The *Rashei Chadar* (dining hall managers) are responsible for maintaining the cleanliness of the dining hall at all times, including daily mopping and wiping all surfaces and tables, with sanitizer, after each meal.

Weekly deep-cleaning of all spaces at Mosh by *tzevet* and campers include: living spaces; bathrooms; MLC; *Sif*; and *Chadar Ochel*.

Daily cleaning of MLC, *Sif*, Marp, *Chadar Ochel*, and bathrooms, using appropriate disinfecting solutions based on the space, are supervised by trained staff with the use of checklists. Bathrooms and the dining hall are mopped daily. Daily cleaning of living spaces takes place during *rachatza* (mid-morning break).

The medic is responsible for daily use of electrostatic sprayers on high-touch areas, such as all doors at camp, bathrooms, and dining hall.

Anaf ashpa (trash work group) is responsible for daily trash removal from all areas at camp.

Personal Care

Lower *shetach* campers (rising 3rd-7th graders) will have a specified shower time daily. For upper *shetach* campers (rising 8th-12th graders), their *tzevet* will ensure that they shower daily at appropriate times.

The *mashatz* will check in with the *tzevet* daily about the hygiene of their campers and help plan interventions, as needed. *Tzevet* are expected to return to their *ohel* slightly before bedtime so they have a better sense of who has showered that evening. Mosh provides toiletry products to any camper or staff member who does not have them.

Sickness at Camp

The following guidelines for care are all to be treated as contextual. In all cases, we will follow the best judgment of our nurses, treating physicians, and camp staff.

Camper remains at camp (given we have space/staffing):

- Camper has a non-infectious, stable condition.
- Camper diagnosed with infectious condition but can be treated by antibiotics.
- Camper has fever or is otherwise unwell, but without diagnosed illness. If we do not have enough space/staff available to accommodate for this, camper will be sent home after 48 hours of continued fever.

Camper will return home:

- Camper diagnosed with an infectious condition that cannot be treated via antibiotic, such as COVID, hand-foot-and-mouth disease, or other highly-transmissible viral infection.
- Serious injury we cannot accommodate at camp, such as unstable fracture.
- If we have a disease outbreak of over five children, we may need to send diagnosed campers home to convalesce, due to lack of space and staffing and to protect against spread. These decisions are case-by-case and situational; the decision to send campers home remains at the discretion of health care staff and Camp Director.

Communication

Camp Mosh commits to communication with parents in these situations:

About your child: if your child stays overnight in the *mirpa'ah* (health center), sees a physician, or returns to the *mirpa'ah* with a repeated complaint.

To all parents: if we have multiple cases of the same condition occurring at camp. If we think this may affect campers no longer at camp, we will also inform families of campers no longer at camp.

Parents should contact the health center directly via their new private phone line at 410.893.7006 and/or their email moshnurse@campmosh.org.

Communications to the Mosh summer office should be directed to 301.348.7339 and/or info@campmosh.org.

Mental Health

Mosh also maintains many policies and procedures regarding camper mental health, which are not found in this document. To learn more about that, please be in touch with Co-Executive Director for Camp Experience, **Talia Rodwin**, at talia@campmosh.org.