



By Karen Schmidt

Camp Nursing: A Unique Specialty

ABSTRACT: *Camp nursing offers a unique opportunity for nurses to invest their skills in a novel setting. Nurses fill an essential role in the camp environment and have opportunities to practice a wide variety of tasks with diverse populations of children and teens. The purpose of this article is to inform potential camp nurses of the skill set and aptitudes most inclined to ensure a successful and satisfying camp nursing experience. Serving at a Christian camp also allows nurses to reflect Christ and invest in the faith journey of campers and staff.*

KEY WORDS: *camp, nursing, pediatric nursing*



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*Names changed to protect privacy.

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When Corrine* signed a contract to work as the nurse at a summer horsemanship camp, she envisioned applying Ace wraps to twisted ankles when campers improperly dismounted their horses, maybe smoothing topical ointment on some bug bites, and the hopeful potential for a casual evening saunter on a horse along a tree-lined trail after the campers finished their rides for the day. Twisted ankles and bug bites did appear in her daily health center documentation, but seemed tame compared with the anxiety-induced, high-pitched weeping one camper experienced every time she faced a horse, the health center lockbox brimming with campers' (and staff's) psychotropic meds and rescue inhalers to be administered multiple times day and night, two confirmed concussions, and the rampaging gastroenteritis that flattened most of the already-fatigued college-aged staff over the course of 11 days.

As the last camp ended and staff packed up to go home, Corrine had an epiphany: She had arrived as a neophyte who didn't know what she needed to know, but was leaving with invaluable experience—and a desire to be a camp nurse again next year.

THE SPECIALTY OF CAMP NURSING

“Camp nursing is not just hanging out at the pool,” affirmed Tracey Gaslin, PhD, RN-BC, CPNP, FNP-BC, CRNI, Executive Director of the Association of Camp Nursing (ACN). Gaslin works at camps each year along with administration of the nursing organization that provides abundant resources and training; the organization also conducts research within the specialty of camp nursing.

More than 14 million kids are served in summer camps in the United States each year, according to the American Camp Association (2021), and those children all need healthcare while away from home. “You also need to add the camp staff, most in the age range of 18-22, to those needing services. These staff may not yet be adults in respect to managing their personal health care needs,” Gaslin said.

Camp nursing is a specialty in its own right and presents a unique opportunity for nurses to apply their skills in an outdoor setting, gain new competencies and knowledge, and care for diverse populations for a week or an entire summer. A camp nurse may be an advanced practice nurse (APN), a registered nurse (RN), or licensed practical/vocational nurse (LPN/LVN). Some camps use emergency medical technicians (EMTs) or paramedics, and some camp health centers also have physicians on staff.

The variety of camps and thus, camp health situations, is diverse. A nurse might be hired to join a group of healthcare professionals staffing a well-equipped clinic at a camp in the mountains or at a lakeside. Healthcare workers



might accompany a backpacking or cycling camp, or serve at a single interest camp: soccer, music, or science, for example. Nurses are needed for every kind of camp experience from day camps to weeklong to full summer camps as well as those for special populations: children with health concerns such as diabetes, autism, visual impairments, or posttransplant, those in foster care, all girls or all boys, or inner-city kids who've never been outside an urban environment.

The diversity of type and location of camps varies dramatically, as do the

healthcare models that camps use and the personnel hired. Gaslin explained, "Every camp has a broad scope of tasks that the nurse does, but they're done in many different ways." For example, serving as the only nurse at a small church camp in a scenic forest 65 miles from the nearest medical clinic or fire/EMT station has unique challenges and demands compared to working with five other licensed staff (including an MD) in a fully equipped camp health clinic 10 minutes from a hospital with an emergency department.

"One thing to be aware of," Gaslin advised, "is that every camp must have

healthcare personnel to operate, and most camps are constantly challenged to fill their healthcare staffing needs. The person who oversees camp—the camp director—generally has zero health care training and knowledge," Gaslin said. "So you often have a camp director trying to hire a nurse who doesn't know what to ask the nurse about experience or knowledge. They [camp directors] often don't know the whole scope of camp health services."

A starting point for a nurse interested in camp nursing is to know the nurse practice act/scope of practice for the state in which the camp is located. This framework provides a grid of beginning questions the nurse can ask about the expectations of the healthcare staff, the setting, and type of campers, providing a glimpse of what daily camp life might involve and the kind of healthcare potentially needed. (See Sidebar 1: Position Wanted: Camp Nurse)

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A DAY IN THE LIFE

A camp nurse's life can be wildly variable or relatively mild, depending on the type of camp and campers, the number of people at the camp (including staff/counselors), and how many other healthcare staff are employed. In settings with several nurses, healthcare staff have scheduled shifts in the health center and are on-call for needs outside health center office hours. Jessi Yarnell, an LPN who has worked for several years as the single nurse at a Bible camp in a national forest 15 miles outside a town, summarized her camp weeks: "It's a 24/7 job of just go-go-go. They [campers] wake me up all night long; I just expect that. I'm constantly going." Like many nurses, when she's not in the nurse's station, Yarnell totes a backpack with first aid supplies, hydration, and often, campers' meds.

Although the demand for her services can be wearing, Yarnell, who grew up attending the camp and later served as a counselor, loves the job and the opportunity to relate to the

campers. "I like to be with the kids. We have a little nurses' station at camp, but I want to do what the kids are doing."

Larger camps often have a healthcare team that shares responsibility for staffing the health center and taking call. A typical day would include time in the health center (2-3 times a day) to dispense medications and tend to health complaints: upset stomachs, bug bites, rashes, wounds, and a plethora of other needs, as well as documenting all care and situations encountered. When not tending to camper and staff needs, nurses can observe and participate in the camp activities as well as enjoy personal time. (See Sidebar 1.)

The start of each camp session may be the busiest single event of the camp nurse's experience, as campers arrive and often are screened by healthcare staff who receive medications and instructions from parents. At some camps, the nurse assesses campers individually at this time to verify the accuracy of the health forms submitted when campers registered, and deter-

mine if the camper is healthy. Each camp has its own procedures related to intake screening, which requires the licensure of RN or higher.

During the camp day, the nurse makes rounds to the various areas of the camp to check on supplies and equipment, restocking as needed. Additionally, the nurse ascertains and works to remedy gaps in health and safety procedures. One nurse discovered, after a volunteer was burned while baking in the camp kitchen, that first aid and emergency supplies were badly lacking in that area of the facility. Another RN, during the daily visit to camper areas, observed that campers and counselors were wearing flimsy flip-flops while playing a vigorous game of kickball on a concrete surface.

BEYOND BAND-AIDS AND BUG SPRAY

Providing first aid and triaging injuries or a flu epidemic are common facets of a camp nurse role. However, most camp nurses attest to providing more care for emotional needs than for physical ones. Nurses often care for children who are away from home the first time and feeling lonely or anxious, those experiencing friction with other campers, and kids with a background or home life involving trauma. One camp director recalled a young teenage girl who made multiple visits to the health center. The nurse could discern no medical needs, but eventually learned that this teen lived in a foster care home as the result of childhood abuse. The nurse generously gave time and attention to the camper throughout the camp session, making the health center a safe place for the student to relax or unwind each day. The nurse later told the camp director, "For this camper, it really isn't about a Band-Aid. What this kid was looking for was someone she could trust." This student came to understand that the nurse was safe, someone who could "put a Band-Aid on a sore place" that no one could see.

Gaslin affirmed that behavioral health management has grown into a significant aspect of camp healthcare.

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“There are more behavioral health needs now in staff as well as in campers. Due to many variables and the lack of support systems at home, when kids get to camp, they have a counselor or a nurse who listens. Kids share all their previous neglect, abuse, and challenges at home. At camp, they’re in a safe environment with someone who cares about them.” She added that an ACN research study of 870 camps about camp medication management demonstrated that the most common medications brought to camp are psychotropic (Funk et al., 2021).

Jessi Yarnell said she discovered that many campers are taken off their behavioral health meds during the summer, which makes it hard to know which individuals may need certain approaches to their behavior and emotional needs during camp. “I try to partner a counselor with a kid who’s having behavioral problems to get the student engaged and help him or her get along with other kids.” Creative solutions help, too. “I found that I could give one camper with ADHD a soda with caffeine when he got unruly. It helped him calm down some,” she said.

KEY FUNCTIONS OF A CAMP NURSE

Based on feedback through ACN surveys and research, Gaslin described the five top activities of camp nurses: health screening, documentation, delegation, medication management, and communicable disease management.

Health screening

Screening campers upon arrival can be a considerable task depending on the level of prearrival information provided. Nurses may encounter children who have symptoms of an infectious illness or have conditions that require decision-making about the child’s suitability to the camp program and setting.

Kris Mauk, PhD, DNP, RN, CRRN, GCNS-BC, GNP-BC, FARN, FAAN, a veteran of three summers of part-time camp nursing,

performed physicals as the week’s worth of campers arrive. She recalled detecting a heart murmur in a young boy. “His parents were present, so I was able to discuss my findings and concerns. Their son had never been told he had a heart murmur. They were able to follow up later with specialists and get a diagnosis. I was glad the Lord gave me wisdom during a routine assessment to help this family.”

In another scenario, the healthcare staff at a day camp realized that parents often neglected to provide all the information requested on health forms prior to the first day of camp. So the staff instituted a new protocol: One healthcare staff member met parents at the first day check-in to ask specifically about their child’s medications, allergies, and special needs, reducing the surprises and potential adverse situations that might occur during the camp week.

The American Camp Association (ACA) states that health screening can substantially reduce adverse illness at camp (Garst et al., 2010). “Camp professionals should conduct consistent, thorough screening procedures to minimize the potential that ill campers will affect the camp community” (Garst et al., 2010, section 6). The ACA recommends that screening start before arrival, when parents decide if their children are well enough to attend camp. The ACN practice guideline on health screening states,

Written health histories should be reviewed (pre-screened) to determine if the individual is, indeed, a good fit for the camp program. Pay attention to special needs, medications, allergies, immunization records, recent injuries and illness, dietary needs, and the individual’s ability to perform the essential functions associated with their camp role. Parents/guardians of minors should be contacted if information found during pre-screening requires clarification, verification, or additional information. (ACN, 2017a)

Prearrival screening is followed up with personally meeting campers and parents upon arrival to verify the accuracy of the health forms and assess campers for possible illness and to collect medications and special instructions from parents (ACN, 2017a). Nurses also should know state regulations regarding whether campers need physical exams or to submit immunization records for camp participation. Organizations such as the ACA and ACN have a plethora of documents, checklists, and articles on topics such as health screening procedures and records.

Documentation

The ACN expects that camp nurses be familiar with state requirements and ACA Standards related to documentation which can include health history forms, medication records, incident reports, and/or facility logs, “all integrally linked to providing evidence of comprehensive assessment, care, and nursing services provided at camp” (ACN, 2017b, para 1).

Legal concerns at camp can be minimized when camp nurses appropriately document their actions and interventions, and camper/staff responses. Documentation is critical to camp nursing practice, Gaslin advised. “The records kept by a camp’s health center become part of the camp’s legal records and are often used as a risk reduction tool” (Gaslin & Marugg, 2020, p. 7). Some camps have paper forms, logs and records, whereas others use electronic medical record (EMR) systems. As in other healthcare settings, privacy rules apply to camper and staff health records and information.

Delegation

Camp nurses, typically RNs, oversee the delegation of healthcare tasks to other camp staff, both licensed and unlicensed personnel, according to the National Council of State Boards of Nursing (NCSBN) Guidelines for Delegation (NCSBN, 2019) and in accordance to the camp’s stated procedures. Sometimes counselors, lifeguards, health center aides, or

volunteers may be delegated responsibilities for camper care or supervision. For example, some camps use volunteers to assist in the health center providing basic first aid, dispensing medication, or tending to sick campers in the health center.

Medication management

This significant aspect of camp nursing has health and safety implications for campers and liability ramifications for the camp. The ACA lists the following elements to camp medication management:

- Communicating about prescribed and over-the-counter (OTC) medications with parents before camp,

don't allow standing orders," she cautioned. "Then only the camper's provider can sign the order for medication." She advises first-time nurses who come from an acute care setting to remember that they need a written order for any medication given to a camper or staff member, including products such as acetaminophen or an antihistamine.

Communicable disease management

As illness, including upper respiratory conditions, norovirus, and lice, is a more common camp occurrence than injuries (Erceg, 2020; Handler et al., 2018), healthcare staff must be proac-

lowing the practices ingrained during the coronavirus pandemic, health-care staff must take initiative to clean and sanitize surfaces and high-touch areas, provide supplies (gloves, hand sanitizer, cleaning supplies, protective equipment), and give instruction on expectations throughout the camp facility (Gaslin, 2021).

Spiritual element

For Christian nurses, serving at a Christian or Bible camp is a unique opportunity. (See Sidebar 2.) Prayer can be as common as bug bites and campfires. When confronted with a child whose complaint isn't easy to figure out, Jessie Yarnell said she prays

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including written permission to administer OTC products.

- Stocking and replenishing medications at the camp in collaboration with the camp's medical advisor.
- Updating and using written guidelines/standing orders for medication dispensing.
- On arrival day, screening and processing camper and staff medications.
- Securely storing medications in compliance with ACA and state regulations.
- Informing appropriate staff (i.e., counselors) of medication needs of campers for whom they are responsible.
- Administering routine medications to campers and staff, or delegating (and supervising) this responsibility.
- Documenting medication administration—both routine and as needed. (Marugg, 2000)

Gaslin emphasized that the nurse should make sure the camp has current standing orders written by a local provider who reviews the orders and signs them every year. "Some states

are more strict than others," she said. "We don't allow standing orders, and we're regular in screening incoming campers and staff for signs of illness and regularly evaluating healthcare practices that eliminate or reduce the spread of contagious disease."

The author experienced three consecutive summers of waves of a norovirus-type illness sweeping through the 100+ college-age counseling and summer staff at a large camp and conference center. Most camp health centers cannot isolate multiple individuals, so individuals may have to be isolated in staff housing, tended by the nurse and unaffected helpers, while those who are not sick attempt to fill the staffing needs.

Educating young adult staff about self-care, safe and sanitary health practices, and the importance of reporting emerging symptoms is an essential facet of the camp nurse role. The healthcare staff can model this behavior by maintaining a clean health center and inspecting other camp areas (kitchen and eating areas, restrooms, sleeping areas, pool) where sanitation and well-person health practices should be maintained. Fol-

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children receive Christ as their personal Savior and others yield their life to the Lord,” she added.

Kris Mauk shared how, while serving as a camp nurse, she was asked to fill in as a chapel speaker when the scheduled pastor had to cancel due to illness.

I shared with the campers about the importance of family, using Abraham, Isaac, Jacob, and Joseph as examples, in addition to sharing about my own family. The young campers responded to the stories of Joseph and all his life problems and how God was with him through it all. I was able to share about miracles in my own family with the adoption of our 3 youngest children, and that families are not perfect, but God can still use them. During that camp, several children made the decision to follow Christ. I had almost forgotten the joy of seeing children being saved but was grateful that I could play a small part in lighting the path toward Jesus. Camp nurses must be flexible and willing to let God use them, even though it may not always be in the role of the nursing.

TAKING THE PLUNGE

Because camp nurses are in high demand, finding a position is best started by engaging in self-assessment and reflection. Gaslin suggests asking oneself, “What seems the best fit for me? Where do I think I’ll be most well suited? What’s my comfort level?” Job boards are available along with plentiful guidelines and articles on camp nursing on the websites of the Christian Camp and Conference Association (CCCA), the American Camp Association, and the Association of Camp Nursing (see Web Resources). Check out job boards and do some research. Many camps begin advertising jobs in September for the following summer (Sidebar 1).

Gaslin believes that the nurses who most enjoy and excel at their camp nurse roles share these characteristics:

1. Be intrinsically motivated. Be willing to self-educate, speak out about

Sidebar 1: Position Wanted: Camp Nurse

Because the person hiring camp healthcare staff often has minimal actual knowledge about the nursing done at camp, nurses must take initiative to find out the expectations for the role and a sense of the setting and population of the camp. Veteran camp director Bev McEntarfer and ACN director Tracey Gaslin offer these thoughts for prospective nurses on the hunt for a satisfying summer job.

McEntarfer, director for Camp Homeward Bound in New York for 15 years, recommends asking one’s colleagues and friends who have served as camp nurses for suggestions on where to apply. Consider the types of camps and what sort fits your personality: a camp full of children who come with physical or emotional needs, or one that is meant for healthy kids? Do you want to spend days at a time in the rugged outdoors or do you appreciate the comfort of a clean bed, hot showers, and a stocked health center?

When considering a position, look beyond the written job description to the person hiring you. Generally the camp director, who has no medical training, hires the healthcare workers. “Camp directors will look for the right person [for the job], but they can be very anxious to hire people on. Many nurses don’t know what to ask in the interview or what to look for,” McEntarfer said. Gaslin agreed: “Finding a camp nurse is the biggest challenge by far all summer. Camp directors can be desperate to have anyone with a license at camp.”

Learn what the daily work looks like. How many hours a day is the nurse expected to provide care? What back-up is there for the nurse(s)? Where is the nearest advanced care (hospital, clinic, or EMT station)? Who supervises the healthcare staff and how closely? How many other licensed staff will work with you? Does the camp provide insurance for the staff?

Get to know the clientele: How many campers attend each session and what is the camper-counselor ratio? Where do the campers come from and what are their ages?

“It’s not like interviewing for a regular nursing job,” McEntarfer cautioned. “It’s a live-in situation, so you can’t just go home at night. What you deal with in an 8- or 12-hour shift is not the same as a camp environment.” She counsels being cautious if a camp director does not ask many questions and is quick to hire on the spot. Ask if you can contact past years’ nurses to get a better picture of the job.

Camp Nurse Self-Care

The camp pool, forest trail, lakefront—or your bed—may be calling, but the camp nurse sometimes may feel like his or her work is never done. This is particularly true for the nurse who works solo. Being mindful of the potential of needs among campers, counselors, and other staff, wise camp nurses plan—and hold to—time off. When interviewing for a position, clarify how often and for what amount of time the nurse is not on duty. Then stick to the time-off schedule. Also ask who covers the nurse during time off.

Data from the Healthy Camp Study indicated that fatigue is a contributing factor to injury and illness (Garst et al., 2010). Camp healthcare workers should be sure policies are in place that reinforce the importance of staff self-care, including sufficient rest. Dubin et al. (2019) reported that the hectic camp environment could be stress-inducing for all camp staff, leading to fatigue. For nurses, this was most true when no healthcare-trained back-up personnel were available. “Nurses felt the pressure of the constant health care needs of the camp community, even during ‘time off’” (p. 82). In their article, “Working at Camp: It’s a Marathon Not a Sprint,” Jordan et al. (2020) advise camp staff to maintain self-awareness of their need for rest and a break from the job, and to intentionally use off-duty hours to recharge. “Acknowledging and confronting your feelings of fatigue are necessary steps to maintain physical and mental well-being” (para 13).

Sidebar 2: From PICU Nurse to Foster Camp Nurse: A Reflection

Recently I had the unique experience of switching my nurse hat from PICU nurse to volunteer camp nurse for a 5-day sleepaway camp for foster kids through my church and Royal Family Kids Camp. For 5 days, 42 volunteers staffed a camp for 28 foster kids, ages 6 to 12, to give them a week where they could simply enjoy being kids and be treated like royalty for a week. The counselor to camper ratio was 1:1 or 1:2, and the remaining staff served to run activities and support the counselors.

To put the potential significance of this camp for these kids into some perspective, one foster parent I spoke with at registration told me of some kids she has fostered who hated the idea of camp because their only previous experience of “camp” was when the previous adults in their lives took them camping, but shut all the children into an enclosed space where they couldn’t go anywhere while the adults indulged in drugs and alcohol. For some of these campers, this was the first real and safe kids’ camp they’d ever experienced.

As camp nurse, I was primarily responsible for medication administration, usually for issues like ADHD, depression, asthma and allergies, and then the expected duties with first aid here and there. I expected those duties. What I didn’t expect was to have a child come to me complaining of chest pain and sudden itchiness in the face, only to draw out from him that the only precipitating factor for his symptoms was a heated argument with his cabinmate that needed resolution and reconciliation. I told him, “You know, sometimes when I get really mad, my body feels really yucky too. Why don’t you go with your counselor to talk to your cabinmate about the fight and if your chest still hurts afterwards, come back and let me know.” He went with his counselor and didn’t come back to see me.

I didn’t expect to look out for bruising and swelling as some campers broke out in fights with each other and even threw wild punches at our team in their most frustrated moments. Because though this was structured as a typical kids’ camp with sports and crafts, pool time, chapel and games, it was also a place where these precious children were trying to be normal kids in one moment, but became wildly agitated in the next moment from sometimes hidden triggers, full of fury, confusion, and dysregulation in response to their dysregulated childhood. Sometimes it lasted a few minutes, sometimes a couple of hours. Sometimes we engaged one group in play while we heard one child howl in the distance as his counselors worked to console his young heart. My heart and mind barely knew what to do with the dissonance I felt.

Up until this point, my main nursing experience with kids in foster care has been as the bedside PICU nurse for children so severely abused, or so far gone from self-inflicted harm that they have not been conscious enough to interact with. They are usually so medicated by the time they get to us in the PICU, I really don’t know much about their true personhood. But after one particularly harrowing case where we saw the most cruel signs of disregard that drove a girl into self-destructive despair, and too many cases after hers, I found myself thinking a great deal about what led these children to our PICU, and how we as not just nurses, but humans in the community, might prevent these young ones from being that next awful code in our unit. This experience at camp showed me a glimpse of what that kind of prevention, that human connection, might look like. It’s both heartbreaking and hopeful.

You see, while it felt as though the darkness of the campers’ stories rose up like towering trees, threatening to eclipse all the little lives in the campground, I watched as our team opened their hearts wide open with the light of God’s unwavering, unconditional, relentless, strong, and tender love in Jesus Christ. They took blows from the children and absorbed their pain, and came back with hugs, affirmation, presence, and mercy. In both words and action, our team told the children, “You can hit me, but I will still love you.” Day after day, the team would play with the children, take more blows, and come back to love the children again.

This was the light that shone in the darkness all week, the light that says evil does not always triumph over good, fury does not always triumph over peace, selfishness does not always triumph over sacrificial love. For 5 days, I watched our team shine the bright light of Christ into the darkness. And though the time felt much too short, I believe with all my heart that these 5 days gave the children hope that light can in fact exist in their dark world, and that light can break through the darkness.

—Hui-wen Sato, MSN, RN, MPH, is a pediatric intensive care unit nurse. This article originally appeared on her blog, *The Heart of Nursing*.

what you don’t know, and be willing to discover the knowledge you need. Contact experienced camp nurses for their insights. “There’s no Cliff Notes version of camp nursing knowledge,” Gaslin noted.

2. Be a strong team player. Be able to collaborate with other healthcare staff, general camp workers, the camp director, counselors, and all sorts of volunteers.
3. Be open to new experiences. Nursing at camp is unlike any other setting; patient needs are different and extremely varied. Nurses who work with children in acute care or in schools, or who have their own children, generally find the camp nursing role easier to adapt to.

CONCLUSION

Camp nursing is full of adventure, novel experiences, and pouring care out for children of every kind (Sidebar 2). Serving as a nurse at camp can be stimulating, exhausting, demanding, satisfying, and memorable. Anna*, a first-time camp nurse, summarized her summer experience. “I think my favorite time was the campfire at night when we all gathered to share a thought from the day, sing a new or a favored camp song, and listen for God calling each of us as we quieted ourselves before retiring for the evening.” Kris Mauk believes that “camp nurses have to be competent and flexible, calm under pressure, and always reassuring. They don’t only treat health issues: They are also teachers, counselors, moms, comforters, detectives, and an essential part of the camp team. The camp nurse is one thing a camp cannot run without. It is truly a diverse and demanding job.” 🙏

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 **Web Resources**

- **American Camp Association**
<https://www.acacamps.org/>
- **Association of Camp Nursing**
<https://campnurse.org/>
- **Christian Camp & Conference Association**
<https://www.ccca.org/ccca/default.asp>

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-Church Retreats-
-Family Reunions-
-Christian Conferences-

Water slide, Zipline, Disc golf, Basketball, Volleyball, Hiking, Ping-pong, Foosball, Gagaball, and much more!