



**SETEBAID SERVICES,[®] INC.
CAMPING PROGRAM
PARENTS' MANUAL**

Setebaid Services,® Inc.
P.O. Box 196
Winfield, PA 17889-0196
(570) 524-9090

Spring / Summer 2008

Dear Parents or Caretakers:

Enclosed is your copy of the Camping Program Parents' Manual. Please read it carefully. It contains many tips that will help you as you prepare your child for camp. These same tips will help the camp staff take care of your child at camp.

Camper mail is an important part of Camp. While all correspondences **PRIOR** to camp should be addressed to the address at the top of this letterhead, do **NOT** send camper mail during camp to this address. Please note the addresses to send camper mail while at camp are:

Camp Setebaid®	HDYC or Camp Setebaid® at Camp Victory
c/o Camp Louise	c/o Camp Victory
{Insert Camper Name and Unit}	{Insert Camper Name and Cabin Name}
195 Hawk Road	P.O. Box 810
Shickshinny, PA 18655-2118	Millville, PA 17846-0810

The staff can't wait to see the campers arrive on incoming day. They're what make camp what it is ... FUN!

If you have any questions prior to camp. Please call us at the number listed above. We look forward to seeing you at camp.

Sincerely,

Lucas Morgan
Camp Director

Mark Moyer
Executive Director

SETEBAID SERVICES®, INC. CAMPING PROGRAM PARENTS' MANUAL

REVISED 2008

Special thanks to Mark A. Forsha, M.Ed.,
Author of the original version of this manual.

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PHILOSOPHY OF CAMPING AND DIABETES

The American Camping Association defines CAMPING as "a sustained experience which provides a creative, recreational, and educational opportunity in group living in the out-of-doors. It utilizes trained leadership and the resource of natural surroundings to contribute to each camper's mental, physical, social, and spiritual growth". Setebaid Services,[®] Inc.'s camping program endorses that concept and definition.

Setebaid Services[®] believes that we should "conceptually think of our programs as being CAMPS for CHILDREN who have *Type 1 Diabetes Mellitus* (in that order of priority)". The staff wholeheartedly endorses that concept.

TIMELESS GOALS

This summer the camps celebrate over 30 years of service to children with diabetes. Throughout that time we have helped boys and girls gain a better understanding of the world around them, while developing the personal confidence that makes all the difference in growing up with diabetes. Encouragement, education, and a safe, happy environment will help make our camp an important part of our campers' summers.

CAMP OBJECTIVES

Camp for children with diabetes serves many purposes. The following objectives are established for our diabetes camping program:

1. To provide an enjoyable, recreational experience for children with diabetes.
2. To provide a safe and healthy setting away from home.
3. To promote independence.
4. To enable children with diabetes to meet and live with other children with the same condition.
5. To promote diabetes education and to foster more self-management of diabetes.
6. To provide time-off for the parent or caregiver.

CAMP PROGRAM PHILOSOPHY

Setebaid Services, ® Inc. offers a sound and proven camp program for children with diabetes, ages 8-17. The camp has always operated under the philosophy that we are a camp first and a diabetes program second. We give children (who happen to have diabetes) a camping experience similar to what children would have at any other camp. We just happen to provide a diabetes-trained staff and have on-site physicians, nurses, and dietitians so that we have camp **safely**. Many parents are much more at ease allowing their children to be away from home for an extended period (maybe for the first time) when they know the child's camping experience will have diabetes care built in.

Typical Day

Because our camp tends to be *camp* before being a "diabetes clinic", we offer and provide many of the camp activities any other camp would provide. A typical day is filled with singing, camp cleanup, and classes like arts and crafts, hiking, nature lore, fishing, swimming, boating, and archery. Campers participate in these activities in small and large group settings. Each camper will receive a diabetes educational session during the week. Some people say this is not enough, but remember we are camp **FIRST**. Many things at camp are *caught*, not taught! In the afternoon, we offer free swimming time at the camp's Olympic-size pool, a much needed rest hour is observed, and mail is distributed to campers.

In the evening, the entire camp community joins together for different planned activities often based on a theme for the week. Skit nights, carnivals, masquerade parties, campfires, movies, and all-camp games are examples of these.

Older campers, and/or those who have attended camp in the past, are provided with advanced programming and wilderness training, so they may develop their camping and life skills more fully.

Our belief is that a child with diabetes can do anything! Just because a child has diabetes does not mean he/she is limited to certain activities.



Life at Setebaid Services,[®] Inc. Camping Programs

Campers enjoy a beautiful, natural, mountainous setting. Camp Louise (one camp site we rent) is nestled in the Pocono Mountains above Berwick, Pennsylvania, near Shickshinny. The camp is situated beside state game lands and has, for itself, hundreds of acres of woodland filled with all the elements of nature. Camp Victory, another site we rent, is situated in the rural farmland area behind Millville, Pennsylvania. Both camps have a lake and pool.

Camp Setebaid[®]

Campers at Camp Setebaid[®] are housed in platform tents like those typical of scout camps. Each tent has bunks for three or four campers and a counselor. We use four units for our campers, with 10 tents in each unit. Each unit has a permanent shelter and toilet facilities. The tents are located in the woods away from the main camp buildings. This type of setting affords the opportunity for all campers to be exposed to the natural surroundings.

Radios are in each unit in direct communication with the infirmary and Camp Director. Camp Setebaid[®] operates four units: Birches, Needles, Hemlock, and Yakima. Each unit houses 18-24 campers. Assignments to these units are based on the age and experience of the campers.

Each unit of tents is managed and supervised by a Unit Leader or Head Counselor, who are counselors with special qualifications, experience, or skills in supervising staff and campers. In addition, each unit has a nurse and a physician to help campers effectively manage their diabetes.

Since our campers are in tents in the woods, we request that parents refrain from sending any food with their campers. Food tends to attract animals and those little nighttime visitors are not usually welcomed. Each tent has special containers for camp-supplied food needed for low blood sugars (like juice, graham crackers, peanut butter, etc.). A small amount of sugarless gum is permitted. Campers are allowed to chew gum at rest hour only.

Harrisburg Diabetic Youth Camp (HDYC) and Camp Setebaid[®] at Camp Victory

Campers at these camps stay in cabins. Each cabin has bunks and sleeps 10-15 campers and 3-5 counselors. There are two cabin groups, one for boys and one for girls. Each cabin group has four to six cabins. Since our campers are in cabins in the woods near open fields, we request that parents refrain from sending any food with their camper. Food attracts little night time visitors that are not welcomed. Each cabin has special containers for camp-supplied food and hypoglycemia emergency kits.

Setebaid Services,® Inc. Staff

Setebaid Services employs staff to cover all areas at camp. Counselors, junior counselors, counselors-in-training, kitchen aides, and lifeguards are trained in camp programming, child psychology, and diabetes care. These persons support our professional staff consisting of the Camp Director, Program Director, Medical Director, physicians, nurses, dietitians, Head Counselors, and Waterfront Director. We hire by interview and contract our staff for training and the camp week. Many staff members are teachers, diabetes educators, health care professionals or currently training at institutions of higher learning. Also, many staff members have diabetes.

It is against our personnel policy for staff to accept gifts or monetary tips. Please make appropriate donations to the camp by contacting the Camp Director or calling the camp office.

Mail and Letter Writing

Mail call at camp occurs at rest hour. Campers' mail is delivered then and they are encouraged to write notes and letters to family and friends at home. One way parents can assist is to send with your camper pre-addressed, stamped envelopes. Many campers have difficulty addressing envelopes.

Please write to your camper while he/she is at camp. Keep letters upbeat and cheerful. Stay away from the "I miss you" statements that may make the child feel guilty about leaving you. If possible, mention camp happenings in your letters, asking, for example, how free swimming was or how the skit night went, etc. Be sure letters emit confidence in your child to enjoy camp and have fun while away from home.

You may also opt to email your camper via the Bunk1.com program. This is available to all camper parents for a fee. You can participate in this program by returning the registration form sent to you in your camper mailing. This program is a one-way program, campers cannot respond via email.

One other important consideration about mail - although receiving mail is critical to each and every camper, please use discretion in the number of letters you send to your camper. Too much mail can cause more problems than none at all. Parents may not agree with this, but experience has taught us that homesick children just get worse, and all their mail can make other children feel badly if they do not receive as much. A good guideline is one note per day.

Homesickness

Camp is designed to be recreational, educational, and above all FUN. We keep our campers very busy on purpose. A low percentage of our campers experience homesickness, but it is a natural occurrence with children and cannot be denied. Our jam-packed schedule helps alleviate much of this. In addition, our staff is trained

regarding homesickness, and some of our veteran staff members are quite experienced when dealing with a child who may be homesick. Sending a child home due to homesickness is used as a last resort and rarely done.

From the parent's point of view, you can help to minimize the impact of homesickness by trying the following:

1. About two weeks before camp, talk informally and casually about camp **when the child brings it up.**
2. Always keep discussions "matter-of-fact" and honest.
3. Allow your camper to stay overnight at a friends house, grandparents, or other relative so the child's "first time away from home" is not camp.
4. Express confidence in your child.
5. Acknowledge the child's feelings if they are apprehensive or uneasy about camp week. Do not make promises you may not be sure about, like "We will come get you if you get too homesick" or "I'm sure they'll let you call home every night".
6. Be positive about the camp experience and the fun that awaits the child. Don't tell the child how much he/she will be missed.
7. Write to your camper so mail call is fun, keeping letters upbeat and cheerful. Don't overdo mail call, however.

Phone calls from parents during camp week are strongly discouraged. **Please do not call expecting to talk with your child** to find out "how he's doing". This is unwise and can make a homesick child's week worse instead of better. If you feel you must be in touch, the Camp Director, or someone on the medical staff can let you know how the week is going for your camper. Many, many children come to our camp, some away from home for the first time. While it is understandable that parents are concerned, children need the chance to prove they can be away from parents for an extended period. It can be one of the most important growing experiences your child can have!

***Cellular phones are forbidden at all camping programs for campers.**

Bedwetting

Our counselors are trained to deal sensitively with bedwetting campers. Bedwetting is not rare at diabetes camps. Counselors are expected to launder bedclothes, sleeping bags, etc. after each bedwetting incident.

Prevention can go a long way here. We try to prevent bedwetting by waking the camper several times during the night. You may help us too. If you are a parent of a chronic bedwetter, we suggest sending along special undergarments (similar to

Huggies) for problem bedwetters. These garments are now widely available for older children.

At night, when campers are preparing for bedtime, it is rather dark in the tents and cabins, and it is possible for campers to change into these without their bunkmates really knowing. We train our counselors to be extra sensitive to this both at bedtime and in the morning, perhaps distracting the other campers, so changing will be less embarrassing for the bedwetting camper.

You know your child best. You may feel he/she will be more embarrassed by wearing such garments than the bedwetting itself. If you do try this, please alert the counselor on incoming day that you packed such undergarments. Several parents tried this for the first time at camp and, in all cases, it saved embarrassment for the camper and extra work for the staff. Regardless, bedwetters are treated with the utmost respect and dignity.

Discipline

Behavior problems at camp are rare. Our counselors are given strategies to use to deal with camper misbehavior. Counselors are expected to treat campers with respect and candor, and handle problems with as much fairness as possible. Counselors often talk with campers regarding their expectations during the rest hour on the first day. Our staff does not use any form of corporal punishment. Other strategies like time-outs, reasoning, and firm reprimands are used to discipline campers. Sometimes the Camp Administrator, Camp Director, Assistant Director or Head Counselor handles tough cases where a small punishment may be called for. Counselors are encouraged to seek assistance from our professional staff when dealing with camper problems.

Accreditation, Compliance, and Awards



Camp Setebaid[®] and The Harrisburg Diabetic Youth Camp (HDYC) are accredited by the American Camping Association (ACA). Accreditation requires camps to adhere to standards regarding staff, program, site, health care, and administration. The ACA also has minimal standards for diabetes camps, tightening controls on staff to camper ratios and health care. In 2006, both The HDYC and Camp Setebaid[®] underwent the process of reaccreditation, which is required every third year; we are proud to say that both camps earned a 100% overall score. This proves the camps are rated as some of the best camps in the nation.

All Setebaid Services[®] camping programs must meet the American Camp Association's Standards for Accreditation. In addition, Setebaid Services[®] standards for staff background checks and credentials exceed industry standards. Setebaid Services[®] runs the safest camping programs in the industry.

All of Setebaid Services[®] programs meet or exceed standards established by the *Management of Diabetes at Diabetes Camp Position Statements* of the American Diabetes Association.

Setebaid Services[®] programs have received Safety First Awards from Market Corporation. This award recognizes programs who take safety seriously and ensure that their staff receives proper training and certifications to operate a safe program. Fewer than seven programs were chosen from throughout the nation, and Setebaid Services[®] was the only diabetes program to receive the award two consecutive years.

Campers Learn at Setebaid Services[®] Camping Programs

You, as parents, may notice some newfound independence when your child returns from camp. Normally, this independence is a good thing and should not be squelched. Be ready for it, and think of ways to incorporate it into family life.

As has been the case for 30 successful years at these camping programs, it is our intention to provide your child with a positive camping experience that he/she will remember for a lifetime.

TYPICAL DAILY CAMP SCHEDULE

7:00 a.m.	Greet the Day/Wake Up
7:15 a.m.	BGM (blood glucose monitoring)
8:00 a.m.	Flag Raising and Breakfast / Insulin Administration
9:00 a.m.	All-Camp Cleanup (units, tents, grounds, cabins)
9:45 a.m.	All-Camp Assembly / Beginning of Programs (HDYC)
10:30 a.m.	Program Area Sessions (1-1/2 hour class with snack)
12:00 noon	BGM
12:30 p.m.	Lunch
1:30 p.m.	All Camp Assembly / Beginning of Afternoon Program (HDYC)
2:00-5:00 p.m.	Program Area Sessions / Free Swim / Boating / Green Time (Rest Hour is scheduled by unit for one hour daily during this time period.)
	[Snack time is 3:00 p.m.]
5:00 p.m.	BGM / insulin Administration in Units / Cabins

5:45 p.m.	Dinner
7:00 p.m.	Flag Lowering and All-Camp Evening Event
8:30 p.m.	BGM/Insulin / Snack
9:30 p.m.	Lights Out
9:45 p.m.	All Quiet (older campers and teens have a later time)

MEDICAL PHILOSOPHY AND PROCEDURES

At camp, our philosophy espouses holistic treatment of campers, mindful that camp is a balance between program, medical, and dietary concerns and their relationship to the children, both physically and mentally.

Our medical staff goes above and beyond the call of duty many times within our camp week. They are at camp for the kids, pure and simple. In the course of a typical day, they not only supervise the diabetes health regimen of about one hundred campers and staff, but they also perform routine first aid tasks. In addition, they respond to problems around the clock.

Seven or eight health professionals perform a myriad of tasks and still participate fully in the camp activities and community life.

Setebaid Services[®], program's medical philosophy is summarized as:

TRUTH	It is our intention to be completely honest with the children, to explain all the facts of diabetes mellitus and how it will affect their lives. We answer all of their questions honestly and sincerely.
BEAUTY	We explain the beauty and magnificence of the human body and how the human body Works, with the help of insulin and the newer forms of technology, keep a young person healthy for a long lifetime.
LOVE	We treat the children as if they are our own. We nurture them and also treat any illnesses that come along.

Diabetes is an inborn error in metabolism. It is not a disfiguring disease. Our intent is to "normalize" all care that goes with insulin-dependent diabetes so that the children will feel comfortable with themselves and their diabetes

Medical Realities at Camp

Campers come to us from all walks of life, from all family backgrounds, and from all types of medical philosophies. The medical and dietary staff do their best to work with campers "where they are" in their knowledge of diabetes and their health program at home. It is difficult to do this with large groups of children. Parents need to realize that there are as many diabetes medical philosophies as there are health professionals. Parents have an opportunity to consult with our Medical Director, physicians, and nursing staff upon arrival at camp. Our physicians will discuss your child's health history and diabetes program.

Please recognize some realities at camp, such as:

1. Campers are out of their normal routine while at camp. **Don't expect perfect blood sugars.**
2. Blood sugars at camp may not run as high or as low as at home. In fact, many campers will run higher at camp. This affords the staff a "cushion" to stave off those away-from-home, traumatic low blood sugar reactions. Do not be alarmed if your campers blood sugar is higher than "normal" while at camp.
3. "Normal" blood sugar control is not the primary goal of diabetes camping. Every effort is made to provide safe diabetes care at camp, and most importantly, to prevent severe low blood sugars, ketones in the urine, and high sugar levels.
4. The medical staff tries to follow a campers schedule for insulin injections. Normally campers, who are on two shots per day, receive injections before breakfast and before supper or bed time snack. If a camper is on more or less insulin injections in a day's time, the medical staff will accommodate the camper's schedule, providing it is safe diabetes management for the child's week at camp.
5. The Medical Director or physician may need to alter a campers insulin dosages, injection schedule, and diet without consulting the child's personal physician. Remember, our goal is safe diabetes care during the camp week. Often, the camper's doctor is contacted for any extreme measures that will affect the child's diabetic management program.
6. The Medical Director will look over and file the campers blood sugar level record form from the week before camp. Please be sure to keep accurate records of your child's blood sugars the week preceding camp. Have the form, your child's insulin, and any other medications ready for your consultation with the medical staff upon check-in.

Blood Glucose Monitoring Procedures

Part of Setebaid Services® philosophy stresses independence. This is obvious in our medical procedures at blood testing times. Blood glucose monitoring occurs routinely four times a day at camp. Campers monitor with their group on site in their tent unit or cabin. Each group is assigned a physician, nurses, and a dietitian.

Counselors oversee blood glucose monitoring (BGM) with their campers. Each group has its own blood glucose monitor. Each camper has his/her own record chart, BGM equipment, alcohol swabs, and strips for the machine. The camper is under the watchful eye of trained counselors (many of whom have diabetes themselves) as he/she follows safe BGM.

Nurses are available to help campers who need assistance, but part of our goal at camp is to return your camper to you with a more independent attitude about BGM. Campers are encouraged by the medical and counseling staffs to begin to take charge of their blood glucose levels and insulin administration. Many older campers come to us already handling their BGM practices and procedures, glucose machine operations, safe handling of syringes and BGM equipment, and blood sugar readings. Sharps containers are readily available for counselors. Part of each BGM procedure is to train campers to dispose of medical waste safely.

Campers keep a record of each blood glucose level on a specially designed sheet. Following each BGM, each camper is visited by the unit physician and dietitian. They will informally chat with the camper about his/her glucose reading, upcoming activities for the day, and the next meal. It is hoped that through these chats, the campers will begin to take part in decisions about insulin dosages and food intake.

Our unit physicians and dietitians are in constant communication with campers' counselors, Camp Director, and the Medical Director, especially if there is a concern about a particular camper's program.

Blood Glucose Monitoring (BGM) and Insulin Administration

Because the safety of each camper is a **priority** at camp, we have the following criteria regarding a campers blood sugar levels:

BGM is done with all campers:

- before breakfast
- before lunch
- before dinner
- before evening snack

Additional BGM may be done for campers:

- complaining of feeling "low"
- during the night, if blood sugars are less than or equal to 100 mg/dl at the evening snack

- considered "high risk" for night time reactions by counselors, medical staff, or parents
- who are acting strangely or confused, or having symptoms of a low blood sugar reaction
- who are not able to or willing to eat scheduled meals

Decision-making and Independent Choices

To review, we check blood sugars routinely before breakfast, before lunch, before supper, and before evening snack. All BGM is done under supervision of the medical staff and trained counselors. Our physicians and/or dietitians briefly consult with each camper immediately following each blood check. Many campers are involved in decisions regarding insulin dosages, dietary concerns, and exercise. This way, campers learn to become more independent by directly participating in their daily diabetes care program, as health professionals advise and suggest options to campers.

Campers who are not able to check their own blood will be helped by the medical staff. They will be encouraged to assist in the procedure in some way. Ideally, children will learn how to do BGM and insulin injections with as much independence as possible while at camp always under the watchful eyes of the staff. We suggest that you, as parents, be sensitive to newly-found independence when a camper returns home, and continue to encourage your child to blood test or give shots independently.

Urine tests for ketones are administered at the discretion of the medical staff. Ketones are a danger sign and will be treated by medical staff.

Insulin syringes are provided by Setebaid Services,[®] as are glucose monitoring machines and testing strips. Campers should not bring syringes (unless they use other than U-100), machines, or testing supplies.

Campers do need to bring their insulin with them, and any other medications they will need to use while at camp. ALL medications are stored in areas under control of the medical staff.

Once again, keep in mind that our medical staff attempts to individualize care to each camper. It is the full intention of the medical staff to provide the highest quality health care to each and every camper. Parents will find the camping experience to be a positive step and one on which their camper readily can build new diabetes care knowledge and independence.



DIETARY PHILOSOPHY AND PROCEDURES

Setebaid Services® provides camping for children with diabetes. All facets of the camp program revolve around the camp experience for children. The campers and many of the staff have diabetes themselves. Therefore, the utmost care is taken to assure the proper balance between insulin, exercise, and diet.

Our camp employs a registered dietitian who plans the menus and lives on-site during our camp week. The dietitian has expertise in many areas of nutrition, especially diabetes. Menus are planned with the ADA Exchange System and carbohydrate counting in mind and, more importantly, with children in mind. Our kitchen staff prepares meals and snacks under the supervision of our Food Services Manager, who works closely with the Camp Dietitian when ordering and preparing food.

The Camp Dietitian is in constant communication with the Medical Director and Camp Director, especially since the delicate balance of insulin, exercise, and food is critical to a safe week for each camper. Each camper consults with both the medical staff and a dietitian several times daily. As stated before, the camper is often involved in decision-making as it relates to his/her insulin and food intake.

The goal of dietary education is to build the camper's knowledge of:

1. Food choices that will provide optimum growth and maintenance of lifelong health.
2. Accurate carbohydrate content of foods eaten using the Nutrition Facts label and other resources.
3. Age appropriate portion sizes.
4. Recognition and appropriate treatment of hypoglycemia.

These goals are achieved during "teachable moments" throughout the day, but especially during meal times.

The camper's diet history (provided prior to camp by the camper's parent) reveals a great deal about the level of knowledge and compliance of a camper. The dietitian reviews each diet history and communicates any special needs, including food allergies or unique meal pattern requirements (especially campers using NPH insulin) to the counselor and kitchen staff. Each unit is assigned a dietitian who works with individual campers and counseling staff encouraging campers to develop the skills listed above.

During meals, counselors' responsibilities are many, including:

1. Arriving on time for meals.
2. Making sure blood glucose monitoring is completed and documented on the appropriate medical record.
3. Treatment of hypoglycemia as needed.

4. Reviewing the posted menu, including carbohydrate counts, with campers, being sure to have a positive attitude about meals at camp. Remember, counselors set the tone for campers!
5. Setting a good example by modeling good eating habits, including appropriate portion control.
6. Helping campers calculate and record their carbohydrate intake in the proper place.
7. Document insulin dose and administration per physician's order.
8. Assist with the cleanup after meals.



Summer Food Service Program

Setebaid Services, Inc. participates in the Summer Food Service (SFS) program through the PA Department of Education and the USDA. Meals provided must meet certain nutritional requirements and must offer foods in proper portions from each food group. A copy of the meal pattern requirements is attached. Staff should familiarize themselves with these meal patterns. Student dietitians will monitor camper's food intake to make sure they are selecting meals which meet the SFS meal patterns.

Snacks at Camp

The role of snacks at camp is an important one. Snacks are provided according to an individual camper's need and depend upon what type of insulin regimen is used at home. Although most campers are currently using an insulin pump, those campers using NPH insulin follow a less flexible meal and snack pattern and will need to have snacks daily at specific times. These individual needs are identified by the dietitians and medical staff and discussed with the counselors to ensure camper safety.

Snacks are provided mid-morning, mid- afternoon and in the evening.

Evening Snack Guidelines are attached and should be reviewed.

Hypoglycemia (LOW) Supplies

The best treatment for hypoglycemia in diabetes is prevention. However, the increased physical activity at camp, combined with other factors, can lead to hypoglycemia throughout the day.

Treating hypoglycemia should be done consistently by counselors. Hypoglycemia is treated by: 1. testing blood glucose to confirm hypoglycemia. (< 70mg/dl) 2. Administration of 15 g of Carbohydrate 3. Re testing in 15 minutes. If a meal is more than 30 minutes away, a more substantial snack of carbohydrate and protein should be given to prevent repeat hypoglycemia.

Low supplies can be found in a central place at camp. Counselors should carry low supplies with them at all times and are responsible for replenishing their supplies. No food should be kept in tents/cabins unless secured in an animal-proof container.

Some Miscellaneous Notes

Meal times are wonderful opportunities for campers and staff to talk about, plan and re-live the daily camp activities. Making pleasant conversation at the table gives everyone time to get better acquainted. In addition, campers who are traditionally “picky eaters” sometimes forget to be picky if they are distracted by the fun events of the meal. During meals, camp spirit is especially important. At times, the dining hall becomes spirited with singing table songs and silly chants. Staff should make these times fun for the campers by participating in these group activities.

Milk is the main beverage offered at meals. This is a positive habit that should be encouraged and modeled by all staff. Only 16% of American children meet their calcium requirements, and developing a “milk with meals” philosophy is a healthy habit campers can take home. Diet soda is available at times, but staff should not drink it during meals. Water is also available.

Vegetarian and gluten free menus are available. The kitchen staff will honor requests as time permits. Those requesting a vegetarian entrée should communicate with the dietitian or kitchen manager in advance of the meal.

Be positive about the food.

Campers and counselors are not permitted behind the serving line for safety reasons.

Staff snack is available every evening in the dining hall at specified times. At times counselors are responsible for staff snack clean up. The dining hall and kitchen should be left clean when snack is over.

ARRIVAL AND DEPARTURE

Checking In on the First Day

Camp may be just around the corner from you or many hours drive. **Please do not use GPS, TomTom, Magellen or any other direction devise, you will get lost. Our camp addresses ARE NOT detected by satellite.** Either way, allow plenty of time for travel and for check-in procedures for your camper. Arrival time is established by unit / cabin assignment. In the last mailing you receive before camp, you will receive your registration time and your camper's unit / cabin assignment plus four "luggage tags". Please abide by the registration time assigned to you. If you are carpooling or if circumstances preclude you from arriving at your assigned time, please notify us in writing one week before camp.

The camp lane at Camp Setebaid® may be lengthy and provides you with a stimulating preview of the lovely area surrounding the camp. The camp gate near the camp will be closed and locked until the time specified in your mailing .

Please do not plan to arrive early. If you arrive prior to your assigned time you WILL NOT be allowed to register until your time. We need every minute to prepare buildings and program areas before campers arrive. If you should arrive before the camp gate opens, turn off your motor, relax and enjoy the surroundings!

We have a controlled check-in procedure. You will be instructed to unload your child's luggage at the loading dock, then park your car. There will be a rather long walk from the parking area to our dining hall or medical shed where the medical and camp staff will check in campers. (Please be sure to alert personnel near the parking lot or at the loading dock of any food donations you have, or if one of your group is physically handicapped. Arrangements can be made to park your vehicle closer to the dining hall or medical shed.)

Once on camp, you will be greeted outside by volunteers. If any forms or fees are outstanding, they will be expected at this time. The medical staff will screen your child for any contagious conditions taking his / her temperature and checking hair and feet. If a condition is found, it is then the decision of the Medical Director to treat the condition at camp, or request that the Camper be released. While in the dining hall, parents will have the opportunity to consult with the Medical Director, nursing staff, and Camp Dietitian. Please be sure to bring (Not packed in luggage) your child's insulin, blood sugar record form from the previous week, and any other prescribed medicines he / she may need at camp.

Once the health screening and consultation are completed, parents may accompany their child to the appropriate bunk (a list is posted at the dining hall). The luggage is delivered to each unit / cabin before your arrival to the tents / cabins. Upon arrival in the unit / cabin, please tell your child's counselor when your camper last ate, and if he / she ate well. Sometimes children don't eat well before reporting to camp, and they start out their experience with an insulin reaction. They can be understandably nervous about the new experience awaiting them. Snacks are available in the unit / cabin immediately upon your arrival, if needed.

CAMP SETEBAID® ONLY

Campers may then be asked to report to the pool (weather permitting) to meet our Waterfront Director and Lifeguards, and take a simple swim test. You may accompany your child if you wish. Snacks are available throughout the day. (No need for parents to bring an afternoon snack for their camper.) Upon completion of the swim tests you may walk with your camper back to their unit. This is a great time for parents to say good-byes.

Parents who wish to accompany their child to the bunks will want to have appropriate footwear, especially if it has rained recently.

Parent Tours and Orientation

On incoming day, we offer parent tours which leave from the dining hall at posted times. These leisurely walks around the camp are especially suggested for first-time campers' parents. Also, we offer several brief Parent Orientation Sessions, beginning with the first registration hour. Actual times will be announced in the last mailing and posted at the registration area. A representative from the medical staff, the Camp Director, and the Camp Dietitian are available, plus a panel of parents of Camper's form years past. The sessions take place in the dining hall and refreshments are served. (Campers are busy and are not permitted at the sessions.)

Parting from your Camper

When leaving camp on the first day, be positive about your child's week at camp. It is helpful to our staff if Campers are motivated and eager on the first day. Campers are very busy from the beginning, settling in, getting to know their counselors and bunkmates, swimming tests at the pool, etc. While we understand your interest in the camp, please do not linger with your child for an unnecessary amount of time. Part from your camper in a quick, relaxed manner.

Checking Out on the Last Day

Campers may be called for at their assigned check-out time.

Your camper may only be retrieved **by** the person or people listed on the camper pickup form. Please be sure to list anyone who can pick up the camper. Your camper will not be released to you without proper photo identification (i.e. drivers license).

Check-out procedures include consultation with the medical director and dietary staff, retrieving luggage from the loading dock, and loading your child into the car for the return home! Camp staff will be available to direct you to the right places. And before you leave the camp grounds, be sure to check our pile of LOST and FOUND items!

A FINAL WORD



We intend to make your child's week at camp the best week of the summer. For many of our "veterans", it is! That's why they keep returning year after year. We are anxious to provide a worthwhile camping experience for your youngster.

Please be certain to read all correspondence and reminders that relate to camp as they come from us. You will receive a more specific list indicating activities planned for the camp week, a detailed list about what your camper may want to pack and your registration time and luggage tags. Your prompt attention to the details of completing forms and sending fees is extremely important.

Now, go back and read the goals and objections of camp. We hope you have gained a better insight into what we try to provide, encourage, and promote at camp. We hope you have read and pondered this brief manual. Your child will be in capable hands. Remember, camp gives you a break from the constant care associated with a youngster with diabetes. Enjoy! Take the family out for ice cream sundaes!!

As always, we will answer any questions you have which cannot wait until check-in:

CAMP DIRECTOR AND CAMP OFFICE

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