

Journey's End Farm Camp

364 Sterling Road, Newfoundland, PA 18445 T: 570.689.3911

What We Hope For

Our aim at Journey's End—besides having fun—is to help children grow. To do this, we try to create a supportive, cooperative community that responds to each camper as an individual. We hope that each child's time here will increase their ability to live in harmony with each other and with nature. We also hope that being at camp will help each child to become more committed to these goals.

Our actions teach our values much more strongly than our words. As an influential role model to the campers, we hope you will:

- Enjoy working and playing with children
- Be positive toward others
- Favor cooperation over competition
- Be hard-working [and enjoy it!]
- Be listeners: to children, to each other, to nature, to the voice within yourself
- Appreciate quietness as well as activity
- Communicate freely, sincerely, and sensitively
- Be committed to nonviolent resolution of conflicts
- Be non-sexist and non-racist
- Enjoy a rustic lifestyle with few conveniences
- Be patient, understanding, and flexible
- Place the needs of children, and camp as a whole, before personal desires
- Be able to handle stress
- Appreciate the natural world and want to preserve and care for it
- Be prepared to get up by 7 a.m. each day (except cooks)

Some Requirements:

We feel strongly about the following, as we are all role models for the campers we live, work, and play with. If you cannot willingly and cheerfully abide by these policies, you should **not** apply to work at Journey's End.

STAFF SHOULD NOT USE TOBACCO

STAFF SHOULD NOT DRINK ALCOHOL

STAFF SHOULD NOT USE ANY OTHER RECREATIONAL OR ILLEGAL DRUG

Staff should not communicate an attitude that promotes the use of any of the above.

ALSO: If you need a significant amount of personal or private time on a daily basis, this type of job may not be for you.

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Camp Nurse Responsibilities

As of 2008 head checks for lice are done immediately upon camper arrival prior to bunk assignments.

Check campers in on arrival day, collect meds and vitamins, talk with parents about any concerns, make sure medical form is in order and release is signed. Record height, weight and temperature.

Alert staff of noteworthy conditions/situations/needs re: medical form info, parental consultation, or check-in. We may ask for a presentation during staff orientation week on a pertinent health topic or standard procedures for injuries.

Oversee/dispense daily medications and supplements. Make health announcements as needed. (Ex: wash hands, drink water, wear a sun hat, etc.)

Care for injuries or illness that may occur. Serious conditions will be referred to camp physician(s). Pediatric Practices—3 miles. Wayne Memorial Hospital—22 miles. Call parents as needed.

Complete accident report for our camp insurance agency for each incident or illness that requires a visit to health professionals off site. This can be done online or on the phone.

Keep First Aid kits stocked. Make sure hikes and overnights have adequate First Aid kit along. Kit with sunscreen goes with swimming counselors (daily) to the pond.

Check out campers and staff for “soundness” prior to all overnight campouts and long hikes. Check in upon return, including temp. and head check (preferably after they have showered).

Campers who have special dietary needs (due to “selective” eating or allergies) can present a challenge. It works best for the camp nurse to coordinate with cooks to supply their food. For example: availability of defrosted gluten-free bread, cooked plain rice, etc.

Keep infirmary ready for occupancy, changing bedding, emptying trash, etc. Dishes, utensils, and cups used by sick people must be sterilized in a separate wash basin.

Advise directors and staff of health/safety concerns.

Make sure Epipens and OTC medications are available and currently dated.

Coordinate with directors to make sure other medical supplies are on hand.

Keep thorough records in medical notebook.

Involvement in the daily camp program is encouraged (morning meeting, assembly, activities, etc.) as this will give you a valuable perspective as to the total program and the kids themselves.

End of session: Make sure camp families take home meds, vitamins, etc.

End of summer: Inventory supplies, list needs for next summer. Alphabetize current health forms (all sessions) for file.

Add to this list as needed. Write down your reflections for future reference.

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Camp Nurse Application 2010

Name _____ Date of Birth _____ Social Sec. # _____ - _____ - _____

Address _____ City _____ State _____ Zip Code _____

E-mail _____ home phone _____ work phone _____

Best time to call _____ Nursing License # _____

Certification/Degree(s) _____

Experience in medical care/nursing _____

Current employment (if applicable) _____

2010 Camp Dates

Please indicate preference for session(s) available

_____ Session 1 June 27-July 10 _____ Session 2 July 11-31 _____ Session 3 August 1 - Aug. 14
(2 weeks) (3 weeks) (2 weeks)

Family Camp _____ August 16 - 22 (1 week)

Can you arrive the day before the session starts? _____

Are you available to fill in for a different session? _____

If yes, please specify what day(s) or week(s) _____

Camper-aged (7 - 12) children who would attend camp:

_____	Date of birth _____	Gender _____
_____	Date of birth _____	Gender _____
_____	Date of birth _____	Gender _____

We can offer \$200/week plus free tuition for one camper-aged child or \$500/week if you bring no children. We can negotiate a mutually agreeable arrangement if there are other needs or circumstances.

Please see the attached sheet of responsibilities. We are a small camp, so you would be the sole certified medical person on staff. We would expect you to live on site, upstairs in the farmhouse. Down time/time off varies from day to day. We will count on you to let us know if/when you need a few hours or a day to yourself.

1. Do you have any dietary restrictions?

2. How willing are you to spend the session/summer here without TV, tobacco, or illegal/recreational drugs?

3. Have you ever been convicted of abuse, sexual offense, or a felony? If yes, please explain the circumstances.

4. What physical, mental, and/or emotional health issues, if any, do you have that would impact your ability to function well as a camp nurse?

5. Do you have a valid driver's license? Driver's license # _____ State _____

6. Would you be bringing a vehicle to camp?

7. Please list names and phone or e-mail contacts for 2 references
