



# **Camp Bruce McCoy Training Guide 2022**



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# Module 3 THE COUNSELOR ROLE

## Our responsibilities include (but are not limited to)...

#### <u>Helping</u> <u>Campers With</u>

- Activities of Daily Living (ADLs)
- Attending
- Transfers
- Transport
- Rooming
- Social engagement
- Behavior management

CAMPER SAFETY

<u>Most</u>

important

#### <u>Helping Camp</u> With

- Running camp activities
- Camp setup/clean-up
- Daily meetings



#### Camper Review

- Day before campers arrive
- Given list of campers, along with room assignments
- Brief review of medical history
- Review of any outstanding circumstances
  - Dietary restrictions
  - Past conflicts between campers
  - $\circ~$  Campers who need attendants
- Take notes! especially for the campers in your room

\*This is a prime opportunity to get a better idea of each camper's abilities and potential areas of need\*



#### Assistance Levels

#### Varied abilities lead to varied needs for assistance

- Terms to Know
  - $\circ$  Independent
  - Modified Independent
  - o Supervision
  - Minimal Assistance
  - o **Mod**erate Assistance
  - Maximal Assistance
  - Total Assistance/Dependent



\*Keeping open communication (and some of your own problem solving) will allow you to see where each camper falls on this spectrum with each different activity.



# Activities of Daily Living (ADLs)

These are the everyday tasks we do to survive and/or to function at an individual level.

- Eating
  - <u>Potential problems</u>: Dietary restrictions, swallowing precautions, handling of silverware, bringing food to mouth, clean-up, etc.
  - Our role: cutting up food for campers, reminding them to swallow before taking another bite, take sips of drink between bite, feeding camper, assisting with hygiene before/after meal, etc.

\*All campers with specific dietary restrictions (such as diabetic diet or severe allergies to certain foods) should be memorized; special diet plates will be served to those campers first at meals.



# Activities of Daily Living (ADLs)

- Toileting
  - <u>Potential problems</u>: Maintaining hygiene, transferring to/from toilet, managing clothing, managing assistive devices, incontinence, etc.
  - Our role: wiping for camper, help with transfers, helping with zippers, buttons, pulling down/pulling up clothes, holding/handling urinal, changing brief/diaper
- Dressing
  - <u>Potential problems</u>: picking out clothes, putting on clothes, removing clothes, remembering all items, etc.
  - *Our role:* helping them pick/choose weather appropriate clothing, assisting with putting on shirts, pants, socks, shoes, bras, underwear, belts, hearing aids, etc.



# Activities of Daily Living (ADLs)

- Bathing
  - <u>Potential problems</u>: remembering all the steps, reaching parts of body, safely transferring to shower/shower bench, etc.
  - Our role: giving camper reminders for steps, assisting with reaching parts to wash and/or dry, help with transfer
- Grooming
  - <u>Potential problems</u>: remembering all the steps, grasping items (like toothbrush or comb), safety with shaving, oral/denture care, etc.
  - Our role: give reminders, help set them up with needed items, assist with task itself



## Attendants

- For campers who require all day one-on-one assistance
- Assisting with: ADLs, transportation, activity engagement, and most everything they need to participate in camp
- You will essentially be the "expert" on that camper for the week
- 1 camper/2 attendants
  - $\circ~$  Usually attendants will alternate days and help one another out when needed





## Transport

A variety of rough terrain exists at camp, as do various walking distances.

- Wheelchair/Powerchair management
  - $\circ$  Brakes
  - Leg rests
  - $\circ$  Seatbelts
  - Powerchair controls (especially turning on/off, starting and stopping)
- Golf carts
  - Some campers need to be transported via golf cart, which are operated by camp staff (including counselors)
- Keep track of campers, especially those who tend to wander or have memory deficits and could get lost



# Transfers - Types

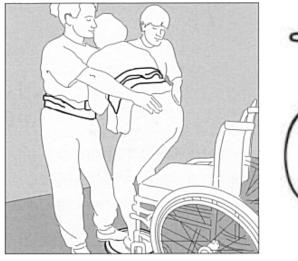
Most transfers will be practiced by everyone during on-site orientation.

- Common Types
  - Stand pivot, squat pivot, lateral
- Camp Specific Transfers
  - Horseback getting on and off horse, stability while riding, often requires 2-3 people
  - Canoe –very low to the ground, support in canoe using bean bags, often requires 2 people
  - Pool wheelchair to pool edge, pool edge into the water, and reverse
  - **Port-a-potty** small/confined space (especially for wheelchairs)
- Mechanical Lifts
  - Hoyer lift for campers in wheelchairs/powerchairs unable to complete pivot or lateral transfer safely; primarily used for shower transfers or bed transfers



# Transfers - Mechanics

- Good Body Mechanics
  - $\circ~$  Wide base of support
  - $\circ~$  Lift with your legs
  - Bend at knees, not at waist
  - Keep back straight no twisting
  - Toes follow direction of movement
  - Never pull on the person's arm, leg, or under their armpit could injure the camper
  - Encourage them to *scoot* towards edge of seat and *reach* towards the transfer surface to avoid injury
    - If they do need to hold on to you, best to have them hold onto your tricep area, just above the elbow
    - Just be aware that having their hands around your neck or back could result in you getting injured
  - When in doubt, get help!



1. Transfers between a wheelchair and a toilet

\*Optimal hand placement is generally around waistband of pants or cupped under buttocks



Pivot Transfer \*Likely will not have gait belt available – standard belts/belt loops can be good substitute

## Transfers – Assess, Prepare, and Position

• Assess the environment

•Remove all obstacles on floor, transfer surfaces

•Ensure floor is dry and camper has on non-slip shoes/socks

- Prepare
  - $\circ~$  Arrange equipment conveniently
  - Sequence the steps in your mind beforehand
    - **Especially with limited space or camp-specific transfers**
  - Ensure equipment brakes are locked (e.g., wheelchair, rollator) before initiating transfer
  - Be mindful of camper's physical abilities
    - Example: Someone with right-sided weakness may do better transferring to their left or **unaffected side**
- Position
  - o Must be comfortable being in someone else's personal space



## **Transfers - Communication**

- Always let the camper know:
  - 1. What the **steps** are
  - 2. What you plan to do for assistance
  - 3. What you expect **them** to do to help you
    - Many campers know what transfer techniques work best for them, so always ask
    - If they are unsure or cannot remember, ask someone who has worked with them before
- Be patient and listen when the camper has questions/concerns
  - If either you or the camper are uncomfortable with the transfer set-up, *take time to pause, start over, and/or request backup as needed*



#### Transfers – Additional Points to Consider

- Pay attention to vital signs (e.g., breathing rate) and overall appearance during and after transfer
- Orthostatic hypotension (OH) can be a concern during transfers, primarily for those using wheelchairs or powerchairs
  - $\circ~$  OH: Sudden drop in blood pressure due to positional changes
    - Signs of OH: Pale or flushed appearance, sudden sweating, dizziness, and/or nausea
    - **Response to OH:** Have camper safely sit or lie down and rest, encourage deep breathing, notify camp leadership and medical manager if symptoms persist or worsen



# **Rooming with Campers**

- Up to 4 campers per room
- 2-3 counselors per room
- Bunk beds
  - •ALL campers sleep only on the bottom bunk
- Morning and night-time routines
- Camper Check-in/Check-out
  - Help with bringing camper belongings to room and getting "unpacked"
  - Help with packing on second-to-last day and making sure all belongings are accounted for



# Social Engagement

- You will not only socialize with campers, but facilitate campers' socialization with one another
- Help them participate by:
  - $\circ$  Problem solving with them
  - Offering encouragement
  - Demonstrating patience
  - $\circ$   $\,$  Modeling appropriate behavior and a positive attitude  $\,$
- Desire for social participation is different for everyone.







# **Facilitating Participation**

Beyond just the social component, things to keep in mind when helping campers participate:

- Improvisation
  - Learning to improvise can be what makes an activity successful, especially when last minute changes occur
- Repetition
  - o Memory deficits and lapses in attention/concentration particularly benefit
  - You may find yourself repeating the same thing many times before everyone gets it; try not to get frustrated
- Fatigue
  - $\circ~$  Take breaks when needed get to some shade and take a breather
  - Encourage HYDRATION.
  - $\circ~$  The further into the week you get, the more fatigue will set in– prepare.



#### **Behavior Management**

In Module 2, a number of potential behavioral & cognitive effects of brain injury were addressed. Keep the following in mind when finding solutions:

- Patience
  - Essential for the whole camp experience, especially when campers need assistance and may not know how to effectively express it
  - Some campers may test your patience, intentionally or unintentionally, so do your best to remain professional

#### Boundary Setting

- Saying no to an inappropriate or unnecessary camper request is sometimes best
- Don't let a camper mistake assistance or friendliness with affection (it happens)
- Candidness
  - Honesty goes a long way; if you don't have an answer or solution, don't try to bluff it; be truthful and ask for help from fellow counselors or other camp staff



#### **Behavior Management**

Specific scenarios where behavior management strategies are most relevant:

#### Aggression or Agitation

- Demonstrate calmness and rationality
- Be assertive (but *not aggressive back*) in figuring out reason for aggression
- Redirection try to distract the camper by offering to walk to another area or talk about an area of interest for them
- Be solution focused try to find an answer before situations escalate
- If a situation does escalate and a camper becomes physically aggressive to themselves or others, do *not* fight back – ensure other campers are not at risk of being harmed and that any harmful items are removed from situation; find staff with walkie talkie and get camp leadership involved ASAP



## **Behavior Management**

Specific scenarios where behavior management strategies are most relevant:

- Confusion
  - Demonstrate calm sudden worry or concern could distress the camper
  - Take a moment and allow camper to re-orient to the present situation
  - **Keep instructions simple and repeat things if necessary**

#### Camper Disputes

- $\circ~$  Step one make sure campers are not at risk of harming one another
- $\circ~$  Get clarification on the disagreement from the campers
- See if a compromise can be reached
- Get leadership staff involved if campers become more physically aggressive or if campers refuse to reach agreement

# To sum up module 3...

- The counselor role includes a number of responsibilities to both campers and to the camp itself.
- Counselors may help campers with ADLs, transfers, transportation, rooming needs, social engagement, behavior management, and overall safety.
- Camper safety is your number one priority and responsibility as a camp counselor.
- Some campers will need personal one-on-one attendants during their stay at camp.
- Camper review is an excellent opportunity to become more familiar with each camper's individual strengths and needs.
- Campers require varying levels of assistance for different tasks, if any assistance is needed at all.



#### References

Brain Injury Association of Virginia. (n.d). *Camp Bruce McCoy operations manual, appendix 2: Camp staff training information.* 

https://www.biav.net/camp/

#### Module 3 Quiz

Please return to the training homepage to take the Module 3 Quiz and complete a couple of brief survey questions that will help us continue to keep improving the training program.