

Year-Round School Concept Unrealistic

A current topic of concern expressed by many camp leaders is the year-round school, also known as the 12-month school. The entire concept, in my opinion, is unrealistic because of costs, staffing, children and family needs, and educational values. Because camp is desirable on all levels of the socioeconomic scale, extending the school year with a camp experience could be of great value.

Camp offers an opportunity to apply the knowledge and skills fostered in the "indoor" school. Education is a broader exposure than just "book" learning. Camp provides purposeful, related experiences under actual life circumstances, and is, therefore, educational.

Camp exposure should be part of the experience of every youngster and it is best served during the summer months.

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Suggestions for Selecting Camp Nurse

I was please to read Ed Schirick's article, "Selecting a Nurse for Your Camp," (*Camping Magazine*, Vol. 63, No. 1, pp. 9; September/October 1990). Most of the article's content was excellent; however, I reacted to two of his points. First, there was no distinction made between nurses with different education backgrounds. A camp director needs to realize that the health care professional described by the article would be registered nurse who was prepared with a bachelor's degree. I think some camp directors believe that any registered nurse or licensed practical nurse is adequately trained to provide the health care described by the article; it is important to recognize differentiation of practice among nurses.

Second, I disagree with Mr. Schirick's statement that "A camp nurse is not authorized to diagnose, suggest treatment..." I believe the problem lies with a misunderstanding between what physicians and nurses do. Physicians treat illness and/or injury. A professional nurse treats a person's reaction to illness and/or injury. According to the American Nursing Association's Social Policy

Statement, nurses accomplish this by using nursing diagnosis and developing a client-centered care plan treats that nursing diagnosis. We do diagnose and then design treatment plans to effect that diagnosis within the professional framework of nursing — not medicine.

I felt Mr. Schirick's strongest point was suggesting that the nurse's duties move beyond the confines of the camp health center. He recognized that camp nursing should be more than a bandaid-and-aspirin role. It should function from a risk management position, one which identifies potential health and safety problems and then develops strategies to minimize/eliminate them. I also applaud his use of "health center" instead of camp infirmary. Campers and counselors move between two extremes of the health continuum; our camp health care programs need to recognize this and approach health care from a wellness rather than illness standpoint.

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Should We Put Everyone in the Picture?

I read with interest the article "Putting Everyone in the Picture: Countering Homophobia at Camp." I realize there will be some ACA camps that will applaud the advice offered, but we cannot.

As a Christian ACA camp, our philosophy, purpose, and goals are rooted in the Scriptures, which we feel are inspired of God. And the Bible is quite clear to us that non-heterosexual lifestyles are sinful and therefore unacceptable to God, even as are murderers, thieves, etc. And, to have such folks as counselors and leaders of our campers would not be right. God is for role models who have high moral character. This is why the offices of elder and deacon have stiff requirements.

Perhaps it would have been wiser for Ms. Ohle to direct her suggestions more restrictedly toward those camps who do not try to mirror the standards of the Scriptures.

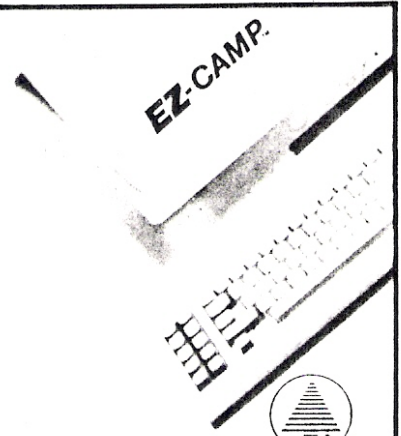
*Wesley Woodard, Jr.,
Executive Director
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