



BOYS & GIRLS CLUB
OF NORTHERN WESTCHESTER

VOLUNTEER

FUN CLUB / ADVENTURE CLUB

HEALTH, SAFETY AND CRISIS MANUAL

I have read, understand, and agree to the terms set forth within

Signature of Volunteer

Date

Print Name

Position

Please return this cover sheet with your application.



BOYS & GIRLS CLUB
OF NORTHERN WESTCHESTER

Mission Statement

To inspire and enable all young people, especially those who need us most, to realize their full potential as productive, responsible and caring citizens

I. MISSION & GUIDELINES

The Boys & Girls Club of Northern Westchester in Mt. Kisco is a nonprofit organization dedicated to the service of all youth through quality programs designed to enhance their lives through education, athletics and social interaction.

Boys & Girls Club helps members build self-esteem by incorporating a proven youth development strategy in all programs and services. This strategy instills in every member:

- A sense of competence:* The feeling there is something they can do well;
- A sense of usefulness:* The opportunity to do something of value for other people;
- A sense of belonging:* A setting where members know they are accepted and fit in, and
- A sense of power or influence:* A chance to be heard and to influence decisions.

The goal of all Boys & Girls Club programs is to teach youth to feel good about and believe in themselves. Programs are designed to be fun while teaching valuable life lessons.

WHAT MAKES A BOYS & GIRLS CLUB UNIQUE?

- FULL-TIME, COLLEGE-EDUCATED AND PROFESSIONALLY TRAINED STAFF
Our experienced and knowledgeable staff develops meaningful programs, which address the issues and concerns of our times and have achieved documented positive results. Part-time staff and volunteer leaders supplement this.
- BUILDING CENTERED
Our facility offers a safe, warm, friendly atmosphere especially designed to conduct Boys & Girls Club programs. Our members take pride in their club and see it as their own special place. Summer Adventure Clubs use the outdoor campsite areas as well as the indoor facility.
- GUIDANCE ORIENTED
The Club helps young people make appropriate and satisfying adjustments in their physical, educational, social, emotional, vocational and personal lives.

INSURANCE

The Boys & Girls Club of Northern Westchester carries standard liability coverage. This does not cover medical cost for anyone injured in the normal course of participation in any program. All persons participate at their own risk.

AFFIRMATIVE ACTION STATEMENT

The Boys & Girls Club of Northern Westchester advertises in the public media in order to make openings known to all. Children are admitted regardless of race, creed, color, sex, national origin, or religion. Children with disabilities are admitted to our program. The Boys & Girls Club works cooperatively with the Committee on School Age Special Education of local school districts in the placement of children with disabilities.

STANDARDS

The Boys & Girls Club of Northern Westchester School Age Child Care Programs, (the Afterschool Fun Club and Summer Adventure Club) are governed by the Board of Directors, Executive Director, and Director of Operations. The Afterschool Fun Club is registered by the New York State Office of Children & Family Services. The Summer Adventure Club is governed by Westchester County Health Department. The Director, Leaders

and Assistant Leaders are required to update and reinforce their knowledge through college level courses, workshops and in-service training.

PHYSICAL FACILITIES

The Afterschool Fun Club Program is held in the activity rooms, gymnasium and pool of the Boys & Girls Club of Northern Westchester, 351 Main Street, Mt. Kisco, New York. Summer Adventure Club utilizes the above in addition to outside areas including the field, campsites and the pool.

II. POLICIES

VOLUNTEER GUIDELINES

1. All volunteers must sign in at the Front Desk.
2. While at the Club, volunteers should be mindful not to interrupt the activity that is going on.
3. While interacting with children:
 - a. We expect that you shall be treated with courtesy by all and, in turn, show courtesy to all within the Club.
 - b. We do not permit corporal punishment under any circumstances.
 - c. We do not condone inappropriate language under any circumstances.
 - d. If a child is acting inappropriately, you may report that child to a staff member with a description of the behavior.
 - e. No cell phone use is allowed.
4. When an emergency alarm is sounded (fire drill or emergency evacuation), please follow the lead of the staff member in charge. In all cases, use common sense and be sure that the health and safety of the children are of paramount concern.
5. Confidentiality regarding members and staff must be maintained at all times.
6. Personal pets are not permitted in the building except in unusual circumstances and only with prior approval of the Director of Operations or his/her designee.

NO CHILD WILL BE DISMISSED TO A PERSON OTHER THAN HIS/HER PARENT, GUARDIAN OR CAREGIVER WITHOUT A WRITTEN NOTE. A CAR POOL PERMISSION SLIP MUST BE ON FILE FOR EACH CHILD. VOLUNTEERS MAY NOT DISMISS A CHILD.

INEBRIATED ADULT POLICY

A child will not be released to an adult who appears to be inebriated or under the influence of any substance that might impair judgment or reasonability. If an adult parent or guardian of a child who arrives at the program location appears to be inebriated, and intends to drive, the program staff must ask the parent to arrange for an alternate form of transportation. The child will be retained until an alternate approved driver is notified and can pick up the child. In the event an inebriated adult insists on removing a child from the program with the intention of driving the child, the program staff must notify the parent/guardian of his/her intention to immediately report the situation to the appropriate law enforcement entity.

“OPEN DOOR POLICY”

Parents and guardians are always welcome at the Boys & Girls Club of Northern Westchester. However, due to the need for increased security, for the safety of children, our “open door policy” has changed slightly. Parents/guardians wishing to visit or observe their children at the Club, during program hours, are welcome to do so.

DISCIPLINE AND BEHAVIOR MANAGEMENT POLICY

- Discipline will be consistent and developmentally appropriate.
- Discipline will include positive guidance, redirection and clear limits that encourage the child’s ability to become self-disciplined.
- The Boys & Girls Club of Northern Westchester will NOT use the following disciplinary practices:
 - Physical punishment of any type, including shaking, biting, hitting or putting anything on or over a child’s mouth;

- Withdrawal of food, rest room access or outdoor activities;
- Abusive or profane language, including yelling;
- Any form of public or private humiliation with the intent to embarrass and not to redirect;
- Unsupervised separation.

FIELD TRIPS

An important part of the Boys & Girls Club After School Program is exposing the children to many and varied experiences within the community; therefore a number of field trips are built into the programs. Transportation is provided by an outside carrier or by Boys & Girls Club minibus.

SCHOOL VACATIONS AND NON-SCHOOL DAYS

Fun Club will operate on half days and Superintendent’s Conference days as indicated in our current Program Book . The Boys & Girls Club is open on most vacation days for your convenience. All are included in the fee.

EMERGENCY CARE

As a general policy, when the Bedford Central School District is closed for classes due to inclement weather, the Boys & Girls Club (BGCNW) will be closed. However, there are times when BGCNW will offer emergency childcare during CERTAIN inclement weather conditions when schools are closed. It is important that you listen to the following radio stations to find out if the Club is Closed or Open for Emergency Care: WHUD – 100.7 FM or WFAS – 106.3 FM. The radio announcer will state either “The Boys & Girls Club of Northern Westchester is CLOSED” or "The Boys & Girls Club is open for EMERGENCY CARE ONLY.” On the days when schools are closed and we provide Emergency Care – children may not be dropped off earlier than 8:00AM. Children will need to bring their own lunches. Children must be picked up no later than 7:00PM.

III. STAFF QUALIFICATIONS

PROGRAM ADMINISTRATOR: Barbara E. Cutri, Director of Operations – BS in Education, Certificate in Administration, 30 years experience in Youth Development. Responsible for administering the mission, goals and policies of program, program implementation and evaluation, fiscal management, organizational development and management of human resources. 30 hours training, RTE/CPR PR.

GROUP LEADER: Supervision and guidance of children in the program, program planning, communication with families, supervising support staff, relating to the community. Minimum requirement – High School Diploma, 20 hours training RTE/CPR PR, AED, LGT or Community First Aid and Safety and Infant, Child, Adult CPR.

ASSISTANT GROUP LEADER: Supervision and guidance of children under the direct supervision of the Group Leader. Minimum age: 16, 15 hours per year training, Community First Aid and Safety, Infant, Child, Adult CPR.

VOLUNTEERS MUST be at least 14 years old, attend a volunteer orientation and submit required paperwork & screening. Volunteers may begin after all screening are passed.

All staff and volunteers are fingerprinted, drug tested and screened through the New York State Child Abuse Registry.

STAFF RATIO: (Adventure Club)

Grades 1 and 2:	6 children to 1 staff
Grades 3, 4, 5, and 6:	8 children to 1 staff
Grades 7, 8, and 9:	10 children to 1 staff

Supervision during high risk activities such as physical education or swimming include qualified staff in those areas meeting the appropriate ratios. **Volunteers MAY NOT be left alone with children.**

SUPERVISION

The children must be under direct adult supervision at all times. Fighting is not allowed; running and throwing of objects are not allowed except in a supervised part of the curriculum.

All sharp objects are stored out of the reach of children. Such objects as scissors are used only under direct supervision. The classroom equipment is observed continually for stability, smoothness of wooden objects, and safe corners. No toys or equipment with easily removable small parts (eyes, wheels, etc.) are allowed.

The play yard is fenced. **NO child is allowed outside to play unless there is a staff member present.**

When the children leave the building as a group, they are required to walk in an orderly fashion and are accompanied by the staff and other adults, if deemed necessary. Parents are required to bring their preschool children into the building, and pick them up inside each day.

IV. SAFETY

SAFETY POLICIES AND CRISIS PLAN

The staff and volunteers of each department are informed of safety rules, special hazards, and commonly occurring accidents.

PREVENTION

There should never be a time when a program area or classroom is unstaffed. If there is no staff present, the area must be locked.

The staff person in charge in a crisis situation is Executive Director Brian P. Skanes, or in his absence, Director of Operations Barbara E. Cutri.

The Crisis Team consists of Executive Director Brian P. Skanes and Director of Operations Barbara E. Cutri. The liaison to the Board of Directors is Brian P. Skanes, Executive Director. In his absence, the liaison to the Board of Directors is Barbara E. Cutri, Director of Operations.

The Media Spokesperson is Executive Director Brian P. Skanes. All staff are to refer reporters or other representatives of the media (TV, radio, newspaper, magazine, etc.) to the Executive Director. (NO EXCEPTIONS!) Staff ARE NOT to speak to reporters or any other media representative.

As a crisis unfolds, Club leaders need to be able to alert the staff of the need for help without risking disclosure of inappropriate information or spreading panic among Club members. A coded system for staff communications is used to allow staffers to immediately comprehend the scope of the problem and to respond. Front Desk Staff, Department Heads, Administration, and lead staff in each department are made aware of this coded system.

EMERGENCY POLICIES

This is the Boys & Girls Club's comprehensive health, safety and crisis management plan for the protection of Club members, staff volunteers and visitors. Program staff receives training twice a year.

In case of fire, power failure or other emergency situations, the building will be evacuated and parents will be notified when and where to pick up their children. Bi-monthly fire drills are conducted.

In case of tornado or earthquake warnings, children will be moved to the safest possible part of the building and housed there until it is deemed safe to leave. Parents are advised **NOT** to attempt to pick up their children during such a warning or occurrence to ensure the safety of both parent and child. Tornado and earthquake drills are conducted at least bi-annually.

During hurricane or blizzard conditions, if parents are unable to pick up their children, the staff will house the children at the facility until the parents or guardians can pick them up.

Arrangements have been made with a local grocery store for food should such an emergency arise.

The Boys & Girls Club of Northern Westchester will offer emergency childcare during CERTAIN inclement weather conditions when schools are closed. However, there will be times when the weather conditions force the Club to be CLOSED. If parents/legal guardians insist on picking up their child under dangerous conditions, all liability for the health & safety of that child falls on the parent or legal guardian.

In the event of an emergency dismissal from school, the Boys & Girls Club of Northern Westchester facility will be available to children enrolled in our "FUN CLUB" Afterschool Program ONLY.

EMERGENCY PROCEDURES

The child's parent, guardian, or authorized person shall be notified immediately in the event of a serious accident or an illness requiring emergency care. A qualified staff member shall administer first aid, CPR.

The 911 emergency number is posted by the telephone. The local rescue squad or ambulance service shall provide emergency transportation; the local hospital shall provide emergency care.

In the event that a child is transported to the hospital, his/her health summary and signed Permission for Health Care shall be sent along. A staff member shall accompany the child until the arrival of the parents, guardian or authorized person.

A battery operated radio is easily accessible and kept in good repair. The radio is located in the Director of Operations office. In case of an emergency, staff will tune to the local radio station for emergency information.

EMERGENCY INTERVENTION

In any emergency situation, make sure the crowd is monitored so that control is maintained. If possible, remove crowd from the emergency situation and involve only the crisis team or those immediately needed to assist with the situation.

1. Fire

The buildings conform to all fire regulations as designated by the local Fire Marshal. The doorways in each program area, classroom, as well as in the office, lobby and bathrooms, locate a fire evacuation plan, and alternate.

The 911 emergency number is posted by the telephones.

The care and custody programs hold monthly fire drills. The fire alarm system, emergency power pack lights and fire extinguishers are checked yearly for proper function. The main fire alarm system is located in the boiler room. Pull boxes are located at each exit. Staff is instructed as to the location and use of fire extinguishers.

In the event of a fire, the building shall be immediately evacuated to the back field. The staff member in charge shall phone the fire department from within the building, if it is safe, or from another phone. All other staff members are to remain with the children and see them safely to the designated emergency area. Staff members are to complete a head count and roll call to determine that their entire group has evacuated the building. Should a child be determined missing, the Executive Director and/or Director of Operations will be notified immediately, the lost child plan will be enacted and the firemen will be notified. The firemen will search the building.

The local police and fire departments have been informed, in writing, of the location and existence of the Club.

2. Missing Person - Lost Child Plan

Should a child be missing, staff shall search the building and grounds completely. If the child is still not found, the police and parent/guardian shall be notified while staff begins to search the immediate surrounding area.

3. Tornado

The areas of shelter in case of a tornado are Classrooms 1, 5, 6, 7 and the open area in the Club. A Tornado Drill will be held twice between the months of April through September.

In the event of a tornado warning, the children shall be evacuated to the designated area and remain there until the threat has passed.

4. Earthquake

Earthquake drills shall be held biannually.

In the event of an earthquake, if the children are indoors, they will be kept indoors and seated on the floor along the inside walls. If the children are outside, they will be kept outside in the open, away from buildings and utility wires. After the quake, the children will be kept together until a staff member can inspect the premises for damage.

5. Blizzard or Hurricane

In the event of a blizzard or hurricane, when parents are not able to pick up their children, the staff will house the children at the facility until the parents or guardians can pick them up. Arrangements have been made with a local grocery store for food should such an emergency arise.

6. Power Failure

Two flashlights, in working order, are kept in the Director of Operation's office. Power pack emergency lights are installed to light each exit.

7. Evacuation

In case evacuation is necessary due to fire, flood, disaster, radiological emergency, medical emergency, etc., the fire alarm will be activated to notify each class to assemble in the back playground area, located 150 feet distant from all buildings, and out of the way of rescue and/or fire fighting equipment. Staff of the various programs will be responsible for each member of their class. Once everyone is assembled, the staff will take attendance by roster roll call. If someone is missing, the Director of that particular program, as well as, the Executive Director and Director of Operations will be notified and the lost child plan will be implemented.

8. Accident - ONLY STAFF WITH CURRENT FIRST AID, EPIPEN & AED ADMINISTER FIRST AID.

In the event of any minor accident, such as scrapes, cuts, bruises and bumps, appropriate first-aid procedures (cleanse area with soap and water and Band-Aid if necessary) will be administered. ALL accidents, however minor, MUST be recorded in the first aid medical logbook, which is located at the front desk. An accident report must also be completed. The original report is to be given to the front office and a copy given to the Director of Operations.

ANY AND ALL TIMES FIRST AID IS GIVEN, THE PERSON ADMINISTERING FIRST AID MUST WEAR DISPOSABLE GLOVES. Blood, nasal mucous, feces or urine, IS NOT TO BE TOUCHED with bare hands. All Boys & Girls Club of Northern Westchester program staff are trained to use universal precautions.

Parent or legal guardian must be notified of the minor accident at dismissal, in person or by phone.

In the event of any SERIOUS accidents, such as falls, possible broken bones, life threatening injuries, or seizures, the victim will NOT BE MOVED. Call 911 IMMEDIATELY. The staff in charge will appoint an assistant or volunteer to clear away any children or bystanders who may be surrounding the area of the injured person. The staff member in charge will direct another adult to notify the director of the program in which the child is registered and Director of Operations Barbara E. Cutri for further assistance. The injured's health summary and Permission for Health Care shall be sent along. A staff member shall accompany the child until the arrival of the parents, guardian or authorized person. The person who witnessed the accident as well as the person who administered the first aid will complete an accident report. The accident must be logged in the first aid medical logbook. ***Parents/ legal guardians must be notified IMMEDIATELY of a serious accident. Parents are***

to receive a copy of the accident report. Follow up call to home to inquire on he victim's condition is required. Westchester County Department of Health will also be notified.

In the event of a minor accident in the pool the Aquatics Director will instruct a lifeguard or other staff to administer appropriate first aid procedures. A first aid cabinet is located 20 feet from the pool area. An accident report will be completed. The accident will be documented in the first aid medical logbook.

In the event of a SERIOUS accident, in the pool, the Aquatics Director or Lifeguard will call 911 and notify the front desk for IMMEDIATE assistance.

9. Thunderstorms

- If the children are outside and a thunderstorm threatens, the group should be brought back into the building IMMEDIATELY.
- If the children are in the indoor pool area, the adult caregivers will get the children out of the pool and out of the pool area, when lightening is observed.
- If the children are on an off site trip and a thunderstorm threatens, the children will be brought into a nearby building or to the bus or vehicles that transported them.

The signs of an oncoming thunderstorm are thunderhead clouds, dark skies and distant rumbles of thunder and flashes of lightening. **DO NOT WAIT FOR THE FIRST NEARBY LIGHTENING STRIKE BEFORE TAKING COVER.**

When inside, stay away from windows, water and from grounded objects such as metal fences, rails, pipes, etc. When outside, stay away from isolated tall trees or objects that project above the landscape.

If you are in a level field and you feel your hair standing on end (indicating lightening is about to strike), drop to your knees and bend forward putting your hands on your knees (not on the ground). This is safer than lying down because the body is kept low to the ground but only a small area of the body is touching the ground.

POLICY STATEMENT ON WEAPONS AND VIOLENT BEHAVIOR

Members or adults possessing a dangerous weapon will not be permitted in the Club. A dangerous weapon is a gun, knife, razor, karate stick, metal knuckle or any other object, which, by the manner it is used or intended to be used, is capable of inflicting bodily harm. In cases that clearly involve a gun or any weapon used in a threatening manner, the police will be called and the individual will be subject to immediate disciplinary procedures including permanent suspension from the Club.

Members or adults who bring weapons into the Club or who are involved in violent behavior will be subject to immediate disciplinary action, and the police will be called. Such behavior includes assault with intent to do bodily harm, theft or extortion, arson and sexual assault.

In all cases involving a weapon or violent behavior, the member's parent or guardian will be notified as well as the proper authorities.

10. Intruders, Violent Behavior or Assault

- *Contact the police immediately.* If you are not able to do so, use the agreed-upon signal to alert another staff member or crisis team member to place the call.
- *Maintain visual contact with the offender,* and be prepared to report your observations to the staff in charge or the police if they are called.
- *Ask the disruptive person to accompany you to an area away from other members.* Do not persist if the individual is not cooperative.
- *Clear all members from the immediate area* if the offender is unwilling to accompany you elsewhere.
- *NEVER attempt to physically disarm an armed individual.* Remove others and yourself from the range of the weapon.
- *Do not use force as a response to violent behavior.* Consider it the last choice of action and only use it to protect members and staff from serious bodily harm.

- *Allow the police to remove a severely disruptive person who refuses to cooperate. Turn over any confiscated weapon to the police.*
- *Direct Staff to ensure the safety of all members until the police arrive.*
- *Provide police with a copy of the Club floor plan. If the crisis warrants, let police officers know the location of all exits, entrances, closets or other places an intruder may hide.*
- *Report the incident to the Executive Director and/or Director of Operation and Unit Director by phone, as soon as possible following the resolution.*
- *Contact the parents or guardians of members directly involved and inform them of their child's behavior.*
- *Prepare a written report of the incident and a written log or record of any follow-up actions and submit the report to the Executive Director and/or Director of Operations as soon as possible after the incident.*

Early Warning Signs of Potentially Violent Individuals

- Social withdrawal
- Excessive feelings of isolation and being alone
- Excessive feelings of rejection
- Being a victim of violence
- Feelings of being picked on and persecuted
- Low school interest and poor academic performance
- Expression of violence in writings and drawings
- Uncontrolled anger
- Patterns of impulsive and chronic hitting, intimidating and bullying behaviors
- History of discipline problems
- Past history of violent and aggressive behavior
- Intolerance for differences and prejudicial attitudes
- Drug use and alcohol use
- Affiliation with gangs
- Inappropriate access to, possession of and use of firearms, knives, etc.
- Serious threats of violence

Lockdown Procedures

In the event of an emergency which requires us to prohibit entry or departure from one or all of our units the Lockdown Procedure will be in effect. Doors to our buildings will be locked to prevent entry to the building. Staff will contain the children within the building. Parents/guardians will be kept informed via local radio stations (WHUD, WLNA) and any local, state or county emergency communications available. Staff will contact appropriate authorities for assistance.

11. Bus or Auto Accident

The steps to take for both minor and major accidents are the same; in the case of a major accident, however, the driver of the vehicle may have to ask for help in evacuating the vehicle, setting out flares, contacting police, etc. The appropriate steps to follow are:

- *Call for police and/or medical help immediately. Inform Executive Director and/or Director of Operations as soon as situation permits.*
- *Determine the extent of the injuries, and prioritize the need for treatment.*
- *Calm Club members as much as possible by remaining composed. Try to remain calm and keep your emotions and voice under control.*
- *Begin emergency first aid as needed.*
- *Evacuate the bus or automobile safely. Keep everyone in their seats until the injured passengers can be removed, then evacuate the vehicle when it is safe to do so. Seek assistance from passerby, if needed. Keep Club members in a safe place. Do a head count and roll call if possible*
- *Set out emergency flares.*
- *Obtain information on the other driver, if applicable.*
- *Assist in the investigation of the accident when police arrive at the scene.*
- *Arrange transportation back to the Club.*

- *Complete an accident report.*
- *Never leave the scene of an accident, even if you think no damage has been done to the vehicle and no injuries have occurred.*

12. Infectious Disease Outbreak

- *Call 911 immediately.* Notify Executive Director and/or Director of Operations.
- *Alert other staff members to the situation;* let them know if movement of Club members within the facility must be stopped.
- *Contact parents or immediate family of Club members affected.*
- *Provide all pertinent information to the emergency medical staff* when they arrive.
- *Notify the appropriate outside agencies of the outbreak.* Attached to this manual is a list of diseases that must be reported to Westchester County Department of Health.

NAME OF SAFETY COORDINATORS

Brian P. Skanes - Executive Director

Barbara E. Cutri – Director of Operations

Gregory Johnson - Maintenance Supervisor

- Safety of equipment, apparatus and grounds will be checked at daily and reported to Barbara E. Cutri, Director of Operations. Maintenance needs are reported to Gregory Johnson, Maintenance Supervisor.
- Director of Operations will be responsible for informing staff of any precautions, dangers and problems on site at Mt. Kisco.
- Senior staff will be responsible for informing their staff and Club members of any dangers and problems on location to avoid any potential injuries.
- Director of Operations will police grounds daily for broken glass, rocks, holes, mowing of lawns, pool chemistry, maintenance of walkways and any other hazards. If problems occur, Maintenance Supervisor will be informed of any conditions which may need immediate repair.
- Safety and order of special activity sites is the responsibility of Director of Operations and Maintenance Supervisor. Removal of bats or other animals from building is the responsibility of Maintenance Supervisor.
- D. P.W. of Mt. Kisco removes trash weekly from dumpsters in rear of building.
- All maintenance of building facility i.e.; cleaning gym, games room, pool, lockers, bathrooms, is done on a daily basis by Maintenance Department. All cleaning supplies are kept in a locked room.

13. Waterfront Facility Maintenance

Aquatic Director Dennis Munson is responsible for operation of filtration system and testing and maintenance of the disinfection system. Storage and handling of chemicals is done by Dennis Munson. All chemicals are stored in locked rooms.

V. HEALTH POLICIES

The Director of each care and custody program and each program area staff are responsible for observing the health and development of children, handling illnesses, implementing accident prevention and emergency procedures, keeping health records complete and current and informing parents of community resources. Some or all of these duties may be shared with, or delegated to, other staff members.

Continuing health consultation is sought from a physician, PHN or RN with training in dealing with children. Our off-site Health Director is Patricia Reilly, RN 914-241-6165. The on-site Health Director is the Director of Operations. The Consultant assists in developing health policies and keeping them current, assists in screening referral and follow-up procedures, and provides advice about children with special needs. The on-site Health Director reviews health policies, health records, any health problems and the Accident Log twice a year. The Health Director also checks the first aid kit, the sick room area, and safety conditions. The twice-yearly

inspection and any recommendations for change are noted in writing. Any necessary changes are made to conform to health and safety standards within 30 days notice of inspection.

VOLUNTEER HEALTH

Each volunteer involved in programs with children must submit a Medical Report Form signed by her/his source of medical care based on a thorough examination within three months. Statements must be submitted every two years thereafter.

All volunteers must submit evidence of freedom from tuberculosis. If a Mantoux test proves negative, no further evidence is necessary; if the mantoux is positive, a chest x-ray must be repeated every two years. A positive x-ray prevents employment.

VI. CHILD ABUSE

POLICY FOR REPORTING SUSPICION OF CHILD ABUSE

In accordance with the provisions of Section 413 and 415 of the Social Services Law, any suspected incidents of child abuse or maltreatment concerning a child must be reported to the State Central Register of Child Abuse and Maltreatment or cause such a report to be made when such employees have reasonable cause to suspect that a child in their care is an abused or maltreated child. This must be done in the following manner:

The primary person responsible for the reporting suspicion of child abuse is the staff person suspecting the abuse or neglect. Barbara E. Cutri, Director of Operations, must be informed and a document for concern for a child must be completed. **In all cases, no report is to be made without informing Brian P. Skanes, Executive Director, and Barbara E. Cutri, Director of Operations.**

MANDATED REPORTERS

Mandated reporters of child abuse are those individuals who must report, or cause a report to be made, whenever they have reasonable cause to suspect that a child coming before them in their professional or official capacity is abused or maltreated.

REASONABLE CAUSE TO SUSPECT

A person can have "reasonable cause" to suspect that a child is abused or maltreated if, considering what physical evidence he/she observes or is told about, and from his/her own training and experience it is **possible** that the injury or condition was caused by neglect or by non-accidental means. The reporter need not be absolutely certain that the injury or condition was caused by neglect or by non-accidental means; the reporter should only **BE ABLE TO ENTERTAIN THE POSSIBILITY THAT IT COULD HAVE BEEN NEGLIGENCE OR NON-ACCIDENTAL** in order to possess the necessary "reasonable cause."

SUSPICION

CERTAINTY IS NOT REQUIRED. To be suspicious, it is enough for the mandated reporter to *distrust* or *doubt* what he or she personally observes or is told. In child abuse cases, many factors can and should be considered in the formation of that doubt or distrust. Physical and behavioral indicators may also be helpful in forming a reasonable basis of suspicion. Although these indicators are not diagnostic criteria of child abuse, neglect or maltreatment, they illustrate important patterns that may be recorded in the written report when relevant.

WESTCHESTER COUNTY DEPARTMENT OF HEALTH COMMUNICABLE DISEASE REPORTING REQUIREMENTS

Reporting of suspected or confirmed communicable diseases is mandated under the New York Sanitary Code (10NYCRR 2.10) and Westchester County Sanitary Code Article IV, Section 873.402. The primary responsibility for reporting rests with the physician; moreover, laboratories (PHL 2102), school nurses (10NYCRR 2.12), day care center directors, nursing homes/hospitals (10NYCRR 405.3d) and state institutions (10NYCRR 2.10a) or other locations providing health services (10NYCRR 2.12) are also required to report the diseases listed below.

<p>Anaplasmosis Amebiasis (Animal bites for which rabies prophylaxis is given¹) (Anthrax²) (Arboviral Infection³) Babesiosis Botulism² Brucellosis² Campylobacteriosis Chancroid Chlamydia trachomatis infection (Cholera) Cryptosporidiosis Cyclosporiasis (Diphtheria) E. coli 0157:H7 infection⁴ Ehrlichiosis (Encephalitis)</p>	<p>(Foodborne illness) Giardiasis (Glanders²) Gonococcal infection Haemophilus influenzae⁵ (invasive disease) (Hantavirus Disease) Hemolytic uremic syndrome (HUS) Hepatitis A (Hepatitis A in a food handler) Hepatitis B (specify acute or chronic) Hepatitis C (specify acute or chronic) Pregnant Hepatitis B carrier Herpes Infection, infants age 60 days or younger Hospital associated infections (as defined in section 2.2 10NYCRR)</p>	<p>Influenza, laboratory confirmed Legionellosis Listeriosis Lyme disease Lymphogranuloma venereum Malaria (Measles) (Melioidosis²) Meningitis Aseptic or viral (Haemophilus meningococcal) Other (specify type) (Meningococcemia) (Monkeypox) Mumps Pertussis (Plague²) (Poliomyelitis)</p>	<p>Psittacosis (Q Fever²) (Rabies¹) Rocky Mountain spotted fever (Rubella) (including congenital rubella syndrome) Salmonellosis (Severe Acute Respiratory Syndrome (SARS)) Shigatoxin-producing infection⁴ Shigellosis⁴ (Smallpox²) Staphylococcus aureus⁶ (due to strains showing reduced susceptibility or resistance to vancomycin) (Staphylococcal enterotoxin B poisoning²)</p>	<p>Streptococcal infection (invasive disease)⁵ Group A beta-hemolytic strep Group B strep Streptococcus pneumoniae (Syphilis, specify stage⁷) Tetanus Toxic shock syndrome Transmissible spongiform encephalopathies⁸ Trichinosis (Tuberculosis current disease (specify site)) (Tularemia²) Typhoid Vibriosis⁶ (Vaccinia Disease⁹) (Viral hemorrhagic fever²) Yersiniosis</p>
---	---	---	--	---

WHO SHOULD REPORT?

Physicians, nurses, laboratory directors, infection control practitioners, health care facilities, state institutions, schools.

WHERE SHOULD REPORT BE MADE?

Report to local health department where patient resides.

Name/Address: **Westchester County**

Department of Health – DC
145 Huguenot Street – 8th Floor
New Rochelle, New York 10801

Phone: **(914) 813-5159 [M-F 8:30-4:30]**
(914) 813-5000 [After Hours & Weekends]

Fax: **(914) 813-5182**

WHEN SHOULD REPORT BE MADE?

Within 24 hours of diagnosis:

- phone or fax diseases in bold type,
- mail case report, DOH-389, for all other diseases,
- in New York City use form PD-1

SPECIAL NOTES

- Diseases listed in **bold type (t)** warrant prompt action and should be reported **immediately** to local health departments by phone followed by submission of the confidential case report form (DOH-389). In NYC use case report form 395V.
- In addition to the diseases listed above, any unusual disease (defined as a newly apparent or emerging disease or syndrome that could possibly be caused by a transmissible infectious agent or microbial toxin) is reportable.
- Outbreaks: while individual cases of some diseases (e.g., streptococcal sore throat, head lice, impetigo, scabies, and pneumonia) are not reportable, a cluster or outbreak of cases of any communicable disease is a reportable event.
- **Cases of HIV infection, HIV-related illness and AIDS are reportable to:**

Division of Epidemiology
P.O. Box 2073, ESP Station
Albany, New York 12220-2073
(518) 474-4284

In New York City:
New York City Department of Health
For HIV/AIDS reporting, call:
(212) 442-3388

1. Local health department must be notified prior to initiating rabies prophylaxis.
2. Diseases that are possible indicators of bioterrorism.
3. Including, but not limited to, infections caused by eastern equine encephalitis virus, western equine encephalitis virus, West Nile virus, St. Louis encephalitis virus, La Crosse virus, Powassan virus, Jamestown Canyon virus, dengue and yellow fever.
4. Positive shigatoxin test results should be reported as presumptive evidence of disease.
5. Only report cases with positive cultures from blood, CSF, joint, peritoneal or pleural fluid. Do not report cases with positive cultures from skin, saliva, sputum or throat.
6. Proposed addition to list.
7. Any non-treponemal test \geq 1:16 or any positive primary or secondary stage disease or prenatal or delivery test result regardless of titer should be reported by phone; all others may be reported by mail.
8. Including Creutzfeldt-Jakob disease. Cases should be reported directly to the New York State Department of Health Alzheimer's Disease and Other Dementias Registry at (518) 473-7817 upon suspicion of disease. In NYC, Cases should be reported to the NYCDOHMH
9. Persons with vaccinia infection due to contact transmission, and persons with the following complications from vaccination: eczema vaccinatum, erythema multiforme major or Stevens-Johnson syndrome, fetal vaccinia, generalized vaccinia, inadvertent inoculation, ocular vaccinia, post-vaccinal encephalitis or encephalomyelitis, progressive vaccinia, pyogenic infection of the vaccination site, and any other serious adverse events.

ADDITIONAL INFORMATION

Reporting Forms (DOH 389) are available for download at:
http://health.westchestergov.com/images/stories/pdf/s/form_doh_389.pdf
For more information on disease reporting, call Westchester County Department of Health Division of Disease Control at (914) 813-5159, or New York State Department of Health Bureau of Communicable Disease Control at (518)-473-4439. In New York City (866) NYC-DOH1.

PLEASE POST THIS CONSPICUOUSLY