Summer Enrichment Camp

Policies and Procedures

For Parents
Date:  
June 15th-July 26th  
Closed July 3rd

TIME:  
8 a.m. - 5 p.m.

NOTE:  
No Supervision Before 8 AM or After 5 PM.  
Violation may result in your child(ren) being suspended from camp.

2020 Summer Camp Locations

Bails CC, 1513 LaSalle St, 32207
Beachwood, 11758 Marina Dr, 32246
Cecil Recreation, 13611 Normandy Blvd, 32221
Clanzel Brown, 4575 Moncrief Rd 32209
Cuba Hunter CC, 3620 Bedford Rd, 32207
Dinsmore CC, Civic Club Dr. 32219
Emmett Reed, 1093 W 6th St, 32209
Henry T Jones CC, 3856 Grant Rd, 32207
Johnnie Walker, 2500 West 20th St. 32209

Julian Barrs CC, 10151 Crystal Springs Rd, 32221
Lewis Cobb, 4511 Portsmouth Ave. 32208
Mary Lena Gibbs CC, 6974 Wilson Blvd, 32210
Mitchell, 1010 Acorn St. 32209
Normandy Center, 1751 Lindsey Rd, 32221
Oceanway CC, 12215 Sago Ave, 32218
Robert F Kennedy CC, 1133 Ionia St, 32206
Westside CC, 1061 Line St. 32209
Windy Hill CC, 10540 Anders Blvd, 32246
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Our Mission

The mission of JaxParks is to provide a recreation program conducive to a growing and thriving community.

During Summer Camp, we aim to provide an atmosphere that helps your children learn from positive interactions while having an exceptional enrichment and recreational experience. We aim to create a safe, fun environment that allows your child to get the most out of their experience!

Our Program

Summer Camp is available to children ages 6-12 years old. The program currently serves campers Monday through Friday. See listing below for locations.

The goal of summer camp is not only to provide a safe place for Jacksonville's youth, but to broaden their horizons with new activities and experiences. Summer camp will include enrichment, arts and crafts, and recreational games.

Parent / Staff Communication

Communication is the key to the success of our program. Please feel free to speak with your child’s Recreation Supervisor about any concerns or commendations you may have. Parent conferences are scheduled upon request.

Center Phone Numbers:

Balis: 904-306-2148
Beachwood: 904-928-0917
Cecil Recreation: 904-573-3157
Clanzel Brown: 904-765-5282
Cuba Hunter: 904-858-1366
Dinsmore: 904-924-5330
Emmett Reed: 904-630-0829
HT Jones: 904-399-0615
Johnnie Walker: 904-630-0321

Julian Barrs: 904-693-4909
Lewis Cobb: 904-765-6753
ML Gibbs: 904-573-3153
Mitchell: 904-630-0331
Normandy: 904-783-1926
Oceanway: 904-751-3386
RF Kennedy: 904-630-0933
Westside: 904-565-2669
Windy Hill: 904-565-2669
Arrival and Departure

<table>
<thead>
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<th>Time</th>
<th>8 a.m. - 5 p.m.</th>
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**NOT E:** No Supervision Before 8 AM or After 5 PM.

Violation may result in your child(ren) being suspended from camp.

Participants or their parents are responsible for their own transportation to and from the program.

**Sign-in Policy**

Parents will sign campers in daily. Due to COVID-19 we will be following CDC guidelines by administering temperature checks to each camper. We also ask that parents do not come into the building (past the designated check in area) without being asked to do so by staff.

**Dismissal Procedure**

Identification must be shown upon the pickup of your child **EVERY DAY**.

*NO CHILD WILL BE RELEASED TO ANYONE NOT LISTED ON THE OFFICIAL REGISTRATION FORM*

* The Summer Camp programs end at 5:00pm. Habitual late pickup is unacceptable and may result in dismissal from the program.

**Attendance Policy**

We ask parents to notify the Recreation Supervisor if their child will not be in attendance that day. Daily attendance will be taken at the beginning of the program every day. If a camper has more than three unexcused absences, they will be dismissed from the program.
**Supervision**

We ensure all participants are adequately supervised. A minimum of two staff will be onsite and available until all participants have left the program at the end of the day.

**Example for School Age**

To provide quality programming to youth and to promote social distancing the ratios we will maintain this summer are 1 adult to every 10 youth. The Recreation Supervisor will ensure that ratios are adjusted to maintain the levels of supervision.

**Clothing**

Send your child in comfortable clothes, appropriate for the weather and for participating in various indoor and outdoor recreational activities. (All shorts must be arm length. Please, no tank tops, tube tops or bare midriffs). **For safety reasons, no sandals or open-toed shoes will be allowed at Summer Camp.**

**Lunch/Snacks**

The program will include lunch and one snack per day. Water is always accessible for children.

**Personal Items**

The City of Jacksonville is not responsible for the loss or damage of a child’s possessions. Please do not send anything of great value or importance to the program with your child.

**Money**

Participants are discouraged from bringing money. Please make sure your child understands that if money is brought, he/she must keep track of it and keep it in a safe place. We encourage you to pin to a pocket inside shorts to hold the money. Money stuffed in shoes could be lost or stolen. Staff is not allowed to hold your child's money.

**Cell Phones**

Cell phones are not to be used during program hours. Children may use their cell phones before and after the program, or in case of emergency. Please contact the individual center if you need to speak with your child.
Health and Safety

Sick Policy

Before your child begins attending Summer Camp, it is important that you have an alternate plan for care in the event that your child becomes ill. If you keep your child home due to sickness, please call to notify the individual center of his/her absence and particular illness. If you bring your child to the program thinking that he/she may not be feeling well, please advise staff so they can be more alert for any signs of developing illness. If your child becomes ill during the program day (see criteria below), you will be called to take him/her home. If you cannot be reached, staff will contact persons listed on your child’s registration form. Until your child is picked up, he/she will be separated from the other children at the camp and observed in the site office.

Exclusion Criteria

Children may not attend Summer Camp if they have any of the following signs or symptoms:

- Any illness that prevents the child from participating comfortably in program activities.
- Any illness that results in a greater need for care than staff can provide without compromising the health and safety of other children.
- Signs of fever (over 100 degrees F).
- Difficulty breathing (e.g. uncontrolled asthma attack).
- Lethargy, irritability, persistent crying, or other signs of severe illness.
- Diarrhea (2 or more loose stools in the past 12 hours or any loose stool with blood or mucus).
- Vomiting (2 or more times in the past 24 hours).
- Mouth sores associated with drooling (e.g. herpes stomatitis).
- Contagious rash (chicken pox, impetigo, scabies, ringworm of the scalp or body).
- Rash with fever of behavior change.
- Infectious conjunctions (pink/red eye with white or yellow eye discharge).
- Head lice
- Sore throat and swollen glands to the point of discomfort and difficulty eating.
- Persistent cough that interferes with activities.

Children who are sick may return to the program once the fever, diarrhea and or vomiting has resolved for preferably 24 hours, and they can comfortably participate in program activities. For specific illnesses or conditions, children may return once the criteria outlined below have been met.
Illness Criteria for Return

COVID-19 – Negative COVID-19 test
Fever – Fever and fever medication free for 72 hours
Chicken pox - All lesions have dried over 6 days after onset of rash
Conjunctivitis - Note from clinician with treatment, or eye clear without discharge
Ear infection - No fever for 24 hours
E. coli 0157:H7 - Diarrhea resolved and two negative stool cultures
Hepatitis A - 1 week after onset of illness or jaundice
Impetigo - 24 hours after antibiotic treatment is started
Lice - After the first treatment
Measles - 4 days after onset of rash
Mouth sores with drooling - Note from clinician
Mumps - 9 days after onset of parotid gland swelling
Pertussis (whooping cough) - 5 days of completed antibiotic treatment (out of 14 days total)
Rash with fever - Note from clinician
Ringworm of scalp or body - Treatment for Tinea capitis started
Scabies - After treatment is completed
Shigella - Diarrhea resolved and two stools cultures negative
Strep throat - 24 hours after antibiotics are started and no fever for 24 hours
Tuberculosis - Note from clinician stating no longer contagious

Special Note: Ringworm
Children with ringworm of the scalp/body or Tinea Capitis may not attend the program until a clinician prescribed antifungal treatment is started.

Communicable Disease

The Florida Administrative Code, Communicable Disease Control, does not permit children to remain in the program if they have a communicable disease or symptoms of a communicable disease. Parent(s)/guardian(s) should notify the Recreation Coordinator within 24 hours after the child has developed a known or suspected communicable disease. If a child is found to have signs or symptoms of a communicable disease, a notice will be given indicating the disease and the nature of the illness. The names of the children will not be provided. All information about communicable diseases is confidential.

The following communicable diseases must be posted or reported:
- COVID-19
- Chicken pox/varicella
- Conjunctivitis, infectious (pink eye)

- Diarrhea: viral, parasitic or bacterial (e.g. E. coli, Salmonella, Shigella, Rotavirus, Norwalk agent, Enterovirus, Giardia)
- Diphtheria*
- Fifth Disease/Erythema infectiosum
- Haemophilus influenza type B (Hib)*
- Hepatitis A*
- Hepatitis B*
- Hand, Foot and Mouth disease
- Herpes simplex virus stomatitis (severe case of oral herpes)
- Impetigo
- Influenza (the flu)
- Lice
- Lyme Disease*
- Measles*
- Meningitis, viral or bacterial (e.g. meningococcus*, enterovirus)
- Mumps*
- Pertussis (whooping cough)*
- Rabies*
- Rubella*
- Ringworm of the scalp or body
- Scabies
- Stomach virus
- Strep throat/Scarlet fever
- Tuberculosis*
- Typhoid Fever*

* Diseases marked with an asterisk (*) need to be reported to the local county health department by camp staff.

**Medication**

Recreation staff will not administer any medications. Please cooperate by not asking our staff to administer drugs, and please do not pack such substances in your child’s lunch or school bag, unless it is a field trip day.
Medications can be administered by the child with Parks and Recreation staff present, only if left in the original container and only according to the instructions on the container. Any medications are to be kept in the main office or site area. Recreation staff will walk the participant to the office for medication, as needed. On field trip days, please pack the medicine in your child’s bag and advise staff of the times to be taken.

**Immunizations**

Your child should be up to date on all immunizations recommended by the Florida Department of Health.

**Significant Special Needs**

Parents of any child enrolled or applying to enroll in the program must notify staff of any medical or developmental condition requiring special accommodations. Parents should provide the Staff with any information that would be useful in helping to care for the child. Appropriate medical documentation may also be required. The program will make every effort to meet the child’s special needs. These special needs include any allergies a child may have to certain foods (e.g., peanut butter or milk). Please provide the program with appropriate documentation from a doctor in regards to allergies. A child may be excluded from the program when he or she requires a level of care that would cause the staff to compromise the needs of the group.

**First Aid**

Staff at the program administers basic first aid in accordance with the Health Department regulations.

**Injury at the Park**

If your child is injured at the Summer Camp Program, an *Injury/Incident Report* will be filled out by your child’s Recreation Supervisor. A copy will be sent to Risk Management, the parent(s) and kept in the program’s file. If your child has a serious injury, we must be able to contact you by telephone. Please make sure your telephone information is correct.

**Emergency Procedures**

If a child is seriously injured or in need of medical attention, a staff person will call 9-1-1 and the child will be taken to the nearest hospital. Parent(s)/guardian(s) will be notified immediately. Parents are required to pay for the cost of the ambulance and all medical expenses. Staff will not personally transport children, in case of medical emergencies; 9-1-1 will always be contacted.

**Hand Washing and Personal Hygiene**

Staff constantly reminds the children to wash their hands after using the lavatory and continually focus on good personal hygiene habits.
Drugs, Alcohol, and Cigarettes

Because we care about the safety of children, we ask that parents/guardians do not use illegal drugs or are under the influence of alcohol while transporting children to and from the recreation program sites. If in our judgment a parent/guardian is impaired by drugs or alcohol, the Recreation Supervisor will:

1. Inform the person of the observation that he or she appears to be under the influence of drugs/alcohol
2. Ask the person to contact someone else to come pick up the child
3. Contact the Police Department, if the authorized person insists on transporting the child

Please do not use any tobacco products on the premises.

Child Abuse Policy

Any employee or volunteer who becomes aware of or suspects that any child or minor is a victim of physical and/or sexual abuse must immediately report such suspicion to the supervisor and the Parks, Recreation and Community Services Director. Such report shall be made promptly.

By law, all staff members are required to report all suspected instances of abuse or neglect to the central abuse registry and tracking system. The Recreation Supervisor and the staff person who suspects the incident will file a confidential report together.

Code of Conduct

Following is a list of rules that your child must adhere to. It is important to read these guidelines and understand the implications that can arise if participants do not properly abide by them.

- Safety must come first.
- Do not participate in any physical contact that may result in the injury of another individual is permitted.
- Never take items that do not belong to you.
- Do not leave an assigned group or area without getting permission from the staff member.
- Never go anywhere alone.
- Do not drink or eat unless during the snack and special activity times. Water is always available during outdoor activities.
- Always tell the truth.
- Be polite and helpful to other.
- Respect staff and other participants in the program.
- Do not run in the building.
- Do not use drugs, alcohol, or tobacco products.
- **Do not bring toy guns, knives, Chinese stars, etc. to camp.** *(Bringing these items to the program may result in suspension or expulsion)*
- Clean up your particular area of use before moving on to the next activity.
- Participate in all activities unless hurt or ill. If they choose not to participate they must stay in close proximity to the activity.
- Do not chew gum during the program.
- Never make a trip to the restroom or water fountain without first getting the recreation staff’s permission. Participants must ask staff to escort them to the restroom at all times.
- Do not wander away from the group on walks to the fields or other facilities.
- Never act in an unsportsmanlike manner, tease, or taunt other participants or use inappropriate language.
- Never inappropriately touch or expose yourself to other participants.
- Do not throw or spit food or drink while at lunch.

**Discipline Action Plan**

Any behavior that is disruptive or endangers the safety of those participating in the program will be subject to disciplinary actions. In addition to the rules listed above, other types of behavior that will not be tolerated include but are not limited to: derogatory remarks directed to the other participants or staff members, refusing to follow instructions, stealing or defacing others’ property, running away, smoking, cursing, etc.

The program discipline actions are as follows:

- **First Incident:** Explain to the child the problem and issue warning
- **Second Incident:** Institute a penalty. (Examples: denial of use of facility or piece of equipment, sit out from an activity, etc.). Staff will complete an Incident/Injury report for the parent to sign.
- **Third Incident:** Call the child’s parents and explain the situation. Staff will complete an Incident/Injury Report for the parent to sign. Include a note on the report that next offense results in a one-day suspension from the program.
- **Fourth Incident:** One-day suspension from the program. Parents will be notified immediately. Staff will complete an Incident/Injury Report for the parent to sign. Include a note on the report that the next offense may result in expulsion from the program.
- **Fifth Incident:** Expulsion from the program

*Please see attached disciplinary notification sheet (page *).

**NOTE:** Staff will have the discretion to elevate the matter to higher degree based on the severity of the incident. In such a case, parents will be informed immediately and if necessary, child will be expelled from the program. No refund will be given in these cases.
Any disciplines problems will be recorded on an Incident/Injury Report. The Report will require a parent signature. This will serve as the formal notification to the parent and for Department records.

Discipline should be handled immediately. If “time-out“ is to be used as a form of discipline, it will be set as “one minute per each year of age“ (i.e., if they are ten they will receive ten minutes of “time-out” of the current activity).

**Discharge Policy**

The City of Jacksonville reserves the right to cancel the enrollment of a child for the following reasons:

- Lack of attendance
- Not observing the rules of the program or code of conduct as outlined in the Parent Handbook
- Physical and/or verbal abuse of staff or children
- Any situation or circumstance that presents any harm to the child, other participant or staff

**Parental Expectations**

Keeping our parents informed and our parents keeping us informed is very important to the success of our afterschool program.

Parents must contact the center when:

1. Information on your registration application has changed.
2. Someone other than those listed on your child(ren’s) application will be picking your child(ren) up.
3. A child will not be picked up on time.
4. An incident or change occurs in your child’s life that alters his/her attitude or behavior or causes emotional upset (i.e., divorce, loss of a pet, death in the family, etc.).

Parents will be contacted immediately when:

1. Your child has received an injury which could require medical attention.
2. Your child exhibits a medical condition which could be contagious or threatening to others in the program.
3. Your child is ill and is unable to participate in daily activities.

Parents will be notified at pick-up time when:

1. Your child receives a minor injury that does not require the service of a professional in the medical field.
2. Your child complains of a non-emergency condition or symptom.
3. Your child exhibits unusual behavior.
4. We want to share your child's accomplishments.

Parent conferences will be scheduled by the Recreation Supervisor when:
1. Your child exhibits a pattern of disruptive behavior which interferes with the quality of the program or management of other children.
2. Unusual patterns of behavior or participation are observed by the staff.

**Parental Notification of Misconduct Form**

<table>
<thead>
<tr>
<th>1st Offense:</th>
<th>Verbal Reprimand</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Student Signature:</td>
<td>Parent Signature:</td>
<td>Staff Initials:</td>
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<table>
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<tr>
<th>2nd Offense:</th>
<th>Time out:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Student Signature:</td>
<td>Parent Signature:</td>
<td>Staff Initials:</td>
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<tr>
<th>3rd Offense:</th>
<th>Phone call to parent:</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Student Signature:</td>
<td>Parent Signature:</td>
<td>Staff Initials:</td>
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<tr>
<th>4th Offense:</th>
<th>_____ Day Suspension</th>
<th>Date:</th>
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<tbody>
<tr>
<td>Student Signature:</td>
<td>Parent Signature:</td>
<td>Staff Initials:</td>
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</table>
**Parental Notification of Misconduct Form**

**Center**

**Progressive Disciplinary Procedure**

The Discipline actions stated below are in affect according to the DR&CS Code of Conduct.

**Level I** - These misbehaviors will result in the child being counseled by the staff, conference with the parents, up to one month suspension. Minor offenses set forth an escalating sequence of consequences that will occur if the misbehavior continues to be repeated.

**Level II** – These misbehaviors are more serious. The consequences of these behaviors can range from a parent conference with the child, suspension, expulsion or trust passing.

<table>
<thead>
<tr>
<th>1st Offense</th>
<th>(Verbal Reprimand)</th>
<th>Date: <em><strong><strong>, 201</strong></strong></em></th>
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<tr>
<th>2nd Offense</th>
<th>(Time Out)</th>
<th>Date: <em><strong><strong>, 201</strong></strong></em></th>
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<tr>
<th>3rd Offense</th>
<th>(Phone Call To Parent)</th>
<th>Date: <em><strong><strong>, 201</strong></strong></em></th>
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<th>4th Offense</th>
<th>(_____ Day Suspension)</th>
<th>Date: <em><strong><strong>, 201</strong></strong></em></th>
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Student Signature _____________________ Parent Signature _____________________ Staff’s Initials _____

Student Signature _____________________ Parent Signature _____________________ Staff’s Initials _____

Student Signature _____________________ Parent Signature _____________________ Staff’s Initials _____

Student Signature _____________________ Parent Signature _____________________ Staff’s Initials _____

Student Signature _____________________ Parent Signature _____________________ Staff’s Initials _____
I acknowledge that I have received, read and understand the Summer Enrichment Camp Policies and Procedure Handbook.

________________________________________
Parent Name (Printed)

________________________________________
Parent Signature

________________________________________
Date

Please list all your children that are enrolling in Summer Enrichment Camp:

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________

________________________________________
JaxParks Summer Camp
Department of Recreation & Community Services

DROP-OFF/PICK-UP, BIKE RIDERS AND WALKERS CONTRACT

Child (ren)'s Name(s)
_________________________________________________
_________________________________________________
_________________________________________________

CAMP SITE

Please list below adults who are permitted to pick up your child (ren) from camp. Siblings under 18 years of age are not permitted to sign out campers. Please notify us in advance if your child(ren) is to be picked up by another person. A picture ID is required when picking up a camper.

1. ____________________________________________________________________________
   Print Name of Authorized Person         Relationship         Contact Number

2. ____________________________________________________________________________
   Print Name of Authorized Person         Relationship         Contact Number

3. ____________________________________________________________________________
   Print Name of Authorized Person         Relationship         Contact Number

4. ____________________________________________________________________________
   Print Name of Authorized Person         Relationship         Contact Number

5. ____________________________________________________________________________
   Print Name of Authorized Person         Relationship         Contact Number

I give my child (ren) permission to: ( ) walk home and/or ( ) ride a bike home.

I understand the structured program hours are from 8 a.m. until 5 p.m.

______________________________
Signature of Parent (or Legal Guardian)

______________________________
Date
Site Name: ______________________________
Address: ________________________________

**Medication Form**

This form must be completed and submitted before your child can receive any medication.

Name: ________________, Age: _____ Type Medication: _______________ Dosage: ______

<table>
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<tr>
<th>Childs Name</th>
<th>Date</th>
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<th>Staff Signature</th>
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______________________________________________________________________________

Signature of Parent or Guardian

Phone Number

Address: ________________________________ Date: ____________