

HEALTH AND WELLBEING HANDBOOK



CUBOREE 2023



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Wellbeing

Cuboree should be a fun, challenging, and exciting experience for every Cub Scout. But sometimes things go wrong, or the fun and excitement become overwhelming. Sometimes, the challenges appear insurmountable, and sometimes a person's brain just goes into overdrive and will convince them that the situation is uncontrollable or unsafe.

Every Cub Scout will have a moment where things stop being fun, and some may need more in the way of direct support or intervention. Cuboree will have a dedicated Wellbeing team for both youth and adults, but our wellbeing response starts with you, the Unit Leaders. You have the most important job, and what you say and do can have a huge impact before, during, and after Cuboree.

Director: Bronwyn Mepstead

Assistant Director – Youth & Adult Welfare: Adele Mepstead

Assistant Director – Venturer Support: Ceri Braithwaite

General Manager – Health: Janice Lawlor

Administration: Rachel Byron

Health & First Aid

- Frog Hollow Advisor & Support: Lesley Eckfeld MATRON
- Administration: Jacqui Day

This includes first aid, roving first aid posts and Frog Hollow.

Youth & Adult Welfare

Assistant Director - Adele Mepstead

- Adult Support Liaison: Jan Kerr
- Timezone: Wombat Lyons & Chrissy Almarez
- Adult Wellness & Day Spa: Jan Fisher & Nicole Klep



Cuboree Wellbeing Facilities

Cub Time Zone

Cub Time Zone will be available to all Cub Scouts throughout the duration of Cuboree, this is located opposite the Adult Wellness & Day Spa near Sycamore Lodge.

The purpose of Cub Time Zone is to provide a short (15-20min) stay to allow our important youth members to have some downtime, relax and regulate themselves.

We do ask that Cub Scouts are attended to by their Unit Welfare Leader before being referred to their respective Sub Camp Welfare and Cub Time Zone.

All Cub Scouts will need to be signed in and out of Cub Time Zone by one of their Line Leaders or Carers. During the short stay the Line Leaders or Carers are welcome to attend the Adult Wellness & Day Spa for some relaxation as well.

Care Bear Castle

Care Bear Castle is about providing additional support for medical or welfare issues as they arise. Transport to and from Care Bear Castle will be via the Care Bear Buses.

The referral process for Care Bear Castle will be through your Unit Welfare Leader, from there you will be escalated to your Sub Camp Welfare or Health & Wellbeing Personnel before being transported to Care Bear Castle.

Care Bear Castle is located in DeMolner Hall at the Training Ground and operating 24/7.

Our aim for those Cub Scouts referred due to wellbeing / homesick purposes will be to set them at ease and return them to their respective Unit at either their campsite or activity rotation. They will be supported by the People & Wellbeing personnel and the Assistant Director – Youth Welfare.



Laundry

The onsite laundry will be available for all cub scouts throughout Cuboree, this is only for soiled / wet clothing and/or bedding following any accidents.

All laundry requests need to be packaged correctly, as per guidelines and delivered to Sub Camp in a timely manner. Once cleaned all items will be returned to Sub Camp for distribution. Your relevant Sub Camp will advise of delivery and collection times.

Please Note that all items need to be named, including socks, and each Unit is to provide their own spare / replacement bedding as required.

Unit Welfare

Please ensure Unit Akelas and Line Leaders advise parents and Cub Scouts of the correct personal equipment, this includes appropriate sleeping bags, stretchers and raincoats.

We also ask that you discuss correct handwashing practices and provide suitable facilities and sanitising stations throughout your campsite.

We also recommend providing spare bedding and pull-ups or drynights for your Cub Scouts, along with glow sticks and a pre-packaged backpack for those 2am unexpected wake-ups.

Sub Camp Welfare

This is your first referral point after initial unit care, either first aid or welfare. The purpose of these sub camps is to provide hands-on support to Unit Akelas, Line Leaders and personnel.

Sub Camps will be the coordination point for wet / soiled clothing and bedding for laundry, as well as an initial rest area and/or TLC for youth and adults.

Sub Camps operate 24/7 throughout Cuboree and these personnel will be easily recognised by hi-vis vests.

Venturer Welfare

All Venturers will be supported by their respective teams, with the teams providing a separate welfare support person. Venturers will be camping in either their unit or service team and treated as adults.

A Unit Council will be conducted across all activity and service teams.



The break-out area will be at Hoadley Hall, near the training grounds with organised activities until 10pm each night. Post these activities, all Venturers will be returning to their designated activity or service team camping area.

There will be NO wandering around Cuboree without supervision or permission.

In the case of medical / health concerns all Venturers will be to first see their Unit Venturer Welfare Support. From here, First Aid will be delivered or a referral to Frog Hollow as required.

A medical certificate will be issued by the medical treatment providers if they are unable to attend their activity or service commitments. This certificate is to be handed to their activity or service team leader and they will then return to their campsite, you will not be permitted to wander around Cuboree if you are unwell.

Adult Wellness & Day Spa

This is an opportunity for all Leaders, Adult Helpers and Rovers to partake in some well-deserved R&R. You will be able to indulge in a foot spa, a hot cuppa or even a back massage.

Take away tea/coffee facilities will also be available during operating hours, we do ask that you please bring along your own keep cup.

Location: Opposite Sycamore Lodge

Hours of Operation: 9am to 9pm



Birthday Surprise

This is being organised by the Health and Wellbeing Team and distributed to Sub Camps. We do ask that Units pre-arrange additional birthday and party items such as balloons and streamers to make our adults and youth members feel special and have a birthday they will never forget.

Health

The Health Team is at Cuboree to help support the care of all participants. It is expected that each Unit will provide basic Health and First Aid care for their own members. You are not, however, obliged to provide complex or invasive medical care. Nor are you obliged to provide or maintain the supplies and medical equipment needed to support someone with a with pre-existing condition.

It is recommended that a Carer accompany any youth member with complex health or welfare needs. Looking after a child with complex needs can require considerable time and resources which may impact the rest of the Unit. If you have any concerns or require any advice, please reach out to Director – Health & Wellbeing via cuboree@scoutsvictoria.com.au.

Cuboree Units

All Cuboree Units should have a fully stocked Unit/Patrol First Aid Kit. Units should refer to [First aid in the workplace compliance code \(worksafe.vic.gov.au\)](https://www.worksafe.vic.gov.au) for recommendations on the contents of their kit.

- Unit's may wish to consider including a salbutamol inhaler and/or adrenaline autoinjector (Epipen®) if they have any youth members who are higher risk for these conditions.
- To comply with the [Drugs, Poisons and Controlled Substances Act 1981 \(legislation.vic.gov.au\)](https://www.legislation.vic.gov.au) and to avoid any adverse reactions, it is recommended that pain relief or antihistamines are not included in the kit. Instead, families should be encouraged to provide any over the counter /Pharmacy Only medications (including pain relief) that their child may require during the event.



- Hydrolyte® or similar is not recommended for Unit First Aid Kits. Water and cordial are sufficient for most routine hydration needs. The use of electrolyte replacements is costly, and if a child is sick enough to be considered for such, it would be better to refer them to First Aid.
- Don't forget the cooks! – include some blue Band-Aids and burn treatments.

Each Unit should designate an Adult Leader to be responsible for monitoring the health and welfare needs of the Unit.

First Aid Services

First Aid Support will be available at each Subcamp and via roaming First Aiders during the activities.

Advanced First Aid and Health Support will be available at the Medical Aid Post (Frog Hollow), which is staffed by registered nurses and first responders (First Aiders). Medical Support will be available via onsite medical practitioners or telehealth. Health Team members can be easily identified by a green first aid vest or shirt.

Urgent or emergency support can be requested by anyone, and at any time, during the event by contacting the Emergency Management Centre (EMC). We usually request that you **do not ring 000** unless the EMC or a Health Team member have instructed you to do so.

Unit Health & Welfare Leader

Suggested responsibilities include:

- Planning for and monitoring the health & welfare of all Unit members.
- Ensure that all Unit members have a current and accurate Operoo record.
- Liaise with families regarding any support or care that may be required.



- Liaise with, and request support from, the Health & Wellbeing teams as required (Health, Welfare, Disability & Inclusion).
- Maintain a Unit First Aid Kit and ensure that all First Aid provided has been documented.
- Safe storage, use and documentation of all medications provided.
- Ensure that any required emergency medications accompany Cub Scouts during activities.
- Keep records of any behavioural or welfare related incidents or concerns.
- Ensure incident reports are completed for all injuries or notifiable incidents.
- Monitor hand washing and hygiene requirements.

Operoo

Operoo is Scouts Victoria approved and compliant with Victorian Privacy and Health Records legislation. It will be the primary source of health and wellbeing information during this event, available to Adult Unit Leaders and First Aiders on mobile devices and offline.

All youth members must have a current Operoo record.

Personal Details for Sam Scout	
Gender	Other
Date of Birth	1 August 2010 - 12 years old
Mobile	0400 000 000
Addr	152 Forster Road, Mount Waverley, Victoria 3149, Australia Map

Buttons: Share, Delete, Transfer

Cuboree Unit Leaders will be provided with access to their Unit members Operoo profiles prior to Cuboree. They will be required to complete an Operoo Acceptable Use eForm which outlines the appropriate use of private health information and the obligations associated with this access.

Cuboree Unit Leaders are responsible for ensuring that all Unit members have a current Operoo profile, including a recent photo (passport style), instructions for medication use and any required action/care plans attached.



Wellbeing Journal

At recent major events, Scouts Victoria has introduced a Wellbeing Journal to assist in supporting Units and for follow up/review purposes. A Wellbeing Journal has also been implemented for Cuboree.

Anyone can use the Wellbeing Journal to document incidents of concern. This may include:

- Behavioural incidents
- Child Safety incidents
- Safety incidents
- Wellbeing incidents
- First Aid provided.
- Health/Welfare phone calls / referrals
- Transport provided offsite
- Property Damage
- Follow ups / reviews.

A QR code link will be provided and available on posters directing you to a website form, where details can be documented.

Incident Reports

All injuries and notifiable incidents must be recorded on a [Scouts Victoria Incident Report](#). Normal Scouts procedure also requires you to report any near miss incidents where the consequences could have been more significant.

It is the responsibility of the Cuboree Unit Leader to ensure that this has been completed. Incident reports are best filled out by the adult who observed the injury occurring. Our team may request details on who will be reporting the incident. The Cuboree Risk and Safety team may follow up with you to investigate the incident further.



The Cuboree Directors are also responsible for contacting Scouts Victoria about any notifiable incidents occurring during the event.

Medications

Medications include prescriptions, over the counter and complimentary medicines.

Participants are required to provide their own medication. Sufficient medication should be provided for the duration of the event plus an additional day - to allow for any mishaps.

Participants and families must document all required medication in Operoo, including occasional pain relief (paracetamol, ibuprofen etc), over the counter and complimentary medications.

- Ensure that the correct dosage, frequency of use and purpose of use details have been documented.
- Documentation of the medication in Operoo provides permission for Scouts Victoria to assist youth members with its use. Consequently, Adult Leaders will not be able to assist with undocumented medications.

It is the responsibility of the family to ensure that all medications are in date, and in an original pharmacy container.

- Prescription medication must have a pharmacy label that includes the youth member's correct name, dose and administration instructions attached, or be in a Webster-pak ® or similar.
- Over the counter or complimentary medications must also be in the original packaging with the manufacturer's original instructions. Instructions must be in English so that all members of the care teams can understand them.
- Families should pack the participant's medications together in a zip lock bag or similar with a correctly filled out [Personal Medication Record](#). Label the bag with the participant's name and Cuboree Unit number on the outside.

PERSONAL MEDICATION RECORD – 5 Day

Name: <u>Saw, Scout</u>		Date of Birth: <u> </u>							
Scout Rego No: <u>8007000</u>		Unit: <u> </u>							
Medication (Name, Dose and Instructions)	Scheduled times to be taken	Mon. <u>08 / 09</u>		Tues. <u>09 / 09</u>		Wed. <u>10 / 09</u>		Thurs. <u>11 / 09</u>	
		Time	Initials	Time	Initials	Time	Initials	Time	Initials
Medication (Print Name & Strength) NITROFUR-ANTON, 60 mg Capsule DOSE: Frequency 1 Capsule At night Additional Information TAKE with milk or food	8 P.M	8:10 PM	JL						
Medication (Print Name & Strength) MELATONIN 1.50mg, 1 mg/1ml DOSE: Frequency 3 mL At night Additional Information TAKE 30 minutes before bed. Avoid bright lights and stimulation before bed	8 P.M	8:10 PM	JL						
Medication (Print Name & Strength)									

Cub Scouts should give their medication to their Adult Leader prior to boarding the bus.



- Collect all medications together in an identifiable box or similar.
- Asthma medication may be carried in the Cub Scout's backpack.
- Adrenaline autoinjectors (Epipen® or Anapen®) must be readily available and should be carried by the Adult accompanying the youth member. Please include a copy of their current action plan with the autoinjector.

Safely store the Unit medications out of reach of youth members.

- Adults are reminded to store their own medications safely and out of reach of youth members.
- Dangerous medication such as drugs of addiction (Endone, Targin, MS Contin, codeine, Ritalin, Concerta, diazepam, etc) should be kept in a small, locked box (cash tin or similar).

Adult Leaders – assisting youth with medications

Adult Leaders/First Aiders are authorised to assist with a youth member's medication with the following provisions:

1. The family has provided permission for it to be given in Operoo, correctly documented with dosage, frequency, and purpose of use.
2. The medication has been provided in the correct packaging/container.
3. Prescription medication has been correctly labelled by a registered pharmacist.
4. The medication has not expired.

Families should be encouraged to provide any occasional use pain relief that their child may require.




Unauthorised medication may only be provided under the direction of an appropriately registered healthcare professional.

Check it!

All youth medications must be checked with another adult/responsible person. Every time, and with another person, check:

- You have the right child (name, date of birth)
- The Operoo permission/instructions are valid/correct.
- The medication name, dosage and method of administration.
- Record the medication use in the [Personal Medication Record](#).



Safety Alerts ✎ Edit				
Name	Description	Risk level	Medication	Docs
Dietary Requirements	Anaphylaxis to shell fish. Strict avoidance of all shellfish, crab, shrimp, oyster including fish and oyster sauces.	 High		
Allergies (anaphylactic)	Allergy to shellfish.	 High	Epipen Autoinjector, 300 mcg. As required for Anaphylaxis or ingestion of foods containing shellfish. Cetirizine Syrup, 5 mg/ml (Zyrtec). 10 mls as required for moderate symptoms (hives or itching only) Epipen/Anapen required. Expires on: 2024-06-02	View Attachment
Urinary Tract Infection	Recurrent UTI's. Please encourage frequent toileting and drinks.	 Moderate	Nitrofurantoin, 50 mg Capsule x 1, taken before bed with milk. Prevention of infections.	

Notes ✎ Edit		
Title	Description	Attachment
Occasional Use Pain Relief	For abdominal pain associated with illness, 'gastric upset', food intolerance AND/OR headache associated with illness, lack of food/water/sleep. Please give Paracetamol 48 mg/mL, 10 mls, 4 hourly as required.	

Self-Management of Medications – Youth Members

Young people with chronic health conditions are encouraged to recognise the symptoms of their condition and administer their own medications.

During a Scouting activity or event there is a duty of care to all children and young people to take reasonable steps to ensure that carry, self-administration and disposal of medications, supplies and equipment is done safely. This has implications for not just the youth member but also the youth members that they are camping or doing activities with. In the younger sections this is managed by the Adult Leaders, however older youth members and their families may wish to manage this themselves.

Generally, it is not recommended that primary school aged children self-carry/self-administer medications.

NOTE: Youth members should not be fully responsible for the self-administration of emergency medication (Adrenaline auto-injector, Midazolam, Glucagon etc) as their symptoms may make them incapable of administering the medication properly.

Agreement for a youth member (< 18 years) to self-carry/self-administer should be sought from the youth member, family and the Adult Leader responsible for their immediate care.



If everyone has agreed that a youth member will be carrying and self-administering medication the following actions should be taken:

- The youth member's Operoo record must be completed accurately as previously described.
- Medication details should include a comment that the youth member will be self-managing.
- The youth member must agree to document or communicate the medication's use with their Adult Leader, as agreed upon.

Schedule 8 medications are not permitted to be self-managed by underage youth members.

The use of any emergency medications must be immediately followed up with notification to an appropriate adult.

Vomiting and/or Diarrhoea

Vomiting may be caused by a multitude of conditions, including heat related illness/dehydration, headache/migraine, viral illness, gastrointestinal illness, food poisoning and other medical conditions.

Vomiting and diarrhoea together typically happen with a viral infection or food poisoning. Loose bowel motions are considered to be diarrhoea when they are watery/sloppy and have occurred 3 or more times in a 24-hour period. Please note that stress/anxiety, medications and changes of diet may also cause nausea/vomiting and/or diarrhoea.

Gastroenteritis may be **highly contagious**. Consider 'gastro' in an individual who looks unwell and has vomiting and/or diarrhoea. If suspected, discreetly separate the individual from other participants and contact your subcamp or first aid for advice. Be mindful of vomiting, as the aerosols generated may contain virus.

- Wear a mask and eye protection if exposed to vomiting.
- Wear gloves when handling contaminated materials and cleaning up. Wash hands well with soap and water.



- Wash surfaces with soap and water and then disinfect with chlorine-based disinfectants, where possible.
- Use paper towels or disposable cloths for clean-up/hand drying and dispose of appropriately.
- Consider keeping a 'gastro kit' on hand, containing:
 - Bucket or vomit bags
 - Disposable wipes / towels
 - Masks, goggles, gloves, plastic apron
 - Chlorine based disinfectants.
 - Handgel
 - Rubbish bags.

Individuals with suspected/confirmed gastroenteritis will need to isolate for up to **48 hours from the last episode of diarrhoea and/or vomiting.** This may mean a delayed arrival to camp or returning home early.

Units with 2 or more cases of suspected/confirmed gastroenteritis will be assessed for additional precautions/requirements.

Please advise your families of the 48-hour seclusion requirement. It is better for people to delay their arrival to the event rather than be the cause of an entire Unit being placed in isolation due to uncontrolled infection.



Allergies and Anaphylaxis

An important aspect of allergy and anaphylaxis management is prevention by avoiding the triggers.

- Make sure all adults know who has allergies. Providing your cooks with a poster including the photos and first names of anyone with food allergies can be helpful.
- **Adrenaline Autoinjectors must accompany the youth member at all times.**
- Consider having a spare adrenaline autoinjector in your first aid kit or requesting that anyone with anaphylaxis provides a 2nd device.

The following resources may be useful.

- [FA Training: All about Allergens for Camps \(foodallergytraining.org.au\)](http://foodallergytraining.org.au)
- [Anaphylaxis e-training for first aid \(ascia.org.au\)](http://ascia.org.au)
- [ASCIA e-training for health professionals.](http://ascia.org.au)
- [A&AA Food allergen cards - Allergy & Anaphylaxis Australia \(allergyfacts.org.au\)](http://allergyfacts.org.au)

Safety Alerts Edit				
Name	Description	Risk level	Medication	Docs
Dietary Requirements	Anaphylaxis to shell fish. Strict avoidance of all shellfish, crab, shrimp, oyster including fish and oyster sauces.	High		
			← Document Food Allergy in Dietary Requirements also	
Allergies (anaphylactic)	Allergy to shellfish.	High	Epipen Autoinjector, 300 mcg. As required for Anaphylaxis or ingestion of foods containing shellfish. Cetirizine Syrup, 5 mg/ml (Zyrtec). 10 mls as required for moderate symptoms (hives or itching only) Epipen/Anapen required. Expires on: 2024-06-02	View Attachment
				↑ Emergency Action Plans
Allergies (non-anaphylactic)	Hayfever allergic rhinitis). Sneezing, runny nose and watery, itchy eyes.	Low	Cetirizine Syrup, 5mg/ml (Zyrtec). 10 mls as required for symptomatic relief.	



Participants who are anaphylactic are advised to bring 2 adrenaline autoinjectors



Asthma


At camp, the cold air, exposure to different allergens and increased exercise can all trigger asthma.

- Asthma can be life threatening. Familiarise yourself with the first aid treatment for an asthma attack.
- Make sure youth members have emergency medications (and spacer) with them and a current action plan regardless of how mild their asthma may be or how long ago they last had issues.
- Ask if they have been hospitalised with their asthma in the last 12 months – make sure this is documented in Operoo.
- Preventative medications reduce the risk and severity of flare ups – it’s important to keep up with the schedule.
- Some youth members may need to use their puffer, 15 to 20 minutes before activities.
- Don’t ignore an asthmatic youth member’s persistent coughing, particularly overnight – encourage them to use their puffer and escalate to first aid if there is no improvement.

The following resources may be useful:

- [Asthma First Aid: What To Do During An Asthma Attack - Asthma Australia](#)
- [ASTHMA FIRST AID FOR SCHOOLS – 2023 | Asthma Australia \(asthmaonline.org.au\)](#)

Safety Alerts		[Edit]	
Asthma	Mild - moderate asthma. Asthma triggers Cold/Flu, Exercise, Smoke Asthma usual signs Wheeze, Tight Chest, Cough Signs Asthma is getting worse Tight Chest, Cough, Shortness of Breath Have you been hospitalized due to asthma in the past 12 months? No	Moderate	Salbutamol Inhaler, 2 - 4 puffs via spacer as required for relief. Seretide Inhaler, 2 puffs via spacer, twice daily, preventative medication.
			View Attachment


Asthma Action Plan



Salbutamol is best administered with a spacer.



Diabetes

There should be at least two adults attending the camp who are able to support a youth member with diabetes. Supporting younger members with diabetes can be challenging, a carer should be considered. You may be required to assist with:

- Monitoring blood glucose levels and administering insulin.
- Overnight blood glucose monitoring (even if they do not usually do this at home)
- Adjusting dosages (in consultation with family and clinical treating team)
- Pump line changes and CGM re-sites.

Be mindful that insulin must be safely stored at the correct temperature and its use must always be checked with another responsible person. An incorrect dosage can be life threatening.

Blood glucose will need to be monitored more frequently due to the increased activity, changes in mealtimes/diet and unfamiliar setting.

- Be aware of the need for regular snacks and meal breaks. Do not delay or change mealtimes without considering the possible need for treatment adjustments.
- Know how to recognise the signs & symptoms of hypoglycaemia and what to do. It is not unusual for a camper to experience 'lows'.
- Make sure that the youth member's 'hypo kit' and emergency medication always accompany them and that everyone knows where to find them.

If a participant with diabetes becomes unwell for any reason seek support promptly. Physical activity should be avoided if they are unwell – call for assistance rather than walking them to First Aid.

The following resources may be useful:

- [Diabetes in Schools LMS \e-Learning](#)

Level 2: Intermediate Training is recommended for anyone responsible for the direct care of a youth member with diabetes. This learning is free, and you can sign up as a General User.



- [School camp planning - a guide for school staff \(diabetesinschools.com.au\)](https://diabetesinschools.com.au)
- [Diabetes Technology - Diabetes in Schools](#)

Safety Alerts Edit				
Name	Description	Risk level	Medication	Docs
Diabetes	Diabetes Type 1. Animas Vibe insulin infusion pump and Dexcom® CGM. Please see attached Diabetes action plan and Camp action plan.	High	NovoRapid®, via insulin pump for diabetes management. Glucagon 1 mg, via injection for Hypoglycaemia as per action plan.	View Attachment

↖
↗

Sun Smart

Think UV, not heat and remember you can still get burnt on cool or cloudy days.

All participants should supply their own sunscreen and apply it regularly. Make it part of your routine to check before heading out to activities (backpack, full water bottle, hat, sunscreen, snacks etc).

Always wear a wide brimmed hat when outside, and collared shirts are advisable.

It is important to remember to hydrate when you are moving around, even in cooler weather. Encourage your Cub Scouts to drink small amounts frequently (before you leave, between activities and when you stop for a break etc).



Handwashing and Handgel

Frequent handwashing and/or use of handgel is one of the best ways to avoid getting sick and spreading illness (COVID-19, the flu and gastroenteritis).

Some tips:

- **Washing with soap and water is the best option** and is most effective in preventing the spread of viruses and gastroenteritis.
- Hand gel should be used when water is unavailable. It is only effective if the hands are visibly clean - mud cannot be sterilised with handgel!
- Make it a habit for everyone to wash hands and/or use handgel on entry to and exit of your campsite.
- Wash hands and/or use handgel before every meal.
- Carry small bottles of handgel with you to activities.



Bed wetting

Please reassure your families that bedwetting (nocturnal enuresis) is common and that you will work with them to manage it. It is estimated that between 5 – 10% of Cub Scout aged children wet the bed.

Laundry Instructions:

- **Remove any solid matter and dispose in toilets.**
Failure to do this will result in the items being returned to you without processing.
- Place wet items (including any pjs & soft toys) in a garbage bag.
- Place any soiled items in a separate bag.
- **All items must be tagged with participants name and unit number**– tags and cable ties are available from the subcamp.
- Wet sleeping bags must be delivered to the subcamp **before 7:30 a.m. for collection.**
- Complete the required Laundry forms at the subcamp.
- Bags will be washed and returned to the subcamp semi-dry. Drying will be completed at the subcamp.

Have the bed wetting conversation with your Cub Scouts and families early. Bedwetting risk should be documented in Operoo (Other Conditions).

How families can assist


- Discuss with the Cub Scout how to manage incidents at camp.
- Teach them how to correctly wear and dispose of continence aids.
- Pack the following additional items:
 - Pull ups or underwear pads for the child to wear at night.
 - Wipes for the child to clean up with after any incidents.
 - Small bags for discretely bagging used pull ups and wipes.
 - Extra underwear and pyjamas for each night of Cuboree.



- An extra sleeping bag, mat & blanket to allow for laundering times.

How Adult Leaders can assist

- With the Cub Scout and family, decide the best procedure for managing at camp.
- You may wish to set aside a small tent or pop-up changing shelter for the Cub Scout to use. Set it up with their supplies, handgel and a bucket/bin for disposing of used pullups and wipes. Alternatively, you may decide that it is better to change in the toilets. Be sure to remind your Cub Scout that **pullups/pads are not flushable!**
- Ask your Cub Scout to let you know if they have any incidents so that you can assist with bagging up the bedding/clothing.
- Make it a habit to discreetly check the bedding of 'known' bedwetters each morning. This can be done during breakfast after they have left the tents.
- Do not restrict fluids during the day or at night. There is no evidence that this works. Do however, avoid caffeine late at night (tea, coffee, hot chocolate, cola drinks).
- Make it a habit that everyone goes to the toilet before bed at night.

Safety Alerts ✎ Edit				
Name	Description	Risk level	Medication	Docs
Bedwetting	Remind Joe to go to toilet before bed. He will wear Night Time pull ups at camp.	 Moderate		

Abdominal Pain and Constipation

Constipation is more likely to occur on longer camps like Cuboree. The change of diet, busy-ness, lack of privacy and the portable toilets can all contribute to the issue. Encourage your youth members to drink










frequently, offer fruit freely and alternate fruit with processed carbohydrate snacks which we often liken to ‘concrete’!

Contact Welfare for assistance if you have youth members having difficulty finding privacy or quiet time to ‘sit’ on the toilet.

Don’t be shy in asking youth members complaining of ‘stomach aches’ when they last ‘did a poo’. Most abdominal pain gets better without needing special treatment. Escalate to First Aid anyone with:

- sudden, severe incapacitating abdominal pain.
- pain that is getting worse or keeps coming back.
- pain that is not improved by a trip to the toilet and simple pain relief, and which you are concerned about.

THE BRISTOL STOOL FORM SCALE (for children)		
Choose your Poo!		
type 1		looks like: rabbit droppings Separate hard lumps, like nuts (hard to pass)
type 2		looks like: bunch of grapes Sausage-shaped but lumpy
type 3		looks like: corn on the cob Like a sausage, but with cracks on the surface
type 4		looks like: sausage Like a sausage or snake, smooth and soft
type 5		looks like: chicken nuggets Soft blobs with clear-cut edges (passed easily)
type 6		looks like: porridge Soft blobs with clear-cut edges (passed easily)
type 7		looks like: gravy Watery, no solid pieces ENTIRELY LIQUID

Travel (motion) Sickness

The bus trip to Gilwell Park winds around the foothills of the Dandenong Ranges and can be an issue for anyone who gets travel sickness.

Make sure you have vomit bags, wipes and a couple of spare bottles of water in your arsenal. Encourage anyone known to get travel sickness to sit towards the front of the bus and to watch out the window rather than reading or looking at screens. Give them plenty of fresh air if possible, by opening any air vents above/near their seat.

Emergency Action or Care Plans

All youth members with life impacting health conditions and/or who are neurodiverse should have emergency action or care plans provided by their health care providers and/or families. Allow at least 6 weeks before Cuboree to discuss these with families and/or their treating teams. A copy of the plans that are being used at school are usually sufficient. The following are examples of suitable plans:

Allergies and/or anaphylaxis



- [Anaphylaxis or Allergy Action Plan](#)

Asthma

- [Asthma Action Plan](#)
- [School Camp and Excursion Update Form](#)

Please make sure that the participant brings reliever medication even if they have not had symptoms of asthma recently.

Diabetes

- [Diabetes Management Plan and Action Plan](#)
- [Camp Diabetes Management Plan](#)
- Consider the need for a carer.

Epilepsy

- [Epilepsy Management Plan](#)
- May also need a carer and an [Emergency Medication Management Plan](#)

Neurodiverse Youth

- Support Plan, including Important things to know, support with routine/changes, sensory requirements, time management, strategies/tips that will help etc.

Other complex needs or health support

- Care plans, including details of any personal care, supervision or assistance with health conditions that may be required.

TYPE 1 DIABETES ACTION PLAN 2022 SCHOOL SETTING

Use in conjunction with Diabetes Management Plan. This plan should be reviewed every year.

STUDENT'S NAME: _____
 DATE OF BIRTH: _____ GRADE / YEAR: _____
 NAME OF SCHOOL: _____

INSULIN will be given before breakfast, at _____
 Home: Please make sure all carbohydrate food is eaten at snack and main meal times.
 Continuous Glucose Monitoring (CGM)
 Flash Glucose Monitoring (FGM)

BLOOD GLUCOSE LEVEL (BGL) CHECKING TIMES
 BGL check should occur where the student is at the time it is required
 Anytime hypo is suspected
 Confirm low or high sensor glucose reading
 Before physical education / sport
 Before exams or tests

PHYSICAL EDUCATION (PE) / SPORT
 Some students MAY require a BGL check before PE/sport.
 Some students MAY require low acting carbohydrate food before planned activity.
 Vigorous activity SHOULD NOT be undertaken if BGL is greater than or equal to 15.0 and the student is unwell.

PARENT / CARER NAME: _____
 CONTACT NO.: _____
 DIABETES TREATING TEAM: _____
 CONTACT NO.: _____
 DATE PLAN CREATED: _____

ascia ACTION PLAN FOR Anaphylaxis

Name: _____ Date of birth: (/ /)

Confirmed allergy(ies): _____

Family/emergency contact(s):
 1. Name: _____ Mobile: _____
 2. Name: _____ Mobile: _____

Plan prepared by: _____ Monitor or nurse practitioner who administers medications to be given, as covered by the parent/guardian, according to the plan.
 Signed: _____ Date: (/ /)

Authorisation: _____ Date: (/ /)

This plan does not expire but review is recommended by: (/ /)

How to give adrenaline (epinephrine) injectors

EpPen®
 1. Peel off cap and pull OFF BLUE SAFETY RELEASE
 2. Hold leg out and FLICK INJECTOR ON upper arm or mid-thigh with or without clothing
 3. PUSH DOWN HARD and a click is heard
 4. Hold for 10 seconds
 5. REMOVE cap and REMOVE EpPen®

Anapen®
 1. PULL OFF BLACK SAFETY CAP
 2. PULL OFF BLUE SAFETY CAP
 3. PLACE NEEDLE END FIRMLY against skin
 4. PRESS RED BUTTON
 5. HOLD FOR 10 seconds
 6. REMOVE Anapen®

LOW Hypoglycaemia (Hypo)
 Blood Glucose Level (BGL) less than 4.0 mmol/L
SIGNS AND SYMPTOMS Pale, headache, shaky, sweaty, dizzy, drowsy, changes in behaviour
Note: Check BGL if Hypo suspected
Symptoms may not always be obvious

HIGH
 Blood Glucose to 18.0 mmol/L or additional symptoms
SIGNS AND SYMPTOMS visits, poor or no urine, symptoms

DO NOT LEAVE STUDENT ALONE DO NOT DELAY TREATMENT

MILD
 Student conscious (Able to eat hypo food)
Step 1: Give fast acting carbohydrate
 e.g. _____

Step 2: Recheck BGL in 15 mins
 • If BGL less than 4.0, repeat **Step 1**
 • If BGL greater than or equal to 4.0, go to **Step 3**

Step 3: Give slow acting carbohydrate
 e.g. _____

Step 4: Resume normal activity when BGL 4.0 or higher








SEVERE
 Student drowsy / unconscious (Risk of choking / unable to swallow)
Find Aid DISABCD
 Stay with student

CALL AN AMBULANCE DIAL 000

CALL AN AMBULANCE DIAL 000

CONTACT parent/carer when safe to do so



Safety Alerts ✎ Edit				
Name	Description	Risk level	Medication	Docs
Autism	ASD See attached management plan	 Moderate	Melatonin Liquid 1mg/ml. 3 mls, 30 minutes before bed to assist with sleep. Avoid bright lights and stimulation before bed. Please refrigerate Melatonin Liquid.	View Attachment
Travel Sickness	Sit at front of bus. Have sick bags available.	 Low		
Sight Impairment	Hyperopia (far sighted) Sam uses glasses for reading, computer and close work.	 Low		
Cerebral Palsy	Care instructions as per attached welfare plan. Uses a walker to assist with mobility. Will bring an all terrain mobility chair for longer distances.	 Low		View Attachment
Ear Infections	Multiple ear infections. Grommets inserted in Jan 2022. Must avoid water in ears when showering and swimming. Ear plugs.	 Low		
Sleep Apnea	CPAP Machine	 Low		
Sleep Walking	Occasional episodes, associated with illness/fever or when over tired. They may appear disorientated and be unable to talk. Protect from injury and gently guide back to bed. Reassurance.	 Low		

Communications

The healthcare team at the Medical Aid Post (Frog Hollow) is available to assist with any complex health concerns or support required, including diabetes, epilepsy etc. Please discuss your support requirements with the Health Team as soon as possible via cuboree@scoutsvictoria.com.au or health@cuboree.com.au.

Please do not expect email responses from the Health Team or Welfare during the event, we are often too busy to monitor emails. If you require an urgent response or assistance, please contact your subcamp or the EMC.

Units are advised not to contact families during the event unless they are liaising with the family to provide routine care for a youth member with a complex health condition, for example diabetes or epilepsy.

- It is best that families do not anticipate being able to contact their Leaders for general enquiries/updates. Intermittent phone reception and the frequent demands of the event make it unlikely that you will answer your phone which may result in unnecessary anxiety. Reassure them instead that 'no news is good news'.



- **In the event of an emergency or significant health concern, the family will be contacted by the appropriate Cuboree Director or delegate.** To avoid conflicting information and duplicate calls, we request that you do not do this yourself.

Adult Unit leaders are responsible for informing families of any basic first aid or care that was provided during the event. Families may request copies of their child's First Aid or medical documents after the event by contacting cuboree@scoutsvictoria.com.au.

Please note that it is generally considered that young people over the age of 15 have the capacity to consent to treatments and make privacy decisions themselves. Requests for medical information from families of children 16 years and over should include permission from the youth member to release this information.

First Aid Records

Records must be kept of all care provided.

First aid treatment records are subject to requirements under Health Records legislation.

- The information is confidential and must not be disclosed to unauthorised persons.
- You must take reasonable steps to protect the records from misuse, loss and unauthorised access, modification or disclosure.
- The records must be kept for 7 years or, in the case of a youth member, until they are 25 years old.

Following the event, it is recommended that all paper First Aid records be digitally scanned and then destroyed in a secure manner by shredding. Save scanned copies securely with password or permissions protection.

Venturers and Scouts

Venturers and Scouts are under the care of their service Unit Leader. Service Unit Leaders are responsible for ensuring that their health and wellbeing requirements are met. This may include checking that they are taking their medications appropriately and assisting with any healthcare needs they



have. An adult member of each service team should be designated this responsibility.

Teenagers may not be keen to tell their leaders or others about their health conditions. They have a right to privacy; however, it is important that the information is communicated with us for safety and duty of care reasons. Please be mindful that some symptoms may impede rational decision making and that **no youth member should be left fully responsible for managing a condition that has the potential to be life threatening.** Please contact health@cuporee.com.au or welfare@cuporee.com.au for any confidential discussions.

Venturers and Scouts who present to First Aid and have been advised to rest or modify their work, will be provided with a 'Work Advice' form which they can show to their Unit Leader.

Adults

Adults are responsible for their own health requirements. They must ensure that they bring to the event sufficient medication and supplies to manage any pre-existing conditions. Please note requirements for safe storage of medications.

Adults are encouraged to maintain an accurate Operoo record (including medications) in the event of an emergency and/or in incidents where they are unable to communicate properly with health care providers. Adults with life-threatening conditions should also consider attaching an action plan on how they would like us to manage their condition if they are unable to communicate with us. This could be as simple as a signed one-line statement on their preferred care.

Adults with CPAP devices are advised that the campsites do not have mains power connections. You must make arrangements to bring a battery powered device. There will be facilities at each subcamp to recharge batteries.

In accordance with privacy legislation, Scouts Victoria is unable to disclose details of any health treatment received, including hospitalisations unless authorised to do so by the participant or their legal guardian. It is an expectation that Adults will inform their own families/significant others of any care they have received/are receiving. Scouts Victoria will not



contact an adult's family unless the participant has requested us to do so, or there is an emergency where the participant is unable to do so themselves.

Guidance for Health Care Professionals attending this event

This guidance is for Health Care Professionals who are attending Cuboree on the lines or in service teams but are not working as part of the Health Team. It outlines the expectations of the Cuboree organising team around the usual management of injuries and illness by Health Care Professionals during the event. It is not intended to restrict any care that may be required during an emergency or life-threatening situation. Health Care Professionals will use their own judgement in such situations.

Registered Nurses, Paramedics and Allied Health Professionals allocated to the Units (Line Leaders, Cooks or Carers) and service teams (other than Health) should provide First Aid level support only in accordance with your First Aid certifications or equivalent skill set.

- Your role at this event does not include the provision of professional healthcare, and you may not be covered by Scouts Victoria professional indemnity insurance if your care is beyond what could be reasonably considered to be First Aid.
- You are reminded that the good Samaritan provisions of the Wrongs Act 1958(Vic) is for assistance, advice or care provided in an emergency or accident situation. It is not intended to cover routine or prearranged care.
- If it has been arranged that you will be providing a higher level of health care support (for example, as a carer of a youth member with complex needs) please contact the Director – Health & Wellbeing on welfare@cuboree.com.au so that this can be documented.
- Do not bring advanced First Aid Kits/Paramedic bags with emergency medications to this event - these medications are subject to requirements under the [Drugs, Poisons and Controlled Substances Act 1981 \(legislation.vic.gov.au\)](http://legislation.vic.gov.au), may be illegal to possess without the appropriate health licensing/authority and their uncontrolled use has not been included in our risk procedures.



- Document any First Aid support you provide via your usual local procedures.
- Please follow the Scouts Victoria procedures for incident reporting. Incident reports are best filled out by the person who witnessed the initial incident.
- We may request your assistance at the Medical Aid Post during patient surges or emergencies stretching local capacity.

We recognise that the regulatory differences for Health Practitioners such as Doctors, Dentists and Nurse Practitioners allow for independent practice and authority to possess/supply medications. We request that:

- You inform us if you are not independently insured and intend to provide professional (Medical or Dental) care.
- You inform us if you are bringing a 'doctor's bag' of medications so that we may record its safe storage in our risk procedures.
- You inform us if you provide professional care to the following:
 - any youth member (<16).
 - anyone following a reportable injury/incident.
- WH&S obligations and our duty of care requires Scouts Victoria to document all such instances of treatment/care provided. We request that:
 - Scouts Victoria procedures are followed for incident reporting. Incident reports are best filled out by the person who witnessed the initial incident. Incident reports are required for anyone receiving medical or dental treatment.
 - The Health Care provider emails a summary of the care provided to any youth member (< 16) to health@cuboree.com.au . Please include the patient's Scout Registration number and use their birthdate (DDMMYYYY) as a password for any attached files.
- We may request your assistance at the Medical Aid Post during patient surges or emergencies stretching local capacity.

