CAMPER SELECTION PROCESS

Each camp program needs to develop a policy on camper selection. Your policy should be clearly stated to staff and applicants. The following factors may be considered when designing your individual policy:

- **Campers should be chosen with no regard for race, religion, gender or ethnic background** – Standard clause for all camp literature

- **Severity of asthma** –
  - **Asthma as a primary diagnoses** – The purpose of asthma camp is to provide a full camp experience for children with asthma who are unable or unwilling to participate in a mainstream camp program. Keep in mind, there may be situations where a child without asthma warrants consideration because of other asthma related medical considerations (e.g., multiple food allergies) that prohibit their participation in mainstream camp programs. The decision to accept campers without asthma is up to the discretion of the individual camp planning board.
  - **Asthma and/or other medical conditions must be stable enough to participate in daily camp activities** – Each camp should evaluate their ability to provide a safe camp experience given the diverse care considerations of children with asthma. When determining an acceptable balance of mild, moderate and severe camper population, an asthma severity scale may prove useful. While most programs give priority to campers with moderate to severe asthma over campers with mild asthma, careful consideration must be given to those applicants whose individual medical condition is so severe it may ultimately jeopardize their safety or the safety of other campers.

- **First time camper given priority over return campers** – Given the goal of providing a camp experience to as many kids with asthma as possible, first time campers should always have priority. Several specialty camps limit registration at three years at which time mainstream camp programs are encouraged. There will of course be exceptions. Some campers are able to transition after a year of asthma camp – others benefit from a longer relationship with camp.

- **Age of camper** – Typically older children are given priority if approaching their last years of camp eligibility.

- **Capacity issues** – The number of campers, and in the case of residential programs the gender mix of campers, is often determined by the overall facility size, the amount of staff and program design. If, for example, due to the number of male and female counselors working at your residential program, you can only accommodate twenty female versus fifty male campers, this should be clearly communicated to staff – and potentially even applicants in your registration or promotional literature.

- **Number of family members with asthma** – Given the stress on families with multiple members with asthma, serious consideration should be given to accept siblings applying for camp, even if one child has mild asthma.

- **Receipt date of completed application packet** – Registrations received by the stated deadline should be given priority in the selection process.

- **Referral source** – When at capacity and forced to rank eligible applicants, camps may want to factor in the referral source. In some situations, a health care provider, school nurse, social worker or other advocate may provide a compelling argument for why the camp experience would positively impact the child.