



RISSALAH COLLEGE CHILD PROTECTION POLICY EXCURSIONS AND OVERNIGHT STAYS

POLICY AND PROCEDURES DOCUMENTS 2017

Policy Review

This Policy was approved on 1st March 2017 and will be reviewed at least every two years. The next due date for review is therefore 1st March 2019. Where any material change is deemed appropriate to be made to this Policy, it may be amended and submitted for review and approval at an earlier date.

POLICY STATEMENT

EXCURSIONS AND OVERNIGHT STAYS

1. Introduction

Excursions and overnight stays are an important part of the school's curriculum and specifically of the students' learning program and must be justified on this basis. The following information is designed to ensure the safety of students and to minimize the possibility of litigation against the school.

An excursion is any school organised activity conducted outside the boundary of the school. An excursion can range from a brief visit of less than one hour to a local point of interest, to an extended journey occupying a number of days and requiring overnight accommodation.

There exists a special duty of care between the teacher and student. The duty exists both during and outside of normal school hours. Activities chosen for school excursions must be suitable for children of the age, experience and capacity of those participating. Provision must be made for students with special needs.

2. General Principles

2.1 The need for each excursion must be based upon an assessment of the merits of the learning experience.

2.2 Each excursion must have clearly articulated objectives and expected outcomes as reflected in relevant teaching programs.

2.3 There must be adequate preparation of students for the excursion.

2.4 Students and parents/guardians must have a clear understanding of the school's expectations of students' obligations and required behaviour.

2.5 Each excursion must be evaluated in terms of its objectives and outcomes practice relating to Child Protection must apply.

2.6 An adequate supervision ratio is to be maintained at all times. This ratio is at the Principal's discretion and should be based on careful assessment of factors such as the age/gender, or special needs of students, level of danger, nature of activity and past experience.

3. Before the Excursion

The supervising teacher(s) must observe the following requirements:

3.1 Submit to the Principal for approval full details of the excursion. (See Appendix 1 for an example of the information required).

3.2 Provide complete excursion details to parents/guardians to ensure that consent forms (See

Appendix 2 for examples of consent forms) are detailed and returned signed to the school. Copies of the consent forms and other relevant information must be prepared and taken on all day or overnight excursions.

3.3 Ensure parents/guardians and students understand that if it is necessary for a student to be sent home because of gross misbehaviour, health reasons, homesickness or for similar reasons, the associated costs are the responsibility of the student's parents/guardians.

3.4 Ensure parents/guardians have sufficient advance notice of financial costs.

3.5 Ensure no student is excluded from compulsory excursions because of their financial circumstances.

3.6 Ensure adequate preparation and planning takes place for all excursions. If possible have a good knowledge of the location of the excursion and visit any unfamiliar location and terrain beforehand.

3.7 Personnel with first aid training must be present on all excursions.

- (a) A teacher (or other adult authorised by the Principal) with elementary first aid training must be assigned to any excursion. This training must be renewed at two year intervals.
- (b) For excursions involving water activities and for overnight excursions, a teacher (or other adult authorised by the Principal) with a current qualification in Cardiopulmonary Resuscitation (CPR) must accompany the students. This qualification must be renewed annually.

Training such as the two hour Emergency Care courses conducted at schools by the Australian Red Cross, St. John Ambulance and Royal Life Saving Society (as well as other Workcover accredited providers) would satisfy the requirements in (a).

3.8 Ensure that a properly equipped First Aid kit is taken on the excursion.

3.9 When billeting is used:

- (i) Information is provided to parents concerning transport, venue, billeting and supervision arrangements,
- (ii) All billeting families are screened for their suitability by the host school,
- (iii) Students and billeting families are provided with emergency contact number of a supervisor teacher,
- (iv) Students should be billeted in pairs where practical.

3.10 On overnight excursions ensure mixed groups of students are to be supervised by at least one male and one female adult. Teachers/adults are to sleep in a room/area separate from the students. Only where this is impractical may they sleep at least two to a room/area with the

students. Under no circumstances may a teacher/adult sleep in a room alone with students.

3.11 Ensure adequate teacher supervision is available at school for students unable to attend. This is to be based on careful assessment of such factors as age, gender and past practice. This is at the Principal's discretion.

3.12 A teacher, parent or other approved person providing transport for an excursion is to be appropriately licensed and the car registered. (It should be noted that such a driver may be sued for negligence in the case of an accident).

3.13 Ensure detailed medical information has been obtained from parents/guardians prior to any overnight excursion.

3.14 Where appropriate a separate Action Plan devised by a student's doctor should be available for those students who may require emergency assistance (e.g. severe asthma attack, epileptic fit).

4. During the Excursion

The supervising teacher(s) must observe the following requirements:

4.1 Ensure an adequate supervision ratio is maintained at all times, based upon careful assessment of factors such as the age/gender of students and nature of activity.

4.2 Actively supervise students even when a particular activity is being conducted by a trained person who is not a teacher.

4.3 Promptly inform the Principal if a student has been involved in an accident.

4.4 Promptly complete any relevant accident documentation after an accident.

4.5 Ensure where transportation is needed that:

(i) Adequate transport is provided for the number of people involved in the excursion,

(ii) All normal safety rules apply,

(iii) All students are to have a seat and to use the appropriate restraint (when fitted) when travelling by car, bus, train or plane.

4.6 Ensure mixed gender groups are supervised by at least one male and one female adult. This requirement does not apply to class excursions in the school day to local venues where a class teacher provides adequate supervision.

4.7 If it is necessary to remove a student from the excursion for any reason, make the decision, where possible, in consultation with the Principal and contact the parents/guardians.

4.8 Where practical a mobile phone, phone card and change should be taken on any excursion.

5. Administration of Medication

5.1 Medication must not be given to a child without the written permission of a parent/guardian. Verbal permission may be acceptable in an emergency situation.

5.2 Medication must be supplied by parents where possible in the original container, clearly marked with the student's name, the name of the drug, dosage, frequency of administration and prescribing doctor's name.

5.3 Appropriate equipment for administration, e.g. medication measures, must be supplied by parents.

5.4 All prescribed medication must be kept securely at all times.

5.5 A Medication Register is to be established and maintained during the excursion. The Register must provide the following information: date, time, name of student, type of medication, dosage and the name of the person administering the medication.

6. Overseas Excursion

Overseas visits by groups of students are not permitted without the express approval of the Principal. Approval will be given only if a group:

- (i) establishes there will be significant educational benefits to the students;
- (ii) proposes to undertake activities that are not available in Australia;
- (iii) proposes to undertake the tour substantially in vacation time;
- (iv) organises the costs so that there is no undue financial burden imposed upon individual members of the group;
- (v) ensures any application for approval by the Principal is made at least four months prior to the date of the planned visit.

Teachers should be careful not to raise the expectations of students and parents before approval is gained. The matters outlined relating to the conduct of excursions also applies to overseas visits. Overseas visits may only be booked with Australian-registered travel companies. A travel insurance policy that covers cancellation of all or part of the visit plus medical expenses is a prerequisite before approval by the Director.

Appendix 1

Appendix 1 is a guide for the Principal of the information necessary before an excursion or overnight stay can be approved. It contains one sample.

PLEASE COMPLETE THE FOLLOWING INFORMATION IN REGARD TO THE ACTIVITY BEING PROPOSED

In addition to identification of objectives and expected outcomes for each excursion, the Principal needs to know the following details.

1. General Information

School Name and Phone Number: _____ Phone: _____

Name of Teacher in charge of the activity: _____

Venue for the activity: _____

Address: _____

Contact phone number/s at venue/s: _____

Appendix1(cont.)

2. Details of Departure and Return

Departure

Day and date of departure: _____

Location of departure point: _____

Means of transport: _____ Time of departure: _____

Outward journey: Proprietor: _____ Phone No.: _____

Return

Day and date of return: _____

Location of departure point: _____

Means of transport: _____ Time of return: _____

Return journey: Proprietor: _____ Phone No.: _____

Location of return point: _____

3. Accommodation Arrangements

Date	Accommodation details (If same for all nights please indicate)
1st night	_____
2nd night	_____
3rd night	_____
4th night	_____
5th night	_____
6th night	_____
7th night	_____

Appendix1(cont.)

4. Details of Students Attending the Activity

Year	Boys	Girls	Total
K	_____	_____	_____
1	_____	_____	_____
2	_____	_____	_____
3	_____	_____	_____
4	_____	_____	_____
5	_____	_____	_____
6	_____	_____	_____

TOTAL ATTENDING: _____

Number of students eligible to attend but not attending: _____

Total cost per student attending, including transport: \$ _____

Appendix 1 (cont.)

5. DAILY ACTIVITY PROGRAMME OUTLINE

Please complete briefly the following information regarding activities which will take place on each day during the camp/overnight excursion. Please attach a camp programme if all activities cannot be listed on this page.

GOAL OF EXCURSION

Day	Morning Session	Afternoon Session	Evening Session
1	_____	_____	_____
	_____	_____	_____
2	_____	_____	_____
	_____	_____	_____
3	_____	_____	_____
	_____	_____	_____
4	_____	_____	_____
	_____	_____	_____
5	_____	_____	_____
	_____	_____	_____
6	_____	_____	_____
	_____	_____	_____
7	_____	_____	_____
	_____	_____	_____

Appendix 1 (cont.)

6. Staffing Arrangements

Names of staff employed by the school who will be accompanying the group for the whole of the activity.

- | | |
|----------|-----------|
| 1. _____ | 7. _____ |
| 2. _____ | 8. _____ |
| 3. _____ | 9. _____ |
| 4. _____ | 10. _____ |
| 5. _____ | 11. _____ |
| 6. _____ | 12. _____ |

Names of other adults accompanying the group for the whole of the activity.

Name Relationship to School

- | |
|----------|
| 1. _____ |
| 2. _____ |
| 3. _____ |
| 4. _____ |

The overall full-time camp staff ratio (including voluntary helpers and staff) = _____

The full-time staff (employed by the school) ratio per student = _____

Appendix 2

Appendix 2 is a guide for the school of the type of consent forms necessary for excursions. It contains three samples.

Sample A is of a general nature and would normally be the type of consent form completed at the beginning of a year for excursions to and from school during a school day. Some schools would separate the consent form from the medical information which may be part of an enrolment information form.

Sample B and C are of a specific nature and need to be adapted to the circumstances of the particular excursion.

SAMPLE CONSENT FORM: A

To Rissalah College:

I.....
of..... Postcode.....
parent/legal guardian (delete as appropriate)

of
.....hereby
(hereinafter referred to as "my child")

1. Consent to my child travelling on a school bus or on any form of public or private transport where such transport is deemed by the school to be necessary or desirable.
2. Consent to my child participating in all activities organised or available at school, school camps, work experience programmes and all other outings, excursions and functions.
3.
 - (a) Consent to the school by its servants or agents seeking such medical or dental intervention on behalf of my child as sees fit in the event of accident or illness and if in the opinion of an attending medical or dental practitioner or medical officer my child requires medical or dental attention or treatment including but not limited to the administration of anaesthetic, blood transfusion or the performance of any surgical operation to such medical or dental practitioner or medical officer giving such attention or treatment.
 - (b) Certify that the consent which I have given in paragraph (a) is valid at all times while my child is in the custody of the school including but not limited to such times as my child is at school, is present at school camps or is attending or participating in a work experience programme, outing, excursion or function.
4. (Strike out whichever of the following is inapplicable)

Appendix 2 (cont.)

(a) Certify that my child does not to my knowledge suffer from any illness or disability which might interfere with or inhibit any medical or dental attention or treatment.

(b) Give notice that my child suffers from the following illnesses or disabilities and/or takes medication which might interfere with or inhibit medical or dental attention or treatment but certify that to my knowledge my child does not suffer from any other illness or disabilities or take medication which might interfere with or inhibit any medical or dental attention or treatment.

5. Certify that I understand that the school will take all reasonable care in the event of my child suffering accident or illness but that it will not be responsible for the cost of any medical or dental attention or treatment administered to my child in any such event nor will it be responsible directly or indirectly for any act or omission of any medical or dental practitioner or medical officer attending my child.

Date..... Signed.....
(parent/guardian)

In the case of accident or illness, please endeavour to contact the following persons:

Telephone Nos.

Father: home work.....

Mother: home work

Emergency contact
(name, address and telephone no)

My usual home address is
.....

The name and address of my family doctor is

Dr.
.....
..... Telephone no

Please note it is your personal responsibility to advise the school regarding any alterations to the information supplied on this form.

Appendix 2 (cont.)
SAMPLE CONSENT FORM: B

Dear Parent or Guardian,

The class in which..... participates will be going on an
excursion to.....
(Student's name)
(Place)

on..... to
(Date) (Date)

This excursion has been planned to supplement the following work being done in the classroom
.....

The cost of the excursion is (\$)
(Words)

The class will depart from at.....
(Place) (Time)
and return to at
(Place) (Time)

Accommodation (if overnight).....

Travel will be by.....
(Means of Transport)

The group will be supervised by.....

Additional information.....

.....
Water or Swimming Activities

The excursion will involve the following water or swimming activities:
.....

.....
These activities will take place at.....

The school will provide the following flotation devices to students who may require assistance in
the water:.....

Principal Teacher in charge of excursion.....

Phone number Please complete details and return.....
(Date)

Appendix 2 (cont.)

SAMPLE CONSENT FORM: C (This may vary in content and format)

I hereby consent toparticipating in an
(Student's Name)

excursion to
(Place)

on.....
(Date)

Special needs of my child of which you should be aware (e.g. allergies, medication - please
provide full details)
.....
.....

In relation to the proposed water or swimming activities, I advise that my child is a
strong/average/poor/non-swimmer*.

I give/do not give* permission for my child to participate in the water/swimming activities.

I advise that my child requires the following flotation device to assist him/her in the water:

.....

I undertake to provide this device so that my child can participate in the excursion.

.....

.....
(Signature of Parent or Guardian)

.....
(Date)

*Delete words not applicable