

All Saints Catholic Primary School

Camp, Excursion and

Incursion Policy



Developed by: Staff and School Board

Note: All references to 'Staff members' include Administration Staff, Support Teachers, Teachers and Temporary Relieving Teachers.

Underlying Assumptions, Philosophy and Rationale:

We at All Saints Catholic Primary School believe that:

- the school education program should include activities and experiences held within and outside normal class hours and also beyond the immediate boundaries of the school campus
- participation in camps, excursions and incursions will give an added focus to the development of the child in society and the wider physical environment.

Purpose/Aims:

Through the application of this policy, we at All Saints Catholic Primary School aim to use camps, excursions and incursions to:

- enhance topics covered in curriculum areas within the school program
- offer opportunities for children and teachers to deepen their educational relationship
- offer experiences in an educational climate that would be difficult to create within the confines of the school buildings
- offer an opportunity to develop children's outdoor and environmental interests and attitudes
- create an atmosphere and a challenge for children to freely relate with each other, while at the same time recognising the need to cooperate and show responsibility for themselves and the group.

Guidelines for Incursions and Excursions:

Incursions

These are special events and special visitors that come to the school and are held within the school grounds. While incursions don't raise the same issues as excursions or camps, incursions should be aligned to the aims and guidelines set out above and as appropriate should meet the 'Excursions, Camps, Adventure, Physical and Sporting Activities: procedures for Catholic Schools and Preschools South Australia Commission for Catholic Schools: available on Catholic Education South Australia online services; (Policies, Procedures and Guidelines) as appropriate. Parents and carers are notified of incursions via the school's newsletter, email or letter.

Local Area Consent

When enrolling a child at the school, parents and carers are required to complete a general permission notice for local walks and church visits. In this case parents must be notified of the day and time of proposed walk. Supervision for these walks may require a request for volunteers to ensure adult to child ratios are met. Details of the proposed walk must be sent to the leadership team point of contact and the Front Office administration team.

Excursions

Excursions beyond the local area will be held to enhance a current topic of learning, special event or occasion of significance. The following requirements must be adhered to:

- Adult supervision accompanying any class on an excursion needs to comply with the child/adult ratio in line with South Australian Catholic Commission for Schools guidelines.
- A mobile phone and first aid equipment must be taken on all excursions.
- Where the bus is the sole form of transport for the excursion, the buses must be fitted with seatbelts.
- Where children access the train to and from Seaford, the children and staff may access the use of buses and or trams (without seatbelts) to move around the city area.

Planning - Procedures

When arranging excursions staff must be familiar with and adhere to the 'Excursions, Camps, Adventure, Physical and Sporting Activities: Procedures for Catholic Schools and Preschools South Australian Commission for Catholic Schools available on CESA online Services: (Policies, Procedures and Guidelines)

A Checklist and Planning Form is to be used by teachers when planning each activity, and will be a guide for action for staff in consultation with the Leadership Team. The forms are to be signed by the Principal or Leadership point of contact and the teacher. It is noted that these Planning Forms could be used as a legal document if required.

Medication

Medication taken on excursions for children should be given to a staff member, who is assigned the responsibility of storing medication in a secure place, and administering it at the appropriate time.

Guidelines for Camps

This policy supports the view that children who attend All Saints will have the opportunity to participate in a camp during Year 6. The purpose of camps is to provide children within a class, an opportunity to build positive relationships outside of the school setting. Camps will be designed to support and build upon the learning program. Decisions about when a camp will occur will be made in consultation with the Principal and notified to parents and carers as early as possible in the school year.

Planning – Procedures

When arranging camps, staff must be familiar with and adhere to the 'Excursions, Camps, Adventure, Physical and Sporting Activities: Procedures for Catholic Schools and Preschools South Australian Commission for Catholic Schools available on CESA online Services: (Policies, Procedures and Guidelines)

Teachers organising a camp need to ensure the following occurs well in advance of the scheduled event.

- Confirmation of camp site.
- All child safety requirements such as police clearances and risk assessments are met by the 3rd party providers.
- Ensure ample time given to parents/carers in regard to the dates, cost and program.
- Distribution of letters to parents/carers with consent and medical forms.
- Completion of All Saints 'Confidential Medical Information' .
- Completion of staff and volunteers 'Confidential Medical Information'.
- Completion of All Saints 'Camp Process and Form'.
- Completion of risk assessment.
- Organisation of extra supervision with the support of parent/carer/adult registered volunteers who have a current police clearance.
- Ensure chartered buses have seat belts.

Medical Consent Form

The completed medical forms for children, staff & volunteers should always be taken on camps and should be readily accessible to all leaders. Medication taken on camp for children should be given to a staff member, who is assigned the responsibility of storing medication in a secure place, and administering it at the appropriate time.

Medical consent forms should also be available for each staff member and volunteer attending the camp.

Excursion and Camp Additional Requirements

Transport

Transport will occur via public transport or hire vehicle. Should a hire vehicle be used drivers will:

- hold a current Department of Transport, Energy and Infrastructure (DTEI) accreditation
- hold a full driver's licence and be an experienced and competent driver
- not be permitted to transport if holding a 'P' or 'L' plate licence or if the licence is suspended or disqualified
- be aware that the School Board and the Catholic Church Endowment Society accept no liability for any damage from an accident involving private vehicles being used to provide transport for any school related activity
- ensure that the number of passengers being transported by hire vehicle does not exceed the number of available seatbelts
- abide by the road regulations and laws
- abide by All Saints Catholic Primary School 'Smoke Free School' Policy while on any school related activity
- abide by all legal requirements

When using public transport teachers will have a special and primary duty to the children in their care.

Attendance

The Camp, Excursion and Incursion program is an integral part of the total school curriculum; therefore participation by all children is expected. The school will support children and families by considering the following:

- All Saints is committed to ensuring all children have access to attending camp. All efforts by the school will be made to support children with personal or social concerns that may make attendance difficult.
- Financial consideration should not be an obstacle and if this is a concern parents and carers should contact the class teacher or a member of the Leadership Team so that the school can provide extra support. (see Financial Budget)
- As far as possible provision will be made for special needs. (e.g. medical)
- If a child is unable to attend a camp/excursion/incursion it will be at the Principal's discretion as to whether the child is supervised at school or if parents/carers need to make supervision arrangements outside of school.

Supervision - Safety

The class teacher(s) must take complete charge and responsibility of the program or activity and ensure the following:

- All Parents/Carers involved in an incursion, excursion or camp must have a current Police Clearance and have completed the volunteer screening procedures.
- The teaching staff ensures the bus driver employed for school excursions shows his/her accreditation with the Department Transport and Energy and Infrastructure.
- All staff attending the camp/excursion have a current BELS first aid certificate.
- Supervision – student ratios must be sourced from the Excursions, Camps, Adventure, Physical & Sporting Activities, Procedures for Catholic Schools and Preschools 2005. These ratios must be complied with as a minimum. However, ratios may need to be varied (to lower the student to excursion staff ratio) taking into account the nature of the activity, the venue, the age and abilities of the students, the known behaviour of the group or individual students within it and other variables such as weather conditions.
- Emergency procedures, telephone numbers and contacts must be known by all leaders.
- As supervision and safety are so important, adherence to the relevant sections of the SACCS Policy is emphasised.
- Adult supervision accompanying any class on an excursion or camp needs to comply with the SACCS guidelines.

Volunteers

The number of adults staffing particular excursions and camps is often increased by using volunteers. These will include parents and carers from the school but may also include university students and other adults. These people make valuable contributions and their assistance should be encouraged, however the complete charge and responsibility of the program or activity must be taken by a registered teacher. Volunteers must adhere to the following:

- All volunteers must have completed a Police Clearance and the screening process and be listed at the school as a current registered volunteer.
- Volunteers must be given specific tasks and should understand that they must not operate outside that task except to render emergency aid.
- Teachers will not ask a volunteer to take an individual child away from an area by him or herself.
- Teachers will need to brief volunteers on their duty of care and supervisory responsibilities.

Implementation

In support of this policy:

The Principal will:

- ensure all members of the school community will be made aware and have ready access to the policy.

All Teachers will:

- comply with the school's policy along with the guidelines set down in the SACCS policy for Guidelines and Legal Requirements for Excursions, Camps and Adventure activities, Procedures for Catholic Schools and Preschools 2005
- ensure parents and carers are fully informed of all details prior to the excursion or camp
- attend to completing the relevant forms prior to the excursion and camp
- ensure a copy of all information is handed into the front office prior to the excursion or camp.

Children will:

- participate fully in the school program which includes attendance at excursions, incursions and camps
- ensure they comply fully with the expectations.

Parents/Carers will:

- support the school program by ensuring their child/ren's attendances on excursions, incursions and camps as an important part of children's learning
- ensure they keep themselves fully informed about upcoming excursions, and camps and to ensure all relevant forms are signed and returned to school by the due date.

Basis of Discretion:

See 'Attendance'

Support Documents:

- SACCS Guidelines and legal Requirements. Excursion, Camps and Adventure Activities, Procedures for Catholic Schools 2005.

Appendices

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Financial Budget:

- The total cost of the excursions/camp should be calculated, and then divided between all the children. (This means that the cost of supervising adults will be covered by adding a small amount to each child's expense).
- Due to the requirements of advance bookings and payments, it is not normally possible to make refunds on individual cancellations.
- No child should forfeit the opportunity to attend school excursions or camps because of financial considerations. Funds may be administered by the Principal to support cases of special need.
- For camps an approximate cost should be given to Parents/Carers as soon as possible.
- Teachers must ensure a purchase order form is completed and given to the Finance Officer as soon as possible.
- An excursion budget is set on an annual basis for these activities. Parents/Caregivers will be advised of the amount. Teachers should keep within this budget, with flexibility per term within the annual total amount.

Resources:

Nil

Sign: _____ Date: _____
(Principal)

Sign: _____ Date: _____
(Chairperson on behalf of School Board)

Date to be reviewed: May 2021



Booking an Excursion/Incursion/Camp Procedure

Step 1 - At least 2 weeks before the Excursion/Incursion/Camp

1. Person Responsible for excursion/incursion/camp to meet with your Leadership POC to discuss what you plan to do
2. Check the E-calendar for other school events proposed for that date and enter a tentative date in the E-calendar
3. Commence the "Excursion/Incursion/Camp Checklist" located in the Excursions folder in J:\staffcommon\Excursions
4. Notify the WHS Coordinator of the date and details of the excursion/incursion/camp and work with them to produce a Risk Assessment for the event
5. Send Administration/Office (Angela) all details of excursion/incursion/camp. A note/permission form will then be formatted and emailed back to the Person Responsible.
6. Seek approval from your Leadership Point of Contact (POC) for any notes, permission slips and medical forms which you are intending to be sent and completed by families.
7. Once approved by your Leadership POC, send notes, permission slips and medical forms to families for completion.
8. Send a copy of the excursion/incursion/camp notes which have been approved by your Leadership POC to Gaye for uploading to the website
9. Forward the "Engagement of Third Party Providers Declaration" form to the excursion venue (if applicable).

Step 2 - At least 1 week before the Excursion/Incursion/Camp

1. Check that all volunteers have a current Catholic Police Clearance and that you have the required ratios, as detailed on the Risk Assessment
2. Ensure that all documentation has been approved by your Leadership POC i.e. Excursion Checklist, Risk Assessment and Engagement of Third Party Providers Declaration form (if applicable).
3. Complete the "Front Office Excursion/Incursion/Camp Information" form and submit to the front office

Step 3 – On the day of the Excursion/Incursion/Camp

Ensure that you take the following items with you as detailed on the Excursion Checklist: First aid kit

- Emergency Contacts (provided by office in the first aid bag)
- Medical instructions/Medication for identified children (provided by office in the first aid bag)
- Personal mobile phone
- School phone number: 8327 0020
- The Risk Assessment



Step 4 – After the Excursion/Incursion/Camp

Provide to the front office a completed “package” neatly in clear sleeve which includes:

- Excursion/Incursion/Camp Checklist
- Risk Assessment, including completed Feedback Form
- Completed Permission Slips and Medication Forms (list of Childrens marked off)
- All Excursion/Incursion/Camp Notes
- Drivers Declaration/s (if applicable)
- Engagement of Third Party Providers Declaration (if applicable)

REMEMBER to always Save As and rename the document

Where to find the Excursion/Incursion/Camp documentation

The following documentation can be found in the Excursion folder in J:\staffcommon\Excursions

- Excursion/Incursion/Camp Checklist
- Front Office Excursion/Incursion/Camp Information
- Booking an Excursion/Incursion/Camp Procedure
- Excursion Consent Form
- Engagement of Third Party Providers Declaration
- Medical Forms
- Swimming and Aquatics Medical Consent Form

The Risk Assessment template and Risk Assessments that have been previously completed can be found in the Risk Assessment folder in J:\staffcommon\Risk Assessments

Please work together with the WHS Coordinator to update an existing Risk Assessment or create a new one for your excursion/incursion/camp.

All Saints Catholic Primary School

A spirit centred community of learners, inspired by Jesus, seeking integrity and fullness of life.



Engagement of Third Party Providers Declaration

Weconfirm the following:
(insert Third Party Provider)

- All staff, volunteers and contractors have been assessed as having a current child related clearance issued by the Department for Communities & Social Inclusion (DCSI)
- A child safe environment is provided at all times
- Unsuitable persons are not permitted, or allowed to be involved in the operation of the activities offered at this location

To be signed and approved by an authorised representative of the Third Party Provider.

Name: _____ **Signature:** _____ **Date:** _____



Excursion/Incursion/Camp Checklist

Name of Excursion/Incursion/Camp

Teacher(s) _____ **Class(es)**

Destination

Aim of Excursion/Incursion /Camp (relate to ACARA Outcomes)

Date of Camp/Excursions/Incursion _____ **Depart** _____ **Return**

Cost per child \$ _____ **Purchase order No** _____
(see Bursar)

No of children attending _____ **Staff to Child ratio required**

Public Transport tickets required YES/NO **Number of tickets**

Step 1 - At least 2 weeks before the Excursion/Incursion/Camp (please tick)

- Have you meet with your Leadership Point of Contact (POC) to discuss what you plan to do?
- Have you checked the E-Calendar for other school events on that day and entered a tentative date?
- Have you notified the WHS Coordinator of the date/details of the excursion/incursion/camp and worked with them to produce a Risk Assessment for the event?
- Have you sent the outline/draft note/permission slip to office for formatting?
- Have you had the final excursion/incursion/camp note(s) for families approved by your Leadership POC?
- Have you sent home the approved notes, permission slips and medical forms to families?
- Have you sent a copy of all documents to office for uploading to the school website?
- Are any ESO's required to assist with the excursion/incursion/camp? YES/NO (please circle) (no. required)
- Have you forwarded an "Engagement of Third Party Providers Declaration Form" to the excursion/camp venue, if applicable?

Step 2 - At least 1 week before the Excursion/Incursion/Camp (please tick)

- Have you checked that all of your volunteers are registered and have current a Catholic Police Clearance?
- Have you allocated the required staff/volunteer to Child ratio, as detailed on the Risk Assessment?

List volunteers attending: _____

Volunteers checked by _____ **Signature:** _____ **Date:** _____

Step 2 - At least 1 week before the Excursion/Incursion/Camp (please tick) *cont.*

- Have you completed the "Front Office Information" form and provided it to the Front Office?
- Have you notified Specialist Teachers / ESO's & other relevant staff of your class's absence on the day(s) of the excursion/incursion/camp?
- Have you arranged yard duty swaps and advised your Leadership POC via email?

Excursion/Incursion/Camp and letters have been approved and authorised by Leadership POC:

Name: _____ **Signature:** _____ **Date:** _____

Step 3 – On day of Excursion/Incursion/Camp (please tick)

Remember to take the following with you:

- First Aid Bag
- Emergency Contacts 1 & 2 Report (provided by office in the first aid bag)
- Medical Details Report & Medications for identified children (provided by office in the first aid bag)
- Mobile phone
- School Phone Number: 8327 0020
- The Risk Assessment

Step 4 – After Excursion/Incursion/Camp (please tick)

Please provide the Front Office with ALL of the following in a complete pack/sleeve for filing:

- This completed and signed Excursion/Incursion/Camp Checklist
- Signed Risk Assessment (including completed Feedback form)
- Excursion/Incursion/Camp Notes(s)
- Signed Permission Slips/Medical forms
- List of Permission Slips/Medical forms enclosed in pack
- Engagement of Third Party Providers Declaration (if applicable)

Organiser of excursion/incursion/camp to sign below to confirm you have completed all of the requirements stated in this form.

Name: _____ **Signature:** _____ **Date:** _____

Year 1

South Australian Maritime Museum

Friday, 1 December 2017



Location: The Arts Theatre, Colonel Light Square, Adelaide

Learning Area: As part of the Year 4 Geography and History curriculum, the children have been learning about world explorers, navigators and The First Fleet. We will be participating in the *Life Onboard* program, which will allow the children to participate in such activities as:

- Climb the lighthouse
- Tour of the exhibitions
- Talk of what life was like on board a migrant vessel bound for SA, looking at how people ate, slept, worked and played
- Port River cruise on board the Police Launch Archie Badenoch vessel.

Transport: Children will travel by chartered bus to and from Port Adelaide.

Departure/Return: Children depart **8:45am**; Children return by **3:00pm**.

Staff in Charge: Sandra Partridge, Yvette Bevans & Emma Gill.

Cost: This excursion is covered as part of your annual school fee.

Requirements: Children will need to wear their full sports uniform and hat. Bring a small backpack containing a drink bottle, brain food, recess and lunch.

We also require several volunteers to help supervise the children. If you are a registered volunteer and hold a current Catholic Police Check (CPC), your assistance with this excursion would be greatly appreciated.

Please complete and return the permission slip to the class teacher by **Wednesday, 22 November, 2017**.

All Saints Catholic Primary School Ph: (08) 8327 0020 Fax (08) 8327 0866	621 Grand Boulevard, Seaford SA 5169 spartridge@allsaints.catholic.edu.au
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Please return this section to the CLASS TEACHER by no later than Friday, 24th November, 2017

Year 4

Friday, 1 December 2017

South Australian Maritime Museum

Name of Child: Class..... has permission to attend the above activity Yes No

I am a Registered Volunteer with a current Catholic Police Clearance and would like to assist on this excursion.

IMPORTANT: MEDICAL and EMERGENCY INFORMATION

I/We confirm that Medical and Emergency Information provided to the school on the 2018 Student Information Checklist is current & relevant. Please ensure any changes to this information have been provided to the school.

Medical Condition:

Parent/Carer Name: Date:

Parent/Carer Signature: Emergency Contact No:

Front Office Information

- This form must be completed and submitted to the front office a week before the excursion.
- Please ensure a copy of the original excursion/incursion/camp note to parents is attached.

Name of Excursion/Incursion/Camp:	
Location of Excursion/Incursion/Camp:	
Date of Excursion/Incursion/Camp:	
Classes Attending:	
Type of Transport:	
Number of first aid bags required:	

Arrival and Departure Information

(i.e. time that you will be leaving & returning school and approx. arrival & departure time at each venue)

Teachers/ESOs Attending

Name:	Mobile:
Name:	Mobile:
Name:	Mobile:
Name:	Mobile:
Name:	Mobile:

Volunteers Attending

Names of volunteers that will be attending:

Appendix B

CONFIDENTIAL MEDICAL INFORMATION FOR SCHOOL APPROVED EXCURSIONS

This information is intended to assist the school in case of any medical emergency involving your child. All information is held in confidence.

Child's name

Date of birth Year level

Parent's/guardian's full name

Address Postcode

Emergency telephone numbers After hours Business hours

Name and address of family doctor

Medicare no.

Medical/hospital insurance fund Contribution no.

Please tick if your child suffers any of the following:

- Bed wetting Fits of any type Heart condition Asthma Diabetes
- Dizzy spells Sleepwalking Blackouts Migraine Travel sickness

Other _____

Allergies to:

Penicillin _____ Other drugs _____

Any foods _____ Other _____

What special care is recommended? _____

Tetanus immunisation – year of last tetanus immunisation

(Tetanus immunisation is normally given at five years of age (as Triple Antigen or CDT) and at fifteen years of age (as ADT))

Tablets and medicines – Is your child presently taking tablets and/or medicine? Yes No

If yes, please state name of medication, dosage tc.

All medication containers must be labelled with your child's name, the dose to be taken and when it should be taken. For customs processes, you must enquire with your doctor whether it is necessary for your child to carry a letter from the doctor confirming that the medication is prescribed by a registered medical practitioner. If it is necessary or appropriate for your child to carry his or her own medication (for example, asthma puffers or insulin for diabetes) it must be with the knowledge and approval of both and teacher-in-charge and yourself.

Previous experience – Is this the first time your child has been away from home? Yes No

CONSENT TO MEDICAL ATTENTION

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise:

- The teacher-in-charge(insert name) _____ as my nominee to give consent to the appropriate medical or dental authorities for my child where such authorisation is required eg general anaesthetic, blood transfusion etc. I give this consent on the understanding that the teacher-in-charge will, if at all possible, contact me by telephone prior to consenting to the administration of medical or dental treatment by the medical practitioner, dentist or hospital concerned. However, if the medical or dental practitioner considers that the medical or dental treatment should be administered immediately, and the teacher-in-charge is unable to contact me, I authorise the teacher-in-charge to consent to the administration of medical or dental treatment.
- The supervising staff to administer such first aid as the teacher-in-charge may judge to be reasonably necessary.
- I understand that in the event of illness or accident to my child, I will be responsible for all associated costs and charges, including ambulance transportation. It is a requirement of the College that students involved in overseas travel take out travel insurance as detailed in the Attachment. Please ensure that any documents relating to travel insurance are kept in a safe place.

Signature of parent/guardian 1

(date)

Signature of parent/guardian 2

(date)

SWIMMING/AQUATIC CONSENT FORM

CONFIDENTIAL

To be completed by the PARENT/GUARDIAN for students participating in swimming and aquatic activities.

This information will be shown to SCHOOL STAFF and SWIMMING INSTRUCTORS and EMERGENCY SERVICES PERSONNEL responsible for this student's safety at swimming and aquatic activities.

Student name Date of birth
First name (please print) Family name (please print)

Name of school..... MedicAlert Number (if relevant).....

Emergency contact phone number.....

1. Health support information for swimming and aquatic activities
Please complete the following information so the instructors and school staff can plan for your child's safety in the water. No student will be excluded from swimming except on medical advice.

Does your child have a health care need that could affect their safety in the water?

- NO If NO, please go to section 2 – CONSENT TO TAKE PART IN SWIMMING AND AQUATIC ACTIVITIES.
- YES If YES, please tick the boxes below that show your child's health care needs:

Asthma	
Is your child under a health care plan for asthma?	
Severe allergy (eg bee sting)	
Joint Disorder (eg arthritis)	
Vision Impairment	
Ear Disorder (eg drainage tubes)	
Incontinence	
Medication usually taken at school	

Seizures	
Diabetes	
Heart Disorder	
Hearing Impairment	
Skin condition (eg dermatitis)	
Swallowing/choking difficulties	
Communication difficulties	
Other (please give details)	

Swimming and aquatic instructors need a written health care plan from your child's doctor/treating health professional to plan for any special health needs. Have you attached health care information from your child's doctor/treating health professional? (This may be a copy of the information you have provided already to the school).

- NO If NO, staff and instructors will provide standard supervision for safety and first aid (see over).
- YES If YES, write down what you have attached (eg asthma care plan; details about ear care).

.....

2. Consent to take part in swimming or aquatic activities

I give my consent for my child names above to take part in swimming and/or aquatic activities
 I understand that school staff will be present and provide supervision for safety.
 I understand that the swimming or aquatic instructors will be in charge of the water activities.

Parent/guardian
 or adult student Date.....

This section is for the instructor and/or class teacher about any special measures to be taken for this child's safety in the water.

(for example, safety watch because of a history of seizures; easy access to child's asthma medication; teacher to ensure two puffs of reliever ten minutes prior to lesson; teacher to ensure child eats two snack portions from diabetes school kit)

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Standard health care support for the most common health conditions

Asthma	Any child currently prescribed asthma medication must bring their medication. Asthma care plan should be attached to this consent form. Standard first aid: Four puffs of reliever medication. Wait four minutes. If no relief, four more puffs, four minutes. If still no relief, call an ambulance. No return to the water after two lots of reliever medication within any given session.
Seizures	No swimming without care plan from doctor/seizure specialist. Any student with a diagnosed history of seizures will have an adult acting as one to one safety watch. Seizures are generally managed in the pool. Once the seizure is over, the child will leave the pool for the rest of the session.
Diabetes	No swimming without care plan from doctor/diabetes specialist. First aid as per individual diabetes care plan.
Severe allergy	As per allergy specialist care plan
Drainage tubes in ears	Appropriate protection using plugs, caps and ear wraps to be worn throughout water activities unless written medical advice is provided saying this is not necessary.
Incontinence	As per care plan
Choking	As per care plan

Responsibilities

The teacher(s) from the school:

- provides overall supervision
- supervises lesson preparation, including sun protection for outdoor activities
- supervises packing up at the end of activities
- is responsible for general behaviour management
- ensures consent forms, including relevant health support information, are provided to the instructor in charge. This includes identification of staff appointed to individual student safety watch (for example if a student has epilepsy/seizures).

The instructor

- is responsible for the swimming and aquatics learning program
- must negotiate with teachers any individual student health support (as indicated on consent forms) before students enter the water
- supports school policies including behaviour management and safety including sun protection
- ensures school staff and students are informed about emergency procedures.

Appendix H

Excursion Staff Health Form

CONFIDENTIAL

(NB: This form is to be used by staff including volunteers attending an overseas, interstate and overnight excursion or camp)

Family name	<input type="text"/>	Given names	<input type="text"/>
Date of birth	<input type="text"/>		
Residential Address	<input type="text"/>		
			Postcode
Telephone numbers	<input type="text"/>	(home)	(mobile)

Emergency Details

Medicare no.	<input type="text"/>	Medicare expiry date:	<input type="text"/>
Doctor's Name and telephone number	<input type="text"/>		
Ambulance Cover	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Private Health Cover	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Medical/hospital insurance fund	<input type="text"/>		

Emergency Contact

Name of Contact 1	<input type="text"/>			
Relationship (optional)	<input type="text"/>			
Telephone numbers	<input type="text"/>	(home)	(work)	(mobile)
Name of Contact 2	<input type="text"/>			
Relationship (optional)	<input type="text"/>			
Telephone numbers	<input type="text"/>	(home)	(work)	(mobile)

1. **Health Care Details**

1.1 Do you have any medical condition or other health care concern which we should be aware of, including allergies? Yes No

Please provide details:

1.2 Are you aware of any medical emergency that could arise? Yes No

Please provide details of emergency and how to recognise it?

Emergency Treatment

Are you immunised against tetanus? Yes No

Date of last tetanus booster? ____/____/____

Medical Consent

In case of emergency, and in the event that I am unable to give consent at the time, I give _____ and/or _____ of the school permission to use his or her judgment in obtaining any medical attention which he or she considers necessary. I consent to my doctor or medical specialist being contacted in an emergency.

To the best of my knowledge I am fit and able to undertake this school approved excursion to _____. I am aware of the activities that will be undertaken and of the duration of the trip.

(Signature)	____/____/____
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