

All visits, of whatever type, require approval either from the Headteacher or one of the Joint Heads of School.

Verbal permission should be obtained from the Headteacher **four weeks before** the outing.

An **Education visit notification form (EV1)** must be completed **for all visits**. This form (see **Attached**) gives all the information required and ensures that you have addressed and answered all the necessary questions. This must be completed and signed by the Head Teacher and the Group Leader with responsibility for the Outing at least **two weeks before** the date of the visit.

A Risk Assessment (Appendix Three) should be completed in respect of each visit and should accompany the EV1. In order to carry out this assessment a preliminary visit must be made to the venue.

The signed EV1, accompanied by the Risk Assessment, should be given to the Administrator at least **one week before the date** of the visit.

Parents must be aware of all visits and provided with relevant information. At least two weeks before the event a letter should be sent to parents giving information about the outing using the Checklist (Appendix One) as a guide. A voluntary contribution can be requested, with an explanation that if insufficient contributions are received the outing will not be able to proceed. The letter should be accompanied by a Consent Form (Appendix Two).

At least **two days before** the visit a copy of the Expedition Log Sheet should be given to Reception and to the Administrator and each of the Group Leaders who will be going on the Outing.

### **Transporting children in private vehicles**

Children should wherever possible be transported by their parents, or in taxis or coaches. In exceptional cases they may be transported in your own cars, but please:

- obtain parents' permission in writing before the journey
- ensure that an adult escort accompanies the child. Such escort should travel in the rear seat with the child
- ensure that all passengers wear seat belts or the appropriate specified restraints.

Should you intend to transport children it is essential that you advise your insurance company that you will be occasionally transporting children during the course of your work. Please speak to your insurers and ensure that your insurance certificate or accompanying paperwork makes note of this. A copy of the relevant certificate should be brought in each year, confirming that such suitable insurance is in place. Please bring this in to the Administrator as soon as possible if you believe you will need to transport children so that your name can be added to the register of drivers. If your name is not on the register you must NOT transport pupils in your own vehicle.

### **PLEASE NOTE**

All normal professional responsibilities/duties pertain on outings:  
e.g. as smoking in the presence of children is not allowed, the same applies to outings.

### **Risk Assessments for Outings**

Remember that risk assessment is a process and not a method for generating reams of paperwork. You should carry out a risk assessment to check that what you are planning is safe. You should consider hazards (things that could potentially cause harm) and risks (the chances of someone being harmed by a hazard). There are some basic principles that you should follow when carrying out risk assessments.

These include:

- identify the hazards, i.e. anything with the potential to cause harm
- decide who might be harmed and how the harm may occur
- decide what controls should be introduced to reduce the risk of harm
- record the findings of the assessment
- review the assessment if changes occur.

Potential hazards include narrow pavements and busy roads. Consider the precautions you need to take, for example, when children are dismounting from a coach. Find out where the toilets are and how safe the access is and where the emergency exits are in a building.

The complexity and depth of the risk assessment required will depend upon the type of visit being made.

Frequent visits to the same location may not need a risk assessment each time – you could produce a generic one. However, you should review such generic assessments regularly to guard against complacency.

The person carrying out the risk assessment should ensure copies are given to all teachers/supervisors on the visit, with details of the measures they should take to avoid or reduce the risk.

The group leader and other supervisory staff should monitor the risks throughout the visit and take appropriate action as necessary i.e. whether changes may increase the risk to a degree where the activity has to be curtailed.

The group leader should hold briefing meetings before the visit with all staff who are taking part to make their roles and responsibilities clear and

The group leader should give further briefings during the visit. This is especially important where there are any changes to the itinerary or activities which may present new or increased risks.

Reviewed: September 2018

To be Reviewed: September 2019

Reviewed by: Head Teacher

***We have carefully considered and analysed the impact of this policy on equality and the possible implications for pupils with protected characteristics, as part of our commitment to meet the Public Sector Equality Duty (PSED) requirement to have due regard to the need to eliminate discrimination, advance equality of opportunity and foster good relations.***

*This policy has been equality impact assessed and we believe that it is in line with the Equality Act 2010 as it is fair, it does not prioritise or disadvantage any pupil and it helps to promote equality at this school.*

**Consent From Parents/Carers for School Visits from \_\_\_\_\_**

This form confirms consent from you as parents for all trips undertaken by your child's group out of the PACE Centre whether on foot or by arranged transport. You will always be informed when a trip is taking place and will have the right to opt out of specific trips at any time.

**Group:** \_\_\_\_\_

1.	<b>Consent</b>
	<p>I agree to _____ (please print name) taking part in all visits organised for his/her class. I will read the information sheets for each trip when sent to me and will inform the class if I am not willing to let my child go on a specific trip. I acknowledge the need for _____ to behave responsibly.</p>
2.	<b>Medical Information about Your Child</b>
	<p>Does your child have any conditions requiring medical treatment, including medication? <b>Yes/No</b>          If <b>Yes</b> please give brief details:          .....          .....          .....</p>
	<p>Please outline any special dietary requirements for your child and the type of pain/flu relief medication your child may be given, if necessary:          .....          .....          .....</p>
	<p>Is your son/daughter allergic to any medication? <b>Yes/No</b>          If <b>Yes</b> please specify:          .....          .....          .....</p>
	<p>When did your son/daughter last have a tetanus injection:          .....</p>
	<p>I will inform the group leader/head teacher as soon as possible between now and the start of the journey, of any changes in the medical or other circumstances of my son/daughter.</p>

3.	<b>Declaration</b>
	I agree to my son/daughter receiving medication as instructed and any emergency dental, medical or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present (This will also include any emergency first aid treatment considered necessary by the Group Leader.)
	<b>Contact telephone numbers:</b> Work: ..... Home: ..... Mobile: .....
	<b>My home address:</b> ..... ..... .....
	<b>Alternative emergency contact:</b> Name: ..... Telephone number: ..... Address: ..... ..... .....
	<b>Family doctor's details:</b> Name: ..... Telephone number: ..... Address: ..... ..... .....
	<b>I will also inform the Team Leader of any changes to this information as it arises.</b>
	<b>Signed:</b> ..... <b>Date:</b> ..... Please print full name: .....

**Educational Visit Notification Form – EV1 (2005)**

You must complete this form for **every off-site visit**. The Headteacher should approve ALL visits.

If you, subsequently, make any changes to the trip (in planning, staffing or organisation) you must notify these amendments to the Headteacher immediately.

You may attach additional sheets if necessary. Indicate this clearly on the form. Cross through any sections that are not relevant.

**A Contact details**

1.	<b>Name of person leading the group / visit</b> .....
2.	<b>Date(s) of visit</b> .....

**B. Details of visit**

1.	<b>Please list places to be visited, with times to and from the site(s)</b>		
	<b>Site</b>	<b>Time at site(s)</b>	
	.....	.....	
	.....	.....	
	.....	.....	
2.	<b>Adventure activity centre licence number (where appropriate)</b> .....		
3.	<b>Programme of activities/itinerary attached (please tick)</b>	YES	NO
4.	<b>What means of transport will be used (please tick)</b>		
	Car		
	Train		
	Taxi		
	Coach/Minibus		
Other			
Please specify .....			

5.	<b>How is the visit being funded?</b> Please provide details:  ..... ..... .....
6.	<b>What is the educational objective of the trip/visit?</b>  ..... .....

**C. Expedition Log Sheet**

<b>GROUP</b>	<b>DATE</b>	<b>LOCATION</b>	<b>TELEPHONE</b>
<b>TEAM LEADER</b>			
<b>MEMBERS OF STAFF</b>		<b>CHILDREN</b>	
<b>VOLUNTEERS</b>		<b>ROUTE</b>	
<b>POLICE CHECK</b>			
<b>ACTIVITY</b>		<b>SPECIAL NOTES</b>	

**D. Checklist of requirements prior to visit**

1.	Approval by Headteacher (verbal)	YES	NO
2.	Appropriate information sent to parents and consent obtained	YES	NO
3.	Child protection vetting carried out	YES	NO
4.	Exploratory visit completed	YES	NO
5.	Clear definition of adult roles and responsibilities outlined	YES	NO
6.	First aid arrangements made	YES	NO
7.	Emergency arrangements in event of accident or illness made	YES	NO
8.	Emergency contact details for all adults/children on visit obtained – to be taken on Outing	YES	NO
9.	Procedures and methods of communication in event of an emergency in place	YES	NO
10.	Consideration given to suitability of clothing and equipment and checks carried out where appropriate	YES	NO
11.	Risk assessment of specific activities carried out (where appropriate)	YES	NO
12.	Suitable preparation taken place (training and/or briefings)	YES	NO

**E. Declarations and Approvals**

Declaration by Visit Leader / Visit Co-ordinator:

1. Signed: ..... Date: .....

Approval and Declaration by the Headteacher: *I approve the above visit. I am satisfied that the staff organising and taking part in the above visit have the necessary qualifications, knowledge, experience and skills so that they are aware of and have made arrangements to deal with any particular risks the trip may have. I have seen and am satisfied with the written risk assessments referred to above.*

2. Signed: ..... Date: .....

**Appendix One**
**Information for parents (check list)**

You should make the following available to parents (as appropriate):

1.	Dates of visit	
2.	Objectives of visit	
3.	Times and locations of departure and return	
4.	Mode(s) of travel	
5.	The size of the group and the level of supervision	
6.	Details of special education or medical needs	
7.	Procedures for pupils who become ill during visit	
8.	Names of group leader, other staff and any accompanying, non-teaching adults	
9.	Names and telephone numbers of contacts while visit is taking place. Note: If these include mobile phone numbers, the Group Leader should make sure that these phones are always fully charged and switched on and that transmission is possible in the area of the visit.	
10.	Details of the activities planned and how the assessed risk will be managed.	
11.	Clothing and equipment to be taken	
12.	Money to be taken	
13.	Details of the cost of the visit and the methods of payment	



**Appendix Three**
**THE PACE CENTRE**
**RISK ASSESSMENT FORM**
**1. Risk To: (who could be harmed)**

Staff Member   
  Child   
  Parent   
  Visitor   
  Other (Please specify)

Name: .....

Room or Area:

**2. Identified Hazard:**
**3. Risk Involved: (Give consideration to numbers of people affected – include how they may be harmed)**
**Evaluate Risks (circled)**

**4. Effect:**    Major  
                   (Serious)  
                   Slight

**5. Likelihood:**    High  
                           ( Medium )  
                           Low

**6. How can we reduce the risk?**

**8. Action (Identify tasks and people responsible as result of assessment)****9. Review Date****10. Signed**

.....

**Form Completed By:**.....**Job Title:**.....**Date:**.....**11. Signatories of those present and who were involved in assessment:**

.....

.....

.....

**Supervisor** .....**Date:**.....

