

School Visit Health Precautions



POLICY FOR HEALTH AND SAFETY OF PUPILS ON EDUCATIONAL VISITS

Vranch House School strives to ensure that all pupils and staff are safe at all times both within school and on educational visits. It recognises the advice and guidelines given in Health and Safety of Pupils on Educational Visits (HASPEV) and The Outdoor Education Advisers' Panel (OEAP) that supports Local Authorities, schools and Academy Groups in England, Wales and Northern Ireland.

- The Educational Visits Coordinator (EVC) is the Head of Education. All visits must be approved by the EVC in advance.
- The Class Teacher must complete a Vranch House Educational Visits pack prior to the visit and submit this to the EVC for approval.

Forms to be completed and verified by the EVC before the trip can go ahead:

- Planning pre-visit stating Educational reason for the trip purposes and approximate costings
- Risk Assessment if risks posed during this trip are not adequately covered by the Standard Operating Procedure Risk Assessments for all children intending to be included in this off site activity.
- Educational Visits Off-site form to be completed on the day and left with Reception and Head of Education

Forms to be completed after the visit has taken place:

 Evaluation post-visit – evaluating whether the educational outcomes envisaged on the Planning pre-visit form were met by this visit and whether or not this trip stayed within the budget plan and Risk Assessment competed pre-visit.

(A copy of these forms are in the appendix to this document).

- Details of the following must be included as part of the above forms:
 - Person responsible for Emergency File and Emergency Drugs
 - Names of all pupils and adults on the visit
 - Approximate schedule with timings
 - Letter sent to parents with approval slip
 - o Information on any special medical requirements or training for the trip
 - Analysis of factors which may cause risk to students, staff or volunteers
 - Action to be taken to mitigate risk
 - o Details of the nearest hospital for A&E depending upon the location of the visit
- Full consultation should be made by the Class Teacher with the School Nurse prior to the visit.



 The member of staff in charge of the Emergency File/Drugs <u>must</u> ensure that these are kept with the children at all times. If the group splits up, these <u>must</u> stay with the relevant child/children. The file/drugs are to be returned to the School Nurse on duty as soon as the group return to Vranch House.

- Completed and approved Educational Visits Forms should be circulated to Reception, School Nurse, Therapy Assistants and School Kitchen, not less than one weekprior to the visit. A copy should be retained in the Teacher's File in class.
- A mobile phone will be taken on all visits and held by the Class Teacher.

Further Information

Useful Documents (available in Head of Education's Office)

DfES Health and Safety of Pupils on Educational Visits

DfES Standards for LEAs in Overseeing Educational Visits – Part 1 of a 3-Part

Supplement to Health and Safety of Pupils on

Educational Visits

OEAP The Outdoor Education Advisers' Panel (OEAP),

http://oeapng.info/

Revised January 2020 Review 2023



EDUCATIONAL VISITS Planning pre-visit



VRANCH HOUSE RISK ASSESSMENT form to be completed and submitted to Heau or Education with this form at least one week before the day of this visit.

<u>tins 10</u>	at least one week before the day of this visit.
CHILDREN ON VISI	T ADULTS ON VISIT
	112 62 18 611 12 22 1
Educational reason for this	visit
Curriculum area or Individual outcomes addressed	How will this visit will meet the areas or outcomes stated?
A	
В	
С	
D	
Approximate cost of this tri	ip
Total cost of trip, to	Cost per pupil, to nearest
nearest whole pound	whole pound
£	£
How do you propose to fun	d this trip?
Vranch House budget	Parental Contribution (Delete as appropriate)
Visit Approved	
	Head of Education



EDUCATIONAL VISITS Evaluation post-visit

Did the trip meet the Educational reason for this visit?

Curriculum area	How well did this visit meet the areas or outcomes stated at point of planning?
or Individual	
outcomes	
A	
В	
C	
D	
D	

Were there any accidents or incidents on this trip? YES /NO(delete as appropriate)

Did the Risk Assessment adequately cover this trip? YES /NO(delete as appropriate)

Was this trip conducted within the planned cost? YES /NO(delete as appropriate)

Would you consider repeating this trip?

YES /NO(delete as appropriate)

Copies:

Teacher's File
School Nurse
Reception
Kitchen
Therapy Assistants





EDUCATIONAL VISITS

A COPY OF THIS FORM MUST BE TAKEN ON VISIT

Date:	• • • • • • • • • • • • • • • • • • • •	•		
Venue:			Tel No:	
Group Leader:			Mobile No:	
Driver white bus:				ormed:
*Responsible for Emergency	File:			
kept with the children a	t all times drugs are	. If th	<mark>e gro</mark> up splits up, these	must ensure that these are must stay with the relevant urse on duty as soon as you
CHILDREN ON	VISIT		ADULTS	ON VISIT
Are additional seats requir If using two buses, please a				
Approximate Schedule:		Leav	veSchoolReturn	to School
Letter Sent to Parents:		Date	e letters sent	
		Perr	nission slips signed & returno	ed
Packed Lunches Organised:		Date	e How Mar	ny
CHECKLIST TO TAKE (ON TRIP			
Mobile Phone		Copy	of Risk Assessment Form	
Emergency file / Drugs		Camer	a	
Blanket & Towels		Money	y	
Packed Lunches		Comfo	ort Bag	



Risk Assessment-

VRANCH HOUSE RISK ASSESSMENT form to be completed and submitted to Head of Education with this form at least one week before the day of this visit.

Ask school nurses if any special medical requirements or training is needed for the trip; i.e. drugs, equipment, emergency protocols, emergency telephone numbers, oxygen and suction equipment.

NEAREST HOSPITAL IN EMERGENCY					
Fire Evacuation					
If visiting other premises on the visit, the Group Leader must check fire evacuation procedures prior to visit, make a note of procedures and assess whether it is necessary to take a transfer seat or transfer sheet.					
IN EVENT OF EMERGENCY CONTACT					
Head Teacher or School Nurse Tel: 01392 468333					
<u>Visit Approved</u>					
Head of Education					
Copies: Teacher's File School Nurse					
Reception					
Kitchen					
Therapy Assistants					



To be returned with 'Educational Visits' form at point of submission to HoE.

R	ISK	ΔS	SF	22	M	FN	JT
\mathbf{r}	JUL	AJ	பட	JJ	IVI	LI	4 1

ACTIVITY / ENVIRONMENT:						
COMPLETED BY:		ASSESSMENT DATE:		DATE OF VISIT:	Mous	
A. HAZARD List significant hazards which may result in harm to pupils, staff or property	B. POTENTIAL HARM Give a value (see below)	C. LIKELIHOOD Give a value (see below)	D. RISK B + C =	measure w	ual to or greater than 5, what will be taken to reduce the AL HARM or LIKELIHOOD	F. RESULT t WillCONTROL reduce the RISK to less than 5? If not, review activity.
	1					
B. POTENTIAL HARM: 1 = distress 4 = major inj	s caused, 2 jury e.g. cut or ot		nwanted behavior iring First Aid,		3 = minor injury e.g. graz us injury e.g. requiring parame	
C. LIKELIHOOD: 1 = highly unlikely	/. 2 = unlik	(elv. 3 :	= mav occur.	4 = hiah r	probability. 5 = will de	efinitely happen

This risk assessment template is for use by Vranch House employees and is adapted from the model document produced by Devon County Council, Torbay Council and associated schools. Its purpose is to assist the planning and management of visits and activities. It identifies the common hazards and risks associated the activity stated and the primary means by which risks are controlled. Before undertaking the activity group leaders must also make an assessment of any significant risks which are specific to their particular visit, venue or group.



