

SAMPLE POLICY AND PROCEDURES FOR OVERNIGHT EXCURSIONS

(e.g. schoo/college camps, excursions to Canberra and Bathurst)



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Purpose of Policy and Procedures

Xavier Catholic College is committed to providing a safe and supportive learning environment for its students, staff and volunteers. This commitment includes the health and safety of staff and students when conducting curriculum activities at college or other locations.

Xavier Catholic College excursions enhance student learning by providing the opportunities for students to participate in curriculum-related activities outside the normal college routine. College activities are well planned curriculum-related activities that aim to maximise student learning experiences. All planned college excursions should be approved by the college principal and when more than one college is involved, principals of all participating schools/colleges should approve the excursion.

To ensure the health and safety of students and staff, schools/colleges are required to proactively manage all aspects of variations to college routine. The school's/college's duty of care to students extends to college excursions and camps which are integral to student educational programs. Activities conducted away from schools/colleges may increase risks and therefore the standard of care required must reflect the increase in identified risks.

It is important when considering overnight excursions that the college is able to demonstrate that activities have been thoroughly planned to protect students, staff and others whilst undertaking the activity. **Xavier Catholic College** recognises the additional responsibility and level of care that must be undertaken when students are taken by their college for overnight excursions.

This sample policy is intended to clarify requirements for the planning of overnight excursions so that legal obligations are met and that college values are upheld in what is undertaken. It will also provide a suggested formal procedure for obtaining the necessary approvals for excursions of this kind.

Role of the Principal

While recognising that excursions can have significant educational benefits, **Xavier Catholic College** is aware that such activities can be disruptive to academic study, both for students undertaking the excursion and for those students whose teachers are participating and are therefore absent from college. It also places additional financial pressures on parents.

In considering whether to proceed with an excursion of this type, the Principal must weigh carefully the educational value of a proposed excursion with the total needs and resources of the college and the financial burden for families of students. Consideration should be given to whether the excursion will provide students with significant educational opportunities not available by other means.

In planning excursions, Principals and staff need to be conscious of the legal and moral responsibility for student welfare that accompanies such activities. Arrangements for

care and supervision must reflect the greater degree of risk to students that can exist when travelling long distances within Australia.

Principals need to communicate to parents that such excursions are approved college activities and that staff will exercise the appropriate duty of care. Principals should consider the cost of overnight excursions and the accessibility to students whose families may be experiencing financial constraints. Excursions that would place financial pressure on a significant number of families should not be undertaken.

Teachers

Staff members choose to take part in such excursions. No obligation is to be placed on them to participate in or to organise excursions. No extra remuneration other than reimbursement of genuine pre-approved expenses is to be paid in respect of such excursions.

Accommodation and bathroom arrangements are to be such that no staff member or adult is placed in a position where there is potential for allegations of improper conduct to be made. For co-educational groups, it is advisable that both male and female supervisors are in attendance.

When it has been determined there is an educational need for an overnight excursion, the person planning the event must ensure all necessary requirements are met in relation to budget and number of supervising teachers to support the number of students attending.

A comprehensive risk assessment of the proposed excursion is fundamental. A formal proposal including a comprehensive risk assessment and management plan should be presented to the Principal for approval prior to the event being advertised.

In case of illness, accident or other emergency there must be a plan of action and agreed notification procedure approved by the Principal prior to departure. At least one teacher member of the touring party must have a current qualification in First Aid and all should have CPR. Alcohol must not be consumed by teachers or helpers whilst on tour and in control of students.

Students

The *Disability Discrimination Act* makes it unlawful for a college to subject a student to any disadvantage on the basis of his / her disability. All reasonable efforts must be made to enable disabled students to attend excursions with their classes, including thoughtful selection of excursion venues and activities in the first instance.

An updated college medical form must be obtained for each student and a **copy** taken with staff on the tour. Prior to departure the staff member organising the excursion must read each medical form so that he/she is aware of potential medical emergencies that may arise such as asthma attacks or serious allergies

On the rare occasion where it is proposed that a student or group of students will participate in an independent activity without the direct supervision of a staff member, it is imperative that the parent or caregiver be fully informed of, and agrees with the arrangements. The signed approval of the parent or caregiver should be obtained.

Supervision Arrangements

When determining the ratio of adults to students required for adequate supervision of overnight excursions, the following factors should be taken into consideration:

- age, capability and number of students
- individual student's educational and behavioural needs
- individual student's medical and physical requirements
- rationale for the activity
- identified risks
- adequate instructions for students and supervisors
- provision of sufficient safeguards
- experience, qualifications and insurance status of commercial excursion organisers (if used)
- health plans for individual students

Parents, Caregivers and Volunteers

Parents, caregivers and volunteers ('volunteers') chosen to accompany students should be selected according to the expertise they have relevant to the activities undertaken and must be briefed on arrangements prior to the excursion. Written information should be provided to volunteers including information about their role, hazards that might be encountered and precautions to be taken.

All volunteers should be asked to sign a declaration that they are aware of the risk management plan, accommodation arrangements, supervision details and the itinerary.

Arrangements need to be in place to facilitate the return to their parents of any student who exhibits behaviour that seriously endangers themselves or others. Written confirmation from parents should be obtained to acknowledge agreement to the arrangements proposed.

Excursion Records

The Principal is responsible for the retention of records related to the excursion. This includes a copy of any advice given to parents, costs, approval letters, risk assessments and administrative and travel details. In the event of an injury to a student or property damage, records relating to the excursion must be retained until the injured party reaches the age of 24, or for seven years, whichever is the longer.

Application for Overnight Excursion

School	Name of College			
	Name of Organiser		Position	
	Application Date		ID	
Excursion	Destination			
	Date from		Date to	
	Description			
	Purpose			
	Curriculum context			
	Educational value			
	Outdoor activities			
	Draft itinerary	<input type="checkbox"/> Itinerary attached <input type="checkbox"/> Travel arrangements included		
Student dress	<input type="checkbox"/> College uniform <input type="checkbox"/> Mufti <input type="checkbox"/> Other: _____			
Cost	<input type="checkbox"/> Budget attached <input type="checkbox"/> Students to subsidise adult travel?			
Students and Personnel	Number of students		Gender	<input type="checkbox"/> F <input type="checkbox"/> M
	Year group(s)			
	Genders, names and roles of adult personnel attending:			
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		
	<input type="checkbox"/> F <input type="checkbox"/> M	<input type="checkbox"/> Teacher <input type="checkbox"/> Parent <input type="checkbox"/> Other: _____		

First Aid

Gender, name and of CPR/first aid-qualified college personnel attending:

Date qualifications expire

☐ F ☐ M

☐ F ☐ M

Other Relevant Notes

Approvals

Name

Signature

Date

Principal

**Other
relevant
authorities
if required**

Excursion Budget

Practical Details	Application date	_____	ID	_____
	Name of organiser	_____	Position	_____
	Signature of organiser	_____		
	Excursion destination	_____		
	Year group attending	_____	Subject	_____
	Date from	_____	Date to	_____
	Number of days	_____		
	Numbers attending:	Paying students	_____	
		Hardship students	_____	
		Paying adults	_____	
Method of travel	_____			

Cost Details		Total	Per student / paying adult
	Fares	_____	_____
	Accommodation	_____	_____
	Meals	_____	_____
	Entries	_____	_____
	Other	_____	_____
	Travel/medical Insurance	_____	_____
	Sub-total	_____	_____
	Other spending money	_____	_____
	Total	_____	_____
Cancellation allowance	_____	_____	
Suggested charge per student / paying adult	_____		

Approvals	Final approved charge per student	<div style="border: 1px solid black; width: 200px; height: 30px;"></div>		
	Approved by	Name	Signature	Date
	Coordinator	_____	_____	_____
	Financial Officer	_____	_____	_____
Principal	_____	_____	_____	_____

Parent / Caregiver Excursion Consent and Student Medical Information Form

Details

College _____
 Excursion _____
 Date from _____ Date to _____

I, _____ parent / guardian of _____
 (name of parent or guardian) (strike-out inapplicable) (name of student)

give my:

Permission

1. permission for my child named above to attend the excursion described above, which I understand has been approved by the college Principal,
2. consent for my child to travel on or in any form of public or private transport where such transport is deemed by the college to be necessary or desirable for the safe conduct of the excursion,
3. consent for my child to participate in all activities, outings, trips and functions arranged as part of this excursion,
4. consent for the college, by its servants or agents:
 - to seek such medical or dental advice on behalf of my child as seen fit in the event of accident or illness, and
 - if, in the opinion of an attending medical or dental practitioner or medical officer ('*health practitioner*') 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 that *health practitioner* giving such attention or treatment

provided that reasonable efforts are made to inform me of any serious injury or illness,
5. certification that the consent which I have given in paragraph 4 is valid at all times while my child is in the custody of the college while attending or participating in the excursion,
6. certification that I understand that the college will take reasonable care in the event of my child suffering accident or illness but that it will not be responsible for the costs of any medical or dental attention or treatment administered to my child in such event nor will it be directly responsible for any act or omission of any *health practitioner* attending or treating my child, and
7. certification that if my child should bring or consume drugs, alcohol or cigarettes or otherwise exhibit behaviour that seriously endangers themselves or others, I will bear the full cost of return transport home for my child and any adult supervisor that may be required to ensure the safety of my child during that transport.

Signature _____ Date _____
 (Parent / Guardian)

Health Fund

Student's date of birth

Medicare no.

Position on card

Private health fund

Membership no.

Ambulance cover

☐ Yes ☐ No

Is your child in good health?

☐ Yes ☐ No

Does your child suffer any chronic illness?

☐ Yes ☐ No

Details

Does your child suffer any disability?

☐ Yes ☐ No

Details

Does your child suffer any allergy?

☐ Yes ☐ No

Details

Has your child suffered any acute illness in the past four months?

☐ Yes ☐ No

Details

Has your child been treated by a doctor in the past four weeks?

☐ Yes ☐ No

(If 'Yes' please attach a medical certificate outlining treatment and statement of your child's fitness to attend this excursion)

Has your child had any major surgery?

☐ Yes ☐ No

Details

Does your child need to take any form of medication on the trip?

☐ Yes ☐ No

Medication

Dosage

Frequency

Medical purpose

This medication is to be kept on the excursion by:

☐ my child (secondary student)

☐ nominated staff member (primary student)

Do you give permission for Panadol to be administered if needed?

☐ Yes ☐ No

Has your child had a Diphtheria Tetanus Toxoid booster injection?

☐ Yes ☐ No

Year of booster injection

Medical Information

Diet

Does your child have any special dietary requirements?

☐ Yes ☐ No

Details

Emergency

Contact details in case of accident or illness:

Name

Relationship to student

Phone (home)

Phone (work)

Phone (mobile)

Name

Relationship to student

Phone (home)

Phone (work)

Phone (mobile)

Authority

I understand that the information I provide on this form will be handled in accordance with the Diocesan Privacy Policy and the *Privacy Act 1998*.

Signature

Date

(Parent / Guardian)

Excursion Emergency Contact Information

Group	College			
	Name of group leader			
		Phone (home)	Mobile	Email
	Contact details			
		Date	Time	Location
	Departure			
	Return			
		Students	College staff	Other adult helpers
	Numbers attending			
	Total group numbers			
Is there an emergency contact list for everyone in the Group? <input type="checkbox"/> Yes <input type="checkbox"/> No (If 'Yes', attach the list to this sheet. If 'No', assemble the list and attach it to this sheet)				
College	Emergency contact details during college hours:			
		Phone (home)	Mobile	Email
	Principal			
		Phone (home)	Mobile	Email
	Other			
	Emergency contact details out of college hours:			
		Phone (home)	Mobile	Email
	Principal			
		Phone (home)	Mobile	Email
	Other			
Travel Company	Travel company contact details:			
	Company	Name		
		Address		
		Phone	Fax	Email
	Contact personnel	Name		
		Phone	Mobile	Email

Company	Additional contact person	Name	_____		
		Phone	Mobile	Email	_____

Accommodation	Accommodation details:				
	Type	<input type="checkbox"/> Hotel/motel <input type="checkbox"/> Tourist park <input type="checkbox"/> Sport & rec centre <input type="checkbox"/> Campus			
		<input type="checkbox"/> Other:			
	Venue	Name	_____		
		Address	_____		
Phone		Fax	Email	_____	
Contact person	Name	_____			
	Role / position	_____			

Other (Phone Tree)	Other emergency numbers:			
	Name	Phone	Mobile	Emergency role
	_____	_____	_____	_____
	_____	_____	_____	_____
	_____	_____	_____	_____

Excursion Risk Management Process and Plan¹

The purpose of excursion risk management is to make excursions as safe as possible. Risk management processes are used to identify hazards, assess risks and then eliminate or control risks associated with excursions.

The degree of planning required is influenced by the nature of the excursion, the level of risk and the student group. For excursions that have previously been planned and conducted, previous risk management plans may be reviewed, updated where required and reused.

An important component of the risk management process is consultation, which should include staff, and where appropriate external venue providers and parents.

Steps in developing an Excursion Risk Management Plan

1. List the excursion activities

List the activities of the excursion by breaking the whole excursion into its parts e.g. getting to and from the venue, being at the venue, each of the major activities at the venue, having meals, staying at the accommodation etc.

2. Identify the hazards

Determine the hazards associated with the activities listed. Consider hazards associated with travel, the venue, activities at the venue, equipment used in the activities, the environment, people (e.g. behaviour and medical conditions), and accommodation.

3. Assess the risks

Using the risk assessment matrix, determine the seriousness of the risks associated with the hazards by considering both the likelihood and severity of risks. This gives you a risk ranking from 1 being the most serious to 6 being the least serious.

4. Eliminate or control the risks

Consider the most suitable control strategies for each of the identified hazards using the hierarchy of controls.

5. Document a Plan

Document the Excursion Risk Management Plan.

6. Communicate the Plan

Communicate the Plan to excursion supervisors. Provide relevant information to participants and their families.

7. Monitor and review the Plan

Monitor the effectiveness of controls and change if necessary. Review the risk assessment if an incident or a significant change occurs.

Principals should retain the documented Plan as verification of the planning undertaken. Documentation will aid communication of the Plan, and can also be used in future planning of excursions.

Planning Process and Hazard Consideration Checklist¹

The following Checklist is not exhaustive but is provided to guide the process of excursion risk management and to help prompt the identification and pro-active control of safety issues that may be relevant to overnight excursions so that those participating can safely enjoy the excursion.

	Process Component	Completed? (☒ when Yes)
1. Check Records	Is a previous risk assessment for the excursion available?	<input type="checkbox"/>
	If available, has it been reviewed and updated with reference to:	
	• the process outlined in this checklist	<input type="checkbox"/>
	• potential effect of changes to the student group	<input type="checkbox"/>
	• individual student health care plans for students in the group	<input type="checkbox"/>
	• effectiveness of risk controls previously implemented	<input type="checkbox"/>
2. Obtain Venue Information, Assess and Document	• any incidents that occurred previously on the excursion	<input type="checkbox"/>
	Is venue and safety information already on file at the college?	<input type="checkbox"/>
	Does information on file or obtained from the venue include, if relevant:	
	• public liability cover	<input type="checkbox"/>
	• accreditation of venue staff for the task/activity	<input type="checkbox"/>
	• adequate access and provision for persons with special needs	<input type="checkbox"/>
	• emergency procedures and relevant training of venue staff	<input type="checkbox"/>
	• known hazards and controls related to proposed activities	<input type="checkbox"/>
	• mobile phone and emergency services access for the excursion	<input type="checkbox"/>
	• required equipment and/or machinery availability	<input type="checkbox"/>
	• safety of required equipment and/or machinery in terms of:	
	• regular maintenance	<input type="checkbox"/>
	• good operating condition	<input type="checkbox"/>
	• full function of safety features	<input type="checkbox"/>
	• licensing of construction, maintenance and repair personnel	<input type="checkbox"/>
	• adequacy of facilities (e.g. refreshments, showers, toilets etc)	<input type="checkbox"/>
	• catering procedures for persons with food allergies	<input type="checkbox"/>
	Have parents or carers of students with food allergies been consulted?	<input type="checkbox"/>
	Has the venue been informed of any severely allergic students':	
	• anaphylactic condition and consequences?	<input type="checkbox"/>
• anaphylaxis trigger foods?	<input type="checkbox"/>	
Has previous and venue safety information been assessed?	<input type="checkbox"/>	
Have the assessments been recorded in the Risk Management Plan?	<input type="checkbox"/>	
Are the assessments attached to the Risk Management Plan?	<input type="checkbox"/>	

Process Component		Completed? (☒ when Yes)
3. List Activities and Associated Considerations	Have key stakeholders been consulted in analysing activities?	<input type="checkbox"/>
	Have all excursion activities been listed, including:	<input type="checkbox"/>
	• travel to and from the venue and while en route, including:	<input type="checkbox"/>
	• mode of transport	<input type="checkbox"/>
	• walking on, off and between modes of transport	<input type="checkbox"/>
	• crossing traffic routes	<input type="checkbox"/>
	• using drill or emergency evacuation routes	<input type="checkbox"/>
	• each activity programmed	<input type="checkbox"/>
	• moving around and being at the venue, listing for example:	<input type="checkbox"/>
	• open water, cliffs, crowds	<input type="checkbox"/>
	• sporting, elevated or high-risk equipment at the venue	<input type="checkbox"/>
	• weather, fire, flood, storm, plant, terrain and living creatures	<input type="checkbox"/>
	• meals at the venue (and off site)	<input type="checkbox"/>
	• common allergens (latex, pollens, stings, bites, dusts) present	<input type="checkbox"/>
	• people factors, for example:	<input type="checkbox"/>
	• student ages, maturity and skill levels	<input type="checkbox"/>
	• known problematic student behaviours	<input type="checkbox"/>
	• child protection issues	<input type="checkbox"/>
	• medical issues and student Health Care Plan requirements	<input type="checkbox"/>
	• accommodation factors such as:	<input type="checkbox"/>
• supervision requirements	<input type="checkbox"/>	
• standard of facilities	<input type="checkbox"/>	
• security	<input type="checkbox"/>	
4. Identify and List all Hazards	Have all activity, excursion and related hazards been identified?	<input type="checkbox"/>
	Have all previous, venue, activity and related factors been considered?	<input type="checkbox"/>
	Has the risk arising from each hazard identified been assessed?	<input type="checkbox"/>
	Have incident analyses from previous excursions been considered?	<input type="checkbox"/>
	Have relevant Health Care Plans been updated for excursion factors?	<input type="checkbox"/>
<p>NOTE: Anaphylaxis is potentially life threatening and can result in severe and sudden reactions occurring when affected persons are exposed to allergens (such as a food or insect bites). Reactions usually begin within minutes of exposure and can progress rapidly over a period of up to two hours or more. Excursions may pose hazards that differ from those in the college environment and Health Care Plans must be updated accordingly.</p>		

Process Component		Completed? (☑ when Yes)
5. Assess Risk	Has the risk associated with each identified hazard been assessed?	<input type="checkbox"/>
	Was the DET risk assessment matrix used for the assessment?	<input type="checkbox"/>
	Has each risk and rating been recorded in the Risk Management Plan?	<input type="checkbox"/>
	Have risks been prioritised for management based on risk ratings?	<input type="checkbox"/>
6. Plan Risk Management	Have risk management strategies been developed for each risk?	<input type="checkbox"/>
	Do the risk management strategies follow the hierarchy of controls?	<input type="checkbox"/>
	Do the risk management strategies include actions to ensure:	<input type="checkbox"/>
	Child protection procedures are followed?	<input type="checkbox"/>
	Health Care Plans are updated for each student applicable?	<input type="checkbox"/>
	All necessary aides are safe to use and available?	<input type="checkbox"/>
	All necessary equipment is safe to use and available?	<input type="checkbox"/>
	Are all risk management strategies in the Risk Management Plan?	<input type="checkbox"/>
7. Document Plan	Has the Risk Management Plan been documented?	<input type="checkbox"/>
	Does the Risk Management Plan follow the pro-forma provided?	<input type="checkbox"/>
	Does the Risk Management Plan include:	<input type="checkbox"/>
	Emergency response and management procedures?	<input type="checkbox"/>
	Incident response and management procedures?	<input type="checkbox"/>
8. Communicate Plan	Has each excursion supervisor been provided with:	<input type="checkbox"/>
	A copy of the completed Risk Management Plan?	<input type="checkbox"/>
	Information about his or her emergency response responsibilities?	<input type="checkbox"/>
	Has relevant safety information derived from the Plan been provided to:	<input type="checkbox"/>
	Each person participating in the excursion	<input type="checkbox"/>
	The parent or carer of each student participating in the excursion	<input type="checkbox"/>
9. Review	Was the Risk Management Plan reviewed after the excursion?	<input type="checkbox"/>

Excursion	Excursion	_____	Date	_____
	Person completing checklist	_____		
	Position	_____		
	Signature	_____	Date	_____

Risk Assessment Matrix¹

		How serious could the illness or injury be?			
		Death or permanent disability	Long-term illness or injury	Medical attention and days off	First aid attention
How likely is injury or illness to occur?	Very likely Could happen frequently	1	1	2	3
	Likely Could happen occasionally	1	2	3	4
	Unlikely Could happen but only rarely	2	3	4	5
	Very unlikely Could happen but probably never will	3	4	5	6

Risk Ranking		
1: EXTREME Deal with hazard urgently	3: HIGH-MODERATE Deal with hazard as soon as possible	5: LOW Deal with hazard when able
2: HIGH Deal with hazard immediately	4: MODERATE Deal with hazard as soon as practicable	6: VERY LOW Deal with hazard when able

Risk Management Guidelines - Hierarchy of Control Measures¹

The following hierarchy of risk elimination and control measures is sequenced with the most effective measure at the top of the hierarchy. Effectiveness diminishes as the hierarchy descends, making higher level and combination measures preferred and recommended.

Eliminate	<p>Eliminate the item or activity, for example by:</p> <ul style="list-style-type: none"> not undertaking particular high risk activities (eg. abseiling in high wind) not using high risk equipment <p>If elimination <i>isn't</i> reasonably practicable, control the risk as far as practical using the hierarchy of controls following. Select the highest possible control and/or use a combination of controls to minimise the risk.</p>
Substitute	<p>Replace the activity, material, or equipment with a less hazardous choice such as.</p> <ul style="list-style-type: none"> choosing an easier bushwalk; using an alternative nutritious food instead of food known to cause severe allergic reactions (eg. peanut butter or tree nuts)
Isolate	<p>Isolate the hazard from the person at risk, for example by:</p> <ul style="list-style-type: none"> using distance and selecting a lunch location well away from the water ensuring a coastal walk has adequate safety fencing.
Engineer	<p>Use equipment with built-in protective mechanisms to counteract hazards, for example by:</p> <ul style="list-style-type: none"> hiring coaches with seatbelts and ensuring these are worn during travel ensuring equipment to be used has safety guards

<p>▼</p> <p>Administer</p>	<p>Establish and use safe procedures and practices such as:</p> <ul style="list-style-type: none"> • supervising students • giving clear rules, instruction and training (including by qualified instructors) for all people participating in activities involving risk • for students known to be severely allergic: <ul style="list-style-type: none"> • reviewing and updating Health Care Plans for the excursion • consulting with parents or carers and venue caterers about safe foods • ensuring a trained person with immediate access to an EpiPen is always with or near them
<p>▼</p> <p>Protect (PPE)</p>	<p>Always use appropriately designed and properly fitted clothing and equipment such as</p> <ul style="list-style-type: none"> • protective footwear • activity-appropriate clothing including hats and sunscreen • (for relevant students) medic alert bracelets or necklaces as appropriate • (for relevant activities) safety goggles, helmets or protective pads <p>in conjunction with other control measures identified from above.</p>

Excursion Risk Management Plan¹

College	_____	Principal	_____
Excursion destination	_____	Students	Group/class _____
Excursion description	_____		Number _____
	_____	Excursion coordinator	Name _____
Excursion dates	Departure _____		Contact phone _____
	Return _____		Venue safety information attached? <input type="checkbox"/> Yes <input type="checkbox"/> No
Accompanying staff	_____	Accompanying volunteers	_____
	_____		_____

Activities and Issues	Hazards Identified	Risk Rating	Risk Elimination and Control Measures	Person(s) Responsible	When Required

Activities and Issues	Hazards Identified	Risk Rating	Risk Elimination and Control Measures	Person(s) Responsible	When Required

Monitor and review the effectiveness of risk control measures following an incident or significant change and before the next excursion

Plan prepared by _____ Position _____

Signature _____ Date _____

Personnel consulted _____

Plan communicated to _____

Overnight Excursions Organisation Flowchart

