

YAPTON C. of E. PRIMARY SCHOOL



'I have come in order that you might have life - life in all its fullness'
John 10:10

Learning Outside the Classroom and Off-site Educational Visits Policy

**Approved by the Governing Body – Summer Term 2025
To be Reviewed Summer Term 2028**

1. Introduction

1.1 Yapton C. of E. Primary School provides many opportunities for its pupils to learn and develop through Learning Outside the Classroom (LOtC) activities and visits and recognise the key role they play in the development of an active curriculum. This encompasses both on-site and off-site learning, residential activities, environmental studies, sports, physical and cultural activities, and adventurous activities. Our aim is to ensure every member of our school community accesses LOtC activities throughout their curriculum and that LOtC is considered as an educational entitlement. The school's vision is to 'Live Life in all its Fullness'

1.2 The value of LOtC activities and visits are well recognised by the Governing Body and fully supported throughout the school by all staff. It is emphasised that a culture of safety must prevail and there is a need for careful planning and adherence to statutory procedures. The safety culture is such that children and young people are encouraged and supported to recognise hazards and manage risk in a way that supports their learning and development. Learning Outside the Classroom must be well managed with information communicated and responsibilities recognised as with any other learning that takes place within the school.

1.3 This document outlines the specific policies and procedures for Yapton C. of E. Primary School. It supplements and follows the advice and guidance contained within the following significant publications:

- WSCC's Regulations and Notes of Guidance for Learning Outside the Classroom Activities and Visits.

- WSCC's Adventurous Activities Reference Document.
- The Department for Education (DfE) published guidance Health and Safety on Education Visits
www.gov.uk/government/publications/health-and-safety-on-educational-visits/health-and-safety-on-educational-visits
- OEAP National Guidance www.oeapng.info.
- DfE advice on health & safety: responsibilities and duties for schools
<https://www.gov.uk/government/publications/health-and-safety-advice-for-schools>
- The Health and Safety Executive statement: "School Trips and Outdoor Learning Activities – Tackling the Health & Safety myths. available at:
<http://www.hse.gov.uk/services/education/school-trips.pdf>

2. Roles and Responsibilities

2.1 The **Governing Body** satisfies itself that the appropriate procedures, risk management processes and control measures are in place and that the documented guidance notes are being followed. All residential experiences need to be approved by the Governing Body due to potential liabilities both financial and those related to safety and health. Such approval must be recorded in the minutes of the Governing Body.

2.2 The **Head Teacher** is delegated by the Governing Body to approve all LOTC activities and off-site educational visits of a low risk, local, daily, or regular nature. This is recorded through use of the Local Area Visit form on EVOLVE

2.3 The **Educational Visits Co-ordinator** (EVC) ensures that all LOTC activities and visits follow the correct procedures. The person with these responsibilities will approve the Visit Leadership Team for every visit and monitor the risk management processes to ensure good practice. In addition, the following responsibilities and duties are undertaken:

- Support the Visit Leadership Team in identifying the purpose and outcomes for the visit and the selection, training and briefing of appropriate supervising adults and volunteer helpers. It is important to consider the continuing professional development needs of staff engaged in these activities.

- Ensure that Disclosure and Barring Scheme disclosures are in place, where necessary.
- Arrange Emergency Contact Duty Officer and draw up proper procedures to be followed in such an event. **See Emergency Response Plan**
- Keep records and make reports of incidents, accidents and 'near misses'.
- Review and regularly monitor policies and procedures.
- Liaise with the Outdoor Education Officer where necessary to ensure the proposed visit complies with the WSCC policies for Learning Outside the Classroom.

2.4 The Visits Leadership Team is responsible for identifying the purpose and outcomes for the visit. Significant hazards and their control measures will need to be recorded and attached to the EVOLVE visit form (available at <http://www.westsussexvisits.org>).

This will take account of:

- Generic hazards.
- Event specific hazards as identified from a pre-visit or through knowledge or experience of the environment, accommodation, the competence of the staff team, the group, and other factors such as transport.
- On-going hazards identified by the professional staff responding to changing circumstances and the success of planned activity and procedures. The participants and staff will be fully briefed on the purpose, outcomes, and the risk management process.
- All policies that exist within the school that must be applied when working off-site, for example safeguarding, behaviour policy, managing medicines etc.

2.5 Participants are encouraged to consider hazards involved in LOTC activities and off-site educational visits and to assist in the design of appropriate risk management strategies that support their learning. They

will be fully aware of the purpose and outcomes of the visit and understand expectations of behaviour. They will be able to evaluate the experience and the impact it has had on their learning.

3. Guidance Notes for LOtC Activities and Off-Site Educational Visits

To ensure good practice and compliance with the necessary regulations it is expected that:

3.1 All visit staff will familiarise themselves with the published advice and guidance.

Further information is available from the EVOLVE website (www.westsussexvisits.org).

Training for staff will be arranged by the school to include all aspects of supervision, on-going risk management (including being prepared to stop an activity that has become too hazardous) and how to deal with an emergency. Access to such training is also available through the Outdoor Education Officer.

3.2 In order to plan LOtC activities and visits the EVC should be involved in discussing plans at an early stage. Routine or local visits such as sports fixtures also need to be planned. It may be possible to approve a series of events on a termly or annual basis. No financial commitment should be agreed until all relevant approvals have been achieved.

3.3 Parental Consent and contact details must be available for the Emergency Contact and the Visit Leader to take on the visit. This can include digital copies issued via Parentmail. **See Appendix A**

3.4 The Local Area Visit Form available on EVOLVE is used to approve regular, low risk or routine visits such as sports fixtures. **See Appendix B**

3.5 An EVOLVE Visit form must be completed for all residential visits, overseas visits, visits out of county and or for all adventurous activities whether on-site or off-site. The form will need to be submitted to the LA, four weeks in advance of the activity or visit date and before the school becomes financially committed. Residential visits need the Governing Body's approval. School Journey Insurance should be purchased for educational visits and evidence should be attached to the EVOLVE form. Visit Leaders should avoid duplication of cover being provided by a tour operator, or external provider.

3.6 The OE2 form provides information on what WSCC expects an external provider to provide and deliver. It should be sent to any provider

being considered for the first time and attached to the EVOLVE form as evidence of the planning process. Please note WSCC 'check' a number of providers who are regularly used by WSCC establishments, these providers are listed on EVOLVE as 'checked'.

3.7 On return the Visit Leader must report to the EVC and, where necessary, an evaluation report should be completed to support any learning about a 'near miss' or where an incident took place the relevant reporting mechanism must be followed. If such a form was completed at the venue, there is a need to place such an occurrence on the record at the 'home' establishment.

In addition, it is highly recommended that an evaluation of the visit's purpose and outcomes is carried out to review the learning achieved and educational value. It is possible, within 28 days, to record this through the EVOLVE visit form.

3.8 Risk management forms should be completed and attached to the EVOLVE form when risks are perceived as significant. External providers will have their own risk management documents that can be used to help in this process. For certain activities an Adventurous Activity Licence is legally required (see www.hse.gov.uk/aala). If this is the case, the provider's licence number should be quoted instead of copies of their risk assessment documentation.

Appendix A



Yapton C of E Primary School
North End Road
Yapton
ARUNDEL
West Sussex
BN18 0DU

Date :

Email: office@yaptonschool.org
Phone: 01243551246 Website:
<http://www.yaptonschool.org/>

CONSENT FORM: SCHOOL TRIP (TITLE)

DATE:

Do you give your child permission to attend this event?

Please select an option

- ☐ Yes
☐ No

Child's Name

Parent/Guardian's Name

Parent/Guardian's Address

Parent/Guardian's Mobile Number

Parent/Guardian's Home Telephone Number

Name of Second Contact

Phone Number for Second Contact

Family Doctor's Phone Number

Family Doctor's Name and Address

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Has your child received vaccination against Tetanus in the last 10 Years?

- ☐ Yes
☐ No

Is your child receiving any medical treatment or taking any form of medication of any kind from either your Family Doctor or Hospital?

- ☐ Yes
☐ No

Has your child been given specific medical advice to follow in emergencies?

- ☐ Yes
☐ No

**If you have answered "YES" to any of the above questions then please give details here
(Including dosage of any medicines/tablets)**

Please ensure that any medication to be taken during the visit is clearly labelled with the child's name and dosage

--

Has your child had any of the following:

Please tick any that your child has had:

- ☐ Bronchitis
☐ Heart Condition
☐ Fits, Fainting, Blackouts
☐ Severe Headaches
☐ Diabetes

Has your child any allergies to any known drugs e.g. Penicillin, Paracetamol?

- ☐ Yes
☐ No

If you have answered "YES" to the above, please give details below

Has your child any other allergies e.g. material, food, food colouring, insect bites

- ☐ Yes
- ☐ No

If you have answered "YES" to the above, please give details below

Does your child suffer from any of the following?

Please tick if appropriate

- ☐ Illness or disability
- ☐ Travel Sickness

To the best of your knowledge, has your child been in contact with any contagious diseases, or suffered any recent condition that may become infectious or contagious infectious?

If yes, please detail below

The following medicines and external remedies will be available if required. Please indicate which ones can be administered to your child

- ☐ Savlon and Vaseline
- ☐ Calpol Infant/ Calpol 6+
- ☐ Antihistamine (For stings or insect bites)

If it becomes necessary for my child to receive medical treatment and I cannot be contacted by telephone or any other means to authorise this, I hereby give my general consent to any necessary medical treatment needed.

- ☐ Yes I give consent
- ☐ No I do not give consent

If there are any other details that you have not provided in this form that you think the teachers should be aware of then please write them below.

I understand that if any information should change between now and the date of the trip I will inform the office in writing to office@yaptonschool.org

- ☐ Yes I understand

Name:

Date:

Appendix B

The Local Area Visits Form available will be used for the following visits:

- Walking visits/activities within Yapton village

Yapton C of E Primary School **Consent Form for school trips and** **other off-site activities**

Please sign and date the form below if you are happy for your child to:

A) Take part in school trips and other activities that take place off the school premises; and

B) To be given first aid or urgent medical treatment during any school trip or activity

Please read the following important information before signing this form.

The trips and activities covered by this consent include: all visits (including residential trips) which take place during the school day.

The school will send you information about each trip or activity before it takes place.

You can, if you wish, tell the school that you do not want your child to take part in any particular school trip or activity.

Written parental consent will not be requested from you for the majority of off-site activities offered by the school – for example, visits to the local church/topic walks around the village/ visits to local amenities, as the school uses the local environment for learning in the wider community. Such activities are part of the school's curriculum and usually take place during the normal school day.

Please complete the medical information section below (if applicable) and sign and date this form if you agree to the above.

Medical information


Details of any medical condition that my child suffers from and any medication my child should take during off-site visits:


Parent/Carer Name (Print) _____

Parent/Carer Signature _____

Date _____

These visits will be 'pre-approved' by the EVC/Head Teacher at the start or each term.





Add Local Area Visit

Establishment

Local Authority ▾

Visit Name

Date:

Leaving at Returning at

10 ▾ : 00 ▾ - 10 ▾ : 00 ▾

Where are you going?

Number of Students

Staff member in charge

Simon Whitmore ▾

Comments

Cancel Continue



Appendix C

**PROVIDER STANDARDS
FORM OE2**



For completion by providers of outdoor education, visit venues and off-site activities to West Sussex schools and education establishments

Name & address of provider/organisation: -

The provider named above is asked to give careful consideration to the statements below and sign in the space at the end of the form that the standard of service provided will meet the conditions listed.

Please tick all specifications you meet, cross any you cannot meet or write N/A against any specification, which does not apply to your provision.

Section A must be completed by all providers and evidence submitted upon request. Section B (adventurous activities) must be completed if applicable.

Section A – ALL PROVIDERS

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1. The provider complies with relevant health and safety regulations, including the Health and Safety at Work etc Act 1974 and has a health and safety policy and risk assessments which are available for inspection. | <input type="checkbox"/> |
| 2. Accident and emergency procedures are maintained, and records are available for inspection. | <input type="checkbox"/> |
| 3. The staff have the experience, competence, and professionalism to work with the age range and abilities of prospective groups. | <input type="checkbox"/> |
| 4. The provider has a Code of Conduct, which can be provided in advance of any booking and to which visiting groups should adhere. | <input type="checkbox"/> |
| 5. All reasonable checks, including Disclosure and Barring Service checks, are made on staff that have frequent and intensive access to young people | <input type="checkbox"/> |
| 6. There are adequate and regular opportunities for liaison between visiting staff and the provider's staff and there is sufficient flexibility to make changes to the programme if necessary and the reasons for such changes will be made known to visiting staff. | <input type="checkbox"/> |
| 7. The provider has public liability insurance cover of at least £5million, (please attach a copy of your certificate of public liability insurance cover) (please note £10 million may be required for sub aqua and airborne activities). | <input type="checkbox"/> |
| 8. The provider will take all reasonable steps to allow inclusion and participation for any child or young people who has special needs or a disability, following a risk assessment process, in line with the Special Educational Needs and Disability Act 2001 and The Equalities Act 2010. | <input type="checkbox"/> |

- | | |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 9. The provider encourages responsible attitudes to the environment as an integral part of the programme. | <input type="checkbox"/> |
| 10. All vehicles are roadworthy and meet statutory requirements. Drivers are PCV qualified or operate with a small bus permit and local minibuss driving assessment. | <input type="checkbox"/> |
| 11. A current fire certificate covers all accommodation – or advice from a fire officer has been sought and implemented and a fire risk assessment has been completed. | <input type="checkbox"/> |
| 12. Security arrangements have been assessed and reasonable steps taken to prevent unauthorised persons entering the accommodation. | <input type="checkbox"/> |
| 13. Separate male and female sleeping accommodation and washing facilities are provided and staff accommodation is suitably located to ensure adequate supervision. | <input type="checkbox"/> |
| 14. Visiting groups will have access to appropriate first aid. Provider staff are practised and competent (appropriately qualified where required) to respond to accidents and incidents. | <input type="checkbox"/> |
| 15. There is a clear definition of responsibilities between the provider's and visiting staff regarding supervision and welfare of participants. | <input type="checkbox"/> |
| 16. All equipment used for activities is suited to the task and adequately maintained in accordance with current good practice. | <input type="checkbox"/> |

Section B – PROVIDERS OF OUTDOOR AND ADVENTUROUS ACTIVITIES

- | | |
|----------------------------------------------------------------------------------------------|--------------------------|
| 17. The provider meets the requirements of the Adventure Activities Licensing Service (AALS) | <input type="checkbox"/> |
|----------------------------------------------------------------------------------------------|--------------------------|

For AALS licensable activities the specification in this section may be checked as part of an AALS inspection. However, providers registered with the AALS are also asked to consider the statements below with respect to any activities or aspects of their provision not covered by the licence.

- | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 18. The minimum ratios of staff to young people for the activities conform to those recommended by the appropriate National Governing Body or, in the absence of this, the provider's Code of Practice and are informed by a risk assessment. | <input type="checkbox"/> |
| 19. The provider operates a policy for staff recruitment, induction and training which ensures that all staff, with a responsibility for participants, are competent to undertake their duties. | <input type="checkbox"/> |
| 20. The provider maintains a written code of practice, for each activity, which is consistent with relevant National Governing Body guidelines or, in their absence, recognised national standards. | <input type="checkbox"/> |
| 21. Staff competencies are confirmed by the appropriate National Governing Body qualification for the activity to be undertaken, or staff have had their competencies confirmed by an appropriately experienced and qualified technical adviser. | <input type="checkbox"/> |
| 22. Please list the adventurous activities you will be providing along with the <u>minimum</u> qualification or training your instructor will have. Where appropriate please give details of the nature of the location to be used: | |

e.g. Canoeing
Lake

e.g. BC Paddlesport Instructor

e.g. Sheltered

.....(continue
on a separate sheet if necessary)

*I certify that the organisation I represent complies fully with the requirements set out above, **except where I have deleted or crossed out the item**. The organisation will observe the above conditions during any visit from a West Sussex establishment*

Signed:

Date:

Name:

Position in Org:

Email (general):

Website:

Thank you for completing this form.

Please return it, along with a copy of your Public Liability Insurance Certificate, to the school/establishment that sent it to you, or alternatively send it to:-



Outdoor Education
The Grange, 2nd Floor,
County Hall
CHICHESTER
West Sussex
PO19 1RG
e-mail:
outdoor.education@westsussex.gov.uk