

## 01 Health and safety procedures

### 01.6 Short trips, outings and excursions

#### Planning and preparation

- Outings have a purpose with specific learning and development outcomes.
- If staff are 'borrowed' from another area to maintain ratios on an outing, they are fully briefed about the children they are accompanying.
- The excursion does not go ahead if concerns are raised about its viability at any point.
- Parents/carers are informed of an outing and staff check that consent forms on children's registration were signed.
- A minimum of two staff, one of whom must be Level 3 and hold a paediatric first aid certificate, accompany children on outings. There is a ratio of 1:2 for some disabled children, and children up to 3 years. Older children have a ratio of 1:4 as a maximum. Ratios are always dependent on the needs of individual children and a 1:1 ratio or higher may be needed. This should be assessed before every trip. If a child/young person has a specific health need that requires specialist training, then the allocated member of staff must be trained and confident to meet their medical needs.
- Children are specifically allocated to each member of staff/volunteer; they are responsible for supervising their designated children for the duration of the excursion. They are fully briefed about the children they are responsible for.
- Regular head counts take place when moving from one location to another.
- Parents/carers on outings are responsible for their own children only.
- Parents/carers who have undergone vetting as volunteers may be included in the ratio, if they have completed their induction and the manager has assessed and recorded that they are competent.
- A mobile phone belonging to the setting and small first aid kit is taken out.
- Staff make sure they have water, plastic cups, spare nappies/change of clothes and wet wipes for the children going out appropriate to the length of time they are out for.
- Sun cream is applied as needed and children are clothed appropriately.
- Children wear badges or 'high viz' vests with the name and number of the setting.
- Staff have emergency contacts, medication and equipment needed for children.

#### Risk assessment

- Risk assessment, if required, is completed prior to the outing and signed off by the setting manager and all staff taking part. Any existing risk assessments are reviewed/amended as required.

- Children with specific needs have a separate risk assessment if necessary.

### **Outing venue (larger outings)**

- Venues used regularly are 'risk assessed' and an initial pre-visit is made to look at the health and safety aspects. If pre-visits cannot be made, risk assessment is achieved by calling the venue and asking for their risk assessment.

### **Suspicious behaviour observed.**

If a member of staff, student, parent / carer or child / young person, notices that a member of the public is behaving suspiciously near a group of children / young people on an outing this is reported immediately to the designated lead for the trip or outing. Suspicious behaviour might include:

- A known person who should not have contact with a specific child / young person, i.e., as part of a Child Protection Plan or a Court Order, tries to approach the child.
- A member of the public is paying too much attention to the group or following them.
- A member of the public is taking photographs or videoing the group, or,
- any other behaviour that raises concerns for the safety of the children, including indecent behaviour.

The following actions take place dependent on the location of the concern:

#### **Inside a public building**

- The group stays together and the designated lead for the outing locates a security guard, or reception desk to report their concerns.
- The group returns to the setting immediately if the children have been upset, or the person acting suspiciously cannot be located by security staff.

#### **In a public outdoor area**

- The group stays together and moves away from the area where the person is behaving suspiciously. Moving towards a more densely populated area, or a 'safe' indoor space.
- If they are followed, the lead person phones the Police to report the behaviour.
- The lead person conducts a dynamic risk assessment to decide if they should challenge the behaviour, for example, '*please do not take photographs of the children.*', making sure that their actions do not cause alarm to the children or put themselves at any risk. Please note that in most circumstances the person acting suspiciously should not be approached – the safety of the group remains paramount.

- The Police are informed of the incident as soon as possible and a description of the person is given. The designated lead for the outing will act on the advice of the Police for the group to either remain at the site, or to return to the setting.
- On return to the setting a critical safeguarding incident form is completed, and the incident is reviewed with the Service Manager who will advise on how parents are informed.

For further guidance, refer to the insurance provider.

### **Larger outings checklist**

There is an identified lead person for the outing.

- The outing has an educational purpose and has been agreed with the setting manager.
- Risk assessments, if required, are completed/updated and shared with every staff, student/volunteer accompanying the children.
- Staff understand the potential risks when they are out with children and take all reasonable measures to remove/minimise risks.
- Bouncy castles and similar attractions are not accessed by children on an excursion.
- The designated lead is the last to leave the venue.
- The designated lead conducts a 'safety sweep' before, during and after the outing.

### **Further guidance**

Daily Register and Outings Record (Alliance Publication)

Introducing Forest School in the Early Years (Alliance Publication)

Preventing Accidents to Children on Farms (Health and Safety Executive 2013)