SCHOOL CAMPS AND EXCURSIONS POLICY

RATIONALE
Where school camps and excursions are conducted they shall be undertaken as an integral part of the educational program of the school and shall overall reflect authentic Catholic principles and values.

“School camps and excursions” are defined as activities generally conducted away from the school campus for educational and/or religious purposes. In special circumstances, a camp or excursion could take place at a school campus.

PRINCIPLES
1. School camps and excursions shall be designed to enhance the educational program offered by the school.

2. The Principal shall ensure that maximum emphasis is placed on the safety and well-being of all the participants.

3. The Principal, in planning school camps and excursions shall consider the needs of both students and their families. Particular attention shall be given to the needs of people from varying cultural backgrounds.

4. The Principal shall consider the financial burden on families of sending students to camps or excursions.

5. School camps and excursions are to be regarded as an extension of the school. The same code of conduct expected during school hours is expected of all students, staff and supervisors for the duration of the camp or excursion.

6. A duty of care exists at all times, as a teacher-student relationship exists throughout the camp or excursion.

7. Staff shall ensure that appropriate prayer/liturgical experiences form an integral part of the camp or excursion program.

PROCEDURES
1. All school camps and excursions policy statements are to be reviewed yearly depending on circumstances pertaining to that particular year eg. Camp type, venue, teachers/students involved, needs of particular students etc.

2. Consideration shall be given for a camp to be held annually/biannually involving the senior class depending on the class make-up and size.
3. School camps are to be of approximately five days/four nights duration when appropriate.

4. The Principal will ensure maximum emphasis is placed on the safety and well-being of all participants during school camps and excursions. The Teacher-in-Charge is to ensure all relevant documents are signed by parents/caregivers before children attend the excursion or camp. Documents are to include parental consent outlining details such as method of transport and activities to be undertaken.

5. Consideration is to be given to medical requirements of students participating on camps or excursions. Where an excursion is to be held for the duration of a whole or part of a day, the principal is to ensure all relevant medical documentation for students suffering from asthma or anaphylaxis, including individual emergency plans, are known by all relevant adults attending the excursion. The Principal will also ensure relevant documentation pertaining to any medical condition is taken on the camp.

6. Where a camp or excursion is likely to be strenuous or conducted in circumstances where participation could affect the medical condition of students, a detailed survey of medical needs of students shall be conducted by the teacher to determine the medical needs of the students who are to attend the camp or excursion. The Principal and/or Teacher-in-Charge is to collect signed documents by parents outlining:
   - Medical History and Parent Contact
   - Medical Notification
   - Individual Action Plans for Asthma and Anaphylaxis sufferers signed by a medical practitioner as per school’s Asthma and Anaphylaxis Policies
   - Any medical condition which may prevent a student from participating in a particular activity
   - Dietary needs

7. Specific written instructions and signed permission shall be obtained from parents for the administration of medication whilst on camp

8. An Emergency Plan for camp shall be determined in accordance with the School Camps and Excursions – Guidelines for Catholic Schools. The Emergency Plan will change according to the particular year, location, Principal, number of students, teachers and parent assistants attending the camp. The Principal is to brief staff members and parent assistants on roles within the Emergency Plan prior to the camp. Roles are to include:
   - Attending accident/emergency victim/s
   - Administering First Aid if appropriate
   - Ringing for assistance if needed
   - Accompanying accident victim/s to hospital if needed
   - Driving a vehicle
   - Remaining with the student group

9. A medical kit, including asthma equipment, appropriate to the activities and/or location of the camp or excursion, shall be kept within close proximity at all times.

10. At least one adult attending the camp shall be recognised and hold current First Aid qualifications. Where an excursion is likely to be strenuous or where participation could affect the medical conditions of students, at least one adult attending the excursion shall have a recognised and current First Aid qualification.
11. Where water based activities are to take place, the correct number of adults per student ratio holding current Bronze Medallion certification are to be in attendance. (Refer to School Swimming Policy)

12. While on a camp or an excursion, duty of care responsibilities exist at all times. Therefore, staff and supervisors shall not be permitted to use intoxicating substances at any time during the camp or excursion.

13. The Principal shall ensure that adequate insurance cover is in place to protect all the participants on the school camp or excursion.

14. Students shall be transported to and from camps and on excursions in a safe and proper manner, whatever the mode of transport. All vehicles used shall be in a roadworthy condition.

15. The Principal shall ensure that drivers of any vehicles are persons who act responsibly and give due regard to the safety and well being of the students.

16. All drivers shall have a current and appropriate driver’s licence.

17. In determining the student-adult ratio for school camps and excursions the following factors are to be considered.
   - The types of activities.
   - The location of the school camp or excursion.
   - The age of the students.
   - The camp or excursion facilities.
   - Gender balance for the supervision of male and female students.
   - Dormitory arrangements in a co-educational setting.

18. There is an expectation that all children attending will pay camp or excursion costs with provision for exceptional circumstances.

19. The Principal, in planning school camps and excursions, shall consider the needs of both students and their families with particular attention given to the needs of people from varying cultural backgrounds (Aboriginal students).

20. The Principal, in planning the location and activities of camps and excursions, is to ensure that they both enhance the educational program offered by the school and are of value to students normally experiencing rural isolation.

21. Provision is to be included, when possible, for students to experience some time at a metropolitan school when a camp is located in Perth.

22. The Principal and classroom teacher are to work collaboratively in decision-making regarding camp location and activities.

23. Parents are to be given a minimum of at least a term’s notice regarding camp venue and cost.

24. A Parent Meeting is to be held at least a term prior to camp to discuss location, costs and fundraising and is to be conducted by the class teacher involved.
25. The option of fundraising activities for the camp occurring with the senior class prior to camp is to exist. Parents will be asked to meet the balance of costs.

26. The P&F Association will be approached re. contribution to camp costs.

27. Parent help is to be sought to attend camp when needed, depending on the ratio of the number of children per teacher or adult.

28. School camps and excursions form part of a school’s curriculum program and therefore are to be attended by students. Where parents have any issues regarding the attendance of their child/children on school camps or excursions these issues shall be discussed with the Principal. Care shall be taken to protect the right of parents to decide whether or not to send their children to school camps. Provision is to be made for these students to attend school as normal for the duration of the camp.

29. A school camp is to be presented as a reward for responsible behaviour, not a conclusive event occurring simply because students are in senior years. A structured discipline statement as per camp is to be followed during the year. Those children not attending camp due to misbehaviour are to attend school as per normal for duration of camp.

30. The Mullewa Shire is to be contacted regarding use of Shire Youth Bus for camp.

31. Mullewa Youth Development Officer is to be involved in the preparation of activities for camp and in the running of these during the camp (where appropriate).

32. At the conclusion of the camp a detailed report shall be submitted by the camp supervisor to the Principal. The report shall cover:
   - The adequacy of the camp site
   - Recommendation for the future use of the camp site
   - The overall management of the camp
   - Any injuries that occurred
   - The achievement or otherwise of the objectives of the camp
   - Other information relating to specific incidents on the camp
   - Any other information which may assist in the planning of future camps

33. Where an excursion was strenuous, or when during the course of an excursion a student suffered an injury or experienced ill health, or where an unplanned incident occurred that needed reporting, a detailed report shall be submitted to the Principal by the teacher in charge of the excursion. Notification in writing should also be provided to parent/s of those children concerned.
MEDICAL CONDITIONS/ASTHMA/ALLERGIES

All children who suffer from serious allergic reactions or a chronic medical condition shall have a medical action plan provided to the school by a medical practitioner explaining triggers, expected symptoms and recommended action in the event of exposure to a trigger.

Children who suffer from severe allergic reaction and require immediate transport to hospital need to have Adrenalin in the form of an auto-injector device Epipen provided for emergency use.

Children who suffer from Asthma must have their medication clearly labelled, with written instructions stating the type of puffer used, dosage and the frequency of the medication.

**Asthma**

My child _____________________________ is an Asthma sufferer and is required to take the following medication.

<table>
<thead>
<tr>
<th>Type of puffer</th>
<th>Dosage</th>
<th>Frequency</th>
</tr>
</thead>
</table>

Parent Signature: _______________________________

**Chronic Medical Conditions/Allergic Reaction**

My child _____________________________ suffers from the following condition ________.

Parent Signature: _______________________________

**The following must be completed by a Medical Practitioner**

<table>
<thead>
<tr>
<th>Medication</th>
<th>Dosage</th>
<th>Frequency</th>
</tr>
</thead>
</table>

Things/incidents which trigger the condition___________________________________________

Expected symptoms _______________________________________________________________

Recommended action (prior to calling an ambulance or rushing to a hospital)_____________

Children who suffer from severe allergic reactions such as bee stings must be provided with Adrenalin in the form of an Epipen.

Medical Practitioner’s Signature: ___________________________ Date ___________________
MEDICAL HISTORY AND PARENT CONTACT

Please print all information

Student's Name ____________________________________________

Date of Birth ____________________________ Religion ______________

Name of Parent or Guardian ____________________________________________

Address __________________________________________________________

Telephone No. Home __________________________ Work ___________________

Second Emergency Name, Address and Phone No (if above not answering)

________________________________________________________________________

Medicare Number ______________________________________________________________________

Are you in a Medical Insurance Fund? Yes/No

Name of Fund __________________________ Number __________________________

Has your child had a Tetanus Booster in the past 12 months? Yes/No

Travel Sickness Yes/No Blood Pressure Yes/No
Respiratory problems Yes/No Recent Operations Yes/No
Asthma Yes/No Epilepsy Yes/No
Allergies Yes/No Recent Illness Yes/No
Food Yes/No Bed Wetting Yes/No
Drugs - Penicillin Yes/No Others: Please list Yes/No
Bees Yes/No
Ointments Yes/No
Sugar Diabetes Yes/No
Heart problems Yes/No

Parent Signature: ____________________________ Date: ______________
Our Lady of Mt Carmel School
Mullewa

PARENTAL CONSENT - PERMISSION FOR PARTICIPATION AND MEDICAL ATTENTION FOR YEAR 6/7 CAMP
(DATE)

Name of child: ____________________________________________________

I give permission for my child to travel to and from Perth to participate in the Year 6/7 Camp. I understand my child will be travelling in the Mullewa Shire’s Youth Development Bus driven by (Driver’s Name)______________________________.

Parent Signature: ____________________________________________

Medication

I give permission for medical/dental attention for my child while attending the Yr 6/7 camp. I also agree to meet the cost of such attention.

Parent Signature: ____________________________________________

Ambulance

I give permission for my child to be transported by ambulance to the nearest medical facility if required.

Parent Signature: ____________________________________________

Swimming

I give permission for my child to go swimming - under the supervision of a teacher, during the camp.

Parent Signature: ____________________________________________

Excursions

I give permission for my child to attend all excursions while at camp.

Parent Signature: ____________________________________________

I hereby authorise the Principal or her representative to obtain such medical attention as may be deemed necessary and I understand that I am responsible for the costs. I further authorise qualified practitioners to administer anaesthetic and blood transfusion if the necessity arises.

Parent Signature ____________________________________________ Date _____________________