Lighthouse Christian Church

SC051 Excursion Checklist

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| --- | --- |
| Name Of Activity  |  |
| Program |  | Date of Activity  |  |
| Location Of Activity |  | Time of Activity |  |

|  |  |  |
| --- | --- | --- |
| Element | Details | Completed |
| Feasibility  | * Have you determined the aims of the excursion?
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|  | * Have you selected an appropriate excursion site?
 |  |
|  | * Have you determined the best time of year for the excursion?
 |  |
| Costing | * Have you determined all excursion costs for church and per child?
* Transport
* Entry fees

Food & drink (if applicable) |  |
| Transport | * Have you arranged appropriate transport to the excursion?
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|  | * Have you determined any additional insurance requirements if using private transport?
 |  |
| Bookings | * Have you booked the excursion site (if applicable)
 |  |
|  | * Was booking confirmed in writing?
 |  |
| Preparatory Visit | * Have you visited the excursion site (if possible)?
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|  | * Have you identified hazards that may exist at the site?
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|  | * Have you determined what measures you may use to address any identified hazards?
 |  |
| Ratios | * Have you determined the appropriate ratio of leaders/adults to children/young people for the excursion?
 |  |
|  | * Do you have adequate leaders/adults to effectively supervise the excursion?
 |  |
| Excursion form/letter to Parents | * Does your Excursion form/letter include:
* Name of ministry program
* Name of activity
* Venue
* Departure and return times
* Clothing requirements
* Food & drink requirements
* Emergency contact requirements
* Travel arrangements
* Costs for excursion
* Parental consent (including medical treatment )
 |  |
| Emergency medical information | Do you have emergency medical information for all leaders & children/young people attending the excursion? |  |
| Risk assessment | Have you completed a risk assessment for the excursion, including a Risk Action Plan? |  |
| First Aid | * + Do you have a suitably qualified first aid person attending the excursion?
 |  |
|  | * + Do you have an adequate first aid kit for use during the excursion?
 |  |
| Critical Incident  | * Do you have a Critical Incident Response Plan in place to use during the excursion?
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|  | * Have you notified all people identified in Critical Incident Response Plan about the excursion?
 |  |
| Supervision | * Have all leaders/ helpers completed relevant forms and Working with Children screening checks?
 |  |
|  | * Have you provided guidelines to all non-leader adult helpers including:
	+ Areas of responsibility
	+ Appropriate response to challenging behaviours
	+ Who to contact when an issue arises (including critical incidents)
	+ First aid protocols

Expected behaviours from children/young people during the excursion? |  |
| Permission | Have you gained permission from senior church leadership to proceed with the excursion? |  |

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| --- | --- | --- |
| Approval given by;  |  |  |
| Head of Department |  | Signature |  |
| Ministry Coordinator(If applicable) |  | Signature |  |
| Date Approved |  |