

**Outings and Visits Policy**

**Policy Statement**

We believe that children benefit from being taken out of the setting environment to go on visits to suitable places for activities to enhance their learning experiences. All staff and volunteers are aware of and follow procedures to keep children safe on outings.

**Procedures**

* Parents will sign a general consent for their children to be taken out as part of the daily activities of the setting. This will include details of the visit.
* A risk assessment will be carried out for each outing. All risk assessments are made available for parents to see on request.
* Parents are always asked to sign specific consent forms before major outings.
* A risk assessment is carried out before an outing takes place.
* Our adult to child ratio is high, normally one adult to two children, depending on their age, sensibility and nature of the outing.
* Outings are recorded in an outings record book stating:
* the date and item of outing
* the venue and mode of transport
* names of staff assigned to named children
* time of return
* Staff take a mobile phone on outings, and supplies of tissues, as well as a mini first aid pack, a snack and water. The amount of equipment will vary and be consistent with the venue and the number of children as well as how long they will be out for.
* Staff will take a list of children with contact numbers of parents/carers, as well as how long they will be out for.
* Adults will be given the names of two children who they will be responsible for at all times, regular head counts will be taken.
* Children must always hold an adults hand at all times when walking near roads and crossing them.
* When crossing roads, pedestrian crossings should be used wherever possible, if this is not possible then adults should find a safe place to cross and use the opportunity to teach the children about road safety
* High visibility vests will be worn by children and staff.

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| This Policy was adopted on (date) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signed By\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date to be reviewed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |