

12 APPENDIX

12.1 INCIDENT LOG SHEET

Note: Complete the form for every accident leading to injury, violent or aggressive incident, ill health, disease, behaviour which could have resulted in injury, or near miss.

Incident date and time:	Location:
Group:	Group leader:
Person injured or subject of aggression:	
Relationship to Coastal School:	
Was the incident: <input type="checkbox"/> an accident leading to injury <input type="checkbox"/> a near miss <input type="checkbox"/> ill health/disease <input type="checkbox"/> other <input type="checkbox"/> a violent or aggressive incident <input type="checkbox"/> behaviour which could have resulted in injury	
What happened (describe below including the nature of any injury/illness):	
Was anyone else involved (note names if so)?	
Was anything damaged (e.g. vehicle)?	
What action has been taken to prevent a recurrence?	
Name of person completing form & relationship to Coastal School:	
IF APPLICABLE: School contacted: Yes / No	By who?
When?	How?

12.2 ACCIDENT FORM

ACCIDENT REPORT FORM: THIS FORM MUST BE FILLED IN CLEARLY IN BLACK INK

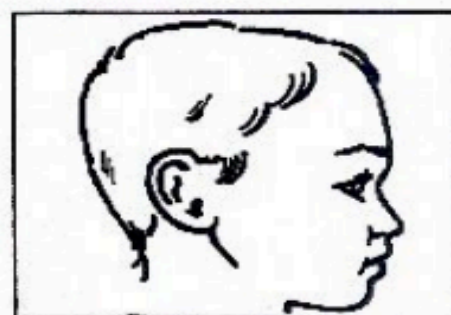
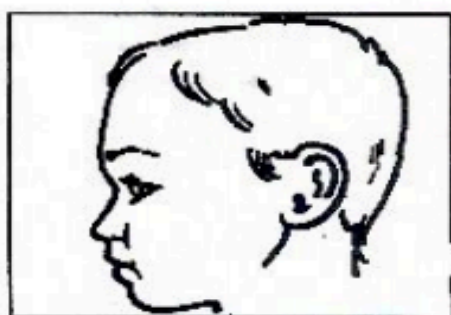
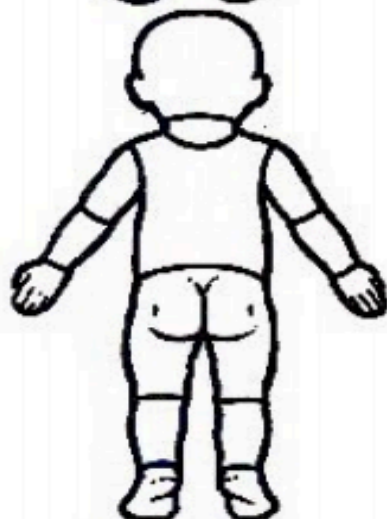
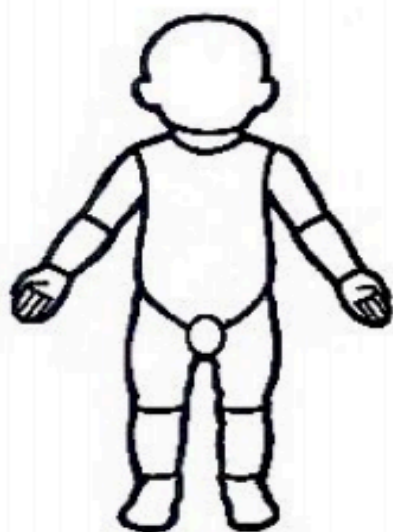
<u>FULL</u> Name of child / adult:	Date of accident:	Time of accident:
Group:	Group Leader:	Location of accident:
Nature of injury:		
What happened?		
Name of caregiver:	Role:	Relationship to WFS:
Caregiver response and first aid:		
Additional information:		

Parents / School contacted? Yes / No <i>(delete as applicable)</i>	When and by who?	How?
Other contacts / actions:		
Signed:	Date:	Print name:

12.3 Body Map Form

Indicate clearly where the injury was seen and attach this to the Recording Form:

Young Child



12.4 Session Plan Format

Date, location and session time	
Age Adult/child ratio	
Forest School Lead/ Leaders	
First Aider/s	
Telephone	
Emergency vehicle access	
Insurance	
Key objectives to include links ot holistic development:	
Resources to fascilitate learning:	
<p>Welcome at Meeting Point</p> <p>Communal walk to site, sharing local observations</p> <p>Opening circle time: Introduction, ‘care rules’ and children/leaders shared agreement about Safety at Seaside (inc flags for boundaries)</p> <p>Adult led (A) and child led (C) activities :</p> <p>A -To include set up of shelter & tippi-tap</p> <p>Gathering for drinks/snacks/</p> <p>Joint activity/ game</p> <p>5 minute tidy time before closing circle time</p> <p>Closing circle time and reflection on today’s activities & wishes for next session.</p> <p>Communal walk to Meeting point and goodbyes.</p> <p>(Details of activities in plan likely to change in situ.)</p>	
Notes/Evaluation:	

[illegible]

12.6 Risk Assessments Forms

Site Risk Assessment

Site name: Caister-on-Sea		Assessment carried out by: I	
Post code:	<i>NR30 5HD</i> <i>What3Words: pinks.pose.vocab</i> Grid Ref: TG 539 122 Longitude 52°38.730N Latitude 001°44.195E	Signature:	Date: Renew Date:

Areas to consider	What are the hazards?	Who might be harmed and how?	Risk Level	Control actions (What needs to be done, Who does it & by When?)	In place? (tick or initiate)	New level
Parking Access route to site	Traffic, lost children	Children, all	High. Children wander off/ hit by car	Children to walk to meeting place with parents. Stay with leaders once joined group. Walk together with group to coast.	All parents informed	Low
Boundaries around site	Open boundaries leading to sea	Children, lost & drowning	Low/medium	Children under parent/carer supervision at all times. Children are aware of physical boundaries and calling signals.	All parents informed	Low
Sea						Low
Shore						
Sanddunes, ie hazardous plant species		Poisoning Stinging	High Low	No picking/eating is a ground rule unless identified by FS leader. Remind children during sessions.	Ongoing reminding and updating / workers & volunteers aware	Low
Sanddunes, ie uneven ground, slopes, surfaces, hidden obstacles	Slippery, rabbit holes,	All	Low	FS leaders to check site before session & digging area during session.		Low
Fish/ insects/ dogs	Stinging insects or fish Animal faeces	All Stings and bites Allergic reaction	Medium	Hot water for jellyfish stings. Bug repellent and	Advice about recommended	medium/low

				antihistamine avail if needed and permission given by parents Parents to provide medical info and medication for children with allergies . Antibacterial hand wipes	clothes to wear in welcoming letter. Identification of jellyfish and weeverfish. Local antihistamine cream applied on site if parent/s give permission	
Seasonal weather conditions	High winds and storms. Hit by branches Excess rainfall\ cold/heat	All, bruise, fracture, concussion Hypothermia or Hyperthermia	medium	Daily check of weather forecast, cancel or reschedule proposed session in case of extreme weather/winds. If children show distress of being cold, shorten session.	Cancellation of session if FS leader assesses necessary.	Low
<p>Low Risk (Something which may result in minor damage or slight harm i.e. scratch or bruise) Medium Risk (Something which may result in a significant loss/damage or major injury i.e. broken bone or other injury which results in person being taken to hospital for treatment) High risk (something which may result in extensive damage, multiple or major injuries or death.)</p>						

Activity Risk/Benefit Assessment

Which activity is this assessment for?	
Consider the benefits to the children of allowing this activity to take place:	

The Hazard	Who could be harmed?	How could they be harmed?	Level of risk (with no control measures in place)	Control	Who will carry out control measure and when (before or during activity)?	Level of risk (with control measures in place)

Experiences & Activity Assessment

Assessment carried out by:			Date:	
Signature:			Review Date:	
Experience / Activity:				
Benefits of Experience/Activity:				
Activity/Experience	Risk	Risk Level	Control Actions	New level

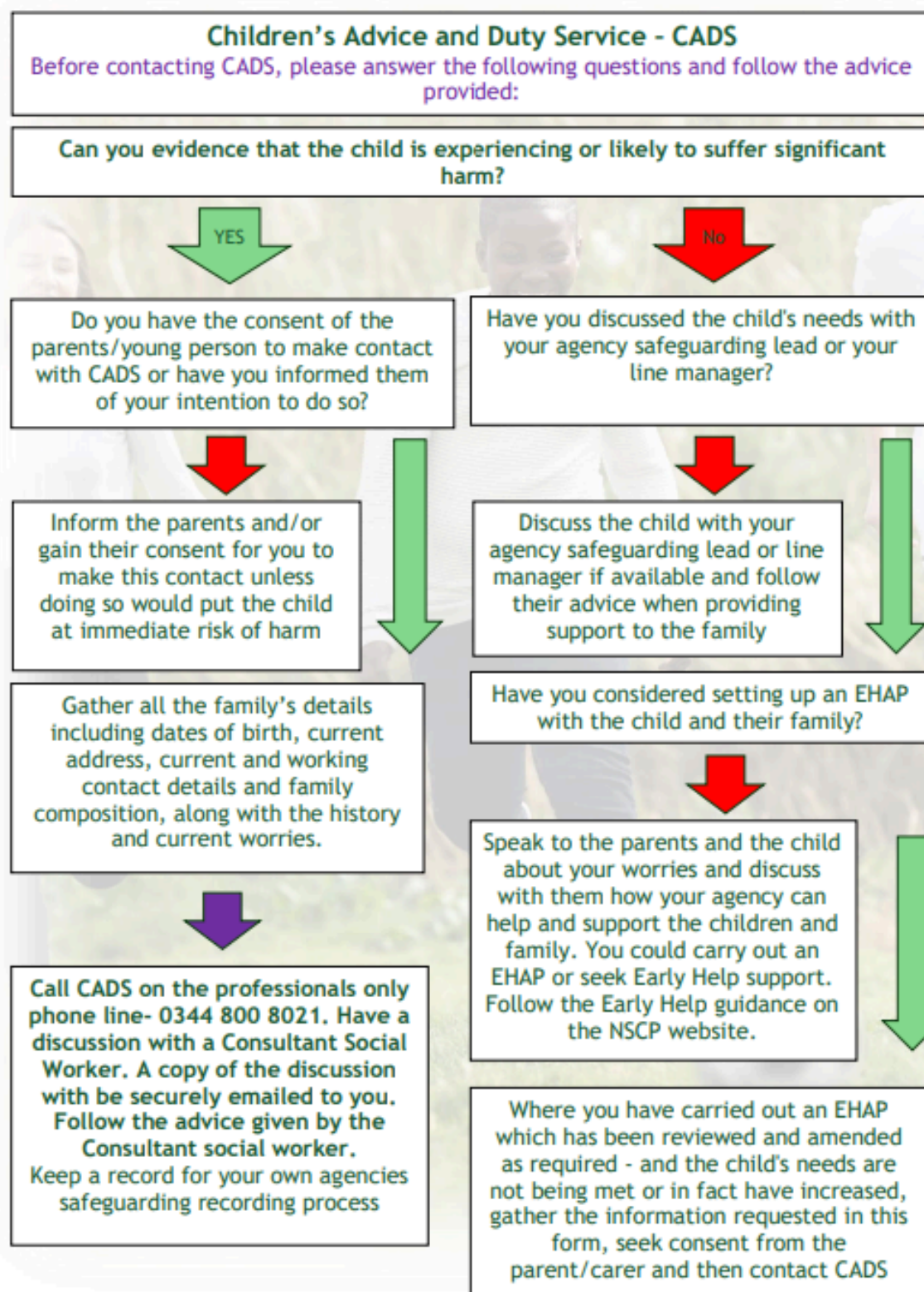
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Coastal school site checklist for site at Caister on Sea, to be used from.....to..... .
Please sign each box and take appropriate action if needed

Hazard	Initial visit	Check Date	Check Date	Check Date	Check Date	Check Date	Check Date
Mobile phone signal present							
Tide for day High/low/rising/neap/spring etc							
Debris in tideline							
Slippery surfaces							
poisonous plants noted							
Free from dangerous rubbish							
Free from dog faeces							
Flotsam and jetsam							
Uneven ground noted							
Potentially dangerous meteorological conditions							
Rain							
Frost							
Wind speed							
Sun							
Fog							
Electrical storm forecast							
Unique activities for the day							
Adaptations for the day							

12.7 CADS Flow chart

Children's Advice and Duty Service (CADS)
Practice Process - Flowchart - June22 V1



Safeguarding Concern Record

Name of Adult reporting	
Your role at Coastal School	
Contact telephone Number	
The Learners Details	
Full Name	
Address	
Telephone Number	
Date of Birth	
Relevant details about the child e.g. family circumstances, physical/mental health, communication difficulties	
Parent/guardians/carers details Name Contact details	
Details of the disclosure/allegation/suspicion	
Are you recording: <ul style="list-style-type: none">• Disclosure made directly to you by a child? Y/N• Disclosure or suspicions from a third party? Y/N• Your suspicions or concerns? Y/N	
Date this form has been written	
Time at which this form was written (24 hour clock)	
Date of the disclosure	
Time of the disclosure (24 hour clock)	
Date of incident	

Time of the incident	
Details of the disclosure/allegation/suspicion (State exactly what you were told/observed and what was said. Use the person's own words as much as possible)	
Action Taken so far	

Signed	Date