# Southport State School P&C

## **Association**

#### **Outside School Hours Care**

## **Incursion Risk Management Plan Record**

Incursion Details:	
Party and Pyjama Day	
Planned Date of Incursion: Friday 11 <sup>th</sup> July 2025	Incursion Destination and Address: 215 Queen St, Southport, 4215 Queensland.
Departure time from Southport State School P&C OSHC: N/A	Arrival time at the venue: N/A
Departure time from venue: N/A	Arrival time at Southport State School P&C OSHC: N/A
Proposed Activities: Children will have the opportunity to participate in a day of fun for the last day of Vacation Care including a party day Method of transport, including proposed rot This is an in-service incursion therefore no te	·
	Dennehy – Co-Ordinator Schuh – Assistant Co-Ordinator
Contact number of Incursion Co-ordinator:	(BH): 07- 5531 1138 (M): 0407 140 528
Number of children attending the incursion: Approximately 80	Number of Educators/Volunteers/Parents:  8 Ratio: 1:10
Educator to child ratio, including whether th Please provide details: <mark>NO</mark>	Ratio: 1:10 is incursion warrants a higher ratio?
This incursion is an In-Service incursion.	

The incursion will be supervised by Educators throughout the day. Children will be given the opportunity to participate in a Party Day Sampling food from different countries eg: Mexico, India, Brazil, Italy and Korea.

- Playing cultural games
- Cultural dress ups and dance sessions
- Arts and crafts related to world cultures

Educators to ensure sun protection by providing sunscreen, encouraging children to wear a hat and stay in the shade when not participating.

Drinking and toilet facilities as per normal locations.

Incursion Equipment Checklist	
Fully stocked first aid kits	☐ Travel sickness bags
List of children attending the excursion	Spare Sunscreen
☐ Contact information for each child	☐ Spare hand sanitiser and wipes
	☐ Spare clothing and towels
List of educators/volunteers/parents	☐ Contact information of
attending the incursion	educators/volunteers/parents attending
	the incursion
	☐ Sharps container and gloves for children
adults and educators attending the	with diabetes
excursion	
☐ Spare water bottles	☐ Venue information
☐ Accident and Incident forms	☐ Working mobile phone / other effective
	means of communication with the main
	service and emergency services
Other items not listed, please list:	

Exc	ursion/Incu	ursion Risk	Assessment				
Activity	Hazard Identified	Risk Assessment Before Controls (Use matrix)	Elimination/control measures in place	Risk Assessment After Controls (Use matrix)	Who	When	Comments
Health and safety	Food intolerances	High	Collect and check children's allergy/medical information in advance. Label all food with ingredients and use allergy-safe options. Adequate supervision and assistance will be provided. Children will be briefed, and instructions will be forthcoming regarding sharing of food while engaging in provided experiences.	Medium	All Educators	4/7/2025	Ensure Epi- Pens and First Aid kit available and First Aid trained staff onsite all day.
Health and safety	Contaminati on of food due to improper handling/sto ring of food	High	Follow food safety standards closely. Maintain hot/cold stations and chains. Use gloves and tongs and supervise eating closely. Ensure handwashing before and after eating and activities. Sanitise any shared equipment.	Low	All Educators	4/7/2025	NQS ratios to be followed and specific staff to be assigned to food stations, games zones and craft areas
Health and safety	Participating in new games	Medium	Adequate supervision and assistance. Explain rules and expectations clearly and ensure games are age-appropriate	Low	All Educators	4/7/2025	NQS ratios to be followed and specific staff to be assigned to food stations, games zones and craft areas
Health and safety	Injury from mixing with wider age groups	Medium	Allocation of groups of children participating in games sessions to allow children to only play with children of a similar size and age.	Low	All Educators	4/7/2025	Staff to assess children attending to ensure appropriate groups are organised

Communicatio	Service to	Medium	Inform families and	Low	Co-	Prior to	
n with families	inform		request consent		Ordinators	4/7/2025	I
	families of		regarding menu and		/Assistant		1
	planned		planned activities for the		Co-		1
	activities and		day.		Ordinators		1
	menu to be						1
	provided						<u> </u>

Plan Prepared By:	Name:
	Elicha Dennehy – Co-Ordinator
	Jessica Schuh – Assistant Co-Ordinator
Communicated to:	Southport State School P & C Executive
	Committee
Date:	/6/2025
Venue and Safety Information	Yes/No
Reviewed and Attached:	Comment if Needed:
Reminder: Monitor the effective	eness of controls and change if necessary.
Review the risk assessment if an	incident or significant change occurs

## **Risk Matrix**

			Co	nsequen	ces		
			Insignificant No Injury	Minor First aid required	Moderate Medical treatment	Major Serious Injury	Catastrophic Death
þ	Almost Certain Is expected to occur most times	1	1 Medium	2 High	3 High	4 Extreme	5 Extreme
Likelihood	Likely Will probably occur most times	2	Medium	Medium	High	Extreme	Extreme
	Possible Might occur some time	3	Low	Medium	High	High	Extreme
	Unlikely Could occur at some time	4	Low	Low	Medium	High	High

Rare	5					
May occur in			•		20.15	
some		Low	Low	Low	Medium	High
circumstances						

	Matrix Code
Risk Level	Actions to be Taken
Extreme	Consider other venues or incursions the risk and control measures can't be eliminated.
High	High risk level must be reduced to at least medium risk before excursion or incursion is considered. If practicable, the hazard should be eliminated if possible before this venue or incursion is considered.
Medium	Record all elimination and control measures within this risk management record.  Proceed with caution. Record and document any hazards closely.
Low	No additional risk control measures may be needed. Frequent review and monitoring of hazards are required to ensure that the risk level assigned is accurate and does not change over time. Proceed with excursion or incursion.
Reminder: Monitor the effectivenessessment if an incident or signif	ess of controls and change if necessary. Review the risl icant change occurs  Staff Signature
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