

## CURRICULAR RELATED HIGH-CARE ACTIVITY ORGANIZATIONAL CHECKLIST

Curricular Related High-Care Activities: \_\_\_\_\_

|                               |  |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
|-------------------------------|--|------------------|---|----------|--|---------------------|------------|-------------------------------|-----------|------------|-----------|----------------------------|------------|------------------|
| 1.                            | Completed one of the following Excursion Checklists. Please check:<br>OC-1 Same Day Ontario/Quebec      OC-2 Extended/Overnight      OC-3 Extended Out of Province/Country   |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 2.                            | Excursion Site has liability insurance and is on Board approved list. See Approved High Care Out of School Excursion Sites Chart.<br><br>Excursion Sites not on the Approved Excursion Sites chart will need to go through the Application for Approval of High Care Excursions process.   | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 3.                            | Contact has been made to site of excursion to confirm excursion and safety details.  | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 4.                            | Students and parents/guardians have been made aware of all necessary safety and conduct rules and procedures.  | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 5.                            | Prior to trip, students are instructed in any required progression of skills.  | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 6.                            | Student participant list for high care will be submitted to the school group superintendent prior to excursion departure.  | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 7.                            | Vehicle available at excursion site to transport a student in case of injury.  | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 8.                            | Students will be organized in a buddy system (for rapid head count, in the event of an emergency).   | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 9.                            | All forms provided by excursion site are included in approval package.   | Yes    No        |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
|                               |  |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 10.                           | If applicable, a print out of OPHEA safety guidelines for each activity is attached (i.e., Generic Section, Elementary or Secondary, Curriculum or Interschool). See <a href="http://safety.ophea.net/">http://safety.ophea.net/</a> and/or Excursion Chart Overview for applicable safety guidelines.   | Yes    No<br>N/A |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| 11.                           | <p>Signing this Checklist indicates you have ensured all OPHEA guidelines for the activities have been/or will be met.</p> <p><b>Check to indicate all guidelines have been/or will be met::</b></p> <table style="width: 100%; border: none;"> <tr> <td style="width: 50%;">Equipment</td> <td style="width: 50%;">Supervision - Ratios appropriate to the age/grade</td> </tr> <tr> <td>Clothing</td> <td>of participants for this activity are:</td> </tr> <tr> <td>Facility Instructor</td> <td>JK-3 _____</td> </tr> <tr> <td>Qualifications/Certifications</td> <td>4-6 _____</td> </tr> <tr> <td>Facilities</td> <td>7-8 _____</td> </tr> <tr> <td>Special Rules/Instructions</td> <td>9-12 _____</td> </tr> </table> | Equipment        | Supervision - Ratios appropriate to the age/grade | Clothing | of participants for this activity are: | Facility Instructor | JK-3 _____ | Qualifications/Certifications | 4-6 _____ | Facilities | 7-8 _____ | Special Rules/Instructions | 9-12 _____ | Yes    No<br>N/A |
| Equipment                     | Supervision - Ratios appropriate to the age/grade  |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| Clothing                      | of participants for this activity are:   |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| Facility Instructor           | JK-3 _____   |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| Qualifications/Certifications | 4-6 _____  |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| Facilities                    | 7-8 _____  |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |
| Special Rules/Instructions    | 9-12 _____   |                  |   |          |  |                     |            |                               |           |            |           |                            |            |                  |

|   |  |                                       |                        |               |
|---|--|---------------------------------------|------------------------|---------------|
| 12.   | If applicable, OPHEA Safety Guidelines for Teacher-Supervisor Qualifications/Certifications have been read and will be adhered to.   |                                       |                        | Yes No<br>N/A |
|   | <b>Teacher Supervisor:</b>   | <b>Qualifications/Certifications:</b> | <b>Date of Expiry:</b> |               |
|   | _____  | _____                                 | _____                  |               |
|   | _____  | _____                                 | _____                  |               |
|   | _____  | _____                                 | _____                  |               |
| If additional space is needed, please attach. |  |                                       |                        |               |
| 13.   | If applicable, certified Sport specific helmets will be worn for: <ul style="list-style-type: none"> <li>• Skiing</li> <li>• Snowboarding</li> <li>• Climbing</li> <li>• skating (Arena for Gr. K-6 and Outdoor rink for all grades) (This guideline exceeds OPHEA)</li> </ul> |                                       |                        | Yes No<br>N/A |

The following High Care Activities have additional requirements not mentioned in OPHEA Safety Guidelines (check only those applicable):

Refer to Excursion Chart for all requirements and forms.

|  |        |
|--|--------|
| <b>Alpine Skiing/Snowboarding</b>  | N/A    |
| Students and volunteers will be instructed in the <b>OC-08a Skier/Snowboarder Responsibility Code</b> .  | Yes No |
| <b>230-12 Alpine Skiing/Snowboarding Consent Form</b> has been completed.  | Yes No |
| All supervisors on the ski hill have alpine skiing/snowboarding experience related to their designated runs/trails and should be identifiable with a system (i.e., armband or vest).   | Yes No |
| Students will be placed in groups according to ability and will be provided with a colour coded mark or sticker to indicate designation of runs/trails the student may use.  | Yes No |
| Note: For more information, see OSBIE (Ontario School Boards' Insurance Exchange) School Board/Snow Resort Safety Guidelines for Out of School Trips for Winter Sports Education Programs. <a href="http://osbie.on.ca/pdf/English-Ski-Package.pdf">http://osbie.on.ca/pdf/English-Ski-Package.pdf</a> |        |

|   |        |
|---|--------|
| <b>Camping</b>  | N/A    |
| Cold weather camping - third Monday in October to the first Monday in May.(Secondary only).<br>Warm weather camping - first Monday in May to the third Monday in October.                                       |        |
| Students and parents will attend a pre-excursion meeting(s) organized by the teacher supervisor.  | Yes No |
| Each student will be given a detailed list of equipment   | Yes No |
| Necessary camping permits have been obtained.   | Yes No |
| A detailed itinerary and map describing campsites, route, timelines, and emergency phone numbers will be left with the Principal, parent, and park authorities (where appropriate) before the excursion begins. | Yes No |

| <b>Canoeing/Kayaking</b>  |     | N/A |  |
|---|-----|-----|--|
| Organizational Checklists completed and attached: (check all applicable)<br>OC - 5a Canoe Skills Test<br>OC - 5b Swimming and Canoe Water Safety Test<br>OC-5c Kayaking Skills Test<br>Note: Must be administered annually, logged, and filed for one year. | Yes | No  |  |
| Instruction will occur between the first Monday of May and the third Monday of October.   | Yes | No  |  |
| Each student will be given a detailed list of clothing and equipment  | Yes | No  |  |
| Additional Requirements if <b>Canoe Tripping</b> (Secondary only)   |     | N/A |  |
| Students have had instruction in the use and care of the types of tents and/or stoves to be taken on the trip.  | Yes | No  |  |
| Students have had experience in the correct methods of packing and water proofing a pack.   | Yes | No  |  |
| Students have practiced loading packs in a canoe efficiently so that the canoe is trimmed properly.   | Yes | No  |  |

| <b>Cross Country Skiing</b>   |     | N/A |  |
|---|-----|-----|--|
| Students and volunteers will be instructed in the <b>OC-08b Cross Country Responsibility Code</b> . | Yes | No  |  |

| <b>Cycling and Mountain Biking</b>   |     | N/A |  |
|--|-----|-----|--|
| A detailed itinerary and map describing route, timelines and emergency phone numbers will be left with the Principal, parent and park authorities (where appropriate) before the excursion begins. | Yes | No  |  |

| <b>Ice Fishing</b>  |     | N/A |  |
|---|-----|-----|--|
| When ice-fishing, ice safety must be determined with absolute certainty – contact local authorities for instructions. | Yes | No  |  |
| When ice fishing, teacher or supervisor is trained in ice rescue.   | Yes | No  |  |

| <b>Swimming</b>  |     | N/A |  |
|--|-----|-----|--|
| OC - 5b Swimming and Canoe Water Safety Test must be administered, logged, and filed for one year. | Yes | No  |  |
| Qualified lifeguard on duty must be at least 17 years of age.                                      | Yes | No  |  |

**Note: Facility/Excursion site waivers are not to be signed by parents or staff. If a facility/site requires a waiver please contact Business Services.**

**Teacher/Supervisor Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Principal's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_