



EAST ADELAIDE SCHOOL
RECEPTION and YEARS 1/2/5 - SWIMMING PROGRAM
Term 3 Week 8 – Monday 7 to Friday 11 September 2020

Dear Parents/Carers,

Classes from Year R/1/2/5 are having five swimming lessons at the Adelaide Aquatic Centre, Fitzroy Terrace, North Adelaide from Monday 7 September to Friday 11 September (Week 8). **The program showing relevant times is attached.** Instruction is carried out by qualified Department for Education instructors.

The total cost of the Swimming Programme is **\$26.00 (GST Free) Paid by Materials and Services Charges.**

Swimming is a compulsory curriculum area in the school's Physical Education programme. It is essential that your child becomes more confident in the water and is aware of water safety.

To show that your child is attending Swimming, please complete the tear off slip attached and the attached water safety Consent Form. ***Students will not be allowed to attend without the signed consent forms.***

If you do not consent to your child attending the Swimming program, you are still asked to complete the tear off slip below, as we need to confirm attendance/non-attendance by all students.

All forms are to be **returned to the class teacher by Friday 28 August 2020.**

- EAS Consent Slip
- Offer of Volunteer Supervision
- DECD Consent Form for Camp/Excursion
- Aquatic Water Safety Consent Form

- *If the school holds medication that you have indicated on the Water Safety Consent Form, this will be taken to the pool by the teachers. Students who self manage their asthma must take their inhalers to the pool.*
- *Please indicate on the Aquatic water safety Consent form if your child needs to wear ear plugs. If they do, parents need to supply them.*
- *All students will require bathers, towel, an old t-shirt or rash vest, comb and a labelled bag for wet bathers and towel. An old t-shirt or rash vest is required as flotation devices will be used in lessons. If your child requires goggles, you will need to supply them. Boys' swim shorts are to be above the knee. **ALL ITEMS MUST BE LABELLED WITH THE CHILD'S NAME. Students leaving school prior to 11.00am will need to wear their bathers to school. Other students will need to change into their bathers at school.***
- *Students will use supervised change rooms to change back into their School Uniform at the end of their session (if your child has worn bathers to school, please ensure that underwear has been packed).*
- *Parent spectators **are NOT** allowed entry due to COVID-19 restriction unless arranged by classroom teacher and identified as a volunteer and travelling with staff and students. Only Parent Volunteers are able to enter change rooms to assist children. Photos or video camera use **is not** permitted at all as per Department for Education Social Media Guidelines.*

We will require parents to assist with supervision. The Department for Education requires all volunteers attending excursions to adhere to the following requirements:

- Attend an onsite Volunteer Induction
- Complete the Volunteer Induction online training
- Complete the Responding to Abuse and Neglect – Education and Care (RAN-EC) 2018-2020 online training
- Obtain a current DCSI child-related employment screening or Working With Children Check

The following documents must be completed and returned to the school front office:

- Volunteer Application Form
- Volunteer Site Induction Checklist
- Volunteer Agreement

Further information regarding the above screenings can be obtained from the front office.

Please complete and return the slip **attached** if you are able to help with supervision. The teacher will contact parents to confirm arrangements prior to the excursion. **Until confirmation of your attendance has been made by the teacher, please do not schedule time off work.**

Belinda Robertson
Deputy Principal

Reception, Years 1,2 & Year 5 Swimming Program
Term 3 Week 8 – Monday 7th September to Friday 11th September 2020

Leave School Time	Lesson Time	Teachers	Leave Pool Time	Return to School	
9:00am	9:30am – 10:15am <i>Reception</i>	Room 4W – Jasmin 22 students – Rec Rm 4B – Lisa 24 students – Rec	10:45am	11:00am	46 students 2 staff 6 volunteers
9:00am	9:30am – 11:30am <i>Year 5</i>	Rm 15 - Tracey 28 students – Yr 5 Rm 16 – Jon 17 students – Yr 5	12:00pm	12:15pm	45 students 3 staff 3 volunteers
9:45am	10:15am – 11:00am <i>Receptions</i>	Room 7 – Heather 21 students – Rec Room 8 – Skye 22 students – Rec	11:30am	11:45am	43 students 3 staff 5 volunteers
10:30am	11:00am – 11:45am <i>Yr 1</i>	Room 5 – Anita/Andrea 23 students – Yr 1 Room 6 – Nadia/Adriana 21 students – Year 1	12:15pm	12:30pm	44 students 3 staff 5 volunteers
10:30am	11:00am – 12:30pm <i>Year 5</i>	Room 19 – Chris 27 students – Year 5 Room 26 – Jo Cl 29 students – Year 5	1:00pm	1:15pm	56 students 2 staff 4 volunteers
11:15am	11:45am – 12:30pm <i>Year 1</i>	Room 1 – Julie 20 students – Year 1 Room 2 – Vicki A 22 students – Year 1	1:00pm	1:15pm	42 students 2 staff 5 volunteers
<i>Lunch for instructors</i>					
12:30pm	1:00pm – 1:45pm <i>Year 2</i>	Rm 12 – Alana 25 Students Year 2 Rm 13 – Peti / Tonia 25 students Year 2	2:15pm	2:30pm	50 students 2 staff 7 volunteers
1.15pm	1.45pm – 2.30pm <i>Year 2</i>	Rm 9 – Vanessa 26 students Year 2 Rm 10 – Nat M 26 students Year 2	2:50pm	3:10pm	52 students 2 staff 7 volunteers

EAST ADELAIDE SCHOOL RECEPTION and Years 1/2/5 - SWIMMING PROGRAM
Term 3 Week 8 – Monday 7 to Friday 11 September 2020

Please return the Swimming/Aquatic water safety consent form and this slip to the class teacher whether your child is swimming or not, no later than Friday 28 August 2020.

Name of child _____ Year Level _____ Room Number _____

I consent to my child attending the Swimming Program, from **Monday 7 to Friday 11 September 2020**

OR

I do not consent to my child attending the Swimming Program because:-

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.....
.....



EAST ADELAIDE SCHOOL
OFFER OF VOLUNTEER SUPERVISION

EXCURSION: **Swimming Program**

DATE: **Monday 7 to Friday 11 September 2020**

NAME of Child _____ Room No _____

- I am able to help with supervision (accompany students on the bus and to assist students in the change rooms).
- I have met the current Department for Education volunteer requirements as outlined in page 1.

(Parent/Guardian Name)

(Signature)

Phone Number _____

Date _____



CONSENT FORM FOR CAMP, EXCURSION, SPORTING OR ADVENTURE ACTIVITY

(Note: that parents includes independent students, see definitions of the camps and excursions procedure)

Requirements in this document must not be altered. Please use block letters when filling out this form

As a parent of:

STUDENT/CHILD'S NAME	
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I:

PARENT NAME	
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Give my consent for (student name) ----- to participate in:

NAME OF CAMP/EXCURSION/SPORTING OR ADVENTURE ACTIVITY	EAST ADELAIDE SCHOOL SWIMMING PROGRAM
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Do not give my consent for my child to participate in any religious activities outlined below (if applicable)

at/on:

LOCATION	
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FROM:

0	7
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0	9
---	---

2	0
---	---

 TO:

1	1
---	---

0	9
---	---

2	0
---	---

 OR ON:

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Does your child have any health support, or medication administration needs that should be considered for camps, excursions etc? Yes No N/A

If Yes, has a care plan/medication agreement been provided to the school/preschool? Yes No N/A

If No, please provide a completed care plan/medication agreement to the school/preschool on completion of this form.

Any other matters that may impact your child's participation in the above activities safely? Yes No

If Yes, please outline details to the school/preschool in the box below.

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Details of **planned activities, transport arrangements**, anticipated **number of students/children** and **supervising teachers/instructors** are provided on the information sheet below.

Agreement

- I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- In the event of an accident or illness and contact with me being impracticable or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child. I understand that I may seek payment of any ambulance invoice by the department if my child does not have private ambulance cover.
- Where appropriate I have also attached additional or updated health care information, including details of any additional health support he/she requires to undertake the above activities safely.
- The information given is accurate to the best of my knowledge.
- I acknowledge that a risk management form is available upon request for my inspection at the site.

Signed: _____

Date: / /

Parent (in case of emergency)

NAME	
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RELATIONSHIP TO CHILD	
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TELEPHONE (1)		TELEPHONE (2)		MOBILE	
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Student Medic Alert Number (If applicable):	
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*Any health care information provided is not intended to prevent your child participating unless specific medical advice warrants exclusion. The health care information you supply to the school/preschool will be treated confidentially. Such information is sought in order to protect and assist the student so the activity may be a safe and enjoyable experience. Please contact the teacher-in-charge if you wish to discuss any health care problems.



ACTIVITY INFORMATION SHEET

<p>REASON FOR AND DESCRIPTION OF PLANNED ACTIVITIES</p>	<p>This is a program principally focused on water safety education. The program is designed to encourage students to think for themselves, make good decisions and understand the consequences through simulated open water and personal survival strategies. It also promotes confidence and awareness by providing opportunities for students to develop skills and knowledge that can help to keep them and others safe in a variety of aquatic environments.</p>
<p>TRANSPORT ARRANGEMENTS</p>	<p>Seatbelt fitted Bus from the school and return to school</p>
<p>NUMBER OF STUDENT/CHILDREN ATTENDING</p>	<p>Maximum of 50 students per session – total of 378 for the week</p>
<p>NUMBER OF SUPERVISING TEACHERS, INSTRUCTORS AND ADULTS ATTENDING</p>	<p>2-10 teachers, volunteers each session</p>
<p>FOR EDUCATION AND CARE SERVICES – THE EDUCATOR TO CHILD RATIO</p>	<p>Adult to student 1:6 ratio R-2 Adult to student 1:10 ration year 5</p>



Water Safety Consent Form

CONFIDENTIAL

To be completed by the Parent/Guardian for students participating in Water Safety activities. This form will be shown to School Staff and Water Safety Instructors and Emergency Services Personnel responsible for this student's safety in Water Safety activities.

STUDENTS WILL NOT BE PERMITTED TO PARTICIPATE WITHOUT A COMPLETED AND SIGNED CONSENT FORM

Section 1: Personal Details

Student Name _____ Date of Birth _____
 Name of School _____ Medic Alert No.(if relevant) _____
 Emergency Contact Person _____ Contact No. _____

Section 2: Health Support Information

Please complete the following information so the instructors and school staff can plan for your child's safety in the water.

Does your child have a health care need that could affect their safety in the water? Yes No

If **NO** - please go to Section 3 - consent to participate in Water Safety activities.

If **YES** - you must complete this section below:

If you tick any of the boxes below, the Water Safety Instructors require a written Health Care Plan from your child's doctor / treating health professional. This may be a copy of the information you have provided already to the school, or further information relating to a water environment / activity.

Asthma <input type="checkbox"/>	Seizures, Epilepsy <input type="checkbox"/>	Incontinence <input type="checkbox"/>
Severe allergy (e.g. bee sting) <input type="checkbox"/>	Diabetes <input type="checkbox"/>	Medication taken at school <input type="checkbox"/>
Joint disorder <input type="checkbox"/>	Heart Disorder <input type="checkbox"/>	Swallowing / choking <input type="checkbox"/>
Vision impairment <input type="checkbox"/>	Hearing impairment <input type="checkbox"/>	Communication difficulties <input type="checkbox"/>
Ear disorder <input type="checkbox"/>	Skin condition <input type="checkbox"/>	Other (please provide details) <input type="checkbox"/>

IMPORTANT: Have you attached health care details from your child's doctor / treating health professional? Yes No

If **YES**, write down what you have attached and please ensure all relevant medication is provided.

If **NO** - Failure to provide a Health Care Plan will mean that in the event of a medical emergency your child will be treated with standard first aid management.

Attached:

If you tick any of the boxes below regarding your child's well-being in the water, the Water Safety instructors need a brief outline of the student's specific issue in regards to water.

Anxiety Fear of Water Other

Details:

Section 3: Consent to take part in Water Safety activities:

- * I agree to delegate my authority to supervising teachers/instructors. Such supervisors may take whatever disciplinary action they deem necessary to ensure the safety, well-being and successful conduct of the students as a group and individually.
- * In the event of an accident or illness and contact with me being impractical or impossible, I authorise the teacher-in-charge to arrange whatever medical or surgical treatment a registered medical practitioner considers necessary. I will pay all medical and dental expenses incurred on behalf of my child.
- * I have also attached additional or updated health care information, including details of any additional health support my child requires to undertake the above activities safely.
- * The information given is accurate to the best of my knowledge.

Parent / Guardian:

Signature:

Date:

Standard Health Care Support for the most common health conditions:

Asthma	<p>Any child currently prescribed asthma medication must bring their medication. Asthma Care Plan should be attached to this consent form.</p> <p>Standard First Aid: Four puffs of reliever medication. Wait four minutes. If no relief, four more puffs, wait four minutes. If still no relief, call an ambulance. No return to the water after two lots of reliever medication within any given session.</p>
Seizures	<p>Any student with a diagnosed history of seizures, must have an adult acting as one to one safety watch, provided by the school. Seizures are generally managed in the pool. Continuation in the Water Safety program that day will be assessed by a supervising teacher in consultation with the student's health care plan.</p>
Diabetes	<p>First aid as per individual Diabetes Care Plan.</p>
Severe Allergy	<p>As per Allergy Specialist Care Plan.</p>
Drainage tubes in ears.	<p>Ear wrap or fitted plugs to be worn throughout water activities, unless written medical advice is provided saying this is not necessary.</p>
Incontinence	<p>As per Care Plan. Any accidents that result in contaminated water must be managed as per health regulations.</p> <p>Cryptosporidium Infection Cryptosporidiosis is caused by the parasite Cryptosporidium. It is highly infectious and can be transmitted by swallowing water contaminated by the parasite in public swimming pools. The main symptoms associated with this illness include watery diarrhoea with stomach cramps. If your child has been diagnosed with Cryptosporidiosis or has had these symptoms recently, they should not use public swimming pools for 14 days after the symptoms have stopped.</p>
Choking	<p>As per Care Plan.</p>
Infection	<ul style="list-style-type: none">- All open wounds must be covered, for the child's own protection, with a waterproof occlusive bandage.- Students with significant unhealed wound(s) will be advised not to enter the water until the wound has closed.- Students with ringworm should not commence water activities until at least 24 hours after commencement of appropriate treatment (usually a topical anti-fungal cream)- Students with tinea should not go into pools or change rooms until at least 24 hours after commencing appropriate treatment.- Wearing slip-on footwear while walking in the pool and change rooms protects against transmission of some infections such as tinea and plantar warts.

NB Failure to provide adequate information about your child's health condition will mean that in the event of a medical emergency your child will be treated with standard first aid management.



WATER SAFETY EDUCATION PROGRAM TAKE HOME INFORMATION

Access to water and participation in aquatic activities in, on and around the water plays a significant part in the lives of Australians. Pool, rivers, lakes and beaches provide opportunities to enjoy a variety of sport and recreational activities including swimming, canoeing, sailing, surfing, windsurfing, snorkelling, kayaking, water skiing, knee boarding, use of boats, fishing etc. Participation in these activities can also lead to employment opportunities.

What is Water Safety Education?

Department for Education and Child Development (DECD) Water Safety Education program provides an educational experience that:

- is designed to encourage students to think for themselves, make good decisions and understand the consequences through simulated open water scenarios and personal survival strategies
- promotes confidence and awareness by providing opportunities for student to develop skills and knowledge that can help to keep them and others safe in a variety of aquatic environments
- focuses on what primary school children are able to learn in their school program to ensure they are able to save themselves in potentially dangerous situations

The program is based on the belief that *“If we only have one opportunity to teach kids what they should do if they fall into open water, these are the key skills they actually need to learn “*

You may notice that the DECD program is different in emphasis from other “Learn to Swim” programs your child may access outside DECD. It is important that children learn the skill and knowledge and gain the understanding and ability to make good decisions around water and keep themselves and others safe.

What part does the DECD Water Safety Education Program play?

Department for Education and Child Development (DECD) Water Safety Education program is designed to maximise the benefit of the time available. The program provides a water safety learning pathway to engage, challenge and support students to:

- become confident and safe in aquatic environments

- develop skills, knowledge and understanding directly related to water safety (survival and rescue skills)
- explore, evaluate and make sound decisions about their own safety and the safety of others in aquatic environments.
- Work effectively with others

The reporting process:

The goal of the program is to support students to reach a level of competency in all identified learning outcomes. A record of development will be issued at the completion of the students' lessons using the following reporting code (**S.A.F.E.**):

S – able to demonstrate task when supported by the instructor

A – able to demonstrate task using a flotation aid

F – able to demonstrate the task frequently and independently

E – able to demonstrate the task effectively and with understanding

It should be noted that achievements demonstrated and reported in this program occur in a controlled and supervised environment under a specialist instructor. Students may not be able to demonstrate the same level of competence in other conditions and should be supervised at all times when in and around the water.

The DECD Water Safety Education Program is only one experience and access to other Learn to Swim and water based activities on a more regular basis can build on what has been taught and enhance skills and confidence.

PARENT INFORMATION

MEDICAL Students with a medical condition will require a copy of their medical action plan attached to their water safety consent form. All required medication must be present daily and within date. Any out of date puffers or epipens may result in the student not being able to participate in the program.

GROMMETS (tubes) Parent/guardian must indicate on the student medical consent form if student requires ear plugs/ear protection and must supply same if required. A swimming cap or ear wrap may be required to keep ear plugs in place. Please advice if otherwise.

ENTRY Family members are unable to enter the pool to swim with students during the sessions however they are more than welcome to watch. No entry fee applies for spectators with the DECD program. **NO SPECTATORS DURING COVID-19 RESTRICTIONS**

CAMERAS & MOBILES No photographs or video footage is to be taken by camera or mobile by parents, friends or relatives. Please discuss with your school their policy on photographs and video. If a parent has used their mobile phone to take images of a student, they will be asked by the school teaching staff to view the images and may be requested to delete any images. No cameras or mobiles are permitted in the toilets or change room areas. **NO SPECTATORS DURING COVID-19 RESTRICTIONS**

STUDENTS PERSONAL ITEMS AND LOST PROPERTY

Students are advised NOT to wear jewellery, fit bits, watches or any other personal items of value unless necessary for religious or cultural reasons. The item may be lost or damaged during the program including those that are waterproof. Once left behind at the centre it is almost impossible to recover. Goggles and any other items left poolside or in the changerooms can be difficult to recover.

TOILETS & CHANGEROOMS

Students should be wearing their bathers on arrival at the Centre.

Parents are asked NOT to use the unisex family toilets situate at the southern end of the centre. These are to be kept open for the public and crèche users. Parents wishing to change and shower their own students are to do so in the changerooms and toilets situate at the front of the centre near the reception foyer. **NA - DURING COVID-19 RESTRICTIONS**

Centre management stipulates that boys over the age of 6 years are not permitted in the ladies changerooms at the entrance to the centre. **NA – NO SPECTATORS DURING COVID-19 RESTRICTIONS**

ASSESSMENT

Students are assessed on an individual basis in relation to the skills noted in the DECD Water Safety Education – Learning Pathway – Record of Development.

In accordance with the Department for Education and Child Development Sport ,Swimming and Aquatics Unit instructors will assess their students on a daily basis and record the information.