



Oundle CE Primary School

OPIE Holiday Club

Registering for attendance

OPIE Holiday Club

Introduction

At Oundle CE Primary School we offer a "Holiday Club" facility to children who are registered at the school and to children who are not registered at the school. All children are under full adult supervision at all times, with a guideline ratio of 1 adult to 10 children.

Children who are not pupils of Oundle CE primary School must already be 4 years of age and in full time primary school education to attend the club. Children who are 4 years of age but are not yet in full time education but are registered to attend Oundle CE Primary School in the September of the new academic year will be allowed to attend the Holiday Club. Children will cease to be able to attend the club once they have left Primary School to attend a senior school (11 years of age). Children who are 11 years of age may attend the holiday club up to 31st August at which point they will no longer be registered as Primary School children.

Aims of the Holiday Club

- To provide a welcoming, safe, secure environment for children between 8.00am and up to 6pm.
- To provide an affordable service to parents/carers.
- To provide a stimulating and fun environment for the children.
- To encourage physical activities to promote healthy living.

It may be necessary to change our fees from time to time however, parents/carers will be informed of the reasons why such an increase is needed, in a timely manner.

Staffing

All staff that work at the Holiday Club are employed following the Oundle CE Primary recruitment process. All members of staff hold current DBS checks and have had up to date safeguarding training. There is always a member of staff on duty who is first aid trained.

Organisation

The Holiday Club runs during the Oundle CE Primary School holidays, Monday to Friday and includes Teacher Training days from 8.00am till 6.00pm. We are closed on Bank Holidays and for two weeks of

the Summer Holidays. Our opening times over the Christmas period vary according to demand and this is communicated once the dates and popularity are known.

Children are to be dropped off at the Holiday Club and signed in using the holiday club register. Upon collection they are to be signed out using the same register.

Access to the Holiday Club is through the Cotterstock Road entrance.

Parents are required to provide a packed lunch and a water bottle if their child is going to be present for a period of time where the child would require a meal. We must ensure that products that are nut based are not included as part of that packed lunch due to allergies of other potential attendees.

Times, pricing and booking

Times – Open 8:00am – 6:00pm

Charges- Charged at £4.00 per hour and a half hour period is £2.00

If your child is not collected by the end of your booked session you will be charged for the additional time e.g if you child is booked in for three hour but they are collected late we will charge for the additional time in half hour slots. The additional time will be added to your Tucasi Sco-Pay booking and thus a fee due on the Tucasi Sco-Pay system.

If you think you are going to be later than 6.00pm to collect your child please notify us by calling 01832 741905.

Registration & Data Collection

If your child is not a pupil at the school you will need to complete the Data Collection sheet and forward this to us prior to making any bookings. The Data Collection sheet is attached.

Booking

Children should be booked into the Holiday Club in advance via the online Tucasi Scopay system. This will ensure staff to children ratios are correct. Parents can book, amend and cancel (24 hours must be given for cancellation. Where 24 hours' notice is not provided the session will be charged in full) places up to four days before the session. If sessions need to be booked or amended after this period please call us or email outofschoolclub@oundleceprimary.co.uk. If you would like to set up an account you

will need to complete and return the Data Collection sheet (as noted above) to us – once we have received this we can email out your access code so that you can set up your account. The activation code is only valid for two weeks.

The website that is used for bookings and payments is www.scopay.com/oundlecofeprimary

User guides for the system can found using this link.

The booking system works on a pre-payment basis. Therefore you need to credit your account in order to book sessions. We cannot accept Childcare Vouchers unless the child(ren) attending are registered as a pupil at the school.

If your child is a pupil at the school we accept Childcare Vouchers for payment for Holiday Club sessions. If you wish to pay via Childcare Vouchers your Scopay account will need setting up for this to be possible. Please speak to the Holiday Club Team for this to happen. Once you have paid via childcare vouchers the Finance Team will apply the credits to your account at around the second week of the following month (in arrears as the credit information is obtained from the Bank Statement). Debts/non-payment of a Holiday Club session via this method will result in the loss of your child's place.

Collection

Parents/Carers should collect their children from the Holiday Club facility or name an alternative person to collect their child, this person being aged 16 years or over. If there is any change to this arrangement the Holiday Club staff must be notified beforehand by contacting them on 01832 741905 or via email to outofschoolclub@oundleceprimary.co.uk

In the event that a child is not collected by 6pm and no call has been received from the parents to advise of a late collection we will follow the procedure below:

The staff member on duty will endeavour to contact all persons listed as emergency contacts. If none of these persons can be contacted, we will then contact the police (after 30 minutes of the after school club closing ie 6:30pm) to find out if there have been any accidents involving any of these people. The situation will be explained and advice will be sought.

Fire procedures

All children will be taught the fire procedure for the Holiday Club – Children who are pupils at the school will follow the procedure they have already be taught in school. Once evacuated, children will then be registered and remain on the playground until further instructions are given.

Health and Hygiene

It is the responsibility of the Holiday Club staff to clean work surfaces at the end of each club session. They also sweep any obvious debris from the floor and mop any spillages up as they occur. The school's cleaning team mop and vacuum thoroughly at the end of each day and clean the toilet facilities. The facility is given a 'deep clean' once a week by a school cleaner.

The school complies with the school food standards and the East Northamptonshire food safety requirements. Allergen information is available upon request. We currently hold a 5* grading for our food hygiene.

Outdoor Area

Children have access to outdoor space (a tennis court is set aside for games and activities) during the holidays and often they use the school field. If children are outside, there will always be a member of staff supervising them.

Equipment

Where children can safely tidy up they are encouraged to do so. All toys and equipment are continuously checked for wear and tear and any equipment damaged during play is removed immediately. Children are taught to care and respect the equipment and their surroundings and encouraged to play constructively.

Behaviour

Holiday Club follow simple rules and children are expected to behave in accordance with these rules. The rules are displayed and made clear to all who attend. A child may be banned temporarily or permanently from the facility if their behaviour becomes or continues to be an issue.

Our rules are:

- Listen to adults and always do what they ask you.
- Keep safe at all times, thinking of yourself and others
- Be friendly and respectful towards each other

First aid

There is a qualified First Aider available at all times. Any incident will be recorded in the school's accident book, located in the first aid rucksack in the holiday club facility. An first aid treatment received will be communicated to parents on collection. For more serious injuries parents will be contacted accordingly.

Illness

If you suspect that your child may be unwell please ensure that you inform a member of the Holiday Club Team. Should they become unwell during a session it may be necessary for you to collect them before the end of the session. We will contact you if necessary.

If your child is on medication we are able to administer this so long as the medicine has been prescribed by a GP (thus the medication having the GP dosage information attached to it) and we have a completed medication form which can be located at: <https://www.oundleceprimary.org/numbersquash/wp-content/uploads/OPS-Medicine-Admin-Permission-Form-November-2017.pdf>

Please return this completed form to the Holiday Club and not the school office as indicated (as the School Office will be closed).

Related policies

The Holiday Club follows the policies of Oundle CE Primary School.

Please refer to the following policies on our website:

- Medicines Policy
- Behaviour Policy
- Safeguarding Policy
- Anti-Bullying
- First Aid
- Fire Drill
- Racial/Anti Discrimination
- Charging and Remissions

The Holiday club is covered by the school's risk assessments.



Holiday Club Data Collection Sheet – For non-school pupils

The school and the Local Education Authority are required under **Data Protection** legislation to comply with essential good practice in respect of the information collected and to manage it securely. The individuals who are the subject of the information or who have parental/guardian responsibility are generally entitled to see the information and are encouraged to help keep the information up to date. This information will be used for educational, welfare, planning or managerial purposes.

CHILD					
Year:	Class:	Date of birth:		Sex (M/F)	
Legal Surname of child:		Preferred surname:			
Legal Forename of child:		Preferred forename:			
Middle name					
Parent/Guardian 1 :			Parent/Guardian 2 :		
Name:		Name:			
Does this parent/guardian have parental responsibility? Yes <input type="checkbox"/> No <input type="checkbox"/>			Does this parent/guardian have parental responsibility? Yes <input type="checkbox"/> No <input type="checkbox"/>		
If parents are separated or divorced has a court order been issued? Yes <input type="checkbox"/> No <input type="checkbox"/>			If parents are separated or divorced has a court order been issued? Yes <input type="checkbox"/> No <input type="checkbox"/>		
Email Address:			Email Address:		
Address Details			Address Details		
House/Flat No.		House /Flat No.			
Building/Flat name		Building/Flat name			
Street Name		Street name			
District/Village/Town		District/Village/Town			
County		County			
Post code		Post code			
Home Telephone:		Home Telephone:			
Please tick the box if the child lives at this address <input type="checkbox"/>			Please tick the box if the child lives at this address <input type="checkbox"/>		

Medical Details		
Doctor's Name and Surgery:	Doctor's Telephone No:	Dietary Needs:
Medical Condition of Child:	Has a Statement of Special Educational Needs been issued in respect of your Child?	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Position of child in family (Please circle)	Name and Address of Previous School (if applicable)	
1 2 3 4 5		

Other children in the family:

Name:		DOB:		School:	
Name:		DOB:		School:	
Name:		DOB:		School:	

Emergency Contact Details

Please list below all Parents and Contacts, and use the first column (priority number) to show in which order people should be contacted in the case of an emergency. These are very important to us. If your child becomes ill during the day we need to be able to contact you, or someone acting for you who are able to collect your child. Please give at least two contact numbers.

We suggest the telephone numbers of any place of work and one other emergency contact, perhaps a grandparent if they live close by. If you have no relatives in the area then ask a friend, neighbour or child minder if they would be willing to act as an emergency contact.

Priority	Name	Relationship	Address	Phone No.
				1.
				2.
				1.
				2.
				1.
				2.

ETHNICALLY based STATISTICS (To be completed on behalf of all children)

The collection of ethnically based data is becoming increasingly recognised as a means of identifying needs and thus ensuring fair and equal treatment for all. The information you are asked to give below is for educational purposes and will be used only to enhance the provision for all pupils in Northamptonshire schools.

Ethnic Origin of Child		Disability																																																																						
		Please select your child's disability																																																																						
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="background-color: #cccccc;">White</th> <th style="background-color: #cccccc;">Other Backgrounds</th> </tr> <tr> <td><input type="checkbox"/> British</td> <td><input type="checkbox"/> Vietnamese</td> </tr> <tr> <td><input type="checkbox"/> Irish</td> <td><input type="checkbox"/> Chinese</td> </tr> <tr> <td><input type="checkbox"/> Irish Traveller</td> <td><input type="checkbox"/> Other Ethnic Group</td> </tr> <tr> <td><input type="checkbox"/> Gypsy/Roma</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Any other White</td> <td></td> </tr> <tr> <th style="background-color: #cccccc;">Asian or Asian British</th> <td></td> </tr> <tr> <td><input type="checkbox"/> Indian</td> <td rowspan="4" style="vertical-align: top;"> I do not wish an ethnic background category to be recorded <input type="checkbox"/> </td> </tr> <tr> <td><input type="checkbox"/> Pakistani</td> </tr> <tr> <td><input type="checkbox"/> Bangladeshi</td> </tr> <tr> <td><input type="checkbox"/> Any other Asian</td> </tr> <tr> <th style="background-color: #cccccc;">Black or Black British</th> <td></td> </tr> <tr> <td><input type="checkbox"/> Caribbean</td> <td rowspan="2" style="vertical-align: top;"> This information provided by: Parent <input type="checkbox"/> Pupil <input type="checkbox"/> </td> </tr> <tr> <td><input type="checkbox"/> Somali</td> </tr> <tr> <td><input type="checkbox"/> Other Black African</td> <td></td> </tr> <tr> <td><input type="checkbox"/> Any other Black</td> <td></td> </tr> <tr> <th style="background-color: #cccccc;">Mixed /Dual background</th> <td></td> </tr> <tr> <td><input type="checkbox"/> White/Black Caribbean</td> <td rowspan="4" style="vertical-align: top;"> Birth Certificate to be shown </td> </tr> <tr> <td><input type="checkbox"/> White/Black African</td> </tr> <tr> <td><input type="checkbox"/> White/Asian</td> </tr> <tr> <td><input type="checkbox"/> Any other Mixed</td> </tr> </table>	White	Other Backgrounds	<input type="checkbox"/> British	<input type="checkbox"/> Vietnamese	<input type="checkbox"/> Irish	<input type="checkbox"/> Chinese	<input type="checkbox"/> Irish Traveller	<input type="checkbox"/> Other Ethnic Group	<input type="checkbox"/> Gypsy/Roma		<input type="checkbox"/> Any other White		Asian or Asian British		<input type="checkbox"/> Indian	I do not wish an ethnic background category to be recorded <input type="checkbox"/>	<input type="checkbox"/> Pakistani	<input type="checkbox"/> Bangladeshi	<input type="checkbox"/> Any other Asian	Black or Black British		<input type="checkbox"/> Caribbean	This information provided by: Parent <input type="checkbox"/> Pupil <input type="checkbox"/>	<input type="checkbox"/> Somali	<input type="checkbox"/> Other Black African		<input type="checkbox"/> Any other Black		Mixed /Dual background		<input type="checkbox"/> White/Black Caribbean	Birth Certificate to be shown	<input type="checkbox"/> White/Black African	<input type="checkbox"/> White/Asian	<input type="checkbox"/> Any other Mixed	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><input type="checkbox"/> Problems with ASD/Aspergers</td> <td style="width: 20%;"><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Behaviour</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Communication</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Consciousness</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Eating & Drinking</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Learning</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Medication</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Mobility</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Hand function</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Hearing</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Incontinence</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Palliative care</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Problems with Vision</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> No Disability</td> <td><input type="checkbox"/></td> </tr> <tr> <td><input type="checkbox"/> Other Disability</td> <td><input type="checkbox"/></td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">_____</td> </tr> <tr> <td colspan="2">_____</td> </tr> </table>	<input type="checkbox"/> Problems with ASD/Aspergers	<input type="checkbox"/>	<input type="checkbox"/> Problems with Behaviour	<input type="checkbox"/>	<input type="checkbox"/> Problems with Communication	<input type="checkbox"/>	<input type="checkbox"/> Problems with Consciousness	<input type="checkbox"/>	<input type="checkbox"/> Problems with Eating & Drinking	<input type="checkbox"/>	<input type="checkbox"/> Problems with Learning	<input type="checkbox"/>	<input type="checkbox"/> Problems with Medication	<input type="checkbox"/>	<input type="checkbox"/> Problems with Mobility	<input type="checkbox"/>	<input type="checkbox"/> Problems with Hand function	<input type="checkbox"/>	<input type="checkbox"/> Problems with Hearing	<input type="checkbox"/>	<input type="checkbox"/> Problems with Incontinence	<input type="checkbox"/>	<input type="checkbox"/> Problems with Palliative care	<input type="checkbox"/>	<input type="checkbox"/> Problems with Vision	<input type="checkbox"/>	<input type="checkbox"/> No Disability	<input type="checkbox"/>	<input type="checkbox"/> Other Disability	<input type="checkbox"/>	_____		_____		_____	
White	Other Backgrounds																																																																							
<input type="checkbox"/> British	<input type="checkbox"/> Vietnamese																																																																							
<input type="checkbox"/> Irish	<input type="checkbox"/> Chinese																																																																							
<input type="checkbox"/> Irish Traveller	<input type="checkbox"/> Other Ethnic Group																																																																							
<input type="checkbox"/> Gypsy/Roma																																																																								
<input type="checkbox"/> Any other White																																																																								
Asian or Asian British																																																																								
<input type="checkbox"/> Indian	I do not wish an ethnic background category to be recorded <input type="checkbox"/>																																																																							
<input type="checkbox"/> Pakistani																																																																								
<input type="checkbox"/> Bangladeshi																																																																								
<input type="checkbox"/> Any other Asian																																																																								
Black or Black British																																																																								
<input type="checkbox"/> Caribbean	This information provided by: Parent <input type="checkbox"/> Pupil <input type="checkbox"/>																																																																							
<input type="checkbox"/> Somali																																																																								
<input type="checkbox"/> Other Black African																																																																								
<input type="checkbox"/> Any other Black																																																																								
Mixed /Dual background																																																																								
<input type="checkbox"/> White/Black Caribbean	Birth Certificate to be shown																																																																							
<input type="checkbox"/> White/Black African																																																																								
<input type="checkbox"/> White/Asian																																																																								
<input type="checkbox"/> Any other Mixed																																																																								
<input type="checkbox"/> Problems with ASD/Aspergers	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Behaviour	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Communication	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Consciousness	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Eating & Drinking	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Learning	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Medication	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Mobility	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Hand function	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Hearing	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Incontinence	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Palliative care	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Problems with Vision	<input type="checkbox"/>																																																																							
<input type="checkbox"/> No Disability	<input type="checkbox"/>																																																																							
<input type="checkbox"/> Other Disability	<input type="checkbox"/>																																																																							

Religion of Child			
<input type="checkbox"/>	Anglican	<input type="checkbox"/>	No religion
<input type="checkbox"/>	Baptist	<input type="checkbox"/>	Other
<input type="checkbox"/>	Christian	<input type="checkbox"/>	Roman Catholic
<input type="checkbox"/>	Hindu	<input type="checkbox"/>	Sikh
<input type="checkbox"/>	Jewish	<input type="checkbox"/>	Unclassified
<input type="checkbox"/>	Methodist	<input type="checkbox"/>	United Reform Church
<input type="checkbox"/>	Muslim		

Pupil's Usual Mode of Transport to School			
<input type="checkbox"/>	Walk	<input type="checkbox"/>	Bus (type not known)
<input type="checkbox"/>	Cycle	<input type="checkbox"/>	Taxi
<input type="checkbox"/>	Car/Van	<input type="checkbox"/>	Train
<input type="checkbox"/>	Car Share (with a different household)	<input type="checkbox"/>	London Underground
<input type="checkbox"/>	Public service bus	<input type="checkbox"/>	Metro/Tram/Light Rail
<input type="checkbox"/>	Dedicated school bus	<input type="checkbox"/>	Other

First Language of Child

<input type="checkbox"/> First language is English If not English, please specify the language _____	First language is defined as the language the child was exposed to during early development and continues to be exposed to in the home. Please give as much detail as possible, including dialects e.g. Bengali (Sylheti), Chinese (Cantonese).
<input type="checkbox"/> Please tick here if you prefer not to say	

Signature: _____ Date: _____

Name (in block capitals): Title: