



From mountain to sea

The Safe Transport of Children and Young People

Draft Guidance for Schools

September 2017



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This guidance has been written by the Education and Children’s Services Additional Support Needs Team

Version	Status	Date	Reason for update
1.0	Guidance	2013	Original document
2.0	Draft guidance	June 2017	Update and refresh
2.1	Draft guidance	September 2017	GIRFEC information and enable hyperlinks

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Introduction

Aberdeenshire Council is committed to offering an excellent service to pupils, their parents / carers, schools and contractors. The following information is intended to ensure the safety and wellbeing of all those involved in the movement of pupils between home and school on organised transport.

GIRFEC

Children and young people have their needs assessed on an individual basis and support will be provided as required in line with [GIRFEC](#). The Getting it Right for Every Child (GIRFEC) is a national approach to improving the Wellbeing of children and young people in Scotland. Aims from GIRFEC which particularly apply in this guidance are:

- Put the child or young person at the centre of any assessment, planning and support, actively promoting their participation and engagement in any processes.
- Promote shared language through a [National Practice Model](#) providing a consistent approach to safeguard, ensure and promote the Wellbeing of children and young people.
- Embed individual a unique professional responsibility and accountability towards supporting children and young people

Please refer to [Appendix 1](#) for more information about GIRFEC and the 5 questions, together with [website links](#).

There is a statutory requirement for education authorities and their partners to work together to ensure the wellbeing needs of the child/young person as detailed in the [Children and Young People \(Scotland\) Act 2014](#).

Parameters for the application for free transport for pupils

The Council provides free transport to all children who live over two miles walking distance from school in the case of primary school children, and three miles for secondary school pupils, as long as they are in zone for the current school or are pupils with ASN.

Free School Transport may be provided for children with additional support needs at the discretion of the Quality Improvement Officer (QIO school) or Quality Improvement Manager for additional support needs (QIM ASN) and relates directly to pupil needs. School transport routes are determined by the pick-up locations required for pupils who are entitled to free school transport.

Free transport can be provided in a number of different ways.

- Some children will be given season tickets to use on public buses or trains
 - Other children will be transported on buses / taxis contracted by Aberdeenshire Council.
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- In some circumstances payments will be made to parents to transport their children to school (see Parent Contracts).

The Council does not guarantee "door to door" transport. The child may have to walk to a safe pick up / drop off point nearby.

Head teachers may use their discretion to apply to the QIO (school) or QIM ASN for free transport to pupils with additional support needs in the following instances (when pupils live within the normal catchment distances):

- The pupil is non-ambulant (wheelchair or buggy user) and lives over 1km from the school
- The pupil has medical reasons for requiring transport (e.g. heart disorder, poor balance / coordination etc.) which would make walking to school very difficult or likely to exacerbate their condition
- The pupil attending a special school / enhanced provision has a young sibling at another primary school and parent cannot be at both schools for start / finish times
- A pupil has a severe form of Autism Spectrum disorder and cannot manage to walk to school due to traffic noise / other sensory issues.

This list is not exhaustive and consideration will be given on an individual basis.

Transport commencement

Please refer to the [flow chart](#) at the end of this section, for employing an escort and the User Guide to the Relief Staff Finder on Arcadia:

The Client Transport Team requires at least 5 working days to organise and set up a contract for the transport of a pupil between home and school. HR must be informed immediately in order to start processing forms and pass information to payroll, as this may encounter delays at peak times.

All information about future requirements for pupils should be communicated to the Client Transport Team by Easter, for contracts commencing at the start of the next academic session (August). With the exception of a very few pupils whose needs change, or who move into area during the interim, this will allow the CTT to make provision for the majority well in advance of the start of the school year.

It is the responsibility of the school to produce a written risk assessment when required for a pupil on school transport. In the case of a pupil requiring a 'walking escort', a risk assessment must be written prior to making the request. A walking escort is employed on a discreet contract, and an escort employed for use in a taxi cannot be required to undertake this duty.

Risk assessment information and advice is available:

<http://asn-aberdeenshire.org/category/part-5/>

The Excursion risk assessment may be adapted:

<http://www.aberdeenshire.gov.uk/schools/outdoor/risk-assessment-documents/>

Health and Safety at Work information:

<http://www.aberdeenshire.gov.uk/business/health-and-safety/>

The job profiles and remit of a Children's Escort may be viewed on Arcadia:

[http://arcadia.ad.aberdeenshire.gov.uk/intranet/itradpub.nsf/0/189aa0a8e67945558025767900665101/\\$FILE/Children's%20Escort.pdf](http://arcadia.ad.aberdeenshire.gov.uk/intranet/itradpub.nsf/0/189aa0a8e67945558025767900665101/$FILE/Children's%20Escort.pdf)

User Guide to the Relief Staff Finder on Arcadia

<http://arcadia.ad.aberdeenshire.gov.uk/Intranet/E&REducaCMS.nsf/0/C21203FE93378FA780257B0B004EB28A?OpenDocument>

Communication

Communication with escorts

- The head teacher is the line manager for the escorts, and is responsible for their induction and training needs. For out-of-authority placements, the line management responsibility lies with the QIM ASN, however day to day communication will be via the head teacher.
 - School is responsible for all communication with the escorts to keep them updated of school activities and ensure that they are made to feel a valued part of the team.
 - Schools are advised to provide a risk assessment for the transport of any pupil who requires one, to be read and signed by the escort. Advice must be given for strategies to use for individual pupils.
 - Schools are responsible for sourcing relief escorts from the database, and ensuring that temporary staff are sufficiently well-briefed for them to carry out their duties safely.
 - It is the responsibility of the School to inform the escort / driver if a pupil has left school early and will not be travelling home on transport. School must also inform an escort if a child is arriving late due to an appointment to ensure that the escort returns in the afternoon to collect the child for the home run.
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- In the event of a child requiring a reduction or termination of school transport or variation of contract, it is the responsibility of the head teacher to notify HR and the Client Transport Team at least 1 month in advance. In certain circumstances escorts may be entitled to redeployment or redundancy (dependent on type of contract, length of service etc.) under their Terms and Conditions, and failure to notify the Authority incurs un-necessary costs, which may then be passed on to the school. If requirement ceases contact [HR Business Partner Team](#) in the first instance.

Communication with Aberdeenshire Council Teams

Schools are responsible for notifying the Client Transport Team and the Human Resources Business Partner Team about any changes in escort's hours, and must contact the Teams in advance of pupils leaving the school.

Failure to do so is costly as in certain circumstances escorts may be entitled to paid notice, redeployment or redundancy (dependent on number of hours reduced, type of Contract, length of Service etc. - see terms and conditions for employment under HR).

If requirement for the transport ceases contact HR Business Partner Team in first instance. For out-of-authority placements, it is the responsibility of the head teacher to inform the QIM ASN in advance of a child's transport being discontinued.

Training of escorts

- Basic escort training is provided via the school prior to commencement of employment, in the form of induction. In the case of out-of-authority placements, the induction is provided via the QIM ASN or representative.
- Sensory Support Services can deliver awareness raising sessions with the escorts prior to the first day of their contract, when transport is arranged for pupils with a sensory impairment. They may also contribute to risk assessment, in discussion with parents, pupil and appropriate agencies
- Pupil Support Assistants or Midas trained escorts do not need to undertake the Passenger Assistant Training Scheme (PATS) as their qualifications supersede this training
- Further training is available through the School (e.g. Passenger Assistant Training Scheme, Child protection, other etc.) according to requirements of the children on the transport. This training is provided from the Authority CLPL budget. Training should be agreed annually at the Employee Annual Review, or earlier if required (parental consultation).
- For out-of-authority placements training requirements are met via the QIM ASN or representative.

- Escorts are entitled to claim for mileage (if using a car) or other reasonable travel costs in line with Council Policy, to attend training under their Terms and conditions.

Use of Pupil Support Assistants / other school staff as Escorts / Escort absence, change of personnel

- Pupil Support Assistants (PSA) or other school staff (e.g. clerical, catering etc.) may apply to be employed as escorts on school transport on a permanent or temporary basis, provided that this does not impinge on their other duties. They may be used to cover the absence of another escort if required, but must first be employed as a relief escort and registered on the relief escort database, and may only be paid the relief escort rate for these duties.
- In the event of late arrival of transport, the PSA / other staff member may only claim for one of their duties for that period of time.
- Where PSA / other staff duties and escort duties follow on directly, the PSA / other staff member must obtain the agreement of their head teacher to act as an escort, as on occasion (due to delays) this may result in their late arrival at school.
- In exceptional circumstances such as lack of an escort at very short notice that would lead to cancellation of transport, a head teacher may employ a PSA / other staff member who is not on the relief register, in order to protect the transport run. In this instance the head teacher would first have checked the relief register and ascertained that no escort was available.

Health and Safety

- When a pupil is unsettled and demonstrating inappropriate behaviours that may escalate, it is the school's responsibility to decide whether or not to permit the pupil to travel on transport. The safety of all children and their escorts / drivers is paramount.
 - In exceptional circumstances, when a decision is taken to prevent a child from travelling on the child's designated transport, the school must inform the parent / carer and the child will remain supervised on school premises until collected.
 - All accidents or incidents involving escorts or pupils must be reported to / and recorded by the School (including physical injuries such as bites, scratches, damage to property etc.). Incident forms must be readily available in all schools. For out-of-authority placements, incidents and accidents must be reported to the QIM ASN. Reports may not be shared with parents without permission from the QIM ASN due to confidentiality / data protection.
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Medical

The head teacher and Parents / Carers are responsible for ensuring that the escorts have all necessary information about the medical requirements of the children being transported (see [Appendix 5](#)). Clear instructions must be in place regarding what to do in the event of an emergency. Escorts are **not** permitted to administer medication on school transport.

Adverse weather conditions

In the event of severe weather conditions:

- The head teacher is responsible for deciding whether the school is open to pupils, and must make this information available to pupils, parents, carers and others on the school weather line / school website. For out-of-authority placements the head teacher must contact the escort and driver directly to advise if transport is not required.
- The contractor will contact the school to notify them of any decision to suspend transport on that day.
- Head teachers may decide to close a school during session. They are then responsible for contacting the contractors to request transport for pupils, and contacting escorts to request their availability to accompany children home. Head teachers must also telephone parents or a pupil's emergency contacts to ensure that a responsible adult is available to meet the child.
- In exceptional circumstances a pupil attending an out-of-authority placement may need to spend a night at a designated address close to their school if they cannot be safely taken home due to weather conditions

Regarding payments for escorts / relief staff whose employment is affected by adverse weather conditions please refer to Arcadia Lite:

<http://arcadialite.aberdeenshire.gov.uk/wp-content/uploads/2011/11/SLAdverseWeatherGuidance.pdf>

Changes to journeys

Journeys may be changed due to the following:

- Additional children joining the vehicle or leaving the route for that vehicle
- Moving escorts to other journeys due to meeting children's needs or the creation of more efficient routing for transport
- Absence of an escort due to illness
- Any changes to journeys for pupils in placements outwith the Authority (e.g. Linn Moor, Camphill, and Orchard Brae Schools) are referred to EC&S for agreement. *This is particularly important where changes may be required by Social Work, who must liaise with EC&S as*

contract variance is a legal procedure (contracts are tendered under European Law for specific journeys)

When schools are notified of the change of an escort for the end of the school day, staff must ensure to prepare the pupil for this. The head teacher must ensure that the relief escort is given necessary details about pupils before the start of the afternoon run.

Accident, breakdown, failure of transport to arrive or cancellation of transport

- In the event of an accident or breakdown, the escort will advise the school who will contact parents / carers to reassure them and give an estimated time of arrival of the school transport, or update to information.
- If school transport fails to arrive, please contact the Client Transport Team.
- If transport is not required due to a pupil's appointment / illness, the escort may be redeployed to other duties for their normal working hours.

School Information

School notice boards / staffroom boards (check with your school) should be kept updated with information for escorts and all other staff. Every school should have information about Unions: Unison, GMB or Unite available to read, and updated regularly.

Aberdeenshire Council Policies are available through their [website](#):

School Policies must be available to be consulted in the school or supplied on request by the head teacher.

Escorts should be included in mailing lists for information such as school newsletters and other correspondence, in order to keep them updated and ensure their inclusion as part of the staff complement.

Employee Annual Review (EAR)

The Head teacher of the school is the line manager for the escorts (unless another member of staff is designated to this role).

- Escorts should receive a review meeting during the course of the academic year with the head teacher / teacher responsible. This may be a joint meeting for escorts. Paperwork must be issued prior to the meeting and each escort given the opportunity to identify any training
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needs. Time for a review meeting is paid by the school. Escorts attend In-service days pro rata, and this may provide a convenient time for reviews / training to be delivered.

- For out-of-authority placements the QIM ASN / representative meets with small groups of escorts to review and discuss training needs. Attendance of escorts for In-service is determined by the pattern of the school terms – when In-service days coincide the escort may be redeployed at an Authority school, or the day used for training requirements.

Attendance

Escorts must be informed about the Attendance Policy, which is available on Arcadia Lite:

<http://arcadialite.aberdeenshire.gov.uk/?p=2120>

And the Special Leave Policy:

<http://arcadialite.aberdeenshire.gov.uk/wp-content/uploads/HR/SLPolicyLGEQuickGuide.pdf>

- Escorts are responsible for informing the head teacher (or other designated staff) if they are unable to work due to illness.
- For out-of-authority placements, escorts must inform the administrator of the Additional Support Needs Team of their absence so that cover can be arranged. Appointments should take place out with working hours. Paid leave is given to attend an emergency appointment. A minimum of 7 days' notice should be given by an escort for a hospital appointment during working hours.

Escorts should be informed about the Human Resources Policies and Procedures Quick Guide on Arcadia Lite

<http://arcadialite.aberdeenshire.gov.uk/wp-content/uploads/2012/06/PolicyQuickGuide1.pdf>

If further assistance or information is required in regards to this any member of the HR&OD Team would be able to provide guidance.

Relief escorts

- If a relief escort is not available, the transport run cannot go ahead. Schools would need to notify parents in this instance.

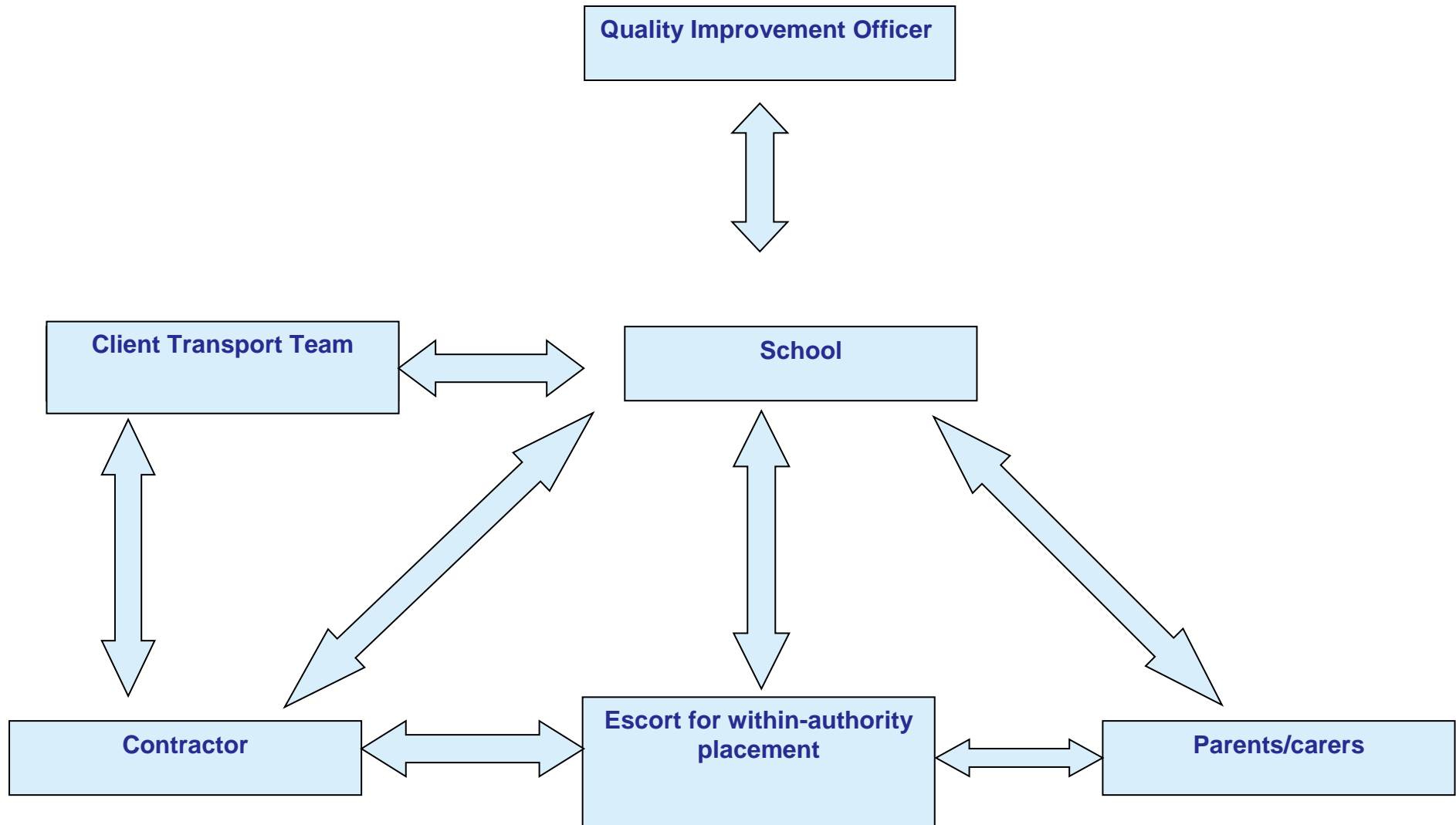
- A PSA who is not on the relief database may only be used in extreme situations as an alternative to cancellation of a transport run.
- It is school's responsibility to source a relief escort when required through the database, and clearly mark the fact that the escort has been booked. The head teacher must advertise the post for a fixed term contract when a relief escort is required for a longer term (than that to cover an absence).
- In the event of a relief escort being required to start work on an afternoon run, it is the school's responsibility to communicate to the escort any information required about the pupils being transported, including medical needs.
- Relief escorts are not required to work on In-service days – please refer to their Terms and Conditions from HR.

Provision of car seats and booster cushions.

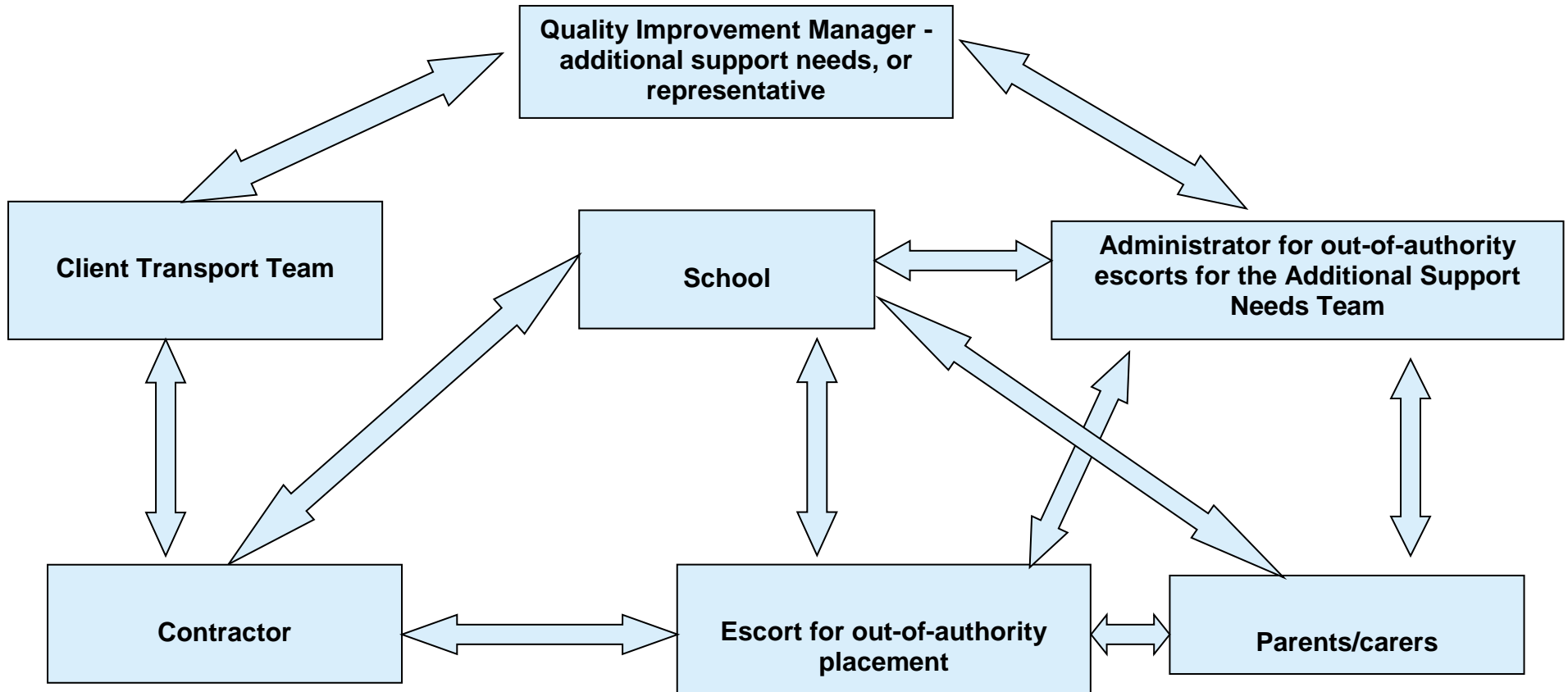
- Head teachers should ask for the advice of the Occupational Therapist to determine requirements for car seats / booster cushions. Occupational Therapists may also advise about the type of securing straps / devices required for wheelchair users, or alternatively consult with the Movement and Rehabilitation Service (MARS) at Woodend Hospital.
- Funding for car seats and booster cushions etc. is available from the Client Transport Unit at Woodhill House (secured from the Additional Support Needs budget).
- Head teachers must notify the Client Transport Team when a car seat / booster cushion etc. is no longer required, as provided it is in good condition (not been involved in an accident) it may be relocated for another pupil's use. Any seat which has suffered damage due to an accident should be discarded and replaced immediately.

Any seats required for pupil transport are the property of Aberdeenshire Council and may not be removed from the taxi.

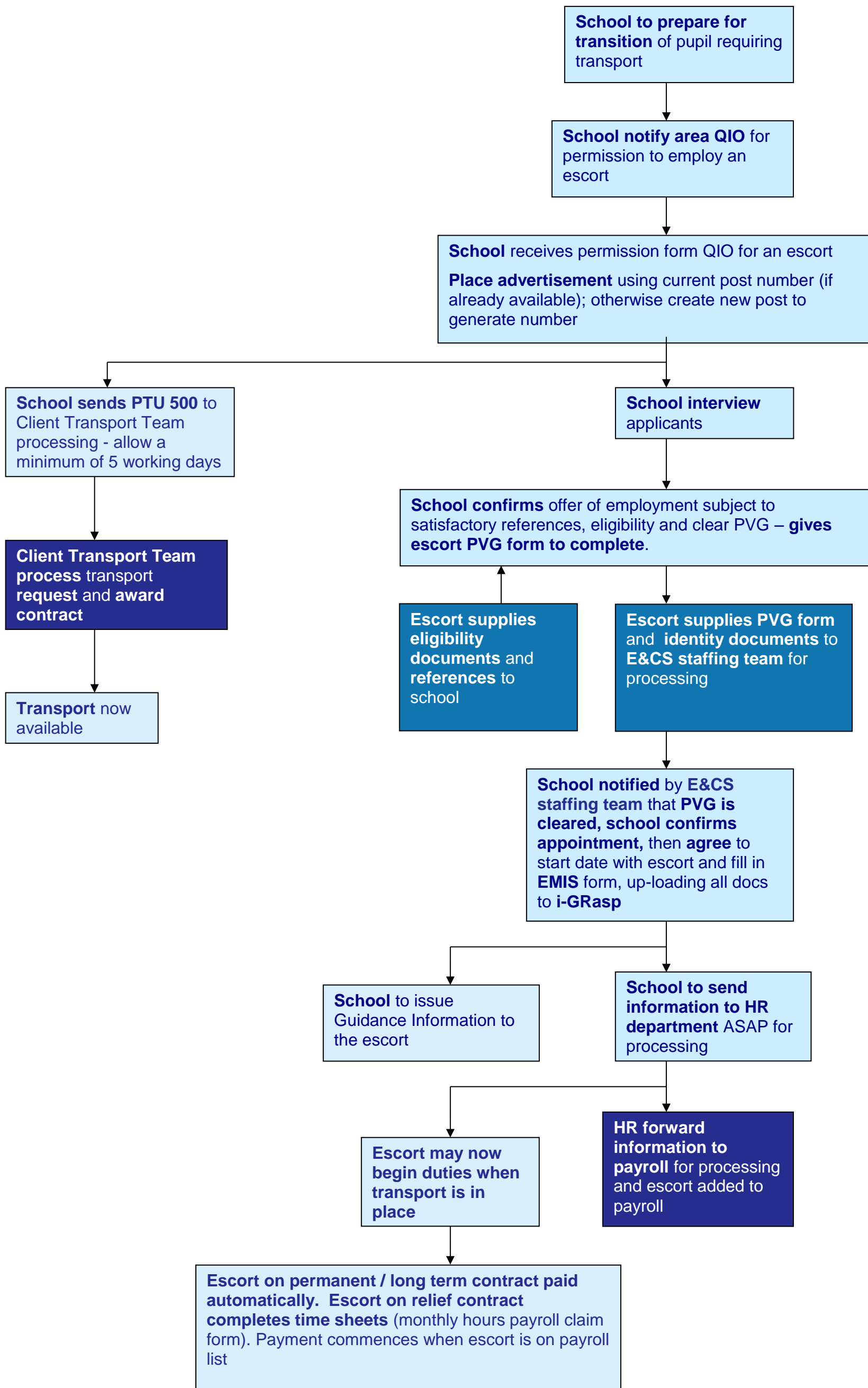
Flow chart of communication for within authority placement



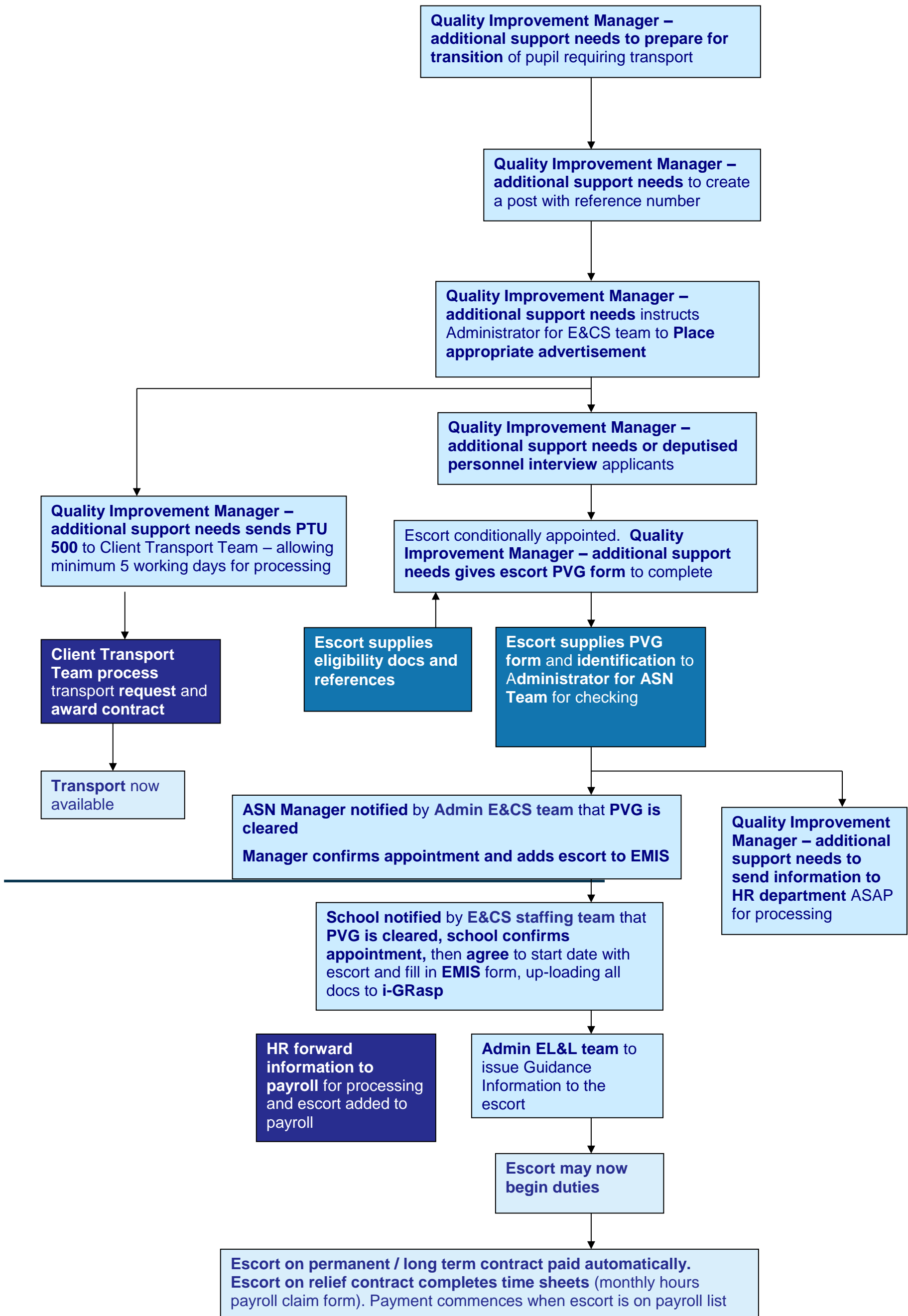
Flow chart of communication for out-of-authority placement



Flow chart for employing an escort for a 'within authority placement



Flow chart for employing an escort for an out-of-authority placement or the relief database



Appendix 1: GIRFEC information and the 5 questions

GIRFEC sets out a vision which aims to:

- Put the child or young person at the centre of any assessment, planning and support, actively promoting their participation and engagement in any processes.
- Promote shared language through a [National Practice Model](#) providing a consistent approach to safeguard, ensure and promote the Wellbeing of children and young people.
- Embed individual a unique professional responsibility and accountability towards supporting children and young people

What I need from people who look after me: specific aims are included in:

Everyday care and help: day to day physical and emotional care, enabling educational opportunities, meeting changing needs over time, listening and responding to the child

Keeping me safe: protecting from physical, social and emotional dangers

What I need from people who look after me:

Play, encouragement, fun: stimulation and encouragement to learn and enjoy life, responsiveness to the child or young person's unique needs and abilities, providing an educationally rich environment. Encouragement to the child/young person's progress by sensitive responses to interests and achievements.

The Five GIRFEC Questions

A child or young person's Wellbeing is influenced by everything around them, and by different needs they will have at different points of their life. Wellbeing concerns may arise from a child or young person's individual experiences or circumstance, or be posed by the impact of a family member or significant person's situation (this could include a non-resident partner of a parent/carer, or a peer).

When a Wellbeing concern is identified or raised for a child or young person, you should ask yourself the 5 GIRFEC questions:

1. **What is getting in the way of this child or young person's wellbeing?**
2. **Do I have all the information I need to help this child or young person?**
3. **What can I do now to help this child or young person?**
4. **What can my service or organisation do to help this child or young person?**
5. **What additional help, if any, may be needed from others?**

If you don't have all the information you need, you may need to gather further information either by speaking with the child or young person themselves, their parents

or carers, or from other people within your own, or other agencies. This will ensure you have as full a picture as possible to inform your own assessment, and informs any Request for Assistance made to other agencies if needed.

Findings from recent Significant Case Reviews tell us that sharing the right information at the right time can help improve outcomes for children, young people and their families. It can often help prevent low level concerns growing into more serious or entrenched difficulties. In the majority of cases, Wellbeing concerns should be openly discussed with the child, young person, family members or other person, including explicit discussions* around what information may need to be shared, why, and with whom.

**Unless there are child protection concerns*.*

Child Protection Prompt: If at any point concerns are raised which suggests a child or young person is at risk, of harm or neglect, or potentially at risk of harm or neglect, Child Protection Procedures must be followed without delay.

Please refer to the [Aberdeenshire GIRFEC](#) website for more information.

Appendix 2 - Glossary of Additional Support Needs

It is good practice to discuss each child's individual needs and behaviours with their parents / carers and agree appropriate strategies for assistance.

The following gives some general guidelines for the purpose of raising awareness, but it should not be used as a generalisation to be applied to each child.

Arthritis

Damage or disease to joints, resulting in inflammation and pain. Particular care may be required to ensure comfort during travel, and assistance with boarding / leaving the vehicle

Asthma

Narrowing of the airways in the lungs due to inflammation / spasm. A number of triggers may precipitate an attack including stress, temperature changes, exercise and allergens. Children usually carry inhalers which can be self-administered (or may require some assistance). Severe attacks may be life threatening.

Attention Deficit Hyperactivity Disorder

Very impulsive behaviours (difficulty in controlling actions) and lack of attention. Instructions need to be short and specific, and preferably accompanied by visual images to assist with processing. Need to be proactive in order to reduce opportunity for negative responses. Some children are prescribed stimulant medication to help them to control their behaviour better, but this takes time to be effective after administration.

Distraction / de-escalation techniques may be used if necessary.

Autism Spectrum Disorders

A developmental disorder with impairment of social and emotional skills, communication and imagination. Pupils insist on routines and may display obsessive behaviours. Verbal communication often requires reinforcement with visual clues. Regular and dependable routines offer support, and very consistent responses to behaviour. Children with **Asperger Syndrome** display similar difficulties but have greater language skills and understanding.

Short clear instructions should be given, and distraction / de-escalation techniques used.

Cerebral Palsy

A condition that affects muscle control and movement. It is usually caused by an injury to the brain before, during or after birth. Children with cerebral palsy have difficulties in controlling muscles and movements as they grow and develop. The degree of impairment varies from slight clumsiness, to severe spasticity, athetosis (involuntary movements), and ataxia (balance, gait, limb, eye and speech affected).

Cystic Fibrosis

It is caused by a faulty gene that controls the movement of salt and water in and out of the cells within the body. Cystic Fibrosis affects the internal organs, especially the lungs and digestive system, by clogging them with thick sticky mucus. This makes it hard to breathe and digest food.

Diabetes Mellitus

Develops when the body's immune system attacks and destroys the cells that produce insulin. As a result the body is unable to produce insulin and this leads to increased blood glucose levels, which in turn can cause serious damage to all organ systems in the body. Diabetes Mellitus is treated with daily injections of insulin and a controlled diet to ensure blood sugar is maintained at the correct level. A diabetic pupil may have a 'hypo' in which the blood sugar level falls to the point at which the pupil becomes unresponsive. Diabetic pupils usually carry sachets or tablets of glucose to be taken when the blood sugar level drops. Alternatively, sugary drinks may be administered.

Down Syndrome

In most cases, Down syndrome occurs when there is an extra copy of chromosome 21. This form of Down syndrome is called Trisomy 21. The extra chromosome causes problems with the way the body and brain develop.

Physical development is often slower than normal. Most children with Down syndrome never reach their average adult height. Children may also have delayed mental and social development. Instructions should be short and clear, and accompanied by visual materials to enhance understanding. Behaviour problems may be reduced by distraction / de-escalation. Children are often reassured by a regular routine. Some children need assistance to learn appropriate behaviours towards adults and peers (should be discouraged from hugging or kissing others) and incidents reported to School.

Epilepsy

Epilepsy is a tendency to have recurrent seizures (sometimes called fits). A seizure is caused by a sudden burst of excess electrical activity in the brain, causing a temporary disruption in the normal message passing between brain cells. This disruption results in the brain's messages becoming halted or mixed up. Epilepsy is

usually treated with anti-epileptic drugs (AEDs). They act on the brain, trying to reduce seizures or stop seizures from happening.

A child with Epilepsy will have a protocol if there is a regular occurrence of seizures.

Fragile X

Fragile X Syndrome is the most common known cause of inherited learning disability (mental handicap). It occurs in boys and girls and is associated with varying degrees of learning difficulty. Pupils with Fragile X often have difficulties with speech and language development, sequencing, spatial abilities, and short term memory and sometimes develop epilepsy. Some pupils exhibit autism-type behaviours, and require adherence to established routines. Instructions should be short and clear, and accompanied by visual materials to enhance understanding. Behaviour problems may be reduced by distraction / de-escalation.

Head Injuries

Acquired brain injuries may result from trauma (accident), shaking or tumours. The severity of the injury and the stage of development of the child when this occurs will influence its effect. Children often experience learning difficulties, and social / emotional difficulties. Due to the nature of head injuries, the effect on each child is unique, and therefore liaison with parents / carers is essential to ensure safe transportation.

Hearing Impairment

There is a wide variety of hearing impairments from mild (such as high frequency deafness) to severe (no natural hearing, may have cochlear implants). Escorts need to be aware that pupils with hearing impairments require face to face communication to facilitate lip reading. Escorts should speak at a normal rate without over emphasizing their articulation, but use of hand signs and body language may assist with conveying information.

Children who have a severe hearing impairment find it very tiring to listen, and may wish to have a quiet journey home. Competition from other noises such as the engine, traffic and other children talking also make conversation difficult. Training may be provided through the Sensory Support Services

<http://www.aberdeenshire.gov.uk/schools/additional-support-needs/sensory-support-services/>

Muscular dystrophy

There are many different types of muscular dystrophy, and each affects different muscles. The severity of conditions and how they affect individuals varies greatly from person to person. Most conditions are progressive, causing the muscles gradually to weaken over time, and can either be inherited or occur out of the blue where there is no family history.

Liaison with parents / carers and school staff is essential in order to ensure safe and comfortable transportation.

Multiple sclerosis

MS is the most common disease of the central nervous system affecting young adults. The symptoms experienced depend on the position and extent of the scarring or lesions within the central nervous system and on how much damage has occurred, so no two people with MS will have exactly the same set of symptoms. The common symptoms at the time of diagnosis are: fatigue, loss of vision in one eye, blurred or double vision, dragging a foot, weakness of limbs, reduced coordination, balance problems, numbness, pins and needles, burning sensations.

Liaison with parents / carers and school staff is essential in order to ensure safe and comfortable transportation.

Severe allergic reaction

Reaction to food, chemical, stings or other product causes inflammation of the skin (may exhibit hives or red colouration) and may cause difficulty in breathing due to inflammation of the airways. Pupil may carry anti-histamine or EpiPen for self-administration. Urgent treatment required, as very severe reaction may be life threatening.

Tourette Syndrome

TS is an inherited neurological condition. The key feature is tics, involuntary and uncontrollable sounds and movements. Children may mimic phrases and gestures (echolalia).

In most cases TS is also linked to other behaviours, such as Obsessive Compulsive Disorder, Attention Deficit Disorder, Autism Spectrum Disorder, Dyspraxia, and Dyslexia.

Liaison with parents / carers and school staff is essential in order to ensure safe transportation.

Turner Syndrome

Turner syndrome (TS) is a chromosome abnormality affecting only females, caused by the complete or partial deletion of the X chromosome. Girls with TS may have only a few or several of the features associated with TS, but short stature and infertility are present, there may also be evidence of sleeping, feeding and learning difficulties.

Liaison with parents / carers and school staff is essential in order to ensure safe transportation

Visual Impairment

Visual impairment is due to a dysfunction of either eye, the optic nerves or the visual cortex of the brain. It may be partial or total, acquired or congenital.

Liaison with parents / carers and school staff is essential in order to ensure safe transportation. Training may be provided through the [Sensory Support Services](#)

Appendix 3 - Passenger Assistant Training Scheme

PATs, the Passenger Assistant Training Scheme is a programme developed to enhance the passenger awareness skills of anyone who has care or supervision of passengers. It aims to improve passenger safety by providing the skills and information for passenger assistants to understand and meet the needs of their passengers.

PATS is a national accreditation and is relevant to volunteers as well as paid staff and covers legal, practical and safety issues in a comprehensive training package.

Session one: The role of the passenger assistant or escort

This is the foundation module and covers the role and responsibility of a passenger assistant including the legal and practical issues

- General responsibilities
- Supervising and assisting passengers
- Assisting the driver
- Personal safety awareness
- Emergencies and contingency plans
- Passenger assistance

Session two: Supervising children and young people with additional support needs

This includes supervising children and young people with a variety of additional support needs

- Working with a wide variety of people with learning difficulties, autism, dementia, physical disabilities, sensory restrictions, emotional or behavioural difficulties and people in mental or emotional distress

Session three: Assisting passengers with disabilities

This module includes boarding and alighting from vehicles and safety information concerning wheelchair users

- Safe use of passenger lifts and ramps
 - Safety for passengers who use wheelchairs and other mobility aids etc. in vehicles
 - Practical skills assessment
-

Wheelchairs boards / wheelchairs and WTOP equipment will be provided, and a bus must be available for sessions since the lift is integral to the training. Where possible booster seats and child car seats will also be available.

Escorts are paid for the hours required to attend this course.



Appendix 4 - Other training available

Child Protection

The child protection training course raises awareness of everyone's responsibilities to protect children. The course will cover:

- possible indicators of child abuse
- responsibilities to alert, and
- how to deal with children in these circumstances

This course supports staff in all aspects of safeguarding children in line with local guidance.

Moving and handling

This workshop is provided to people who have to move or handle children / young people with physical disabilities. Information will be given on safe practice, and the workshop includes practical 'hands on' training.

Epilepsy awareness training

Provided by the Epilepsy nurse from Royal Aberdeen Children's Hospital. Medication may not be administered on transport, but awareness of the types and signs of epileptic seizures can assist in early identification and pursuit of assistance for the child.

Diabetes awareness training

Provided by the Diabetes nurse from Royal Aberdeen Children's Hospital. Children with diabetes have to monitor their blood sugar levels carefully to avoid episodes of low (hypo) or high (hyper) glycaemia which can result in loss of consciousness and in extreme cases in death. Information is given regarding administration of glucose solutions / other preparations (sugary drinks) during a hypoglycaemic episode.

Autism awareness and information about specific pupils needs

Provided by Additional Support for Learning Teachers / Class teachers to assist escorts to understand and work with youngsters on the Autism Spectrum. This information gives insight into the kind of triggers that can disturb youngsters, and how to de-escalate anxiety.

Safe transport and use of oxygen

This [link](#) is a user guide to the transportation of oxygen

This is a [link](#) to the main legislation

Appendix 5 – Contact details

INFORMATION FOR ESCORT

Education Establishment to attend				
Pupil's Name		d.o.b.		
Parent/Carer's Name				
Address				
Post Code		Tel No.		
Emergency contact name				
Relationship of contact		Tel No.		
Date Transport to Commence				
Days Transport Required	School starting time	School finishing time		
Sunday				
Monday				
Tuesday				
Wednesday				
Thursday				
Friday				
Saturday				

INFORMATION FOR ESCORT continued

Pupil Name:

SPECIALIST EQUIPMENT REQUIRED FOR PUPIL**BUGGY/WHEELCHAIRS**

Delete where necessary

Is the pupil a buggy or wheelchair user?	Yes/No (<i>delete one</i>)
Please provide make & model of buggy/wheelchair:	
Will the pupil travel in their buggy/wheelchair?	Yes/No (<i>delete one</i>)
If no, will the pupil require assistance to their seat?	Yes/No (<i>delete one</i>)

CAR SAFETY SEATS

Is a car seat or booster cushion required?	Yes/No (<i>delete one</i>)
Make & model of car seat (not booster) if required?	

HARNESSES etc.

Does the pupil require special harnesses etc.?	Yes/No (<i>delete one</i>)
Please provide details of harnesses required	

Specialist equipment provided by the school / child's occupational therapist, or other qualified person. For out-of-authority placements equipment provided through the Quality Improvement Manager – additional support needs.

OTHER SPECIAL / MEDICAL REQUIREMENTS

Other specialist requirements/equipment (please specify)	
Is the pupil visually impaired?	Yes/No (<i>delete one</i>)
Does the pupil have a hearing implant?	Yes/No (<i>delete one</i>)
Does the pupil have a medical condition / allergy	Yes/No (<i>delete one</i>)
Please give details of any medical condition / emergency medication	
Can the pupil self-administer medication?	Yes/No (<i>delete one</i>)

**PLEASE NOTE THAT AN ESCORT IS NOT PERMITTED TO ADMINISTER
MEDICATION ON SCHOOL TRANSPORT**

INFORMATION FOR PARENT / CARER

Passenger Assistant's name	
Address	
Passenger Assistant's Tel no.	

Appendix 6 - Specifications for children's car seats

Child car seats: the rules **REVIEW REGULARLY!**

Overview

Children must use the right car seat until they reach 135 centimetres tall or age 12.

The type of car seat your child needs depends on their weight.

Only EU-approved baby seats, child car seats or booster cushions can be used in the UK. These have a label showing a capital 'E' in a circle.

Child car seat types

Type of seat	Weight range
Rear-facing baby seats	Babies up to 13kg
Forward or rear-facing baby seats	Children from 9-18kg
Forward-facing child car seats (booster seats)	Children from 15-25kg
Booster cushions	Children over 22kg

Some seats are adjustable and can be used as your child grows - check the seat label.

Using a child's car seat in the front seat

You can use a child's car seat in the front seat of a vehicle, if it fits.

Side-facing seats

Child car seats must not be used in side-facing seats.

Cars with integral child-sized seats

Some cars have their own (integral) child-sized seats that are only suitable for children. If the seat is approved for use instead of a child's car seat, it will have a label with an 'E' in a circle. The label will also show the weight of the child that it's approved for - usually above 15 kilograms.

If the child-sized seat isn't approved, the child will need to use their car seat.

Car seats for children with disabilities

Normal rules apply for children with disabilities unless a doctor says they're exempt on medical grounds. However, they may use disabled person's seat belts or child restraints designed for their needs.

The child's doctor / occupational therapist will advise about the most appropriate type of seating for the child / young person

For more information please go to the following [link](#): Seat belts: the law

Appendix 7 – Interventions

Case Studies

CASE 1

This case highlights the need for escorts and schools to follow correct procedure in communicating with the Client Transport Team about problems

Antecedent

The escort noticed that a taxi did not have an 'Aberdeenshire' plate.

Behaviour

The escort reported the fact to the school, offering the opinion that the transport was 'illegal'. The school prevented the children from travelling on the taxi, requiring parents to collect them. The Client Transport Team received a number of complaints from parents about use of 'illegal' transport.

Consequence

The Client Transport Team sent out a member of staff to check the vehicle, and discovered that as it could carry more than 8 passengers, there was no requirement (under transport law) for a taxi plate.

If correct procedure had been followed and the Client Transport Team contacted directly by the escort / school, a lot of trouble could have been avoided.

CASE 2

This case highlights the importance for the escort to be treated as a member of the school staff, and keep the school apprised in the event of problems.

Antecedent

The escort was unhappy with a driver due to perceived behaviours towards herself.

Behaviour

The escort did not make the school aware of the problems, and continued for a while doing her duties but becoming more unhappy.

Consequence

The escort suddenly resigned her post citing problems with the driver as the reason. Had the escort given information to the school, it might have been possible to support her through what was obviously a difficult time, and the situation may have been resolved.

CASE 3

This case highlights the importance for escorts of following set procedures for complaints, and the necessity to inform the school

Antecedent

An escort had concerns about a vehicle being used for a transport run, but failed to make the school aware of her worries.

Behaviour

The escort asked the taxi driver to take her to the company headquarters in Aberdeen where she filed a complaint about the vehicle.

Consequence

The Client Transport Team were billed an additional £120 for the unauthorised journey. The escort was reprimanded by the line manager for breach of procedures and the resulting cost.

CASE 4

This case highlights inappropriate behaviour in the case of a school transport driver and the consequences.

Background

A pupil received funded transport from home to an Academy. The pupil was assessed as able to travel independently without an escort.

The driver on the run had been fully Disclosure Checked (PVG's had not been introduced at the time) and had been a school transport driver for a number of years.

Antecedent

The driver needed to relieve himself halfway through the journey.

Behaviour

He stopped the car in a lay-by and left the vehicle before moving to the side of the car to urinate.

The driver did not consider how he stood in relation to the car, and the pupil was able to see what he was doing. The pupil did not say anything to the driver at the time, but did tell a parent at home.

Consequence

The driver was suspended subject to an investigation by both the Police and Council. Although the police deemed that there was no case to answer to, and it had been an unfortunate error of judgement with no other intent, it was decided that he was not suitable to transport school children from that point on. The driver also lost his job with the taxi company.

CASE 5

This case study focuses on the problem resulting when a passenger assistant intervened physically with a child.

Background

A teenage boy received funded transport to and from a school on a twice weekly basis. He was unable to cope with change and a requirement of his transport was for the same route to be taken on each journey. An escort was employed to accompany him. It should be noted that the teenager's physical development was not affected by his disability and he was a fully grown adult male.

Antecedent

On the journey to School a number of unforeseen road-works and diversions meant the vehicle did not take the usual route. The teenager became agitated, but the escort managed to divert his attention and keep him calm. However, at one set of road-works, a temporary traffic light system was in operation as opposed to a diversion, and the teenager became aware that the vehicle had stopped moving. At this point the escort could not divert his attention and the teenager hit out.

Behaviour

The teenager managed to hook an arm around the throat of the driver. The driver managed to loosen teenager's grip and lean forward out of his reach. The escort tried to physically restrain the teenager by pulling him back towards his seat. This resulted in the teenager hitting the escort.

The taxi driver pulled the vehicle over to the side. The escort exited the vehicle – she suffered a bruise and sprained wrist, although at first it was a suspected fracture.

The driver remained in the front of the vehicle and spoke to the teenager calmly in an attempt to get him to calm down and to allow the escort time to recover. After 10 minutes they were able to resume the journey.

Consequence

Following this incident, it was assessed by the school that the teenager should have 2 escorts and should travel in a vehicle fitted with a partition between the passengers and driver. The new passenger assistants were given a copy of the risk assessment written by the school and training was given in how to support the teenager during the journey.

Glossary

Admin E&CS team	Administrator for the Additional Support Needs team responsible for arranging transport for out-of-authority placements
ASAP	As soon as possible
CLPL	Continuous Lifelong Professional Learning
Contractor	Driver or Manager of company employed to provide transport
CTT	Client Transport Team (formerly Pupil Transport Unit)
EAR	Employee Annual Review - meeting to discuss training requirements and reflect on working practice
E&CS	Education and Children's Services
EMIS	Employment Management Information Service
HR	Human Resources
HR&OD Team	Human Resources and Organisational Development
i-GRasp	Information system on Arcadia / Arcadia Lite
Journey	Pathway connecting two destinations e.g. home and school
MARS	Movement and Rehabilitation Service (based at Woodend Hospital)
Non-ambulant	Not able to walk
Out-of-authority	Outwith the zone for any school in the Aberdeenshire local authority catchment
Physical Intervention	Use of physical force to change behaviour
PSA	Pupil Support Assistant
PTU 500	Pupil Transport Unit form
PVG	Protection of Vulnerable Groups
QIO	Quality Improvement Officer
QIM ASN	Quality Improvement Manager – additional support needs
Redeployment	Move to another post with the same conditions of service
Redundancy	Termination of contract due to post no longer being required. Some paid notice may be included depending on conditions of service

Seizure	Illness caused by Epilepsy or other trigger resulting in temporary loss of ability to respond, may be accompanied by jerky limb movements and/or other physical signs
Social Stories	Photo or symbol supported stories to assist a child's understanding of acceptable behaviours in a particular situation e.g. travel in a taxi
Transport	To include contracted taxi, minibus, bus, or public transport, or method of conveying child in a vehicle to/from school
Violent incident	Any incident when the child / young person has employed physical force inappropriately with a peer or adult
Visual prompts	Objects of reference, photos or symbols which assist the child's understanding / to follow instructions

