Placement Organisation Form

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| **Name of Placement Organisation:** | | | |
| **Address:** | | | |
| **Telephone:** | | | |
| **E-mail:** | | | |
|  | | | |
| **Health & Safety** | **Yes** | **No** | **N/A** |
| Do you have a written Health & Safety policy? |  |  |  |
| Is Employer’s liability insurance held (minimum indemnity limit €13m)? |  |  |  |
| Is Public liability insurance held (minimum indemnity limit €6.5m)? |  |  |  |
| Is Professional Indemnity insurance (minimum indemnity limit €6.5m) held? |  |  |  |
| Is there a formal procedure for reporting accidents and incidents? |  |  |  |
| By what means will you report to UCC any accidents involving the student? |  | | |
| By what means will you report to UCC any absences of the student? |  | | |
| Has a risk assessment been carried out for the activities the student will be involved in? |  |  |  |
| When was the risk assessment last reviewed? |  |  |  |
| Have the results of the risk assessment been implemented? |  |  |  |
| **Training** | **Yes** | **No** | **N/A** |
| Do you have a written policy regarding the training of all persons working in your organisation? |  |  |  |
| Will the student receive training on emergency procedures? |  |  |  |
| Will the student receive training on equipment? |  |  |  |
| Will the student receive training on protective equipment and clothing? |  |  |  |
| Will the student receive any other Health & Safety related training? |  |  |  |
| **Further Control Measures** | **Yes** | **No** | **N/A** |
| Will the student require any immunisations? |  |  |  |
| Any other health and safety considerations? |  |  |  |
| Will the student need to sign a confidentiality agreement? |  |  |  |
| Is there a process for reporting grievances? |  |  |  |
| Is there a Garda Vetting procedure? |  |  |  |
| Is there a child protection policy? |  |  |  |

I believe the above statements to be true and understand I may be asked to provide documentary evidence.

**Placement Organisation/Supervisor:** ………………………………………………….. **Tel:** …………………………………..