Health and Safety Questionnaire

(name of module)

This form should be completed by the placement provider (NGO)

Final Recipient: (The University of Liverpool)

Part 1.

Section 3 of the Health and Safety at Work Act 1974 (England and Wales) imposes a statutory duty on an employer in relation to risks to the health and safety of non-employees. This could be said to apply to the University for the benefit of the students in the sense that in arranging for an outplacement the University is "conducting its undertaking" and so far as is reasonably practicable, should take measures to protect students' health and safety. To enable the University to fulfil its "statutory and moral duty towards students" we request that community/ voluntary groups complete the following questionnaire. Thank you for your cooperation.

Part 2

- 1. Name of organisation (please print):
- 2. Address of organisation Telephone
- 3. Please circle as appropriate

Do you have a written Health and Safety policy?	YES	NO

2. Have you carried out risk assessments to identify	YES	NO
possible hazards as required by the Management of		
Health and Safety at Work Regulations 1999?		
3. Do you have Employers' Liability insurance?	YES	NO
4.Do you have Public Liability insurance?	YES	NO
5. Do you have a fire certificate for your premises?	YES	NO
6. Do you have suitable and sufficient fire warning and	YES	NO
evacuation systems?		
7. Do you have suitable and sufficient fire extinguishing	YES	NO
equipment and is this equipment maintained in a		
serviceable condition?		
8. Do you have suitable and sufficient first aid equipment	YES	NO
and assistance available?		
9. Do you have competent persons trained to ensure the	YES	NO
safe evacuation of all persons from buildings in the event		
of serious and imminent danger?		

Areas	to	be	cov	ered	for	stud	ent	indu	ıctio	n

Emergency procedures for serious and imminent danger
Fire precautions
First aid provisions
Accident reporting
Any other procedures or precautions which should be taken to be relevant to
the type of work being undertaken and the work environment concerned.
Name of person completing questionnaire: Position
Signature
Date
Thank you for taking the time to complete this questionnaire.
Please return to: (Tutor name, address, telephone number, e-mail)

Students: Risk assessment

THE UNIVERSITY OF LIVERPOOL

Risk Assessment: (name of module)

This form should be completed by the tutor in consultation with the student for project work off campus.

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1. Department:	_
Supervisor:	
Namephone number e-mail	
2. Brief Description of Project:	_
3. Name(s) of those carrying out the fieldwork:	
4. Hazard / Risk Analysis:	
Is there felt to be any risk to personal safety?	Yes / No
Comments on the risk – points to raise with the placement	provider:
Will visits take place during hours of darkness?	es / No
If so, what extra precautions are required?	
Has the tutor covered issues concerning contact with men	nbers of the
public during the placement? (e.g. on not touching, working	g with
children)	

5. Precautions:

What arrangements are in place for the student leaving an itinerary of movements and expected return times with a responsible person?

6. Are the following precautions appropriate?

	Yes	No	N/A	Notes
Pre-visit checks, eg on				
records				
Visiting in pairs with a				
companion in earshot				
Personal alarms				
Mobile 'phones				
Regular reporting to base				
and follow-up procedure				
Training in interpersonal				
communication skills				
Parking in appropriate well-lit				
areas				
Security locks on vehicles				
etc.				
Anti-theft devices and alarms				
Other precautions (state)				

7.	Provided the attached questionnaire to the placement provider						
	has been completed sat	isfactorily, work may proceed subject t	to				
	the conditions stated in this assessment.						
	Signed:	Status:					
Date:							