

Work Placement Self Found / Flexible Placement Form

1 Employer details –

The name and Head Office address of the organisation. Workplace location is where the pupil is based.

Name of Organisation

Nature of Business

Number of Employees

Head Office/HQ
Address

Postcode

Will the work placement take place at this location? YES

If not, please provide the location address:

Workplace Location
Address

Postcode

Placement Supervisor

Job Title

Tel

Email

Work placement title

Have you hosted this work placement in the last 12 months?

Yes - please complete sections 2, 3, 6 and 7

No - please complete the remainder of this form

2 Placement details

Placement description - Please detail the type of tasks and duties the pupil will undertake.

Days of work

Start date

End date

Hours of work: Start time

End time

Lunch Options: (please tick)

Employer to provide

Packed lunch

Canteen on site

Buy locally

Dress Code: (please tick)

Smart

Smart/casual

Sportswear

Dancewear

Industrial

Additional Requirements – pre-placement interview or contact, mandatory schools subjects, travel arrangements

3 Pupil details

Pupil Name

Class

School

Teacher

4 Risk Assessment – Provider’s Hazard Identification and Control Measures

A full induction should be given to the pupil on first day which covers Accident Reporting, Emergency Procedures, First Aid Arrangements, Prohibited Equipment or Areas, Workplace Hazards.

A risk assessment should have been carried out on the tasks the pupil will be undertaking and the pupil should be supervised and mentored by a competent person at all reasonable times.

Health & Safety contact Job title Tel

Please use the checklist below to help you identify any significant hazards.

Hazard	Control Measure	Significant Hazard?	
		Yes	No
Asbestos (building maintenance/vehicle repairs)	Identify dangerous substances. Pupil should be prohibited from working with them.		
Display screen equipment (computer/cash register)	Regular task breaks, instruction.		
Electricity	Regular P.A.T. testing, instruction.		
Equipment/ Machinery (mechanical/electrical)	Full instruction and supervision. Guarding all hazardous machinery, local exhaust venting, P.P.E., or pupil to be involved in observation only.		
Falls from height (platforms/ladders/fragile surfaces)	Pupil not allowed to work above a fall height of 1.5m.		
Hazardous substances (cleaning products/oils)	COSHH, instruction and supervision. Pupil involved only with low hazard substances.		
Manual handling (lifting/carrying/pushing/pulling)	Instruction. Pupil prohibited from lifting anything too heavy or awkward.		
Noise (machinery/tools/equipment/environment)	Reduce exposure and/or P.P.E. (ear plugs/defenders).		
Pressure systems (gas/air receivers/steam boilers)	Prohibit or reduce use of pressure systems and/ or P.P.E.		
Radiation (X-ray/UV/lasers/radioactive materials)	Prohibit or reduce exposure to rays, P.P.E.		
Slips/Trips/Falls (spillages/trailing cables/flooring)	Keep areas tidy, clear any spillages, deploy warning signage, instruction.		
Transport (Fork lift trucks/Cars/HGV)	Instruction, supervision, segregation (between people and vehicles, designated walkways), no use of quad bikes.		
Vibration (machinery/transport/powered hand tools)	Prohibit or reduce exposure, P.P.E., instruction, supervision.		
Working with animals (farm/domestic/wild)	Assess any task or animal, P.P.E., instruction, supervision.		

5 Personal Protective Equipment – If an identified control measure is to wear or use protective clothing or equipment, please specify items required, e.g. hard hat, safety boots or special eyewear and whether you will provide this or wish the school to provide.

Employer will provide

School to provide

6 Employers’ Liability Insurance details – Please refer to section 10 of the Letter of Understanding. There must be valid Employers’ Liability Insurance over the placement period.

Name of Insurance Company

Insurance policy number Date of Expiry

7 Acceptance and Agreement

I confirm that -

- I have read the attached Letter of Understanding between the councils and this firm/organisation, and that all points are acceptable to me and I have taken all appropriate action.
- This company’s Employers’ Liability Insurance will cover a pupil for the duration of his/her Work Placement.
- The pupil will receive induction and instruction, which includes Health and Safety issues covering identified hazards and control measures, by a competent person.
- The pupil will be supervised at all reasonable times.
- The details provided may be held on a database to support Work Placements and other similar activities.

Name of Organisation Name

Signed Position Date

THIS AGREEMENT SHOULD BE RETAINED BY THE PROVIDER

Letter of Understanding between the Councils and Firms/Organisations providing Work Placements

To ensure that the implications of the Work Placement programme, and arrangements between the firm/organisation (the Provider) providing the work placement and the Scottish Borders Council are fully understood, we have set out the following essential points:-

- 1 The pupil will be expected to carry out meaningful work during the period of the work placement. The work will be planned by a responsible person and the pupil will be given appropriate instruction before, and supervision whilst, participating in any activity. Under no circumstances should a pupil operate prohibited machinery as defined by law, local byelaws and Health & Safety legislation.
- 2 The Provider will ensure that the pupil does not operate any hazardous machine or equipment, or work in any hazardous situation, or carry out any work of an unsuitable or objectionable nature. At all times, the provider will ensure that the pupil is working within the Health and Safety at Work Act 1974 as amended and any regulations made under that Act, and in particular the Management of Health and Safety at Work Regulations 1999.
- 3 The Provider will ensure that the pupil wears protective clothing whenever appropriate.
- 4 The Provider will ensure that all personnel directly involved in working with the pupil are aware of the responsibilities associated with regard to their duty of care towards them. Instruction in the procedures to be followed with regard to any untoward incident or accident should be provided.
- 5 By prior appointment, the Provider may be visited by health and safety officers contracted by the councils to help you ensure that the appropriate standards of health, safety and welfare will be met in relation to the pupil. **You will be asked to show a copy of an up-to-date Employers' Liability Insurance certificate.**
- 6 The pupil will not receive any payment for this work.
- 7 The pupil must not work outside the hours stipulated in the job description.
- 8 If required, the pupil will sign an undertaking that he/she will not disclose any information confidential to the Provider without the Provider's approval, and that he/she will observe all safety, security and other instructions given by the Provider.
- 9 The pupil's parent/guardian will undertake to ensure that the pupil carries out these obligations and will confirm that he/she is not suffering from any medical condition which could create a hazard to the pupil or those working with him/her.
- 10 The Provider will ensure that its Employers' Liability Insurance, and Vehicular Insurance if applicable, is extended to cover the pupil for the period of the work placement. Firms/Organisations must not receive pupils before they have advised their insurers and obtained confirmation of cover from their insurers.
- 11 The pupil on work placement is on an extension of school attendance. Accordingly, where a pupil fails to attend, has an accident or feels unwell, the Provider must notify, by telephone and without delay, the Work Placement Co-ordinator of the pupil's school and the pupil's home if a telephone number is given. If required the pupil should be allowed the use of medical room facilities, where available.
- 12 For Health and Safety purposes, the pupil on work placement should be treated as if he/she was an employee of the Provider.

Declaration

Please confirm that this letter of understanding is acceptable to the Provider by signing the self-found/flexible placement form and returning it to the pupil/school making the request.

Please Note

The person who completes and signs the accompanying document on behalf of the Provider may not be directly responsible for supervising the pupil. Therefore we would ask that the pupil's direct supervisor/responsible person is made aware of the content of this agreement, especially in relation to Health, Safety and Welfare.