



VICE PRESIDENT FOR FINANCE, RESOURCES & DIVERSITY FUNCTIONAL AREA

(Includes Finance, Human Resources, Ancillary Services & Computer Services)

ANCILLARY SAFETY STATEMENT

JUNE 2024 Version 13

This Ancillary Safety Statement is to be read in conjunction with the Parent Safety Statement, Dundalk Institute of Technology

Table of Contents

1. Introduction	3
2. General Statement of Policy within VPFRD Functional Area.....	4
3. VPFRD Functional Area - description.....	5
3.1 Finance	5
3.2 Human Resources.....	5
3.3 Ancillary Services.....	5
3.4 Computer Services.....	5
4. VPFRD Functional Area – Overview of Risk Assessment Process.	6
5. Risk Assessment Section	7
6. Appendices.....	8
6.1 Appendix 1, List of responsible persons & VPFRD functional area safety management organisational chart	8
6.2 Appendix II, Safe Work practice procedure sheets	9
6.3 Appendix III, Incident report forms.....	10

1. Introduction

Under the provisions of The Safety, Health and Welfare at Work Act 2005, Dundalk Institute of Technology is required to ensure so far as is reasonably practicable the health, safety and welfare of all its employees and students engaged in work or study, and all visitors to the Institute premises.

In view of the recent extensive expansion that has taken place on the campus and in order to comply with the requirements of the 2005 Act, the Institute has decided to review and update its Safety Statement. Dundalk Institute of Technology's safety management programme consists of a Parent Safety Statement supplemented by seven ancillary Safety Statements, which apply to different functional areas of the Institute. These ancillary Safety Statements take account of the diverse range of activities, which apply across the Institute.

The Institute's overall Safety Statement is comprised of the following documents:

- **Parent Safety Statement**
- **Ancillary Safety Statement – School of Business & Humanities**
- **Ancillary Safety Statement – School of Health & Science**
- **Ancillary Safety Statement – School of Engineering**
- **Ancillary Safety Statement – School of Informatics & Creative Media**
- **Ancillary Safety Statement – Vice President for Finance, Resources & Diversity Area**
- **Ancillary Safety Statement – Vice President for Academic Affairs & Registrar Area**
- **Ancillary Safety Statement – Vice President for Strategic Planning, Communications & Development Area**
- **Emergency Evacuations Procedures Manual**

The purpose of the Ancillary Safety Statements is to provide details of the specific hazards and control measures that apply in these areas. Each Ancillary Safety Statement should be read in conjunction with the Parent Safety Statement.

2. General Statement of Policy within VPFRD Functional Area

The Vice President for Finance, Resources & Diversity Functional Area is committed to ensuring that high standards of health and safety are achieved and maintained throughout all areas under our control. The key mechanism for achieving and maintaining safety is Risk Assessment, by which we identify hazards, which have the potential for harming health or causing accidents, evaluate the risks arising and select and implement appropriate precautions.

Throughout the Vice President for Finance, Resources & Diversity Functional Area, Risk Assessments will be carried out in all areas under our control periodically (at least once per year going forward). It is essential that all staff and students contribute and cooperate to this process, thus ensuring that the Vice President for Finance, Resources & Diversity's Functional Area's stated objective of providing in so far as is reasonably practicable a safe place of work is achieved.

The process of Risk Assessment in Vice President for Finance, Resources & Diversity Functional Area enables us to take all relevant precautions to ensure that Dundalk Institute of Technology's legal standard as an employer is fulfilled particularly in relation to:

- Exercising all due care
- Putting in place necessary protective and preventative measures
- Identifying hazards and assessing risks likely to result in accidents or ill-health
- Not being required to take further measures where these would be grossly disproportionate having regard to the unusual, unforeseeable and exceptional nature of the circumstances.

Signed on behalf of Vice President for Finance, Resources & Diversity area

Mr. Hugh Nolan

***Vice President for Finance, Resources & Diversity
Dundalk Institute of Technology***

3. VPFRD Functional Area - description

The Vice President for Finance, Resources & Diversity's Functional Area is divided into four areas as follows:-

- 1. Finance**
- 2. Human Resources**
- 3. Ancillary Services**
 - Restaurant
- 4. Computer Services**

Refer to Appendix I for Vice President for Finance, Resources & Diversity's Functional Area safety management organizational layout.

3.1 Finance

Finance is primarily composed of office staff who are predominantly located on the ground floor of the Whitaker Building.

3.2 Human Resources

Human Resources is primarily composed of office staff who are predominantly located on the ground floor of the Whitaker Building Ancillary Services

3.3 Ancillary Services

Ancillary services on campus are provided by separate individual companies, in the following areas:

- Restaurant (KSG Limited)

Each of these companies is responsible for their own individual Safety Statements & Risk Assessment documents.

3.4 Computer Services

Computer Services is composed of IT Staff who are located throughout the College.

4. VPFRD Functional Area – Overview of Risk Assessment Process.

This Ancillary Safety Statement covers all activities carried out by the Vice President for Finance, Resources & Diversity's Functional Area, and should be read in conjunction with the Institute Parent Safety Statement. The hazards currently pertaining to the VPFRD'S Functional Area are listed on Quantitative Risk Assessment Sheets, which have been compiled for the four areas, as are the control measures required to deal with the risks posed by these hazards.

Risk Assessment will be carried out annually in the four areas. The person responsible for ensuring that Risk Assessment procedure is carried out is the Vice President for Finance, Resources & Diversity

The Risk Assessment process, adopted by the Vice President for Finance, Resources & Diversity's Functional Area identifies all hazards posed by activities within the F.C.F.A. and quantifies the risk posed by same. In most cases, these hazards can be controlled by adhering to procedures detailed in Safe Work Practice Procedures.

Safe Work Practice procedures are in place throughout the F.C.F.A. and copies of Safe Work Practice Sheets for different hazardous activities in the four areas within the F.C.F.A. are listed in this document. The primary objective of the Safe Work Practice procedures is to eliminate, reduce or control any risks posed as a result of the hazards that exist throughout the F.C.F.A. These Safe Work Practice Procedures are also displayed prominently in the relevant areas to which they apply.

Adherence to the Safe Work Practice Procedures is the primary means of risk control in the Vice President for Finance, Resources & Diversity's Functional Area. However, hazards may arise from time to time, which are not covered by these procedures. **Under Section 13 (h)(i - iii) of the 2005 Safety, Health & Welfare at Work Act, all staff are required to report any hazards that they notice or observe to their employer. Within the Vice President for Finance, Resources & Diversity's Functional Area, any hazard noted or observed by any member of staff must be reported to their immediate superior.**

As part of the annual Risk Assessment process, all Safe Work Practice Procedure Sheets will be reviewed and updated to ensure that they take account of any changing circumstances that have arisen during the course of the year.

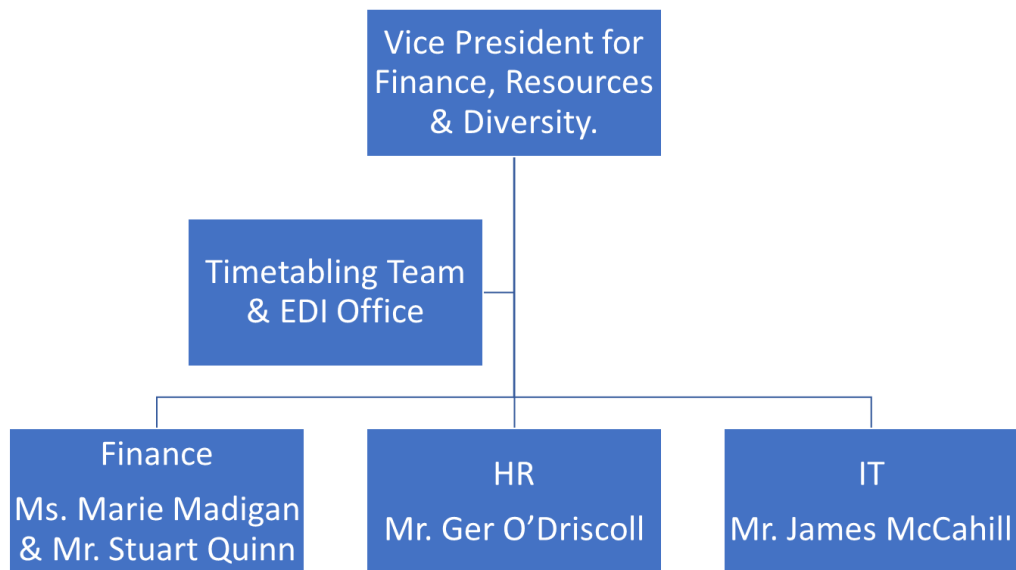
5. Risk Assessment Section

Please note that Risk Assessment is carried out annually in each functional Area of DKIT. Records of Risk Assessment for the Vice President for Finance, Resources & Diversity's Functional Area are maintained in the Admin Office (W115) as part of the Functional Area Safety File.

6. Appendices

6.1 Appendix 1, List of responsible persons & VPFRD functional area safety management organisational chart

Vice President for Finance, Resources & Diversity	Mr. Hugh Nolan
Finance	Ms. Marie Madigan / Mr. Stuart Quinn
Human Resources	Mr. Ger O'Driscoll
Ancillary Services	Ms. Michelle Hopkins, KSG
Computer Services	Mr. James McCahill



6.2 Appendix II, Safe Work practice procedure sheets

Please note the Safe Work Practice Sheets are prepared and reviewed annually in each Functional Area of DKIT.

Copies of Safe Work Practice Sheet for the Vice President for Finance, Resources & Diversity's Functional Area are maintained in the Admin Office (W115) as part of the Functional Area Safety File.

Copies are also available online.

<https://www.dkit.ie/health-safety/safety-statements-including-risk-assessments/routine-safe-work-practice-sheets-including-event-ra>

6.3 Appendix III, Incident report forms

ACCIDENT / INCIDENT REPORT FORM

Note:

This form should be completed whenever an accident or incident occurs which results in injury or damage to personnel or property.

If personnel or property WERE NOT injured or damaged during the Accident/ Incident, do not use this form. Use the NEAR MISS REPORT FORM.

Accident / Incident Report Form	
i	Name of person involved in Accident/Incident:
ii	Address:
	Phone:
iii	Who was involved in the Accident/Incident: <input type="checkbox"/> Student <input type="checkbox"/> Employee <input type="checkbox"/> Public <input type="checkbox"/> Contractor <input type="checkbox"/> Visitor
	iv Occupation:
v	If an employee of the Institute please state Department:
vi	If no, please elaborate:
vii	Particulars of Accident/Incident & circumstances under which the Accident/Incident occurred: <i>Use additional pages and/or photos if necessary.</i>
viii	Place:
ix	Time:
	Date:
x	Witness Phone No & Address:
	Witness Phone No & Address:
xi	When and to whom was the Accident/Incident initially reported?

xii	Details of injury/damage: Indicate type of injury (put an 'x' in one box only)			
	<input type="checkbox"/> Bruising, contusion <input type="checkbox"/> Concussion <input type="checkbox"/> Internal injuries <input type="checkbox"/> Open wound <input type="checkbox"/> Abrasion, graze <input type="checkbox"/> Amputation <input type="checkbox"/> Open fracture (i.e. bone exposed) <input type="checkbox"/> Closed fracture <input type="checkbox"/> Dislocation <input type="checkbox"/> Sprain, torn ligaments	<input type="checkbox"/> Suffocation, asphyxiation <input type="checkbox"/> Gassing <input type="checkbox"/> Drowning <input type="checkbox"/> Poisoning <input type="checkbox"/> Infection <input type="checkbox"/> Burns, scalds and frostbite <input type="checkbox"/> Effects of radiation <input type="checkbox"/> Electrical injury <input type="checkbox"/> Property damage, Specify _____ <input type="checkbox"/> Other, Specify _____		
xiii	Indicate part of body most seriously injured (put an 'x' in one box only):			
	<input type="checkbox"/> Head, except eyes <input type="checkbox"/> Eyes <input type="checkbox"/> Neck <input type="checkbox"/> Back, spine <input type="checkbox"/> Chest <input type="checkbox"/> Abdomen <input type="checkbox"/> Shoulder, upper arm, elbow <input type="checkbox"/> Lower arm, wrist, hand	<input type="checkbox"/> Fingers, one or more <input type="checkbox"/> Hip joint, thigh, knee cap <input type="checkbox"/> Knee joint, lower leg, ankle <input type="checkbox"/> Foot <input type="checkbox"/> Toes, one or more <input type="checkbox"/> Extensive parts of the body <input type="checkbox"/> Multiple injuries <input type="checkbox"/> Other, Specify _____		
xiv	Consequences of the Accident/Incident:			
	Fatal <input type="checkbox"/> Non Fatal <input type="checkbox"/>	Date of resumption of work if back Year Month Day _____	Anticipated absence if not back 4-7 days <input type="checkbox"/> 8-14 days <input type="checkbox"/> More than 14 days <input type="checkbox"/>	
xv	Treatment:			
xvi	Doctor's report and recommendation:			
xvii	Steps taken to prevent reoccurrence of this type of Accident/Incident:			
	Signature of person completing report:		Date:	
	Print Name & Job Title:			
	Signature of Head of Department/School/Function:		Date:	
	Print name:			

(Copies of the completed Institute Accident Report are to be sent separately to the Institute Health & Safety Co-ordinator, the Vice President for Finance, Resources & Diversity and the Estates Office)

NEAR MISS REPORT FORM

Note:

This form should be completed whenever a Near Miss occurs - that is an incident WITHOUT injury to person or damage to property.

If personnel or property were injured or damaged during the incident, do not use this form. Use the 'ACCIDENT / INCIDENT REPORT FORM'.

NEAR MISS REPORT FORM									
i	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; border-bottom: 1px solid black; padding: 5px;">Date of Near Miss:</td> <td style="width: 50%; border-bottom: 1px solid black; padding: 5px;">Time of Near Miss:</td> </tr> </table>	Date of Near Miss:	Time of Near Miss:						
Date of Near Miss:	Time of Near Miss:								
ii	Location of Near Miss:								
iii	Who was involved in the Near Miss: <input type="checkbox"/> Student <input type="checkbox"/> Employee <input type="checkbox"/> Public <input type="checkbox"/> Contractor <input type="checkbox"/> Visitors								
iv	Name of person(s) involved in Near Miss:								
v	Name, Address & Contact details of any witnesses to Near Miss:								
vi	Description of Near Miss:								
vii	Steps taken to prevent a reoccurrence of this type of Near Miss incident:								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 75%; border-bottom: 1px solid black; padding: 5px;">Signature of person completing report:</td> <td style="width: 25%; border-bottom: 1px solid black; padding: 5px;">Date:</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; padding: 5px;">Print Name & Job Title:</td> </tr> <tr> <td style="border-bottom: 1px solid black; padding: 5px;">Signature of Head of Department/School/Function:</td> <td style="border-bottom: 1px solid black; padding: 5px;">Date:</td> </tr> <tr> <td colspan="2" style="border-bottom: 1px solid black; padding: 5px;">Print name:</td> </tr> </table>		Signature of person completing report:	Date:	Print Name & Job Title:		Signature of Head of Department/School/Function:	Date:	Print name:	
Signature of person completing report:	Date:								
Print Name & Job Title:									
Signature of Head of Department/School/Function:	Date:								
Print name:									

(Copies of the completed Near Miss Report Form are to be sent to the Health & Safety Co-Ordinator, the Vice President for Finance, Resources & Diversity and the Estates Office)