



Sheffield Health  
and Social Care  
NHS Foundation Trust

# Policy:

## HR 016 Control of Substances Hazardous to Health (COSHH)

Executive or Associate Director lead	Director of Human Resources
Policy author/lead	Health and Safety Risk Advisor
Feedback on implementation to	Health and Safety Risk Advisor

Document type	Policy
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Ratified by	Executive Directors' Group
Date of issue	19 December 2018
Date for review	Review process - (including re-ratification) - to be scheduled for completion within 3 years of the previous ratification date

Target audience	All staff
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Keywords	
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### Policy version and advice on document history, availability and storage

Policy version 3

This policy will be available to all staff via the Sheffield Health and Social Care NHS Foundation Trust intranet and on the Trust's website. The previous version will be removed from the intranet and Trust website and archived. Any copies of the previous policy held separately should be destroyed and replaced with this version.

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## Summary of the policy and process to deal with hazardous substances

<p><b>Products supplied to the Trust which are classified as toxic, very toxic, harmful, corrosive or irritant</b></p> <p>Use this policy</p> <p>For medicines and pharmaceutical products refer to the <b>Medicine Management Policy</b></p>	<p><b>Products supplied to the Trust which are used in such a way as to make them potentially harmful to health</b></p> <p>For example, work with soaps and detergents which can cause occupational contact dermatitis</p> <p>Refer to this Policy and the <b>Infection Prevention and Control Policy</b></p> <p>For the use of Latex products, e.g. gloves, see the <b>Latex Sensitization Policy</b></p>	<p><b>Products generated within the Trust</b></p> <p>For example, some concentrations of dusts</p> <p>Use this policy</p>	<p><b>Products found within the Trust</b></p> <p>For blood-borne viruses, and other healthcare-related infections, refer to the <b>Infection Prevention and Control Standard Precautions - Prevention of Sharps Injuries and Prevention of Exposure to Blood and Body Fluids Policy</b></p> <p>For water-borne bacteria refer to the <b>Water Quality Policy</b></p>
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## Flowchart - COSHH Risk Assessment Process

### **Step 1: List the hazardous substances**

List all the substances used- or found in the workplace.

(Appendix H).

### **Step 2: Assess hazard to health from the substance(s) and who might be exposed**

Obtain a copy of the Safety Data Sheet for each substance supplied to the Trust and used within the workplace.

### **Step 3: Complete the COSHH Risk Assessment**

- Briefly assess whether there is a need to use each substance.
- Do not use unless necessary.
- Using the Safety Data Sheet, complete a Risk Assessment for every hazardous substance used in order to determine the type- and level or any risk(s) posed to the health or safety of staff, or others.

(Appendix I).

### **Step 4: Complete a 'Standard Operating Procedure'**

Based on the findings of the Risk Assessment, complete a *Standard Operating Procedure* to guide staff on how to ensure the task(s) in question are completed safely.

A Trust template can be used for this purpose. This can be accessed via <http://eforms/SOP/Forms/AllItems.aspx> Once on the page, click the 'Documents' tab at the top of the screen then click 'New Document'.

## 1. Introduction

Sheffield Health and Social Care NHS Foundation Trust recognises its responsibilities under Health and Safety legislation to ensure, so far as is reasonably practicable, the health, safety and welfare of its employees, service users and members of the public.

Potentially hazardous substances found in the Trust include medicines, cleaning materials, maintenance products, (e.g. pesticides), and micro-organisms such as those contained in soiled laundry and/or body fluids.

This Policy demonstrates the organisational structure, and organisational arrangements by which the Trust will assess any health risks associated with exposure to potentially hazardous substances, prevent or reduce exposure to them, and so prevent consequent injury or ill health to staff, service users or others, as far as is reasonably practicable, following contact with hazardous substances associated with the work of the Trust.

## 2. Scope

This is a Trust-wide policy and is relevant to all staff, service users and members of the public.

Some hazards present within the Trust are the subject of other more specific policies, which should be consulted for further information. For example:

- Water-borne bacteria - refer to the Water Quality Policy
- Medicines and pharmaceutical products - refer to the Medicines Management Policy
- Asbestos - refer to the Asbestos Policy
- Biological agents, e.g. blood-borne viruses - refer to Infection Prevention and Control Policy

### 3. Definitions

**Biological agent** - means a micro-organism, cell culture, or human endoparasite, whether or not genetically modified, which may cause infection, allergy, toxicity or otherwise create a hazard to human health;

**COSHH** - Control of Substances Hazardous to Health;

**Control measure** - a measure taken to reduce exposure to a substance hazardous to health

**Hazardous substance** - a substance that can be hazardous to human health;

**Health surveillance** - means assessment of the state of health of an employee, as related to exposure to substances hazardous to health, and includes biological monitoring;

**Medical examination** - includes any laboratory tests and X-rays that a relevant doctor may require;

**Safety data sheet** - produced by manufacturers of substances and provide information to help users to make a risk assessment. They describe the hazards the substance presents, and give information on handling, storage and emergency measures in case of accident;

**Safe system of work** - is a formal procedure which defines the method of working which eliminates hazards or minimises the risks associated with them;

**Personal Protective Equipment, (PPE)** - refers to all equipment and clothing that is intended to be worn, or held, by a person at work and which affords protection against one or more health and safety risks;

**Risk** - is the chance of an un-desirable outcome. It considers the combination of the likelihood and severity of the outcome;

**Risk assessment** - is simply a careful examination of what, in your work, could cause harm to people so one can weigh up whether sufficient precautions have been taken or whether more should be done to prevent harm;

**Workplace exposure limit** - for a substance hazardous to health means the exposure limit approved for that substance contained in HSE publication 'EH/40 Workplace Exposure Limits' as updated from time-to-time.

#### 4. Purpose

The purpose of this Policy is to comply with the requirements of the Control of Substances Hazardous to Health Regulations 2002.

#### 5. Duties

##### Trust Board

The Trust Board has ultimate responsibility for health and safety, its implementation within the Trust, and ensuring its effectiveness in the management of good health and safety practice. This includes the effective management of hazardous substances.

##### Clinical and Service Directors

Clinical and Service Directors will ensure that COSHH-related processes are in place to reduce and control health and safety risks, ensure that departmental managers are aware of the policy and that relevant processes are monitored for continued effectiveness.

##### Departmental Managers

Departmental Managers are responsible for ensuring that suitable and sufficient COSHH Risk Assessments are completed to address the range of risks present in their workplace.

If necessary, Departmental Managers can seek advice from the Trust's competent persons, e.g. Health and Safety Advisor, Infection Control Nurse, Occupational Health Advisors, or Estate Services Officers.

##### Employees

Employees should take reasonable care of their own health and safety and that of other persons who may be affected by their actions or omissions. This will include compliance with any procedures or management instructions designed to make their work safe.

##### **Occupational Health Service**

As part of the risk assessment employers should find out whether health surveillance is required. Health surveillance helps ensure the continued good health of staff by identifying at an early stage any illness caused by exposure to substances hazardous to health, so that steps can be taken to treat the condition and to advise them and their manager about the future. It thus provides a warning of lapses in control and indicates the need for a reassessment of the risk.

Health surveillance is arranged via Sheffield Teaching Hospital's (STH) Occupational Health Service and will be appropriate to the identified risk. The Occupational Health Service will maintain appropriate COSHH health surveillance records as required by legislation.

The contracted Occupational Health Service should provide, on request;

- Baseline health assessment of employees
- Health screening of employees
- Health surveillance of employees
- Suggest any necessary adjustment to employees work

### Contractors

Contractors are responsible for submitting COSHH Risk Assessments to the Trust's Project Manager/Supervising Officer, which details how the health of Trust staff, service users and members of the public will be protected from substances generated during the course of the contractor's work.

The Trust's Project Manager/Supervising Officer is responsible for reviewing these Assessments to ensure their suitability.

## **6. Process**

### **6.1 The management arrangements for Controlling Substances Hazardous to Health, including biological agents**

HSE guidance to COSHH states that employers must not carry out work which can expose any of their employees to any substance hazardous to health until:

- A suitable and sufficient assessment of the risks to employees' health created by that work has been carried out; and
- The steps needed to comply with the Regulations have been identified; and
- Those steps have been put into operation.

The purpose of the risk assessment is to enable employers to make valid decisions about the measures needed to prevent, or adequately control, the exposure of their employees, (and relevant others), to substances hazardous to health arising from the work.

Where exposure to substances hazardous to health cannot be prevented, exposure of staff, (and relevant others), to those hazardous substances, including biological agents, should be controlled in a way which reduces the level of harm associated with such exposure to one which is 'as low as is reasonably practicable'.

### **6.2 Risk assessment and safe system of work/method of work**

Line managers of staff whose work may expose them to substances hazardous to health, including Biological Agents, are required to carry out a suitable and sufficient Risk Assessment in order to identify and prevent, or control, exposure of staff, (and relevant others), to substances hazardous to their health.

### **6.3 Purchased substances for use within the workplace**

Manufacturers and suppliers of substances hazardous to health have a legal duty to supply safety data sheets for the materials provided. Safety data sheets, (required to assist with COSHH risk assessments), can be found on the NHS Supply Chain website.

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The Trust's Procurement Department can assist with locating the safety data sheets for products not purchased via the NHS Supply Chain website. For example, the otherwise high-risk of ill-health to housekeeping staff from using potentially hazardous cleaning substances is controlled by the centralised purchase of standardised cleaning products and by the use of standardised cleaning procedures.

#### 6.4 **Substances found within the workplace**

An additional potential risk of ill-health to staff follows exposure to biological agents contained within the infected body fluids of (possibly some) service users.

Appropriate, standard operating procedures - for example the wearing of Personal Protective Equipment - should be used to help prevent the transmission of applicable diseases.

See the **Infection Prevention and Control Standard Precautions - Prevention of Sharps Injuries and Prevention of Exposure to Blood and Body Fluids Policy** for specific information on preventing the transmission of blood-borne viruses, (BBV).

#### 6.5 **Worker involvement**

Staff should be involved in developing control measures, (e.g. safe system of work), to ensure they are suitable for the way work is undertaken. Staff must also be encouraged to suggest improvements and to report anything they think might be going wrong.

#### 6.6 **Disposal or discharge to drains of hazardous substances**

When considering disposal, or discharge to drains, staff must refer to the Trust's Waste Management Policy for the most appropriate advice and procedure.

### 7. **Dissemination, Storage and Archiving**

Links to an electronic copy of this policy shall be circulated via the Trust's Health and Safety Group and a Trust-wide email. Previous copies must be replaced.

An electronic copy of this policy shall be accessible via the Trust intranet and internet.

An archive copy of the previous policy, and the new updated policy, shall be stored with the Integrated Governance Department for reference.

### 8. **Training and Other Resource Implications**

Line managers must ensure that staff using hazardous substances have received appropriate information, instruction and training so they can undertake their tasks safely.

More specifically, line managers must ensure staff are informed of:

- The substances with which they work;
- The findings of risk assessments;
- Precautions to be taken to protect themselves and others, including protective equipment (PPE);
- How to use the products safely and deal with incidents, spillages and emergencies, including spill kits and first-aid kits. (Also see the Infection, Prevention and Control Policy);
- The signs of ill-health conditions as a result of using substances, e.g. dermatitis, and what actions to take.

## 9. **Audit, Monitoring and Review**

The Health and Safety Risk Advisor is responsible for monitoring the effectiveness of this policy. Ensuring periodic reports are prepared and submitted to the Health and Safety Group for monitoring.

Monitoring will be achieved through active measures - e.g. inspections, audits, training compliance, risk assessments and reactive measures, reviews of incident statistics, accident investigation reports and ill-health checks etc.

This policy will be reviewed within three years of ratification, or earlier if needed due to concerns identified through monitoring the policy, changes in national guidance, legislation, significant concerns raised via enforcement action or significant incidents.

## 10. **Implementation Plan**

Action/Task	Responsible Person	Deadline	Progress Update
Advise the Health and Safety Group that the policy has been ratified		December 2017	
Put the revised policy on to the intranet and internet and remove the old version		January 2018	
Inform all Trust staff of the revised policy via a Trust-wide email		January 2018	
Reference the revised policy in Risk Management training		January 2018	

## 11. Links to Other Policies, Standards and Legislation (associated documents)

Incident Management Policy and Procedure (Including Serious Incidents)  
Infection Prevention and Control Policy  
Management of Contractors Policy  
Medicines Management Policies  
Waste Management Policy  
Water Quality Policy  
Medicines Management Strategy  
Risk Management Strategy

## 12. Contact Details

Title	Name	Phone	Email
Health and Safety Risk Advisor	Charlie Stephenson	27 16208	charlie.stephenson@shsc.nhs.uk
Senior Nurse - Infection, Prevention and Control	Katie Grayson	27 18621	katie.grayson@shsc.nhs.uk
Occupational Health Department - (Contracts Manager)	Janet Chapman	27 14737	sohs@sth.nhs.uk
Infection Prevention and Control Co-ordinator	Jill Perlstrom-Wright	22 63914	jill.perlstrom-wright@shsc.nhs.uk
Estates & Facilities Support Officer	Sarah Ellison	22 62251	sarah.ellison@shsc.nhs.uk
Hotel Services Manager	Janet Mason	27 18350	janet.mason@shsc.nhs.uk

## 13. References

- HSE The Control of Substances Hazardous to Health Regulations 2002 (as amended) Approved Code of Practice and guidance L5
- HSE Working with substances hazardous to health. A brief guide to COSHH INDG136
- HSE HSG220 Health and Safety in Care Homes
- HSE HSG97, A step by step guide to COSHH assessment
- NPSA The Revised Healthcare Cleaning Manual (2009)

## Appendix A - Version Control and Amendment Log

<b>Version No.</b>	<b>Type of Change</b>	<b>Date</b>	<b>Description of change(s)</b>
V2 D0.1	Revised draft policy creation	August 2016	The previous policy was re-written to reflect changes in the layout of SHSC's policy documents
V2	Ratification and issue	January 2018	Policy simplified and some technical updates made

## Appendix B - Dissemination Record

<b>Version</b>	<b>Date on website - (intranet and internet)</b>	<b>Date of 'all SHSC staff' email</b>	<b>Any other promotion/ dissemination, (include dates)</b>
1	January 2019	January 2019	
2			

## Appendix C - Equality Impact Assessment Form

### Equality Impact Assessment Process for Policies Developed Under the Policy on Policies

**Stage 1** - Complete draft policy

**Stage 2 - Relevance** - is the policy potentially relevant to equality, i.e. will this policy potentially impact on staff, patients or the public? If **NO**, no further action is require. Please sign and date the following statement. If **YES**, proceed to Stage 3

This policy does not impact on staff, service users or the public (insert name and date)

Charlie Stephenson, November 2017

**Stage 3 - Policy screening** - public authorities are legally required to have 'due regard' to eliminating discrimination , advancing equal opportunity and fostering good relations , in relation to people who share certain 'protected characteristics' and those that do not. The following table should be used to consider this and inform changes to the policy (indicate yes/no/ don't know and note reasons). Please see the SHSC guidance on equality impact assessment for examples and detailed advice; this can be found at <http://www.shsc.nhs.uk/about-us/equality--human-rights>

	Does any aspect of this policy actually or potentially discriminate against this group?	Can equality of opportunity for this group be improved through this policy or changes to this policy?	Can this policy be amended so that it works to enhance relations between people in this group and people not in this group?
<b>AGE</b>	No		
<b>DISABILITY</b>	No		
<b>GENDER REASSIGNMENT</b>	No		
<b>PREGNANCY AND MATERNITY</b>	No		
<b>RACE</b>	No		
<b>RELIGION OR BELIEF</b>	No		
<b>SEX</b>	No		
<b>SEXUAL ORIENTATION</b>	No		

**Stage 4 – Policy Revision** - Make amendments to the policy or identify any remedial action required (action should be noted in the policy implementation plan section) Please delete as appropriate: Policy Amended / Action Identified / no changes made.

Impact Assessment Completed by (insert name and date)

## Appendix D - Human Rights Act Assessment Checklist

You need to be confident that no aspect of this policy breaches a person's Human Rights. You can assume that if a policy is directly based on a law or national policy it will not therefore breach Human Rights.

If the policy, or any procedure(s) in the policy, is based on a local decision which impacts on individuals, there is a need to ensure their human rights are not breached. To do this, refer to the more detailed guidance that is available on the SHSC website - <http://www.justice.gov.uk/downloads/human-rights/act-studyguide.pdf> (relevant sections numbers are referenced in grey boxes on diagram) and work through the flow chart on the next page.

1. Is your policy based on, and in-line with, the current law, (including case law), or policy?

- Yes. No further action needed
- No. Work through the flow diagram over the page then answer questions 2 and 3 below

2. On completion of flow diagram, is further action needed?

- No, no further action needed
- Yes, go to question 3

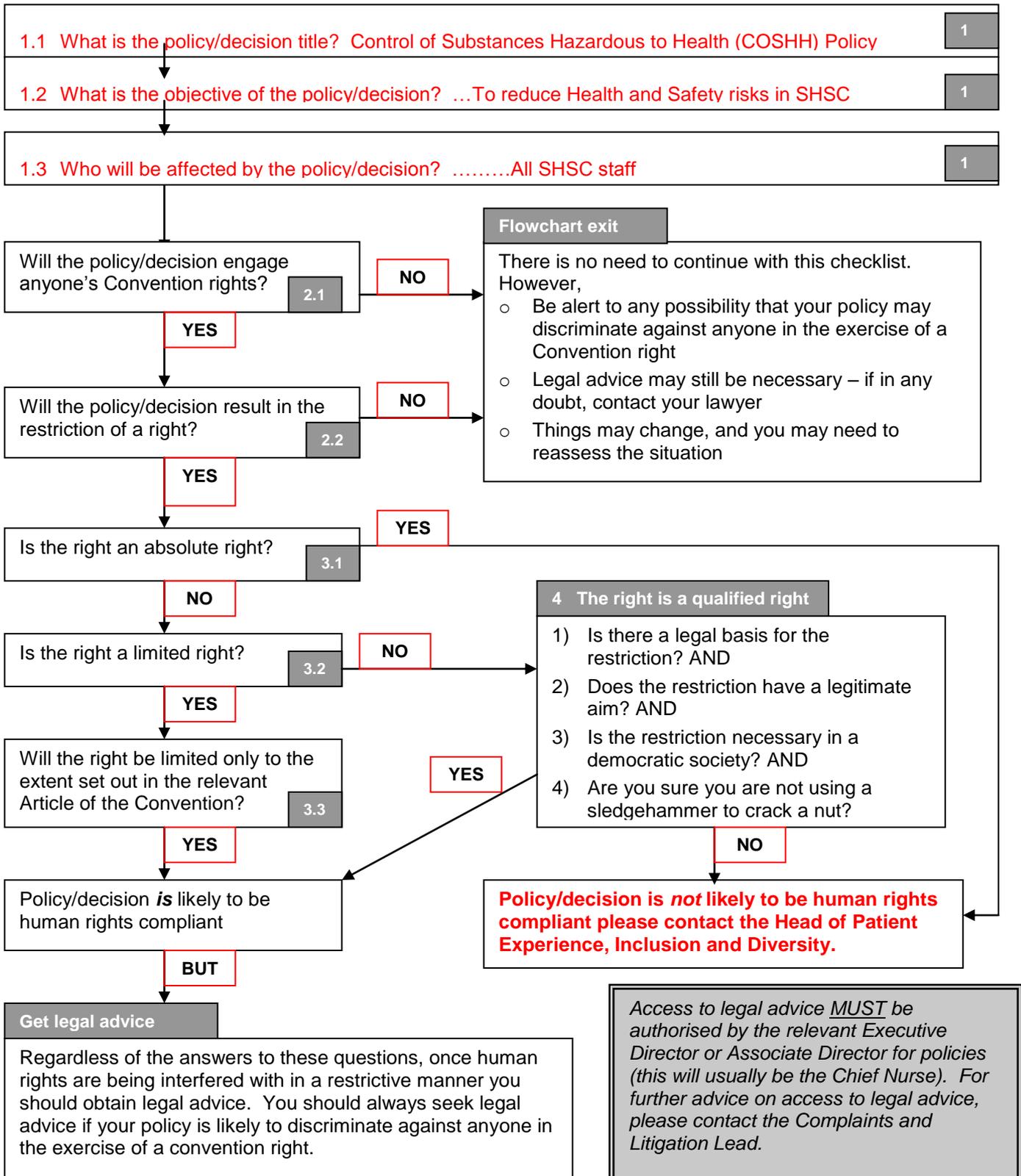
3. Complete the table below to provide details of the actions required

Action required	By what date	Responsible person

## Human Rights Assessment Flow Chart

Complete text answers in boxes 1.1 - 1.3 and highlight your path through the flowchart by filling the YES/NO boxes red (do this by clicking on the YES/NO text boxes and then from the Format menu on the toolbar, choose 'Format Text Box' and choose red from the Fill colour option).

Once the flowchart is completed, return to the previous page to complete the Human Rights Act Assessment Form.



## Appendix E - Development, Consultation and Verification Record

### Significant Amendment

The policy has been placed into the new format as set out in the Policy on Policies.

The policy has followed the Human Resources Policy Consultation and Governance Process.

The draft policy was verified virtually by the Health and Safety Group in December 2017 and will be noted in the minutes of the next meeting.

The Director of Corporate Governance received the policy on xxxx, for pre-ratification checks and arranged for it to be submitted to the Executive Directors' Group on xxxx for ratification.

Following ratification, the Director of Corporate Governance will arrange for it to be placed on the intranet, (under the Human Resources section for policies), and for the previous version xxxx to be removed and archived.

## Appendix F - Policy Checklist

*Please use this as a checklist for policy completion. The style and format of policies should follow the policy template, which can be downloaded from the intranet.*

### 1. Cover sheet

All policies must have a cover sheet which includes:

- The Trust name and logo ✓
- The title of the policy (in large font size as detailed in the template) ✓
- Executive or Associate Director lead for the policy ✓
- The policy author and lead ✓
- The implementation lead (to receive feedback on the implementation) ✓
- Date of initial draft policy ✓
- Date of consultation ✓
- Date of verification ✓
- Date of ratification ✓
- Date of issue ✓
- Ratifying body ✓
- Date for review ✓
- Target audience ✓
- Document type ✓
- Document status ✓
- Keywords ✓
- Policy version and advice on availability and storage ✓

### 2. Contents page ✓

### 3. Flowchart ✓

### 4. Introduction ✓

### 5. Scope ✓

### 6. Definitions ✓

### 7. Purpose ✓

### 8. Duties ✓

### 9. Process ✓

### 10. Dissemination, storage and archiving (control) ✓

### 11. Training and other resource implications ✓

### 12. Audit, monitoring and review ✓

This section should describe how the implementation and impact of the policy will be monitored and audited and when it will be reviewed. It should include timescales and frequency of audits. It must include the monitoring template as shown in the policy template (example below).

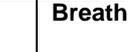
<b>Monitoring Compliance Template</b>						
Minimum Requirement	Process for Monitoring	Responsible Individual/Group/Committee	Frequency of Monitoring	Review of Results process, (e.g. who does this?)	Responsible Individual/Group/Committee for Action Plan Development	Responsible Individual/Group/Committee for Action Plan Monitoring and Implementation
A) Describe which aspect this is monitoring?	e.g. Review, audit	e.g. Education and Training Steering Group	e.g. Annual	e.g. Quality Assurance Committee	e.g. Education and Training Steering Group	e.g. Quality Assurance Committee

- 13. Implementation plan ✓
- 14. Links to other policies (associated documents) ✓
- 15. Contact details ✓
- 16. References ✓
- 17. Version control and amendment log - (Appendix A) ✓
- 18. Dissemination Record - (Appendix B) ✓
- 19. Equality Impact Assessment Form - (Appendix C) ✓
- 20. Human Rights Act Assessment Checklist - (Appendix D) ✓
- 21. Policy development and consultation process - (Appendix E) ✓
- 22. Policy Checklist - (Appendix F) ✓



## Appendix H - COSHH Assessment Form

<b>Unit/Workplace</b>	<b>Department/Ward</b>	<b>Name of person undertaking assessment</b>	<b>Job title/role</b>
<b>SUBSTANCE INFORMATION</b>	<b>Name of substance/material</b>	<b>Trade name, (if applicable)</b>	<b>COSHH Assessment Reference Number</b>
<b>What is the substance used for?</b> (e.g. cleaning floors, protective coatings etc.)			
<b>What are the hazardous ingredients/chemicals in the substance?</b> (see product/hazard data sheet)			
<b>Do any of the chemicals have a Workplace Exposure Limit?</b> (see product/hazard data sheet)	<b>Y/N</b>	<b>What is this Exposure Limit?</b>	

<b>Is the substance:</b> (check symbols on product/hazard data sheet)									
Extremely flammable F+	Y/N	Oxidising	Y/N	Very toxic T+	Y/N	Toxic	Y/N	Harmful	Y/N
									
Biological Hazard	Y/N	Radioactive	Y/N	Flammable	Y/N	Corrosive	Y/N	Irritating	Y/N
									
Explosive	Y/N	Danger to Environment	Y/N	Asbestos	Y/N	Other (specify)			
									
<b>Is the substance hazardous to health when:</b>									
In contact with the skin?	Y/N	Breathed in?	Y/N	In contact with the eyes?	Y/N	Swallowed?	Y/N		
									
<b>Other (specify)</b>									

<b>USE OF THE SUBSTANCE</b>	<b>How should the substance be used?</b> (e.g. dilute in water, applied with brush, sprayed)
	<b>How much is used during each occasion?</b> (e.g. litres or kilos as appropriate)
<b>Who is exposed to the substance?</b> (e.g. those using it, nurses, housekeeping staff, others (please state))	
<b>For how long is the person exposed to the substance during each use?</b>	
<b>Does the substance present additional risks to certain groups or individuals?</b> (e.g. young people, expectant mothers)	

<b>CONTROL MEASURES</b>	<b>Can a less hazardous substance be used to do the same job</b>	<b>Yes</b>	<b>No</b>
<b>If a less hazardous to health substance cannot be used what controls are required for this substance to make its use as safe as reasonably practicable?</b>			
Work process is enclosed		<b>Yes</b>	<b>No</b>
Work area is well ventilated (mechanical ventilation is maintained and tested; test records are available to workplace manager)		<b>Yes</b>	<b>No</b>
Use by trained persons only (training records are kept)		<b>Yes</b>	<b>No</b>
Workplace exposure monitoring is undertaken (results are given to workplace manager)		<b>Yes</b>	<b>No</b>
Employee health surveillance undertaken (results are feedback to staff)		<b>Yes</b>	<b>No</b>
Appropriate respiratory protection is worn (training is given to staff and recorded)		<b>Yes</b>	<b>No</b>
Appropriate protective clothing is worn (training is given to staff and recorded)		<b>Yes</b>	<b>No</b>

<b>If any Personal Protective Equipment used please specify</b>				
<b>Eye Protection</b> state type required	<b>Gloves</b> State type required	<b>Overalls/clothing</b> State type required	<b>Mask/respirator</b> State type required	<b>Other</b> (specify)
Is each of the above regularly checked and replaced or maintained as necessary?				

ASSESSMENT OF RISK	
Are all the controls detailed above currently in place?	Yes
Are hazards to health adequately controlled with all control measures in place?	Yes

RISK RATING (Place score below)	Risk Scoring					
	Impact	5	10	15	20	25
Consequences	Catastrophic (5)	5	10	15	20	25
	Major (4)	4	8	12	16	20
	Moderate (3)	3	6	9	12	15
	Minor (2)	2	4	6	8	10
	Negligible (1)	1	2	3	4	5
		RARE (1)	UNLIKELY (2)	POSSIBLE (3)	LIKELY (4)	CERTAIN (5)
		Likelihood				

Assessor(s) name:	Assessor(s) signature:	Date:
Ward/department manager's name:	Signature:	Date:

### FIRST REVIEW

Assessor(s) name:	Assessor(s) signature:	Date:
Ward/department manager's name:	Signature:	Date:

### SECOND REVIEW

Assessor(s) name:	Assessor(s) signature:	Date:
Ward/department manager's name:	Signature:	Date:

## Appendix I - Safety Data Sheets and Product Information

Products include common substances in everyday use; such as cleaning substances, paint, bleach, solvent or fillers. By law, when a product is 'dangerous for supply' the supplier must provide a safety data sheet.

Safety data sheets can be difficult to understand, with little information on measures for control. However, to find out about health risks and emergency situations, concentrate on:

- Sections 2 and 16 of the sheet, which state the dangers
- Sections 4-8, which refer to emergencies, storage and handling

Example front page of a data sheet

<b>SAFETY DATA SHEET</b>			
<b>1. IDENTIFICATION OF THE SUBSTANCE / PREPARATION AND OF THE COMPANY / UNDERTAKING</b>			
<b>JohnsonDiversey</b>		JohnsonDiversey UK Limited Weston Favell Centre Northampton NN3 8PD Tel 01604 405311 Fax 01604 406809 Emergency Call 0800 052 0185	
Clearance Code	<b>RINSE AID A5 / SUMA RINSE</b> Machine Spraywashing Rinse Aid		Product Code <b>610246</b>
TO :			
<b>2. COMPOSITION / INFORMATION ON INGREDIENTS</b>			
CAS No	EINECS No		
77-92-9	201-069-1	Citric acid	Xi: R38 (<5%)
		Anionic surfactant	Xi: R38 (<5%)
		Nonionic surfactant	Xi, N: R38-50/53 (<5%)
Ingredients according to EC 648/2004: Less than 5% : Anionic surfactants 5% to 15% : Nonionic surfactants Sodium Benzoate			
Full text of R-phrases is given in section 16.			
<b>3. HAZARDS IDENTIFICATION</b>			
No ingredient present at a level leading to a classification of hazardous under the Chemicals (Hazard Information & Packaging) Regulations (CHIP).			
<b>4. FIRST AID MEASURES</b>			
<b>Eyes :</b>	Rinse immediately with plenty of water, holding the eyelids open and seek medical advice if effects persist.		
<b>Inhalation :</b>	Not applicable.		
<b>Skin :</b>	Wash thoroughly.		
<b>Ingestion :</b>	Remove product from mouth, give the casualty a small quantity of water to drink and seek medical advice. Do not induce vomiting.		
<b>5. FIRE FIGHTING MEASURES</b>			
NON FLAMMABLE - In the event of a fire due to other causes the product is compatible with water, foam, carbon dioxide and dry powder extinguishers. May evolve toxic fumes if involved in a fire. Firefighters should wear self contained breathing apparatus.			
<b>6. ACCIDENTAL RELEASE MEASURES</b>			
Hose away with plenty of water diluting to at least 2.5% w/v (25 g/litre) unless this would contaminate a water course or vegetation, in which case either collect, dilute as earlier and pour down wastewater drain (foul sewer) or absorb onto dry sand or similar material and dispose of safely as commercial waste. Caution, spillages may be unusually slippery.			
<b>7. HANDLING &amp; STORAGE</b>			
In common with all detergents, contact with eyes and prolonged contact with the skin should be avoided. Do not mix with any other chemicals other than as advised by your JohnsonDiversey representative. Store upright in original closed containers in a cool place.			
<b>8. EXPOSURE CONTROL / PERSONAL PROTECTION</b>			
<b>Hand :</b>	For prolonged contact, the use of rubber gloves resistant to detergents is recommended.		
<b>Eyes :</b>	Personal protection is not normally required unless a risk assessment indicates the need for it..		
<b>Skin :</b>	Personal protection is not normally required unless a risk assessment indicates the need for it..		
<b>Respiration :</b>	Personal protection is not normally required unless a risk assessment indicates the need for it..		
<b>9. PHYSICAL &amp; CHEMICAL PROPERTIES</b>			
<b>Appearance :</b>	Blue liquid.		
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## Hazard Symbols

Products used may be 'dangerous for supply'. If so, they will have a label that has one or more hazard symbols. The symbols will match those on the right of the table below. Some examples are given here:

New Pictogram	Hazard Class (CLP)	Old 'CHIP' Symbol
	Explosives, self-reactive substances and mixtures, types A, B Organic peroxides, types A, B	 Explosive
	Flammable gases, aerosols, liquids or solids self-reactive substances and mixtures, Pyrophoric liquids and solids, self-heating substances and mixtures, substances and mixtures, which in contact with water emit flammable gases, organic peroxides	 Highly/ Extremely Flammable
	<b>Oxidising gases, liquids and solids</b>	 Oxidising
	Compressed gases, liquids and solids, liquefied gases, refrigerated liquefied gases, dissolved gases	No current symbol
	Corrosive to metals, skin corrosion, severe eye damage	 Corrosive
	Acute toxicity (Cat 1 - 3)	 Toxic /very toxic  Harmful
	Acute toxicity (Cat 4), skin and eye irritation, skin sensitization specific target organ toxicity, respiratory tract irritation, narcotic effects	 Harmful/Irritant
	Respiratory sensitization, germ cell mutagenicity, carcinogenicity, reproductive toxicity, specific target organ toxicity, aspiration hazard	 Toxic / Very toxic  Harmful
	Hazardous to the aquatic environment	 Hazardous to the Environment

## Appendix J - Additional Information

### III-Health Effects

If not properly controlled, hazardous substances can enter the body of staff and/or service users and cause ill-health:

Examples of the effects of hazardous substances include:

- Skin irritation or dermatitis as a result of skin contact.
- Asthma as a result of developing an allergy to substances used at work.
- Losing consciousness as a result of being overcome by toxic fumes.
- Cancer, which may appear long after exposure to the chemical that caused it.
- Infection from bacteria and other micro-organisms, (biological agents).

Staff may come in to contact with hazardous substances in a variety of ways:

- Substances used directly in work activities, (e.g. adhesives, paints, cleaning agents, commercial chemicals with warning labels).
- Substances generated during work activities, (e.g. fumes from soldering and welding).