CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) POLICY

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**DOCUMENT CONTROL**

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**Amendments**
Simplification of the Full Assessment form resulting in the removal of three additional assessments.

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**CONTRIBUTION LIST** Key individuals involved in developing the document

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1. **INTRODUCTION**

1.1 Staff can encounter a wide range of substances capable of damaging their health. The term “substances” refer not only to chemical agents but include biological agents such as bacteria or viruses.

1.2 The Control of Substances Hazardous to Health (COSHH) Regulations lay down the essential requirements and a sensible step-by-step approach for the control of hazardous substances, thus protecting people exposed to them.

1.3 The Regulations cover virtually all substances hazardous to health including solids, liquids, dusts, fumes, vapours, gases or micro-organisms.

1.4 Excluded from the COSHH Regulations is asbestos, lead, ionising radiation, explosive or flammable properties of articles and substances, as all of these have their own specific legislation.

1.5 Substances that are hazardous to health include all those that are listed in Section 4.0 to 4.11. Also included are those substances assigned with a Workplace Exposure Limit in the HSE’s document, EH40.

1.6 The COSHH Regulations set out a hierarchy of measures that employers and Staff need to follow. Failure to comply with COSHH, in addition to exposing Staff to risk, constitutes an offence and is subject to penalties under the Health and Safety at Work etc. Act 1974.

1.7 Depending on the risks that are present and the action that has already been taken to protect people from hazardous substances, many managers may have to do very little to comply with COSHH, while others will need to do far more.

1.8 The COSHH Regulations require employers to make an assessment of all work that is liable to expose any employees to risk from the use of hazardous substances. Assessment means evaluating the risk to health and then deciding on the action needed to remove or reduce those risks.

2. **PURPOSE AND RATIONALE**

2.1 The purpose of this procedure is to formally set out the agreed arrangements and process in place for compliance with the Control of Substances to Health Regulations (COSHH). This will assist managers to manage the hazards and risks associated with the use of hazardous substances in the workplace and give clear instructions to staff on the correct procedures for safe use of such substances.

2.2 As an Employer Somerset Partnership NHS Foundation Trust has a duty to ensure the following steps are taken:

- find out what the health hazards are;
- decide how to prevent harm to health;
- provide control measures to reduce harm to health;
- make sure they are used;
- keep all control measures in good working order;
- provide information, instruction and training for employees and others;
- provide monitoring and health surveillance in appropriate cases;
- plan for emergencies

2.3 This procedure sets out the steps in the Somerset Partnership NHS Foundation Trust process that will prevent harm from substances hazardous to health.

3. POLICY STATEMENT

The purpose of this procedure is to formally set out the agreed arrangements and process in place for compliance with the Control of Substances to Health Regulations (COSHH). This will assist managers to manage the hazards and risks associated with the use of hazardous substances in the workplace and give clear instructions to staff on the correct procedures for safe use of such substances.

4. DEFINITIONS

4.1 Hazard The adverse consequence to health whether immediate or delayed arising from exposure with a biological, chemical, physical substance or process.

4.2 Risk The risk from a substance is the likelihood that it will harm people in the actual circumstance of use.

4.3 Assessment A written record of the evaluation of risks to health and any necessary control measures to remove or reduce risk.

4.4 Biological Agent Any micro-organism, cell culture or human endo-parasite, including any that has been genetically modified, which may cause any infection, allergy, toxicity or otherwise create a hazard to human health.

Biological agents are categorised according to hazard and categories of containment.

- Group 1 Unlikely to cause human disease.
- Group 2 Can cause human disease and may be a hazard to employees – it is unlikely to spread to the community and there is usually effective prophylaxis or treatment available.
- Group 3 Can cause severe human disease and may be a serious hazard to employees – it may spread to the community, but there is usually effective prophylaxis or treatment available.
- Group 4 Causes severe human disease and is a serious hazard to employees, it is likely to spread to the community and
there is usually no effective prophylaxis or treatment available.

4.5 Very Toxic/Toxic A substance which if inhaled or ingested or penetrates the skin, may involve extremely serious/serious acute or chronic health risks and death.

4.6 Harmful A substance which if it is inhaled or ingested or penetrates the skin may involve limited health risks.

4.7 Corrosive Substances that may on contact with living tissue destroy them.

4.8 Irritant A non-corrosive substance that, through immediate, prolonged or repeated contact with the skin or mucous membrane can cause inflammation.

4.9 Carcinogenic A substance which if it is inhaled or ingested or penetrates the skin may induce cancer or increase its incidence.

4.10 Teratogenic A substance which if it is inhaled or ingested or penetrates the skin, may involve a risk of subsequent non-hereditable birth defects in offspring.

4.11 Mutagenic A substance that if it is inhaled or ingested or it penetrates the skin, may involve a risk of hereditable genetic defects.

4.12 Work Exposure Limit (WEL) Legal limits have been set on the amounts of many of the substances that can be present in workplace air. These are known as workplace exposure limits (WELs)

4.13 Personal Protective Clothing and Equipment (PPE) Equipment that will protect the user against health or safety risks at work. It can include items such as safety helmets, gloves, eye protection, high-visibility clothing, safety footwear and safety harnesses

4.14 Respiratory Protective Equipment (RPE) A particular type of Personal Protective Equipment (PPE), used to protect the individual wearer against the inhalation of hazardous substances in the workplace air

4.15 Local Exhaust Ventilation (LEV) An engineering control system to reduce exposures to airborne contaminants such as dust, mist, fume, vapour or gas in the workplace.

5. **DUTIES AND RESPONSIBILITIES**

5.1 **The Chief Executive** has overall responsibility for the safety of Trust employees including contractor’s staff and will delegate such responsibilities to the management team.
5.2 The Chief Operating Officer has operational control of Control of Substances Hazardous to Health.

5.3 Facilities Manager will develop and implement an effective COSHH Procedure that clearly set out the steps by which the topic will be managed, monitored and improved.

5.4 Attend the Health, Safety and Security Management Group as required and present plans, compliance data and any other information requested to demonstrate the effective management of safety in your topic area.

5.5 Provide or ensure provision through the aid of the Somerset Partnership NHS Foundation Trust Competent Advisor, advice, support and training to staff as required on COSHH.

5.6 Audit the effectiveness of the policy annually and report results to the Somerset Partnership NHS Foundation Trust Health Safety Security and Estates Management Group.

5.7 Heads of Division and Divisional Managers will ensure that the COSHH procedure is fully implemented throughout their area of responsibility.

5.8 Will ensure that they make arrangements for full participation in COSHH Audits and Policy monitoring activities as required by Somerset Partnership NHS Foundation Trust.

5.9 Will ensure that all relevant staff attend COSHH assessment training.

5.10 Support team leaders / Line managers to make any necessary improvements to support the COSHH management process.

5.11 Line Managers (Departmental Managers, Ward Managers & Matrons) have responsibility for following the COSHH management process in section 5 of this procedure and ensure that all reasonable steps are taken to:

5.12 Identify COSHH substances within their work area.

5.13 Assess the risks (Risk Assessment).

5.14 Take any necessary steps to eliminate, reduce, and control COSHH substances.

5.15 Check control measures work.

5.16 Have effective procedures in place for emergencies and spillages where required.

5.17 Keep records.

5.18 Identify staff that require Health Surveillance (See Somerset Partnership NHS Foundation Trust Health Surveillance Policy for further information) this includes a health check for dermatitis.

5.19 Where any substances contain Toxic, Very toxic, Carcinogenic, Mutagenic and Teratogenic the Line manager will refer these substances to the Somerset Partnership NHS Foundation Trust Health & Safety advisor for assistance with a full COSHH assessment.

5.20 Where there are reports from staff that they feel their health is being affected by work activity, the line manager will make a referral to Occupational Health
immediately and contact the Somerset Partnership NHS Foundation Trust Health & Safety advisor to discuss, assess and agree actions to take to protect all staff.

5.21 **Staff** under the requirements of Health and Safety Legislation, staff are required to commit to and carry out the following duties:-

5.22 Take responsibility for their own health and safety and that of others who may be affected by what they do or do not do.

5.23 Use all work equipment, materials, personal protective equipment and clothing provided in accordance with the information, instructions and training received.

5.24 Not interfere with any of the work equipment, materials, personal protective equipment or clothing provided.

5.25 Follow COSHH instructions, emergency procedures and spillage instructions carefully and ensure they have a good understanding of the substances in use in their work area.

5.26 Inform line managers and/or Safety Representatives without delay, of any work situation which they consider represents a serious or immediate danger to the health and safety of themselves or others.

5.27 Inform line managers of any matter they reasonably consider represents a shortcoming in the health and safety arrangements, even when no immediate danger exists.

5.28 Those who visit other sites shall make themselves familiar with the health and safety procedures and requirements of those locations and act responsibly.

5.29 **Procurement / Purchasing departments** responsible for the procurement of substances that could present a risk to health must carry out a review and assess the risk of any new products prior to purchase.

6. **COSHH RISK ASSESSMENT PROCESS PROCEDURE**

6.1 Before any COSHH assessments can be undertaken, managers should first compile an inventory of all substances and work processes used within their areas of responsibility. Appendix A shows a layout of this report.

6.2 Following the manager’s inventory of hazardous substances and processes, when complete, it is worthwhile studying the list to see which substances are actually needed.

6.3 Having compiled an accurate picture of substances used, a COSHH assessment should be undertaken by someone who knows the work area and the systems of work within the assessment area. Appendix B shows layout of this report.
6.4 The Material Safety Data sheet (MSDS) that is supplied by the manufacturer or suppliers of the hazardous substance is crucial to enable the assessor to carry out a suitable and sufficient assessment of the hazardous substance. It provides key information on the hazardous substance and can help with the development of control measures. Safety data sheets however do not replace the COSHH risk assessment or meet the requirements of the COSHH regulations.

6.5 The assessment must include;

- The identification of all hazardous materials within the area
- Identify the level of risk those materials pose. It is therefore necessary to consider:
  - How much of the substance is used
  - The nature of the hazardous substance
  - What are the routes of entry to the body
  - The persons at risk of exposure
  - What are the potential hazards of the substances
  - What are the potential ill health effects of the substances
  - Emergency arrangements
  - Existing control measures
  - Further control measures necessary

If there is no risk to health or the risk is trivial no more action is needed. If health risks are identified the manager must then consider what else is needed to be done to protect staff and other people and ensure compliance with the COSHH Regulations.

Assessments must be reviewed and updated annually or;

- When a new hazardous substance is used in the workplace
- There has been a change to work procedure
- The substance is to be used for a different task
- The substance used has changed e.g. the manufacturer or concentration of the substance
- The HSE issue guidance relating to a hazardous substance or work activity
- Following an adverse incident involving the substance or work activity

6.6 If any substance is no longer required, managers should contact appropriate waste disposal company.

6.7 The two main principles of COSHH Regulations state that:

a) Elimination of the need to use the hazardous substance is the most effective method of control.

b) Substitution of the hazardous substance, by using a less-hazardous substance is the next most effective control measure.
6.8 **Control measures** set out within the COSHH risk assessment must prevent or adequately control the exposure of employees to substance hazardous to health. Line managers are responsible for implementing safe systems of work to prevent and control exposure to hazardous substances in their workplace. Means of control that are inherently safe are always to be preferred because there are fewer opportunities for protection to fail. The Health & Safety Executive (HSE) require a stand hierarchy of control measures that should be considered with the most preferred first:

- Elimination
- Substitution
- Isolation
- Reduction i.e. time of exposure/number of staff exposed
- Enclosure (Full or Partial)
- Housekeeping
- Information/instruction
- Personal protective equipment

Both managers and staff must ensure that control measures are effective, maintained and followed.

6.9 **Safe systems of Work**

Safe systems of work must be documented and implements for all work activities involving substances hazardous to health and staff must be trained and supervised in them to ensure the safety of themselves and others. All control measure must be followed and any defects reported to managers to report to Maintenance department.

6.10 **Maintenance**

All equipment used to control hazardous substances must be tested and maintained in accordance with COSHH regulations and associated legislation, Approved codes of practice and guidance. Maintenance records must be kept by the line manager of the system.

Testing includes visual checks, inspections, servicing and remedial work. Where necessary this may involve amendments to working practices.

All Local Exhaust Ventilation systems (LEV) including fume cupboards must be examined at least every 14 months. This includes air handling systems and scavenging units.

6.11 **Personal Protective Equipment (PPE)** necessary should be provided following the implementation of all other measures and should be regularly inspected and inspection recorded.
Reusable PPE should be kept clean in accordance with manufactures guidelines. Disposable or single use PPE should not be reused and should be disposed of safely.

PPE must be provided free of charge and should not hinder a member of staff carrying out tasks while maintaining their health and welfare.

6.12 Information and Instruction

Where staff are exposed to hazardous substances they must receive suitable and sufficient information, instruction and training so that they are aware of the following;

- The risks to health created by exposure
- The precautions which should be taken
- The control measures, their purpose and how to use them
- How to use and store all PPE provided
- The results of any exposure monitoring and health surveillance
- The results of any environmental monitoring carried out
- Emergency procedure include waste disposal and first aid

Staff should be made aware of the arrangements for COSHH compliance within the department so that they can play an active part in improving health and safety standards.

Where a ward or departmental risk assessment identifies the need for specific COSHH training, advice should be sought from the Trust Health & Safety advisor.

Where staff from other departments or contractors may be affected the responsible manager must ensure everyone is informed, instructed and trained.

6.13 Health Surveillance

Where assessment indicates routine health surveillance is required this must be routinely undertaken by Well at Work.

Staff should report any symptoms and concerns to their line manager who should referred to Well at Work for advice.

6.14 Storage and Storage

All hazardous substance should be stored in accordance with approved codes or practice of official guidance and manufacture guidelines. Appropriate signage must be provided on all storage areas and containers where risk has been identified. The storage location and volume requires reviewing as part of the risk assessment.
6.15 **Emergency Procedures**

Managers must ensure where assessment deems necessary written emergency procedures must be established for limiting the extent of health risks and to regain adequate control in the event of leakage, spill or uncontrolled release of any hazardous substances. MSDS’s and COSHH assessment provide appropriate information on emergency procedures.

6.16 **Disposal**

Any substance hazardous to health and containers must be disposed of in accordance with Trust Waste Management Policy.

7. **SAFETY ARRANGEMENTS FOR COSHH**

**Competent advice**

7.1 Somerset Partnership NHS Foundation Trust will ensure that competent advice from the Trust Health & Safety Advisor in relation to COSHH is fully assessable to managers to reduce with risk of substances hazardous to health.

8. **REVIEW PROCESS**

8.1 This policy will be reviewed within three years as agreed by the Health and Safety Committee. Should changes occur within Health and Safety Legislation that require the policy to be updated this will render the stated review date obsolete.

9. **MONITORING COMPLIANCE AND EFFECTIVENESS**

9.1 The Trust Health & Safety Advisor will monitor compliance through audits with the Health and Safety monitors within each service ward or building. Reporting findings to the Health, Safety, Security and Estates Management Group quarterly meetings.

10. **TRAINING AND COMPETENCY REQUIREMENTS**

10.1 All Managers or delegated COSHH Assessors will have training available to them to ensure they can begin the COSHH assessment process competently. This training will be provided by the Trust’s Health and Safety Advisor.

10.2 Line managers of staff who handle substances hazardous to health are advised to ensure that those staff undertake the e-learning COSHH training and assessment available with Learning Zone.

10.3 See Somerset Partnership NHS Foundation Trust mandatory training matrix for further information.
11. REFERENCES, ACKNOWLEDGEMENTS AND ASSOCIATED DOCUMENTS

11.1 The Control of Substances Hazardous to Health (COSHH) Regulations 2002
11.2 The Health and Safety at Work etc. Act 1974
11.3 The Management of Health and Safety Regulations, 1999

**Cross reference to other procedural documents**

Asbestos Policy
Blood Bourne Viruses, Infection Control Policy
Chicken Pox and Shingles, Infection Control Policy
Clostridium Difficile Infection Prevention and Control, Infection Control Policy
Creutzfeldt - Jakob disease (CJD) and Variant Creutzfeldt-Jakob (VCJD)
Health and Safety Policy
Health Surveillance Policy
Laboratory Specimens, Infection Control Policy
Laundry (Handling), Infection Control Policy
Learning Development and Mandatory Training Policy
Meningococcal Meningitis, Infection Control Policy
MRSA, Infection Control Policy
Needle stick and Contamination Injury, Infection Control Policy
Risk Management Policy and Procedure
Risk Management Strategy
Staff Mandatory Training Matrix (Training Needs Analysis)
Tuberculosis and Multi Drug Restrictions, Infection Control Policy
Untoward Event Reporting Policy and procedure
Waste Management Policy

All current policies and procedures are accessible in the policy section of the public website (on the home page, click on ‘Policies and Procedures’). Trust Guidance is accessible to staff on the Trust Intranet.

12. APPENDICES

12.1 For the avoidance of any doubt the appendices in this policy are to constitute part of the body of this policy and shall be treated as such. This should include any relevant Clinical Audit Standards.

| Appendix A | Substance Inventory |
| Appendix B | COSSH Assessment |
APPENDIX A

Substance Inventory

1. **Introduction**

   The line manager and/or nominated COSHH assessor is responsible for identifying all potential all potentially hazardous substances in their work place. A list of the substances used in the work place should be complied on the COSHH Inventory form below.

2. **How to use the form**

   The form is simple to use:

   - In column 1 Reference number Give a sequential number e.g. 1, 2, 3. Etc. Use this on the COSHH assessment form
   - In column 2 Product/Substance name, this can be found on the MSDS
   - In column 3 Manufacture/Supplier Information, this can be found on the front of the MSDS
   - In column 3 Date MSDS issued, this can be found on the front of MSDS
   - In column 4 Date the COSHH Assessment completed.

3. **What to do with the form once it is complete?**

   Once the Substance inventory is complete, a copy of the inventory must be kept in the front of your department COSHH file.

4. **Annual review**

   The substance inventory for your department should be reviewed annually to ensure it is up to date and current. Once reviewed and any necessary amendments made the review should be dated and signed and retained in the front of the COSHH folder to demonstrate continually review.
Appendix A

CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH REGULATIONS (COSHH)

Substance Inventory

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Notes if required:-

Control of Substances Hazardous to Health (COSHH) Policy
V4 - 15 - August 2017
APPENDIX B

COSHH Assessment

1. **Introduction**

A COSHH assessment must be carried out for each hazardous substance, considering the way it is used and what measures can be implemented to protect people.

The procedure for COSHH assessments is divided into 5 easy steps, with guidance set out below to help you. If however you should have difficulties please contact the Trust Health & Safety Advisor for further information.

2. **Step one – Identify the Hazardous Substances for the Substances Inventory**

Complete the Substance Inventory for each Hazardous substance and record the findings on the form.

3. **Step two – Evaluate the risk to health – COSHH Assessment**

Carry out a COSHH assessment for each substance and work activity as identified by the substance inventory. Record the reference number from the inventory on the COSHH assessment form.

4. **Step three – Manage the risk**

- Prevent or control exposure
- Communicate the hazards, risks and control measures with the staff in your department
- Instruct and train staff on the use of product, emergency procedures and record the training
- Use and maintain surveillance if necessary
- Ensure that the MSDS and COSHH assessment are available for reference in the COSHH folder.

5. **Step four – If required record the risk on the risk register**

If the level of risk is considered to be high after all control measures have been considered then record this on the local risk register.

6. **Step five – Review the Assessment**

Review the assessment annually at a minimum
APPENDIX B

COSHH Assessment

This assessment is to be kept with the relevant Product Safety Data Sheet (where applicable)

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<tr>
<th>Type of Substance</th>
<th>Solid</th>
<th>Liquid</th>
<th>Gas</th>
<th>Powder</th>
<th>Dust</th>
<th>Micro-organism</th>
<th>Other please specify</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Hazard symbols on the container label**

- Acute Toxicity
- Irritant
- Carcinogenic / Respiratory Sensitisation
- Environmental
- Corrosive
- Explosive
- Flammable
- Oxidising
- Pressurised Gases
- Other please specify

<table>
<thead>
<tr>
<th>Possible route of exposure (tick all that apply)</th>
<th>Inhalation</th>
<th>Ingestion</th>
<th>Absorption via Skin</th>
<th>Eye contact</th>
<th>Injection</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

**Potential Health Effects:**

- Inhalation:
- Ingestion:
- Absorption:
- Eye contact:
- Injection:

**Workplace exposure limit (WEL)**

- N/A

<table>
<thead>
<tr>
<th>Health surveillance required? (Tick)</th>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Short-term (15 mins):</th>
<th>Long-term (8 hours):</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

**Control Measures**

- Can exposure/use be eliminated or substituted? (Tick)
- Is monitoring required? (Tick)

<table>
<thead>
<tr>
<th>YES</th>
<th>NO</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

**Results of monitoring**

Control of Substances Hazardous to Health (COSHH) Policy

V4 - 17 - August 2017
<table>
<thead>
<tr>
<th><strong>Control of Substances Hazardous to Health (COSHH) Policy</strong></th>
<th><strong>August 2017</strong></th>
</tr>
</thead>
</table>

### Is local exhaust ventilation required? (Tick □)
- **YES** ✅
- **NO** □

### Is there a documented working method available on safe use and handling? (Tick □)
- **YES** ✅
- **NO** □

### Storage (Tick □)

<table>
<thead>
<tr>
<th>Maximum to be stored on site</th>
<th>Secure storage</th>
<th>Store well ventilated</th>
<th>Separate storage facility available/required</th>
<th>Other storage requirements</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
</tr>
</tbody>
</table>

### Method of use (Tick □)

<table>
<thead>
<tr>
<th>Use undiluted</th>
<th>Use diluted</th>
<th>Wash hands after use</th>
<th>Do not mix with other products</th>
<th>Special precautions (state below)</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
<td>□</td>
<td>□</td>
<td></td>
</tr>
</tbody>
</table>

### Special or other precautions (please state)

### Personal Protective Equipment (PPE) Requirements
- Wear PPE as indicated by ticking box (Tick □)
- Additional PPE required in:
  - *= emergency spillage situation
  - **= confined spaces

<table>
<thead>
<tr>
<th>Overall</th>
<th>Gloves</th>
<th>Eyewear</th>
<th>Dust mask</th>
<th>Respirator</th>
<th>Safety footwear</th>
</tr>
</thead>
<tbody>
<tr>
<td>□</td>
<td>□</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Apron</th>
<th>Lab coat</th>
<th>Gas mask</th>
<th>Visor</th>
<th>Other (Please specify)</th>
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<tbody>
<tr>
<td>□</td>
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### Special or other precautions (please state)

### EMERGENCY CONTROLS AND FIRST AID

- **Inhalation**
- **Ingestion**
- **Skin**
- **Eyes**

#### Dealing with spillage

#### Disposal

#### Precautions already in place

#### Training and/or advice available from

### OVERALL ASSESSMENT OF RISK with additional controls if needed (Tick □)

Control of Substances Hazardous to Health (COSHH) Policy

V4 - 18 - August 2017
The overall assessment of risk relates to the correct and controlled use of the substance. Incorrect use or storage may result in injury or increased risk to health. It is the responsibility of the user to ensure that they are able to use the product correctly and if not, they should seek advice from their line manager.

<table>
<thead>
<tr>
<th>Date</th>
<th>Assessor(s)</th>
<th>Job title</th>
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<tbody>
<tr>
<td></td>
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</table>

Specific local control measures (not already included in assessment)

<table>
<thead>
<tr>
<th>Action ref no</th>
<th>Action</th>
<th>Responsible person</th>
<th>Target date</th>
<th>Completed Yes/No (Date)</th>
</tr>
</thead>
<tbody>
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