Control of Substances Hazardous to Health (COSHH) Policy

Document Summary

To ensure exposure to substances hazardous to health is avoided wherever practicable, or where this is not practicable, to ensure exposure is minimised to the lowest reasonably practicable level, and to within statutory limits.

<table>
<thead>
<tr>
<th>DOCUMENT NUMBER</th>
<th>POL/002/039</th>
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<tbody>
<tr>
<td>DATE RATIFIED</td>
<td>October 2015</td>
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<td>DATE IMPLEMENTED</td>
<td>October 2015</td>
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<tr>
<td>NEXT REVIEW DATE</td>
<td>October 2018</td>
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<tr>
<td>ACCOUNTABLE DIRECTOR</td>
<td>Director of Strategy and Support Services, Executive Lead and Accountable Officer for Finance</td>
</tr>
<tr>
<td>POLICY AUTHOR</td>
<td>Safety and Security Officer</td>
</tr>
</tbody>
</table>

Important Note:
The Intranet version of this document is the only version that is maintained.

Any printed copies should therefore be viewed as “uncontrolled” and, as such, may not necessarily contain the latest updates and amendments.
1 SCOPE

This policy applies to all Trust-employed staff, all staff working in integrated teams, full-time and part-time clinical and non-clinical staff, staff directly employed and those who may be contracted-in.

2 INTRODUCTION

The Control of Substances Hazardous to Health Regulations 2002 (as amended), and in any event to below statutory maximum Workplace Exposure Limits (WEL).

3 STATEMENT OF INTENT

In accordance with the statutory requirements of the Control of Substances Hazardous to Health Regulations 2002 (as amended), the Trust undertakes to prevent, or at least control to within statutory limits, exposure of staff, service users and visitors to substances that are hazardous to health. Under no circumstances will exposure exceed the maximum statutory limits.

The Trust will ensure risk assessments are undertaken for all work activities involving substances hazardous to health, and control exposure through a hierarchy of elimination, substitution, engineering and training means. If exposure cannot be adequately controlled by these means, appropriate personal protective equipment (PPE) will be provided free of charge after consultation with employees or their representatives.

4 DEFINITIONS

4.1 COSHH Regulations 2002

The Control of Substances Hazardous to Health Regulations 2002 (as amended) apply to all persons at work as well as others who may be affected by such work. The regulations require the employer to identify ALL hazardous/potentially hazardous substances which may be used in the workplace or that may be produced by a process e.g. dust, fumes etc. The employer must then conduct an assessment of these substances, evaluating the risk of exposure of people, and where necessary, take the appropriate precautions to prevent or control that exposure.

N.B. COSHH does not apply to: drugs, lead, asbestos, and substances whose hazard is due to their explosive, radioactive, flammable, temperature (high or low) or high pressure characteristics.
4.2 Substance Hazardous to Health

The COSHH Regulations define a substance hazardous to health as a substance for which a workplace exposure limit (WEL) has been approved. Substances take many forms and may be:-

- Dust or fumes in large enough concentrations
- Any substance listed in Table 3.1 of Annex vi of The Classification, Labelling and Packaging of Chemicals Regulations 2015
- Any substance not included above but which creates a hazard to the health of any person, comparable to the hazards created by the above mentioned substances.

Appendix 1 provides further information on what constitutes a substance hazardous to health.

4.3 CLP

The Classification, Labelling and Packaging of Chemicals Regulations 2015 place statutory duties on manufacturers to label products that contain substances hazardous to health. These replace the former Chemicals (Hazard Information and Packaging for Supply) Regulations 2002 (CHIP) with full effect from 1/6/15.

4.4 EH40

Publication by the Health and Safety Executive that contains the list of workplace exposure limits for use with the Control of Substances Hazardous to Health Regulations 2002 (as amended).

4.5 Workplace Exposure Limit (WEL)

WELs are occupational exposure limits set under COSHH, in order to help protect the health of workers.

4.6 Material Safety Data Sheet

The Material Safety Data Sheet gives the recipient the information necessary to take measures relating to health and safety at work and the protection of the environment and contains information about the product.

4.7 Personal Protective Equipment

Where exposure to a hazardous substance cannot be avoided, Personal Protective Equipment (PPE), which includes equipment and clothing, must be provided to individuals to physically protect them from the substance.
5 DUTIES

5.1 Chief Executive

The Chief Executive will assume overall responsibility for ensuring the Trust has appropriate arrangements in place for the management and control of work with substances hazardous to health.

5.2 Director of Strategy and Support Services

The Director of Strategy and Support Services has delegated responsibility for ensuring the Trust has in place appropriate policies and procedures for the management and control of work with substances hazardous to health, and for making adequate resources available to eliminate, or if not eliminate, control exposure to substances hazardous to health.

5.3 Head of Corporate Governance

The Head of Corporate Governance has delegated responsibility for ensuring the Trust has in place appropriate policies and procedures for the management and control of work with substances hazardous to health. In particular:

- Ensure the Trust employs or has access to competent persons carry out risk assessments of the exposure to substances hazardous to health and advise on their control
- Ensure qualified professionals, where indicated to be necessary by risk assessments, will carry out health surveillance, and ensure employees are informed of any monitoring and health surveillance results.

5.4 Clinical Governance Manager

The Clinical Governance Manager will ensure facilities are available to store employee health records of all exposure to substances hazardous to health for a minimum of 40 years.

5.5 Professional Head of Estates

The Professional Head of Estates has delegated responsibility for ensuring the Trust has in place appropriate policies and procedures for the management and control of work with substances hazardous to health. In particular

- Ensure resources are in place to ensure engineering controls are properly maintained and monitored by planned preventive maintenance and regular monitoring to ensure continued effectiveness
- Ensure engineering controls and other forms of control measures are implemented in preference to the use of personal protective equipment (PPE), and where PPE is used, it is used as a last resort and back-up measure to other control measures.
- Ensure arrangements are in place for the type and use of PPE to be carefully assessed and maintained according to manufacturer’s instructions. If possible,
the number of different types will be minimised to prevent mistakes in servicing or replacement

5.6 Executive Directors

Executive Directors are responsible for ensuring these policies and procedures are implemented throughout their respective Directorates.

5.7 Ward Managers / Heads of Department / Service Managers/Local Managers

Ward Managers/Heads of Departments/Service Managers are responsible for the implementation and monitoring of this Policy in areas of their remit. In particular they are responsible for:

- Ensuring risk assessments are undertaken for all operations which involve, or may involve, exposure to substances hazardous to health
- Ensuring control measures and safe work procedures are in place and implemented to eliminate exposure, or if this is not possible, to at least minimise exposure to levels within statutory limits.
- Maintaining an inventory of all substances hazardous to health in each workplace, and also maintain up to date hazard information (Material Safety Data Sheets) on each product/substance.
- Reviewing any system of work, supervision system or any other similar measure intended to manage or control exposure to hazardous substances at suitable intervals and revise if necessary
- Where the use of PPE is necessary, ensuring that appropriate PPE is provided to employees and others who may be at risk from hazardous substances
- Informing all employees and others who may work or be present in the affected areas of the purpose and safe operation of all engineering controls
- Reviewing COSHH assessments annually, and reassessing all operations using hazardous substances every three years
- Ensuring all changes to the control measures and changes of PPE are properly assessed and no new substances are introduced into the workplace without prior assessment.
- Ensuring all employees are provided with understandable information and appropriate training on the nature of the hazardous substances they work with.

5.8 All Employees

All Employees are responsible for safeguarding their own health safety and welfare, and that of others, in particular by:

- Following safe working procedures whilst working with substances hazardous to health
- Wearing any personal protective equipment clothing or equipment (PPE) provided in the interests of health and safety
- Highlighting to managers any concerns they may have in relation to work with hazardous substances.
• Reporting any incidents involving COSHH products via the Trust’s on-line incident reporting system as detailed in the Incident and Serious Untoward Incident and Near Miss Policy (POL/002/006)

• Highlighting to their manager and occupational health department any symptoms which may suggest sensitisation to products or substances, including any potential latex allergy, for example from wearing protective gloves (see procedure for the treatment of latex sensitisation health care workers, Latex Policy (POL/002/020)).

5.9 Occupational Health Service Provider

The Occupational Health Service Provider will obtain information regarding allergies, sensitisations (including any previous problems with latex) and general medical history during pre-employment health screening and provide information to staff at time of employment on the importance of reporting any adverse reaction.

5.10 Safety and Security Officer

The Trust’s Safety and Security Officer will provide advice and guidance to Trust Management and employees in line with this policy and review this policy at regular intervals and update as necessary in accordance with statutory requirements and/or recognised good practice.

6 ARRANGEMENTS FOR CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH

6.1 RISK ASSESSMENT

Under COSHH Regulations, employers must carry out a risk assessment on all work activities where there may be exposure to substances hazardous to health. Further details about the process of undertaking and documenting a COSHH risk assessment can be found at Appendices 2 and 3.

It is the responsibility of the Local Manager to ensure risk assessments are undertaken and recorded, in accordance with the Trust’s Service Delivery Health & Safety Risk Assessment Policy (POL/002/023). Managers will document on the online risk assessment system when they have undertaken a COSHH risk assessment, the actual COSHH risk assessment documentation will be held separately by the local manager.

Manufacturers of products and substances that fall within the remit of the COSHH Regulations have to produce, and make available, Material Safety Data Sheets for all such products. Having a Material Safety Data Sheet available is not a replacement or substitute for undertaking a COSHH risk assessment. COSHH risk assessments must be undertaken utilising information from the Material Safety Data Sheet.

6.2 REPORTING OF COSHH RELATED INCIDENTS
All incidents involving actual or potential exposure to products or substances that fall within the remit of COSHH must be reported in accordance with the Trust’s Incident and Serious Incident Reporting Policy. All incidents will be followed up and investigated by the Safety and Security Officer, or other appropriate Trust Specialist Adviser.

### 6.3 MONITORING & HEALTH SURVEILLANCE

It is not envisaged that any work activities undertaken within the Trust will expose employees to the specific hazardous substances listed in Schedule 6 of the COSHH Regulations that necessitate environmental monitoring and health surveillance, however, any queries on whether health surveillance is appropriate should be referred to the Trust’s Safety and Security Officer.

Where it is appropriate to undertake monitoring and health surveillance, the technique of investigation must present a low risk to the employee and records of health surveillance must be retained for a minimum of 40 (forty) years.

### 6.4 PROVISION OF INFORMATION

Sufficient information, instruction and training must be given to employees to ensure full understanding of the hazards to health posed by substances in the workplace and also on the importance of the control measures provided. Managers must ensure that Risk Assessments and Material Safety Data Sheets for hazardous substances are readily available for all staff who work with the substance(s) to refer to.

The results of any monitoring of exposure and health surveillance must be made available to individuals affected. Should monitoring or health surveillance identify that the maximum exposure limit has been exceeded the individual or their representatives must be informed forthwith.

### 7 TRAINING

Attendance at training is managed in accordance with the Learning and Development Policy (POL/004/037).

### 8 MONITORING COMPLIANCE WITH THIS POLICY

The table below outlines the Trusts’ monitoring arrangements for this policy/document. The Trust reserves the right to commission additional work or change the monitoring arrangements to meet organisational needs.
### 9 REFERENCES/ BIBLIOGRAPHY

Health and Safety at Work Act etc. 1974  
Control of Substances Hazardous to Health Regulations 2002 (as amended)  
The Classification, Labelling and Packaging of Chemicals Regulations 2015  
Management of Health and Safety at Work Regulations 1999  
Personal Protective Equipment Regulations 2002  
EH 40/2005 Workplace Exposure Limits  
HSE Working with Substances Hazardous to Health – a brief guide to COSHH (INDG136)

### 10 RELATED TRUST POLICY/PROCEDURES

POL/002/023 Service Delivery Health & Safety Risk Assessment Policy  
POL/002/006 Incident and Serious Incidents that Require Investigation (SIRI) Policy  
POL/002/013 Policy for Risk Assessment of New and Expectant Mothers  
POL/002/020 Latex Policy  
POL/004/037 Learning and Development Policy
APPENDIX 1 - SUBSTANCES HAZARDOUS TO HEALTH

Most substances in sufficient quantity can be hazardous to health. The purpose of the Control of Substances Hazardous to Health Regulations 2002 (as amended), (COSHH Regs), is to ensure exposure to products and substances known to be hazardous to health is eliminated, or if this is not possible, for exposure to be limited to acceptable levels.

The Health and Safety Executive issue guidance (known as EH40) on what level of exposure is deemed acceptable for recognised hazardous substances. These exposure levels are reviewed on an annual basis. The Trust’s Health Safety Fire & Security Manager maintains access to a current copy of EH40.

For the purposes of this policy ‘hazardous’ refers to a substance’s potential to cause harm. Hazardous substances can take many forms, including the following:-

<table>
<thead>
<tr>
<th>Biological agents</th>
<th>For example, bacteria, viruses etc. These will not be covered in the scope of this policy. For further information on this area contact the Infection Prevention Team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Substances used directly for work activities</td>
<td>For example, cleaning solutions, chemicals</td>
</tr>
<tr>
<td>Substances generated by work activities</td>
<td>For example welding fumes, dust from sanding or cutting wood/metal</td>
</tr>
<tr>
<td>Substances that occur naturally</td>
<td>For example, grain dust</td>
</tr>
</tbody>
</table>

Exposure to hazardous substances can occur through the following methods:-

| Inhalation | Breathing in dust, vapours, fumes, airborne particles etc |
| Ingestion | Eating or swallowing hazardous substances or via contamination through contact with unwashed hands |
| Absorption | Absorbed through the skin or mucus membranes of the body (eg nose, eyes) |
| Injection/inoculation | Through sharps injuries, scratches or via open wounds |

The effects of hazardous substances on the human body can also be very wide ranging from minor irritations through to fatal respiratory diseases or cancers (carcinogenic substances). Some substances can also have a detrimental effect on an individual’s reproductive organs or increase the possibility of birth defects in offspring (mutagenic substances).

Acute effects from exposure tend to be fairly immediate, whilst chronic effects of exposure may take months or even years to become apparent.
COSHH defines the following as hazardous substances:

A substance for which a workplace exposure limit (WEL) has been approved (this will be stated in EH40)
- Dust or fumes in large enough concentrations
- Any substance listed in Part 1 of the Approved Supply List as dangerous for supply within the meaning of the Chemicals (Hazard Information and Packaging for Supply) Regulations 2002 (CHIP) (see below)
- Any substance not included above but which creates a hazard to the health of any person, comparable to the hazards created by the above mentioned substances.

A number of substances are not included within the COSHH Regulations as these are all governed by their own regulations; these are lead, asbestos and radioactive materials.

Under the CLP Regulations suppliers are required to label their products. From 01/06/2015 all EU member states are required to identify hazardous chemicals using the new international pictograms shown below:

![New International symbols](image)

There is no single word on the new pictograms describing the hazard therefore it is important that the hazard statement on the packaging and the Material Safety Data Sheet must be read before use.

The following pictograms displayed on products produced prior to 1/6/15 under the CHIP regulations may still appear on some products but will not be legal after 1/7/2017.
As a general rule of thumb, if a substance, particularly a chemical has a warning pictogram, COSHH and this policy applies.

Substances in use within the Trust that display these pictograms are likely to be used for cleaning, laundry, and other domestic duties. However, this list is not exhaustive and therefore managers must ensure that all products and substances in use in all areas of the Trust are checked for a pictogram, and if there are any such substances in use, a COSHH assessment must be undertaken.

CLP requires suppliers to provide recipients of hazardous substances or preparations (and in some cases, preparations which are not classified) with a document, known as a Material Safety Data Sheet (MSDS). The Material Safety Data Sheet gives the recipient the information necessary to take measures relating to health and safety at work and the protection of the environment and contains information about the product organised under 16 standard headings. These are as follows:-

1. Identification:
   - Name of the substance or preparation
   - Name, address and telephone number of the company/supplier/ undertaking
2. Composition and information on ingredients
3. Hazards identification
4. First-aid measures
5. Fire-fighting measures
6. Spillage, accidental release measures

<table>
<thead>
<tr>
<th>European symbols</th>
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</thead>
<tbody>
<tr>
<td><img src="image" alt="Symbol" /></td>
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<td><img src="image" alt="Symbol" /></td>
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</tbody>
</table>
MSDS are useful in many situations, but are particularly important to employers in meeting duties under the COSHH Regulations to assess and control the risks arising from the use of dangerous chemicals. For this reason they are sometimes called 'COSHH sheets'. Material Safety Data Sheets have to be provided no matter how the chemical is supplied - in bulk or in packages.

If the MSDS for products in use within the Trust cannot be located, or the MSDS is not up to date (it should have 16 headings with information about the product) contact NHS Supply Chain. If products have been purchased or obtained not through NHS Supply Chain the manufacturer should be contacted for the MSDS (most manufacturers have these available via the internet).
APPENDIX 2- COSHH RISK ASSESSMENT.

Under COSHH, employers must carry out a risk assessment on all substances hazardous to health that their employees use or are exposed to during their usual work activities. The procedure and form for undertaking COSHH risk assessments can be found as Appendix 3 of this policy. Having a Material Safety Data Sheet available is not a replacement or substitute for a COSHH risk assessment. COSHH risk assessments must be done using information from the Material Safety Data Sheet accordingly.

The assessment should cover two main areas:-

1. The physical properties of a substance (whether it is toxic, corrosive etc.) and how these properties cause harm (through contact with the eyes or the skin, inhalation or ingestion).
2. How the substance is used, namely the amount used at any one time, the duration of exposure and the frequency of exposure.

The physical properties of a substance and how it causes harm are the most important factors when carrying out a risk assessment. If a substance is corrosive, then adequate controls would include avoiding all contact with the substance by provision of protective equipment. If a substance causes harm through inhalation, provision of ventilation or adequate breathing equipment might be appropriate controls.

Substances known to be hazardous are given maximum exposure limits, which are stated in EH40. Workplace exposure limits (WELs) are concentrations of hazardous substances in the air, averaged over a specified period of time referred to as a time-weighted average (TWA). Two time periods are used: long term (8 hours) and short term (15 minutes). Short-term exposure limits (STELs) are set to help prevent effects, such as eye irritation, which may occur following exposure for a few minutes.

As part of the risk assessment it is important to consider how a substance is used, as this can greatly affect its potential to cause harm. For example, daily exposure to a relatively low risk substance can result in greater harm than monthly exposure to a high risk substance.

As part of the assessment process, the current controls in place need to be considered to determine whether further action is required. Under no circumstances can the level of exposure presented by the hazardous substance remain greater than the maximum limits stated in the most recent version of EH40. Under COSHH, if exposure must occur, it is the employer’s duty to ensure that exposure is reduced to the lowest practicable levels; it is not acceptable to merely attempt to reduce exposure to the WEL if a greater level of protection is available.

If you cannot adequately prevent or control exposure by any combination of the measures above, the provision of Personal Protective Equipment (PPE) suitable for the purpose e.g. gloves; a mask; respirator; protective clothing etc. may be sufficient. There are many practical elements that should be considered when issuing PPE, for example, ensuring that equipment fits properly and does not cause any other
problem which causes a greater risk to the individual – please refer to the Safety and Security Officer if you are unsure of the PPE Regulations. Lastly, if staff deviate from safe systems of work, or refuse to use the PPE which has been provided to them for their own safety, this will be considered a disciplinary offence and action will be taken by their line manager.

When considering what improvements could be made, the following should be considered:

<table>
<thead>
<tr>
<th>Reviewing use of chemical</th>
<th>Question whether that product need to be used at all. Will something else less hazardous do the job just as well?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reviewing the safe system of work</td>
<td>How and where is the substance being used, could it be used differently in a safer manner?</td>
</tr>
<tr>
<td>Reviewing the arrangements for its use</td>
<td>Are containers correctly labelled, are they easy to handle?</td>
</tr>
<tr>
<td>Reviewing the arrangements for its storage</td>
<td>How are products stored? Some chemicals should not be stored together, for example flammable substances and oxidising agents, some acids and alkalis.</td>
</tr>
<tr>
<td>Reviewing arrangements for training and instruction</td>
<td>Have staff been made aware of the correct procedures and techniques to adopt when using the chemicals, including not to mix substances? Are they aware of the hazards associated with the substances?</td>
</tr>
<tr>
<td>Review use of PPE</td>
<td>Consider whether PPE is appropriate, and if so, whether the most appropriate PPE has been provided</td>
</tr>
</tbody>
</table>

It is a management responsibility to ensure that control measures are not only in place but that employees are using them as designed.

In the case of staff who are new or expectant mothers, the risk assessment undertaken in line with Trust Policy for Risk Assessment of New and Expectant Mothers (POL/002/013) should consider any potential exposure to products or substances falling under the COSHH regulations, and control measures to minimise or eliminate exposure should be adopted as per the guidance in this policy.

Young Persons under the age of 18 may also have additional risks to some hazardous substances. The risk assessment undertaken in line with Trust Policy for Risk Assessment of Young Persons (POL/002/014) should consider any potential exposure to products or substances falling under the COSHH regulations, and control measures to minimise or eliminate exposure should be adopted as per the guidance in this policy.

In order of preference for preventing or controlling risks, the following hierarchy of measures should be considered and applied (either one or a combination of the measures), where possible, to personal exposure to a hazardous substance:

- **Eliminate** - changing the process or activity so that the hazardous substance is not used or generated; or replacing the process or activity with an alternative
• **Substitute** – using it in a safer form e.g. pellets instead of powder
• **Contain** – physically containing the process within an isolated environment e.g. decontamination of endoscopes in sealed cabinets to prevent exposure to hazardous chemicals. Automation may also be employed to remove/minimise human involvement in the process
• **Control** the extent of the exposure or contact with a hazard through:
  • a safe system of work
  • by partial enclosure and extraction equipment, e.g. local exhaust ventilation (LEV)
  • by improving general ventilation
  • by procedural controls such as reducing the number of people exposed and frequency and duration of exposure
  • applying good hygiene measures e.g. avoiding eating within the work area, providing washing and changing facilities.
APPENDIX 3 - PROCEDURE & FORM FOR UNDERTAKING A COSHH RISK ASSESSMENT

Procedure

1. Identify all products and substances in use.
2. Refer to packaging and/or information on the product. Identify whether there is a warning pictogram present.
3. If a pictogram is present refer to the Material Safety Data Sheet (MSDS) for information about the safe use and storage of the product (if no MSDS is available, contact NHS Supply Chain or the company who from where the product was purchased for a copy).
4. Complete form CPT/COSHH for each substance in use.
5. Keep a copy of the completed risk assessment in a readily accessible place to which people who use the substance(s) have access.
6. Make the necessary arrangements to ensure the control measures as stated in the risk assessment are implemented.

Instructions for completing form CPT/COSHH

<table>
<thead>
<tr>
<th>Form heading</th>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment ref:</td>
<td>Give the assessment a reference number unique to your department</td>
</tr>
<tr>
<td>Date:</td>
<td>Enter the date</td>
</tr>
<tr>
<td>Ward/Unit:</td>
<td>Name of ward/unit</td>
</tr>
<tr>
<td>Persons involved:</td>
<td>Type of person (e.g. staff, visitor, patient) or name of individual (if appropriate)</td>
</tr>
<tr>
<td>Description of procedure:</td>
<td>Brief description of task that involves the use of the substance</td>
</tr>
<tr>
<td>Substance used:</td>
<td>Name of substance / product</td>
</tr>
<tr>
<td>Quantities used:</td>
<td>Approximate amount or quantity of substance used per day/usage</td>
</tr>
<tr>
<td>Frequency of use:</td>
<td>State how often substance is used, e.g. daily, hourly, weekly, monthly etc</td>
</tr>
<tr>
<td>Hazards identified:</td>
<td>Nature of health effect, e.g. skin irritation, respiratory problems</td>
</tr>
<tr>
<td>Exposure route:</td>
<td>Manner in which substance may enter/contact the body, e.g. inhalation, contact with skin, absorption through membranes</td>
</tr>
<tr>
<td>Could a less hazardous substance be used instead?</td>
<td>State whether there are any alternative substances that could do the job just as well, and if so, state why this is not used.</td>
</tr>
<tr>
<td>Information, Instruction, Training</td>
<td>State what has been done to inform, train or instruct staff/users in the use of the substance</td>
</tr>
<tr>
<td>PPE</td>
<td>State what PPE, if any, has been provided for use with the substance</td>
</tr>
<tr>
<td>Engineering Controls</td>
<td>State what, if any, mechanical means of controlling exposure have been implemented, e.g. ventilation systems, extract fans</td>
</tr>
<tr>
<td>Other management measures:</td>
<td>State whether safe working procedures have been implemented, e.g. method statements for how to carry out the work safely</td>
</tr>
<tr>
<td>---------------------------</td>
<td>--------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>What checks are undertaken on control measures stated above?</td>
<td>State whether any checks are made on the control measures, e.g. testing, inspection, monitoring (if so, how often and who does it)</td>
</tr>
<tr>
<td>Any outstanding/additional training requirements or control measures?</td>
<td>State whether there are any control measures or training required that would reduce the risk further</td>
</tr>
<tr>
<td>Is health surveillance required?</td>
<td>Refer to the Material Safety Data Sheet, section on exposure. This will state whether health surveillance is required. If unsure, contact the Trust’s Safety and Security Officer</td>
</tr>
<tr>
<td>Emergency procedures:</td>
<td>State what procedures should be followed in the event of a spillage, uncontrolled release, fire or failure of Local Exhaust Control (this will be in the Material Safety Data Sheet).</td>
</tr>
<tr>
<td>Waste Disposal:</td>
<td>State the process for disposing of the substance safely (this will be in the Material Safety Data Sheet).</td>
</tr>
<tr>
<td>Name &amp; signature of assessor:</td>
<td>Name and signature of person carrying out the COSHH risk assessment</td>
</tr>
</tbody>
</table>
Cumbria Partnership NHS Foundation Trust
COSHH Assessment Form

Read the notes on completion before attempting to fill in this form. If insufficient space is available under any section, use a separate piece of paper and attach it to the form.

Assessment ref: Date:

Ward/Unit/Department: Persons involved:

Description of procedure:

<table>
<thead>
<tr>
<th>Substance used</th>
<th>Quantities used</th>
<th>Frequency of use</th>
<th>Hazards identified</th>
<th>Exposure route</th>
</tr>
</thead>
</table>

Could a less hazardous substance (or form of the substance) be used instead? Yes / No

If Yes, why is this not used?

What measures have you taken to control the risk?

<table>
<thead>
<tr>
<th>Information, Instruction, Training</th>
<th>Personal Protective Equipment/Clothing (PPE)</th>
<th>Engineering Controls</th>
<th>Other Management Measures</th>
</tr>
</thead>
</table>

What checks are undertaken on control measures listed above?

Are there any outstanding / additional training requirements or control measures? Yes / No

If Yes, please state.

Is health surveillance required? Yes / No

If yes, please state how this will be undertaken.

Emergency Procedures:

- Spillage:
- Uncontrolled release:
- Fire
- Failure of Local Exhaust Control:

Waste Disposal:

Name and position of assessor: __________________ Signature: __________