

Control of Substances Hazardous to Health (COSHH) Policy

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Status	LIVE		
Target Audience- who does the document apply to and <u>who should be using it.</u> - The target audience has the responsibility to ensure their compliance with this document by:	<ul style="list-style-type: none"> Ensuring any training required is attended and kept up to date. Ensuring any competencies required are maintained. Co-operating with the development and implementation of policies as part of their normal duties and responsibilities. 		
Special Cases	<p>All employees directly employed by the Trust whether permanent, part-time or temporary (including fixed-term contract). It applies equally to all others working for the Trust, including private-sector, voluntary-sector, bank, agency, locum, and secondees. For simplicity, they are referred to as 'employees' throughout this policy</p> <p>New and expectant mothers and young persons employed by the Trust will require individual risk assessments to be completed before use or exposure to any substance hazardous to health. Some substances such as Lead, Asbestos and Radiations are subject to their own Regulations and are not covered by this Policy.</p>		
Accountable Director	Director of Strategy & Community Services		
Author/originator – Any Comments on this document should be addressed to the author	Head of Health & Safety (H&S), Fire and Security		
Division and Department	Corporate – Health & Safety		
Implementation Lead	Head of Health & Safety (H&S), Fire and Security		
If developed in partnership with another agency ratification details of the relevant agency			
Regulatory Position			
Review period. This document will be fully reviewed every three years in accordance with the Trust's agreed process for reviewing Trust -wide documents. Changes in practice, to statutory requirements, revised professional or clinical standards and/or local/national directives are to be made as and when the change is identified.			

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1 Introduction & Purpose

1.1 Introduction & Purpose

Great Western Hospitals NHS Foundation Trust (the Trust) has a legal duty to provide a safe and healthy environment for patients, employees and visitors. This policy outlines the actions the Trust will take to ensure that exposure to substances hazardous to health is managed and minimised across the Trust.

1.2 Glossary/Definitions

The following terms and acronyms are used within the document:

CQC	Care Quality Commission
EIA	Equality Impact Assessment
IP&C	Infection Prevention and Control
NHS	National Health Service
A 'COSHH' Substance or preparation	<ul style="list-style-type: none"> • A substance listed in Part 1 of the approved supply list of the Chemicals (Hazard Information and Packaging for Supply) Regulations 2008 (Ref 1) • A substance, which has a workplace exposure limit (WEL) as listed in the Health & Safety Executive EH40 (Ref 2) • A biological agent (any micro-organism, cell culture, or human endoparasite) • Dust of any kind when present at a concentration in air equal to or greater than: <ul style="list-style-type: none"> ○ 10mg/m³ total inhalable dust (eight hour time weighted average (TWA)) ○ 4mg/m³ respirable dust (eight hour TWA) • Any other substance that could cause significant harm to health
CHIP	Chemical Hazard Information and Packaging
COSHH	Control of Substances Hazardous to Health
H&S	Health & Safety
HSE	Health & Safety Executive
IP&C	Infection Prevention and Control
LEV	Local Exhaust Ventilation
LTEL	Long Term Exposure Limit
Mg/m3	Milligrams per cubic metre
MSDS	Material Safety Data Sheet
NHS	National Health Service
PPE	Personal Protective Equipment
RPE	Respiratory Protective Equipment
SSOW	Safe System of Work
STEL	Short Term Exposure Limit
TWA	Time Weighted Average
WEL	Workplace Exposure Limit i.e. the air based concentration that must not be exceeded as regulated by the EH40 document published by the Health & Safety Executive. WELs are occupational exposure limits set under COSHH, in order to help protect the health of workers. 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 exposure limit [LTEL] (eight hours) and short term exposure limit [STEL] (15 minutes).

2 Main Document Requirements

2.1 Statement of Commitment

It is the intention of the Trust to fulfil its statutory and mandatory obligations by complying with the Control of Substances Hazardous to Health Regulations 2002 (as amended) (Ref 1) and the Health & Safety Executive's Approved Code of Practice L5 (Ref 3).

The Trust aims to ensure the safety of all persons on Trust premises from any risk of substances hazardous to health.

The Trust shall achieve this aim by meeting the following objectives:

- Supporting the use of non-hazardous substances wherever practicable.
- Identifying any hazardous substances within the workplace and assessing the risks of use and/or exposure.
- Identifying and implementing appropriate measures to remove, reduce, or control 'Control of Substances Hazardous to Health' (COSHH) hazards.

2.2 Specific COSHH Risks

The Trust recognises that there are a range of exposure risks across sites.

This policy describes the general arrangements for the management and control of substances hazardous to health. Some substances require compliance with hazard specific Regulations and Guidelines.

Specific exposure risks will also be managed by risk specific policies including:-

- Flammable Substances – the Fire Safety Protocol (Ref 4) and Medical Gas Cylinder (Handling, Storage and Use) Policy (Ref 5).
- Cytotoxic Substances – Prescription, Safe Handling & Administration of Cytotoxic Chemotherapy Drugs in Adults and Children Policy (Ref 6); Clinical Chemotherapy Service Operational Policy (Ref 7); Standard Infection Control Precautions Policy (Ref 8); Hand Hygiene and Skin Care Policy (including scrubbing gowning and gloving) Policy (Ref 9).
- Exposure to biological agents – Waste Policy (Ref 10); Linen Policy (Ref 11); Safe Handling & Disposal of Sharps Policy (Ref 12); Management of Sharps/Contamination Incidents Policy (Ref 13); Employee Immunisation and Screening Guideline (Ref 14) Hand Hygiene and Skin Care Policy (including scrubbing gowning and gloving) Policy (Ref 9) Specimen Transportation Procedure (Ref 15).
- Work Related Dermatitis – Hand Hygiene and Skin Care Policy (including scrubbing gowning and gloving) Policy (Ref 9).
- Optical and Laser Radiation Safety Policy (Ref 16).

2.3 COSHH Risk Assessment

Where it is not practicable to use non-hazardous substances, information on all hazardous substances in use will be available.

All Departments will have a COSHH file that includes:-

- A Control Sheet: Hazardous Substances Inventory (Appendix B)

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- An up to date Material Safety Data Sheet (MSDS) supplied by the manufacturer or supplier for each substance listed on the Inventory.
- A COSHH Risk Assessment (Appendix C) for all substances (other than very low risk substances) listed on the Inventory.
- A summary of appropriate Control Measures (page 2 of the COSHH Risk Assessment – Appendix C) for all substances (other than very low risk substances) listed on the Inventory.

COSHH Risk Assessments must be reviewed at least annually. A COSHH Risk Assessment must also be reviewed at any time if the substance, activity or work practices changes or following any incident involving that substance.

MSDS will provide much of the information needed about any substance hazardous to health in use and as such forms a key part of the COSHH Risk Assessment. However, a MSDS outlines generic risks. The COSHH Assessment must show that consideration has been given to use of hazardous substance in workplace environments, and identified additional risks that could relate to employees with access to the substance and in relation to the way that the Department uses the substance ('local conditions').

A completed COSHH Risk Assessment will provide information about local conditions and describe the local Safe System of Work (SSOW) to manage the risks identified. A COSHH Risk Assessment must be completed for all substances other than very low risk substances.

'Very low risk substances are:-

- Any substance that can be used safely without specific instructions or training and/or
- Any substance that would not cause significant harm if used incorrectly

Managers and COSHH Co-ordinators must decide from the information provided on the MSDS whether a substance is a 'very low risk substance' and the decision is to take into account local conditions. A substance in use in an adult and employee only work area could be considered 'very low risk' but that same substance in a public area with vulnerable adults and young people may not be. If a substance is to be treated as a 'very low risk substance' this must be documented on the COSHH Inventory (Appendix B).

2.4 Safe Systems of Work

Information about safe working will be available for all substances in the COSHH Folder.

For all substances, other than very low risk substances, safe systems of work will be documented on page 2 of the COSHH Risk Assessment (Appendix C) and will include good hygiene practice, safe handling and disposal procedures for day to day use.

In addition, all SSOW will detail the procedures for managing emergency situations, first aid guidance, fire safety measures and spillage protocols.

All employees will have access to this information at all times in the COSHH File.

Where the risks of working with a hazardous substance are moderate or high, even with appropriate controls, full and comprehensive working protocols must be documented.

2.5 Maintenance and Testing of Equipment

If the risks of working with a specific substance require the use of equipment (for example Local Exhaust Ventilation) that equipment must be examined and tested at least once every 14 months (or more often if advised by the manufacturer).

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2.6 Storage and Signage

All substances identified as hazardous to health must be stored as advised on the MSDS. Appropriate hazard signage must be used on all storage areas and containers where advised. Guidance of labelling of substances, including the new label formats are contained Personal Protective Equipment
Personal Protective Equipment (PPE) shall be provided as a last resort measure, following implementation of all other control options and Department Managers will ensure it is regularly inspected where appropriate.

Managers must ensure before first use of PPE, that employees receive instruction in the correct use, fitting, storage and maintenance of their PPE.

Where PPE is in use, Department Managers will ensure it is maintained regularly, replaced in full or in part at recommended intervals and periodically checked to ensure that it is working effectively.

2.7 Training

All new employees must complete a Local Induction Checklist (Ref 17) to include information on COSHH substances in use and the controls in place for safety – SSOW.

All existing employees must be aware of, refer to and use SSOW in the COSHH folder in their day-to-day work. Managers must supervise their employees to ensure that this takes place.

The COSHH Folder must be available to all employees in the Department at all times for reference. The annual health and safety audit includes checking that this is implemented.

2.8 Monitoring and Health Surveillance

Monitoring shall be undertaken in accordance with regulations and approved codes of practice where measurement is necessary to ensure that WEL's are not being exceeded and where it is requisite for protecting the health of employees.

Examples of substances that may require exposure monitoring include:

- Nitrous Oxide.
- Latex
- Halothane.
- Isofluorane.
- Toluene.
- Xylene.
- Methyl Methacrylate.
- Formaldehyde.
- Radioactivity.
- Carcinogenic or mutagenic substances.
- Legionella.
- Asbestos.
- Dusts from a process

Managers must identify the requirement for Health Surveillance through COSHH Assessment and ensure that appropriate monitoring is carried out in liaison with the Occupational Health and Wellbeing Department.

Standard exposure monitoring records are to be retained for a minimum of five years from the date the record was made.

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Where health surveillance is provided by the Occupational Health and Wellbeing Department, suitable records shall be kept for at least 40 years and with Asbestos (Ref 18) and Radiation cases 50 years (Ref 19).

Occupational Health and Wellbeing Services also ensure that appropriate arrangements are in place to protect employees who already have known healthcare conditions, which may be exacerbated by exposure to specific substances at work.

2.9 Allergies and Sensitivities

Some substances may not generally be harmful - but may be for some individuals with an allergy or sensitivity (for example latex).

The Trust must show that we have given consideration to the safety of those individuals in the work areas and work place. Where such substances are in use a COSHH Assessment must be completed to describe arrangements for safe working and prevention of exposure for those with allergies and sensitivities.

Employees should be screened and assessed through Occupational Health (Ref 23) and a risk assessment completed describing how that allergy and sensitivity will be managed in the workplace.

Patients should be identified through paper and electronic records and through initial assessment to ensure appropriate measures are in place to prevent exposure.

2.10 Incident Reporting & Investigation

All incidents and accidents with substances hazardous to health, including any near misses, should be reported using the Incident Management Policy (Ref 21).

3 Monitoring Compliance and Effectiveness of Implementation

The arrangements for monitoring compliance are outlined in the table below: -

Measurable policy objectives	Monitoring or audit method	Monitoring responsibility (individual, group or committee)	Frequency of monitoring	Reporting arrangements (committee or group the monitoring results is presented to)	What action will be taken if gaps are identified
COSHH Assessments in the COSHH Folder for all substances (with the exception of very low risk)	Health & Safety Audit	Health & Safety Department	Annually	Health & Safety Committee	Develop an action plan, review and monitor progress
An up-to-date and accurate COSHH File in every Department	Health & Safety Audit	Health & Safety Department	At least an annual Departmental Review	Health & Safety Team through Audit	Health and Safety Team would review process

4 Duties and Responsibilities of Individuals and Groups

4.1 Chief Executive

The Chief Executive is ultimately responsible for the implementation of this document.

4.2 Ward Managers, Matrons and Managers for Non Clinical Services

All Ward Managers, Matrons and Managers for Non Clinical Services must ensure that employees within their area are aware of this document; able to implement the document and that any superseded documents are destroyed.

4.3 Document Author and Document Implementation Lead

The document Author and the document Implementation Lead are responsible for identifying the need for a change in this document as a result of becoming aware of changes in practice, changes to statutory requirements, revised professional or clinical standards and local/national directives, and resubmitting the document for approval and republication if changes are required.

4.4 COSHH Co-ordinator

Managers may delegate specific COSHH duties to a department COSHH Co-ordinator but retains overall accountability for managing the risks in their department. The specific duties that may be passed to a COSHH Co-ordinator include:

- All hazardous substances used within the department have been identified and Material Safety Data sheets for chemicals used within the department are available and held in a COSHH File for access at all times.
- COSHH Assessments are completed for all substances, other than very low risk substances.
- Risk Assessments are reviewed annually and amended with the introduction of new substances.
- Ensuring that all control measures identified through COSHH Risk Assessments are in place.
- Employees have knowledge of the substances they work with, and are confident to work safely with the substance on a day to day basis and what to do in an emergency or unexpected situation.
- Undertaking COSHH training available via the Health and Safety Department.
- Helping to undertake their departmental audit.
- Identifying significant COSHH risks and bringing them to the attention of the Department Manager.

4.5 All Employees

All employees must:

- Ensure that they have suitable knowledge on how to work safely with the substances in their department, both on a day-to-day basis and in an emergency or unexpected situation
- Know where their department COSHH File is kept
- Correctly use any control measures, PPE or safe systems of work to minimize the risks of using hazardous substances
- Report any failings in existing systems or equipment or any other concerns relating to the use of hazardous substances immediately to their Line Manager
- Attend, or co-operate with, health surveillance if requested
- Undertake any required training as identified

4.6 Occupational Health & Wellbeing Service

The Clinical Lead shall ensure that the following functions are provided:

- Employment health assessment and screening as appropriate.
- Health surveillance, at intervals of 12 months or less where:
 - An employee is exposed to a substance/process listed in Schedule 6 of the control of substances hazardous to health Regulations, which has been identified by the Head of Health & Safety, Fire and Security.
 - and/or**
 - Where an identifiable disease or adverse health effect may be related to exposure **and** there is reasonable likelihood that the disease or effect may occur under the particular conditions of work **and** there are valid techniques for detecting the effect or disease.
- Occupational health records are maintained for all employees and health surveillance records are stored (as required above) for 40 years from the date of the last entry.
- Advice to managers on control of substances hazardous to health and assessments in accordance with the regulations where appropriate.
- Immunisations/vaccinations to employees for work related hazards.
- Health assessments for employees returning to work from period of absence in order to establish fitness for work and in accordance with Equality Act 2010 (Ref 22) legislation, suggest reasonable adjustments to reduce the risk when identified by Human Resources or line Managers.
- A full and effective surveillance plan is agreed following the occupational hygienist monitoring service report (Commissioned by the Health & Safety Department), to ensure effectiveness of control measures and compliance with occupational exposure standards.

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- Advice is available to employees for needle stick injuries or other contamination incidents.

5 Further Reading, Consultation and Glossary

5.1 References, Further Reading and Links to Other Policies

The following is a list of other policies, procedural documents or guidance documents (internal or external) which employees should refer to for further details:

Ref. No.	Document Title	Document location
1	The Control of Substances Hazardous to Health Regulations 2002 [as amended] and Approved Code of Practice	www.legislation.gov.uk
2	Health & Safety Executive EH40	www.legislation.gov.uk
3	Health & Safety Executive's Approved Code of Practice L5	www.legislation.gov.uk
4	Fire Safety Protocol	T:\Trust-wide Documents
5	Medical Gas Cylinder Handling & Usage Policy	T:\Trust-wide Documents
6	Cytotoxic Substances – Prescription, Safe Handling & Administration of Cytotoxic Chemotherapy Drugs in Adults and Children Policy	T:\Trust-wide Documents
7	Clinical Chemotherapy Service Operational Policy	T:\Trust-wide Documents
8	Standard Infection Control Precautions Policy	T:\Trust-wide Documents
9	Hand Hygiene and Skin Care Policy (including scrubbing gowning and gloving) Policy	T:\Trust-wide Documents
10	Waste Policy	T:\Trust-wide Documents
11	Linen Policy	T:\Trust-wide Documents
12	Safe Handling & Disposal of Sharps Policy	T:\Trust-wide Documents
13	Management of Sharps/Contamination Incidents Policy	T:\Trust-wide Documents
14	Employee Immunisation and Screening Guideline	Department
15	Specimen Transportation Procedure	T:\Trust-wide Documents
16	Optical and Laser Radiation Safety Policy	T:\Trust-wide Documents
17	Local Induction Checklist	Departmental
18	Control of Asbestos at Work Regulations 2012	www.legislation.gov.uk
19	Ionising Radiation Regulations 1999	www.legislation.gov.uk

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Ref. No.	Document Title	Document location
20	How to Assess Risk Policy & Procedure	T:\Trust-wide Documents
21	Incident Management Policy	T:\Trust-wide Documents
22	Equality Act 2010	www.legislation.gov.uk
23	Occupational Health Referral Form	http://intranet

5.2 Consultation Process

The following is a list of consultees in formulating this document and the date that they approved the document:

Job Title / Department	Date Consultee Agreed Document Contents
Director of Estates	27/03/19
Senior Physiotherapist and Outpatients Health & Safety Representative	27/03/19
Specialist Occupational Health Nurse	27/03/19
Head of H&S, Fire and Security	27/03/19

6 Equality Impact Assessment

An Equality Impact Assessment (EIA) has been completed for this document and can be found at Appendix A.

Appendix A - STAGE 1: Initial Screening For Equality Impact Assessment

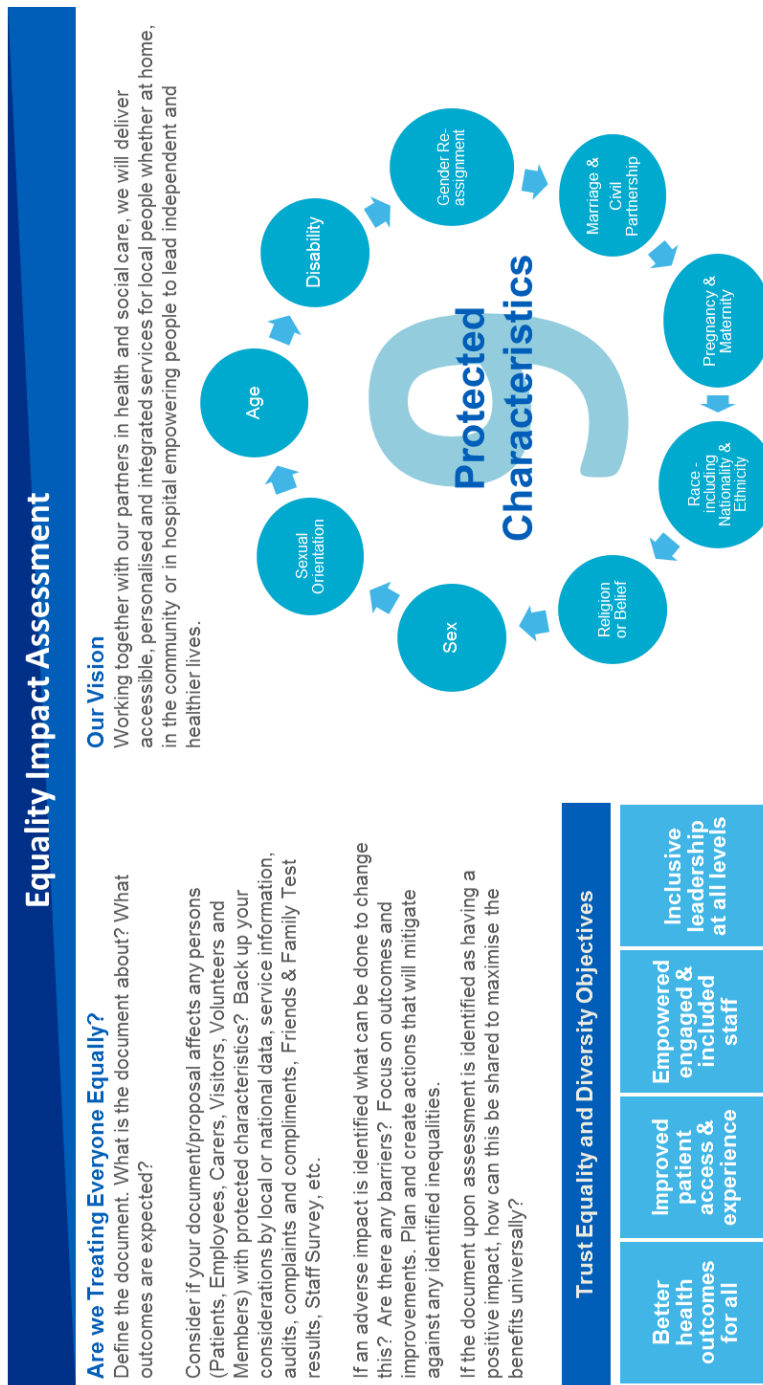
At this stage, the following questions need to be considered:			
1	Control of Substances Hazardous to Health [COSHH] Policy The Policy will give clear guidance and guidelines on how the organisation and teams will ensure safety when working with Substances Hazardous to Health. As a consequence of the Policy, teams may need to review the use of Hazardous Substances and may be able to protect against potential harm by the replacing the Substance with a Non-Hazardous Substance. Where this is not possible all employees will have access to the information they need at all times to provide appropriate information to patients and visitors about substances should it be necessary.		
2.	This policy encourages the review of the use of any Substance Hazardous to Health with the aim of reducing the Hazardous Substances in use across the Trust. Where it is not practicable to replace the Substance this Policy aims to ensure anyone working with or exposed to Hazardous Substances has access to the information they need at all times to be safe, both on a day to day basis and should there be an unexpected or emergency situation.		
3.	Is there any evidence or reason to believe that the policy, strategy or project could have an adverse or negative impact on any of the nine protected characteristics (as per Appendix A)?		No
4.	Is there evidence or other reason to believe that anyone with one or more of the nine protected characteristics have different needs and experiences that this policy is likely to assist i.e. there might be a <i>relative</i> adverse effect on other groups?		No
5.	Has prior consultation taken place with organisations or groups of persons with one or more of the nine protected characteristics of which has indicated a pre-existing problem which this policy, strategy, service redesign or project is likely to address?		No

Signed by the manager undertaking the assessment	Mark Hemphill
Date completed	30/05/19





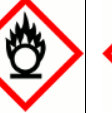




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Job Title	Head of H&S, Fire and Security
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On completion of Stage 1 required if you have answered YES to one or more of questions 3, 4 and 5 above you need to complete a [STAGE 2 - Full Equality Impact Assessment](#)



Appendix C – COSHH Assessment Sheet

Product Name										
Suppliers Name										
Location/Team										
Work activity – how is it used, produced, encountered, stored, handled?										
Potential Routes of Entry	Skin Absorption		Eyes		Inhalation		Description			
	Ingestion		Cuts Abrasions		Injection					
Workplace Exposure Limits: STEL/LTEL	Hazard Statement(s)									
Duration/Frequency of exposure:	Precautionary Statement (s)									
Physical Form and Hazardous Assessment										
Dust		Gas		Mists						
Fumes		Liquid		Aerosols						
Vapour		Solid		Fibres						
Hazard Pictograms										
										
Flammable	Explosive	Corrosive	Harmful/Irritant	Oxidising	Harmful to Environment	Serious Health Hazard	Acute Toxicity	Compressed Gas		
Signal Word:										
Persons who might be affected										
Employees		Lawful Visitors		Pregnant Women/Nursing						

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				Mothers		
Contractors		Unlawful Visitors		Lone Workers		
Members of the Public		Young People		Shift Workers		
Where is Material Used						
Outside		Inside – good ventilation		Inside – poor ventilation		Confined Space
Control Measures						
Storage						
Handling						
Training for Staff						
Transport						
First Aid						
Ventilation/LEV						
Waste Disposal						
Health Surveillance Required	Type:			How often:		
Air Monitoring						
Spillage/Accidental Release Procedures						
Fire Management						
PPE Required (Delete as Appropriate)						
	Gloves	Lab coat	Respirator	Eye Prot.	Face Prot.	Hygiene
Residual Risk Assessment						
Very Low Low Medium High Very High						
Assessors Name:					Date:	
Assessors Signature:						

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Appendix D – Safety Data Sheet and Risk Assessment Guidance

Safety data sheets

Products you use may be 'dangerous for supply'. If so, they will have a label that has one or more hazard symbols. Some examples are given here.

These products include common substances in everyday use such as paint, bleach, solvent or fillers. When a product is 'dangerous for supply', by law, the supplier must provide you with a safety data sheet. Note: medicines, pesticides and cosmetic products have different legislation and don't have a safety data sheet. Ask the supplier how the product can be used safely.

Safety data sheets can be hard 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 tell you what the dangers are;
- Sections 4-8, which tell you about emergencies, storage and handling.

Since 2009, new international symbols have been gradually replacing the European symbols. Some of them are similar to the European symbols, but there is no single word describing the hazard. Read the hazard statement on the packaging and the safety data sheet from the supplier.

European symbols



New International symbols

