



GIG
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Bwrdd Iechyd Prifysgol
Bae Abertawe
Swansea Bay University
Health Board



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|--|--|--------------------------|-------------------------------------|
| Meeting Date | 26 June 2019 | Agenda Item | x.x |
| Report Title | COSHH Procedure | | |
| Report Author | Laurie Higgs, Head of Health and Safety | | |
| Report Sponsor | Gareth Howells, Director of Nursing | | |
| Presented by | Laurie Higgs, Head of Health and Safety | | |
| Freedom of Information | Open | | |
| Purpose of the Report | The purpose of this report is to | | |
| Key Issues | <ul style="list-style-type: none"> • Background • Risks • Summary | | |
| Specific Action Required <i>(please choose one only)</i> | Information | Discussion | Assurance |
| | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input checked="" type="checkbox"/> |
| Recommendations | Members are asked to : Note the procedure that was previously agreed in the group in September 2019 | | |

COSHH Procedure

1. INTRODUCTION

The purpose of this report is to update the Operational Health and Safety group on arrangements to assess Control of Substances Hazardous to Health (COSHH) risk and advice on relevant control measures

2. BACKGROUND

Though the risks from hazardous substances used in the NHS has been reduced there is still a legal requirement to protect staff and others from exposure to chemical and biological materials

3. GOVERNANCE AND RISK ISSUES

Biological risks in the workplace are typically managed by Control of Infection policies and procedures. This procedure focusses on chemical hazards

4. FINANCIAL IMPLICATIONS

There are no direct financial implications arising from this report.

5. RECOMMENDATION

Members are asked to: Note the procedure that was previously agreed in the group in September 2019

| Governance and Assurance | | |
|---|---|-------------------------------------|
| Link to Enabling Objectives <i>(please choose)</i> | Supporting better health and wellbeing by actively promoting and empowering people to live well in resilient communities | |
| | Partnerships for Improving Health and Wellbeing | <input checked="" type="checkbox"/> |
| | Co-Production and Health Literacy | <input type="checkbox"/> |
| | Digitally Enabled Health and Wellbeing | <input type="checkbox"/> |
| | Deliver better care through excellent health and care services achieving the outcomes that matter most to people | |
| | Best Value Outcomes and High Quality Care | <input checked="" type="checkbox"/> |
| | Partnerships for Care | <input type="checkbox"/> |
| | Excellent Staff | <input type="checkbox"/> |
| | Digitally Enabled Care | <input type="checkbox"/> |
| | Outstanding Research, Innovation, Education and Learning | <input type="checkbox"/> |
| Health and Care Standards | | |
| <i>(please choose)</i> | Staying Healthy | <input type="checkbox"/> |
| | Safe Care | <input checked="" type="checkbox"/> |
| | Effective Care | <input checked="" type="checkbox"/> |
| | Dignified Care | <input checked="" type="checkbox"/> |
| | Timely Care | <input checked="" type="checkbox"/> |
| | Individual Care | <input checked="" type="checkbox"/> |
| | Staff and Resources | <input checked="" type="checkbox"/> |
| Quality, Safety and Patient Experience | | |
| Safety for staff, patients, visitor and contractors | | |
| Financial Implications | | |
| There are no direct financial implications arising from this report. | | |
| Legal Implications (including equality and diversity assessment) | | |
| Legal Compliance COSHH Regulations 2012 | | |
| Staffing Implications | | |
| None at present | | |
| Long Term Implications (including the impact of the Well-being of Future Generations (Wales) Act 2015) | | |
| None | | |
| Report History | - | |
| Appendices | None | |

Management of Hazardous Substances (Control of Substances Hazardous to Health Regulations 2002 (COSHH)

1. Purpose

This procedure is to provide necessary guidance on action to comply with the Control of Substances Hazardous to Health Regulations 2002 (COSHH) (as amended). COSHH places a duty on the Health Board to eliminate or effectively control exposure to hazardous substances.

Certain chemicals and biological substances used at work can cause harm. Harm may be short term (e.g. chemical burn, coughing etc.) or cause longer term health problems (e.g. infection, dermatitis, occupational asthma, cancer etc.).

How the same substance is used can also change the risk e.g. spraying versus painting, the latter normally producing lower emissions of solvents. In some cases staff may not directly use or be exposed to the hazardous substance but may be harmed by being in close proximity to it

Certain substances such as Asbestos may be harmful but will have specific regulations regarding their safety management.

2. Staff and Patient Safety

2.1 COSHH and Staff Safety

Exposure of staff to hazardous substances must be eliminated or where that is not possible risks adequately assessed and controlled.

COSHH applies where there is a risk of exposure to hazardous substances during their (non-exhaustive list):-

- Actual use
- Preparation, mixing etc.
- Storage
- Transportation
- Administration e.g. as a drug
- Disposal after use
- Following spillage, clean-up procedures etc.

2.2 COSHH and Patient Safety

For patients COSHH does not apply to the health effects from medication (e.g. cytotoxic drugs but would apply regarding protection of staff to exposure).

COSHH regulations will still apply for patients where unintended exposure could occur. This could be due to risks such as poor or insecure storage of chemicals, cleaning materials etc.

2.3 COSHH and Visitor Safety etc.

The duty of care is extended to visitors and contractors persons who may be exposed to hazardous substances. This include accidental exposure to hazardous materials when used by the Health Board, failure to prevent access to hazardous materials etc.

3. Substances to Which the COSHH Regulations Apply

3.1 Forms of Hazardous Substances

Hazardous substance may occur in wide-variety of forms including (non-exhaustive list):-

- Gas, fume, mist
- Liquid
- Solid, powder, dust
- Biological e.g. blood and body fluids
- Forming part or all of a mixture
- Waste materials

A substance should be regarded as hazardous to health if it is:-

- Hazardous in the form in which it occurs in the work activity (e.g. used as a dust rather than as a solid (e.g. pellet)
- Forms part of a mixture of compounds, microorganisms, allergens etc. with individual substances that have health risk
- Is a waste material with properties that have a health risk (e.g. clinical waste)

4. Principles of Control of Substances Hazardous to Health (COSHH)

The general principles are to:-

1. Control exposure of staff (and others) to hazardous substances.
2. Where possible eliminate the use of a hazardous substance
3. Where elimination is not possible **assess the risk** to identify the necessary control measure(s)
4. Change the risk by implementing control measures Control measures adopted should be proportionate to the level of risk. These can include (non-exhaustive list):-

| Control Type | Example of controls |
|--------------------------|---|
| Substitution | <ul style="list-style-type: none">• Use a safer alternative |
| Change the task | <ul style="list-style-type: none">• Changing how it is used e.g. using a safer form such as pellet instead of a dust, brushing on rather than spraying etc. |
| Management controls | <ul style="list-style-type: none">• Standard Operating Procedures, |
| Training and information | <ul style="list-style-type: none">• Training• Instruction for use, manufacturer's instructions |

| | |
|------------------|--|
| Competent Staff | <ul style="list-style-type: none"> • Providing appropriate training • Providing appropriate information |
| Control exposure | <ul style="list-style-type: none"> • Consider the whole cycle of use and potential exposure to the substance. Is it hazardous during preparation, use, disposal etc.? • Minimising the quantity of hazardous substance used • Enclose the substance so that it cannot escape e.g. use of engineering controls such as a fume cabinet • Providing good general ventilation to work area • Limiting the number of employees that may be exposed • Providing hygiene facilities e.g. washing facilities • Provide appropriate Personal Protective Equipment (PPE) • Provide facilities to safely dispose of or treat contaminated clothing and equipment • Preventing access to hazardous substances by patients and visitors e.g. lockable cabinets |
| Maintenance | <ul style="list-style-type: none"> • Maintaining equipment etc. required to control exposure |
| Emergencies | <ul style="list-style-type: none"> • Developing spillage and other emergency procedures |
| Monitoring | <ul style="list-style-type: none"> • Supervision • Providing health surveillance • Monitoring of levels of hazardous substances |

5. Adopting Appropriate Levels of Control

5.1 Risk Levels

Three levels of risk have been identified. It should be noted that some hazardous substances may have high risk associated with them but the particular way that they are used, quantities and concentrations etc. may actually make them low or medium risk.

Risk levels are:-

| | |
|--------------|---|
| Risk Level 1 | <ul style="list-style-type: none"> • Substance with HIGH potential to cause harm |
| Risk Level 2 | <ul style="list-style-type: none"> • Substance and/or how they are used with a Medium potential to cause harm |
| Risk Level 3 | <ul style="list-style-type: none"> • Substance and how they are used with a Low potential to cause harm |

The purpose of this classification is to give guidance to where the risk assessment and associated control measures must be carefully identified and implemented and to avoid circumstances where arrangements put in place for a low risk substance are not proportionate to the level of risk

Appendix A shows the risk control measures typically required. Where there may be doubt as to the potential classification of the substance unless identified by risk

assessment as not being required the highest level of risk control should be implemented

5.2 Risk Assessment

Unless the risk is clearly low (e.g. correction fluid used in low volumes in offices) the health risks from hazardous substances must be:-

- Assessed
- Risks identified
- Control measure identified for all circumstance where exposure may take place
- Risk assessment recorded
- Risk assessment brought to the attention of staff
- Reviewed if the risk assessment may become invalid

As risk assessments may frequently influence the Standard Operating Procedures (SOP), Quality control systems e.g. required for accreditation, training etc. it is recommended that the key findings of the risk assessment is incorporated into relevant documents, training, procedures etc. Key findings will include when to use Personal Protective Equipment, management of spills etc.

Risk assessments and examples are shown in Appendix A.

5.3 Risk Assessment Review

The risk assessment may become invalid due to

- Change of use of the substance e.g. method of application
- Change in where it is used
- Change in formulation e.g. by supplier
- Information is received that the risk has changed
- Emerging health concerns with staff etc. e.g. respiratory problems during use.

Risk assessment should be reviewed as necessary.

6. Help and Support

Assistance and advice is available from

- Health and Safety Department
- Occupational Health
- Infection Control department

COSHH Risk and Control Measures

| | Used in tables below | |
|------|----------------------------------|---|
| Code | This means | Example |
| SDS | Safety Data Sheet | Information on risks provided by supplier |
| SOP | Standard Operating Procedure | Instruction for use (includes suppliers instructions) |
| PPE | Personal Protective Equipment | Gloves, goggles etc. |
| RPE | Respiratory Protective Equipment | Respirator, mask etc. |
| LEV | Local Exhaust Ventilation | Fume cabinet etc. |
| WEL | Work Exposure Limit | Average exposure over 8 hours |
| STE | Short Term Exposure limit | Short term exposure over 15 minutes |
| | | |

Substance Risk Levels and Potential Control Measures (non-exhaustive list)

| | | |
|------------------------------------|---|--|
| Risk Level 1 | <ul style="list-style-type: none"> Substance with HIGH potential to cause harm | |
| Risk factors | <ul style="list-style-type: none"> Substances where high standards of control must be in place and maintained Risk of short or long term injury Risk of significant health effects (e.g. carcinogenic) Possible or known risk to unborn child (mutagenic) Staff may need high levels of competency Likely requirement for monitoring Likely to require health surveillance | |
| (Possible) Additional risk factors | <ul style="list-style-type: none"> Requires the routine use of control measures such as enclosure, engineering (LEV), PPE etc. Spillage procedures required and likely to include RPE and specific waste disposal procedure etc. Substances may have a WEL and/or STEL | |
| Examples | Substance Example | Typical risks |
| Cancer Services | <ul style="list-style-type: none"> Cytotoxic drugs | <ul style="list-style-type: none"> Carcinogen |
| Laboratory | <ul style="list-style-type: none"> Xylene | <ul style="list-style-type: none"> Carcinogen |

| | | |
|---------------------------------|---|--|
| Risk Level 1 | Examples of Control Measures | |
| Developing the Risk Assessment | <ul style="list-style-type: none"> Consider the basic requirements of COSHH (elimination, substituting safer alternative etc. Knowledge of Safety Data Sheet Formal risk assessment to identify and record control measures Manufacturer's instructions | |
| Likely main control measures | <ul style="list-style-type: none"> Standard Operating Procedure/Instructions for use Training/information for staff PPE (routine use and/or spillage) Spillage procedure, training, equipment etc. Supervision Security of chemicals etc. Incident reporting and investigation | |
| Other possible control measures | <ul style="list-style-type: none"> Enclosure of substance LEV maintained and tested RPE routine use and/or spillage Monitoring for WEL/STEL Specific first aid procedure Health surveillance | |

| | | |
|------------------------------------|--|--|
| Risk Level 2 | <ul style="list-style-type: none"> Substance and/or how they are used with a Medium potential to cause harm | |
| Risk factors | <ul style="list-style-type: none"> Generally immediate or short-term risk to health Higher risk chemicals used in small quantities | |
| (Possible) Additional risk factors | <ul style="list-style-type: none"> May require the routine use of PPE, LEV Unlikely to require RPE in normal use Large groups of staff using substances across a range of areas Possible use in poorly ventilated or inappropriate areas Users may take short cuts e.g. higher concentrations of liquids in a belief the task will be quicker etc. Spillage procedures may be required Substances may have a WEL and/or STEL Possibility that patients and visitors may be exposed to the substance e.g. accessing substance from insecure storage cupboards | |
| Examples | Substance Example | Typical risks |
| Support Services | <ul style="list-style-type: none"> Chlorine releasing agents Hydrogen Peroxide Certain cleaning chemicals | <ul style="list-style-type: none"> Respiratory injury/chemical burns Respiratory injury /chemical burns Chemical burns/Dermatitis |
| Endoscopy | <ul style="list-style-type: none"> Peracetic acid | <ul style="list-style-type: none"> Respiratory injury/Chemical burns |
| Estates | <ul style="list-style-type: none"> Drain cleaner Cement dust | <ul style="list-style-type: none"> Respiratory injury /chemical burns Chemical burns |
| Laboratories | <ul style="list-style-type: none"> Xylene Formaldehyde | <ul style="list-style-type: none"> Respiratory injury/carcinogenic Respiratory injury/carcinogenic |
| Theatres | <ul style="list-style-type: none"> Anaesthetics | <ul style="list-style-type: none"> Respiratory injury |
| General areas | <ul style="list-style-type: none"> Latex Alcohol gels | <ul style="list-style-type: none"> Dermatitis Dermatitis, consumption by patients etc. |

| | |
|--------------------------------|--|
| Risk Level 2 | Examples of Control Measures |
| Developing the Risk Assessment | <ul style="list-style-type: none"> Consider the basic requirements of COSHH (elimination, substituting safer alternative, risk assessment etc. Knowledge of Safety Data Sheet Formal risk assessment to identify and record control measures Manufacturer's instructions |
| Likely main control measures | <ul style="list-style-type: none"> Standard Operating Procedure/Instructions for use Training/information for staff PPE (routine use and/or spillage) Spillage procedure, training, equipment, waste procedure etc. Supervision Security of chemicals etc. Incident reporting and investigation |

Other possible control measures

- Enclosure of substance
- LEV maintained and tested
- RPE (routine use and/or spillage)
- Monitoring for WEL/STEL
- Specific first aid procedure
- Health surveillance

| | | |
|------------------------------------|--|--|
| Risk Level 3 | <ul style="list-style-type: none"> Substance and how they are used with a Low potential to cause harm | |
| Risk factors | <ul style="list-style-type: none"> Low risk to health | |
| (Possible) Additional risk factors | <ul style="list-style-type: none"> May require the routine use of PPE No requirement for engineering (LEV) controls, RPE not required Information on safe use etc. primarily available from the label of the container Spillage procedures unlikely to be required Possibility that patient and visitors may be exposed to the substance e.g. security of cupboard, use in open access kitchens etc. | |
| Examples | Substance Example | Possible risks |
| Detergents | <ul style="list-style-type: none"> Washing up liquid Soap powder/liquid | <ul style="list-style-type: none"> Irritant Drinking etc. by patients, children etc. |
| Likely main control measures | <ul style="list-style-type: none"> Control measures generally simple Knowledge of instructions for use, SOP etc. Limited requirement for training/information for staff PPE (routine use and/or spillage) may not be required Security of chemicals etc. Incident reporting and investigation | |
| Other possible control measures | <ul style="list-style-type: none"> Low requirement e.g. health surveillance not required | |

SWUHB COSHH Risk Assessment Form

This assessment *only addresses the risk of harm to health* from possible exposure to the substances listed. Additional risk assessments may be required to control the risk from other hazards e.g. electrical equipment etc. associated with work.

| | |
|-----------------------------------|--|
| Location of this COSHH Assessment | |
|-----------------------------------|--|

| | |
|--|--|
| What will the chemical(s) be used for? | (describe process, processes etc. e.g. washing floors) |
|--|--|

| | |
|---|--------------------------------|
| What is (are) the names of the chemical involved in the process/this assessment | Trade Name, Chemical name etc. |
|---|--------------------------------|

| | | | | |
|---|--|-----------------------------|---|--|
| Are there R phrases for this chemical? (tick or complete all relevant boxes) | R10 - Flammable. R11 - Highly flammable | R20 - Harmful by inhalation | R21 - Harmful in contact with skin. | |
| | R22 - Harmful if swallowed. | R36 - Irritating to eyes | R37 - Irritating to respiratory system. | |
| | R38 - Irritating to skin | | | |

| | | | |
|------------------|---|--|--|
| R Phrase (other) | R | | |
| | R | | |
| | R | | |

| | |
|-------|---|
| Note: | R Phrases including Toxic, Danger of very serious irreversible effects, May cause cancer. Seek specialist advice. |
|-------|---|

| | | | | |
|---------------------------------------|-----|--|-----------------|--|
| Does the substance have a STEL or WEL | Yes | | If yes describe | |
| | No | | | |

| | | | | | | | |
|---|-------------------------------------|---------------------------------|--|----------------------|--|--------|--|
| Who might be exposed? (tick or complete all relevant boxes) | | | | | | | |
| Staff using the chemical | <input checked="" type="checkbox"/> | Persons in close proximity etc. | | Visitors Patients | | Others | |

| At what stage might exposure take place? (tick or complete all relevant boxes) | | | | | | | |
|--|--|---------------------|--|---------------------------|--|-----------------------------|--|
| Transportation | | Preparation for use | | Actual use | | Finishing e.g. rinsing | |
| Waste disposal | | Spillage | | Accessed by patients etc. | | Inadequate/Insecure storage | |
| Other (describe) | | | | | | | |

| How will exposure be prevented or controlled? (tick or complete all relevant boxes) | | | | | | | |
|---|--|----------------------------|--|--------------------------|--|---------------------------|--|
| Procedure/SOP/Instructions | | Containment (fume cabinet) | | Good general ventilation | | Local Exhaust Ventilation | |
| Use by competent staff only | | Lockable cabinet/stores | | Health surveillance. | | Spillage procedure | |
| PPE gloves | | PPE clothing | | PPE eye | | PPE respiratory | |
| Other (describe) | | | | | | | |
| Other (describe) | | | | | | | |

Other Comments to support this assessment

| | | | |
|--|--|--|--|
| Date of Assessment | | | |
| Assessor(s) (print name and job title) | | | |
| Assessor(s) signature | | | |

| | | | |
|--|--|--|--|
| Date of Assessment Review | | | |
| Assessor(s) (print name and job title) | | | |
| Assessor(s) signature | | | |

SWUHB COSHH Risk Assessment Form

This assessment *only addresses the risk of harm to health* from possible exposure to the substances listed. Additional risk assessments may be required to control the risk from other hazards e.g. electrical equipment etc. associated with work.

| | |
|-----------------------------------|-----------------------------------|
| Location of this COSHH Assessment | Grange Bungalows (Rehabilitation) |
|-----------------------------------|-----------------------------------|

| | |
|--|--|
| What will the chemical(s) be used for? | (describe process, processes etc. e.g. washing floors) Limited range of typical household chemicals used in these premises. Patients will be supervised if required to use. |
|--|--|

| | |
|---|---|
| What is (are) the names of the chemical involved in the process/this assessment | Trade Name, Chemical name etc. Washing up liquid Detergents for general cleaning of surfaces Tablets for dish washer |
|---|---|

| | | | | | | |
|---|--|-------------------------------------|-----------------------------|-------------------------------------|---|--|
| Are there R phrases for this chemical? (tick or complete all relevant boxes) | R10 - Flammable. R11 - Highly flammable | | R20 - Harmful by inhalation | | R21 - Harmful in contact with skin. | |
| | R22 - Harmful if swallowed. | <input checked="" type="checkbox"/> | R36 - Irritating to eyes | <input checked="" type="checkbox"/> | R37 - Irritating to respiratory system. | |
| | R38 - Irritating to skin | | | | | |

| | | | |
|------------------|---|--|--|
| R Phrase (other) | R | | |
| | R | | |
| | R | | |

| | |
|-------|---|
| Note: | R Phrases including Toxic, Danger of very serious irreversible effects, May cause cancer. Seek specialist advice. |
|-------|---|

| | | | | |
|---------------------------------------|-----|-------------------------------------|-----------------|--|
| Does the substance have a STEL or WEL | Yes | | If yes describe | |
| | No | <input checked="" type="checkbox"/> | | |

| | | | | | | |
|---|-------------------------------------|---------------------------------|--|-------------------|-------------------------------------|--------|
| Who might be exposed? (tick or complete all relevant boxes) | | | | | | |
| Staff using the chemical | <input checked="" type="checkbox"/> | Persons in close proximity etc. | | Visitors Patients | <input checked="" type="checkbox"/> | Others |

| At what stage might exposure take place? (tick or complete all relevant boxes) | | | | | | | |
|--|--|---------------------|-------------------------------------|---------------------------|-------------------------------------|-----------------------------|-------------------------------------|
| Transportation | | Preparation for use | | Actual use | <input checked="" type="checkbox"/> | Finishing e.g. rinsing | |
| Waste disposal | | Spillage | <input checked="" type="checkbox"/> | Accessed by patients etc. | <input checked="" type="checkbox"/> | Inadequate/Insecure storage | <input checked="" type="checkbox"/> |
| Other (describe) | | | | | | | |

| How will exposure be prevented or controlled? (tick or complete all relevant boxes) | | | | | | | |
|---|-------------------------------------|---|-------------------------------------|--------------------------|--|---------------------------|--|
| Procedure/SOP/Instructions | <input checked="" type="checkbox"/> | Containment (fume cabinet) | | Good general ventilation | | Local Exhaust Ventilation | |
| Use by competent staff only | | Lockable cabinet/stores | <input checked="" type="checkbox"/> | Health surveillance. | | Spillage procedure | |
| PPE gloves | <input checked="" type="checkbox"/> | PPE clothing | | PPE eye | | PPE respiratory | |
| Other (describe) | <input checked="" type="checkbox"/> | If patients required to use chemicals they will be supervised | | | | | |
| Other (describe) | | | | | | | |

Other Comments to support this assessment

| | | | |
|--|--------------|--|--|
| Date of Assessment | October 2018 | | |
| Assessor(s) (print name and job title) | | | |
| Assessor(s) signature | | | |

| | | | |
|--|--|--|--|
| Date of Assessment Review | | | |
| Assessor(s) (print name and job title) | | | |
| Assessor(s) signature | | | |

