

Title:	Control of Substances Hazardous to Health (COSHH) Standard Operating Procedure
Reference No:	CP2 Procedure
Owner:	Ruth Nutbrown, Assistant Chief Officer
Author:	Ian Plummer, Health and Safety Manager
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Consultation Process:	
Ratified and Approved by:	OE: 16/10/2020
Distribution:	All staff and GP members of the CCG
Compliance:	Mandatory for all permanent and temporary employees of Rotherham CCG
Equality & Diversity Statement:	In applying this policy, the Organisation will have due regard for the need to eliminate unlawful discrimination, promote equality of opportunity, and provide for good relations between people of diverse groups, in particular on the grounds of the following characteristics protected by the Equality Act (2010); age, disability, gender, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion or belief, and sexual orientation, in addition to offending background, trade union membership, or any other personal characteristic.

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1. Introduction

- 1.1 NHS Rotherham Clinical Commissioning Group (CCG) acknowledges its responsibilities under the Control of Substances Hazardous to Health Regulations 2002 (COSHH) and the importance of providing a working environment which is safe and healthy for all employees, contractors, visitors and members of the public. The CCG will ensure that the exposure to hazardous substances is prevented or, if this is not reasonably practicable, adequately controlled by assessing the risks, implementing appropriate control measures and ensuring that appropriate advice and training is given to users the risks of exposure to hazardous substances can be reduced. It is recognised that failure to comply with COSHH Regulations and the approved codes of practice (L5) constitutes an offence and is subject to penalties under the Health and Safety at Work Act 1974.

2. Legislation

- 2.1 The legal requirements for this Standard Operating Procedure are:

- The Control Of Substances Hazardous to Health Regulations 2002
- Health and Safety at Work etc. Act 1974
- The Management of Health & Safety at Work Regulations 1999
- Classification, Labelling and Packaging of Substances and Mixtures Regulations 2015 (CLP)

3. Scope

- 3.1 This procedure applies to all staff and other persons working on CCG premises who come into contact with hazardous substances used by the CCG. The CCG is responsible for ensuring contractors have carried out relevant COSHH assessments by including this as a requirement in the service specification. The regulations require the employer to:

- identify substances which have the potential to cause harm
- not carry out any work which is liable to expose any employees to harmful substances unless they have made a “suitable and sufficient” assessment of the risks created by that work
- ensure that where there is any work which exposes employees to harmful substances, the employee shall receive such information, instruction and training as is suitable for him/her to

know the risks created by such exposure, and what precautions that should be taken

- ensure that exposure to harmful substances is prevented or, where this is not reasonably practicable, adequately controlled
- ensure that control measures (e.g. engineering controls) personal protective equipment or other facilities are provided and that reasonable steps are taken to make sure they are properly used and staff are adequately trained in its purpose and its use
- ensure that such control measures are maintained in an efficient state, in efficient working order and in good repair and in the case of PPE in clean condition
- ensure that assessments of risk involving harmful substances are reviewed regularly and forthwith if:-
 - a) there is a reason to suspect that the assessment is no longer valid, or
 - b) There has been significant change in the work to which the assessment relates.

3.2 If changes have been identified then it is the responsibility of the manager to ensure the appropriate changes to the work practices.

4. Definitions

4.1 ***Control of Substances Hazardous to Health Regulations 2002 – COSHH***

NHS Rotherham Clinical Commissioning Group – CCG

South Yorkshire and Bassetlaw Clinical Commissioning Groups - SY&BCCG

Hazardous Substance - Any substance (or preparation) that is:

- very toxic, toxic, corrosive, harmful or irritant
- a substance for which the health and safety executive has approved an occupational exposure limit
- a micro-organism or biological agent
- any substance (or preparation) which is a carcinogen or possible carcinogen, mutagen or teratogen
- dust at substantial airborne concentration

- a substance which creates a hazard to the health of any person, which is comparable with the hazards, created by those substances mentioned above

This definition excludes a risk to the health of a person to whom the substance is administered in the course of medical treatment. (Medical treatment means medical examination or treatment, which is conducted under the direction of a registered medical practitioner.)

Routes of Entry:

The method by which, substances could enter the body.

- Inhalation
- Ingestion
- Absorption (through skin contact)
- Injection (needle puncture)

WEL:

Workplace Exposure Limits (WEL's). The health and safety commission has established workplace exposure limits for a number of substances hazardous to health which are intended to prevent excessive exposure to specific hazardous substances. A WEL is the maximum concentration of an airborne substance, to which an employee may be exposed by inhalation, averaged over a reference period of time, referred to as a time weighted average (TWA), Two time periods are used:

- Long term (8) hours
- Short Term (15 Minutes)

Substances that have been assigned a WEL are subject to the requirements of COSHH. These Regulations require employers to prevent or control exposure to hazardous substances. Under COSHH, control is defined as adequate only if:

- the principles of good control practice are applied
- any WEL is not exceeded
- exposure to asthmagens, carcinogens and mutagens are reduced as low as is reasonably practicable

CLP:

Classification, Labelling and Packaging of Substances. Chemicals covered are those which, if classified under the Classification, Labelling and Packaging of Substances and Mixtures Regulations 2013 (CLP), would be classified as very toxic, toxic, harmful, corrosive, irritant, sensitising, carcinogenic, mutagenic or toxic to reproduction with the potential to cause harm if they are inhaled, ingested or come into contact with or are absorbed through the skin

GHS:

Globally Harmonised System of Classification and Labelling of Chemicals. An internationally agreed classification and labelling standard

5. Duties and Responsibilities

5.1 Chief Officer

The Chief Officer is responsible for ensuring the implementation of the COSHH Regulations throughout the CCG with the day to day management responsibility devolved to Heads of Service and Managers

5.2 Heads of Service

Have responsibility for health and safety / risk management within their areas of the CCG, and are responsible for managing the implementation of the COSHH regulations and for the maintenance of arrangements for implementing the SOP, application of any codes of practice or other appropriate guidance and subsequent revision of the SOP.

5.3 Managers

Are responsible for ensuring compliance with the COSHH Regulations with the support of the Competent Person, this includes maintaining an inventory of potentially hazardous substances, assessing the risks involved in their use and establishing and monitoring safe procedures for their use. They are also responsible for carrying out assessments of the work area and ensuring that any necessary action is taken.

The Manager is responsible for informing, instructing and arranging training for staff about risks and precautions to be taken.

5.3.1 Managers shall:

- compile an inventory of Hazardous Substances
- ensure that COSHH assessments are carried out by competent persons
- ensure all COSHH assessments are collated in an accessible COSHH folder (this may be an electronically stored file)
- supporting the assessment process and its outcome by ensuring that any necessary control measures and / or resource requirement are met

- determining best method(s) of information collation and effectively communicating assessment findings
- ensure employees have appropriate information, instruction and training and are released for appropriate training programs
- monitoring employee compliance with assessments and identified control measures
- ensuring that any untoward incidents involving hazardous substances are reported, investigated and managed in accordance with the CCG's Incident Reporting Policy and the Reporting of Injuries, Diseases & Dangerous Occurrences Regulations (RIDDOR) 2013
- liaise with the Health and Safety Team for advice where required
- Liaise with the Occupational Health Department where health surveillance may be required

5.4 The Competent Person shall:

- ensure the CCG is aware of its duties under the COSHH Regulations 2002
- provide advice to managers on completion of COSHH risk assessments
- provide information on the potential health hazards associated with chemical use in the workplace
- liaise and consult with Occupational Health Department where required
- ensure all members of staff with COSHH responsibilities are able to access advice in order to carry out their duties
- ensure advice and guidance on hazardous substances is provided to identify potential risks to health and ensure safe working practices
- ensure there is an investigation of all reported adverse events involving substances hazardous to health
- Ensure that COSHH related dangerous occurrence incidents are reported to the Health and Safety Executive (HSE) in accordance with RIDDOR.

5.5 Employees shall:

- Follow the safe system of work identified in the assessments
- Make full and proper use of control measures including personal protective equipment (PPE)

- Report any compliance failures, digressions, defects or concerns to their line manager
- Report accidents and incidents
- Attend training as required
- Inform their line manager of any health concerns which could reasonably be attributed to exposure to hazardous substances
- Attend for health surveillance as required

6. Hazard Symbols and Pictograms

6.1 Categories of danger, health effects and hazard symbols that are relevant to COSHH are illustrated below. It should be noted that identical symbols must be affixed to any other container to which the substance is transferred for subsequent supply to the end-user.

	<p><u>GHS-01</u></p> <p>Explosives Self-reactive substances and mixtures, types A, B Organic peroxides, types A,B</p>
	<p><u>GHS-02</u></p> <p>Flammable gases, aerosols, liquids or solids Self-reactive substances and mixtures Pyrophoric liquids and solids Self-heating substances and mixtures Substances and mixtures, which in contact with water emit flammable gases Organic peroxides</p>
	<p><u>GHS-03</u></p> <p>Oxidising gases, liquids and solids</p>
	<p><u>GHS-04</u></p> <p>Compressed gases, liquids and solids Liquefied gases Refrigerated liquefied gases Dissolved gases</p>

	<p><u>GHS-05</u></p> <p>Corrosive to metals Skin corrosion Severe eye damage</p>
	<p><u>GHS-06</u></p> <p>Acute toxicity (Cat 1 - 3)</p> <p>Category 1: substances known to impair human fertility or cause developmental toxicity (i.e. harm the unborn child).</p> <p>Category 2: substances, which should be regarded as if they impair human fertility or cause developmental toxicity.</p> <p>Category 3: substances which cause concern for human fertility or which can cause concern for humans owing to possible developmental toxicity effects.</p>
	<p><u>GHS-07</u></p> <p>Acute toxicity (Cat 4) Skin and eye irritation Skin sensitisation Specific target organ toxicity Respiratory tract irritation Narcotic effects</p>
	<p><u>GHS-08</u></p> <p>Respiratory sensitisation Germ cell mutagenicity Carcinogenicity Reproductive toxicity Specific target organ toxicity Aspiration hazard</p>
<p>Classification of Biological Agents</p> <p>Group 1 Unlikely to cause human disease.</p> <p>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.</p> <p>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.</p> <p>Group 4 Causes severe human disease and is a serious hazard to</p>	

employees; it is likely to spread to the community and there is usually no effective prophylaxis or treatment available.

The following list describes hazardous physiochemical properties that substances may exhibit. This information must be disseminated to the end user and must also be borne in mind during the assessment process.



GHS-09

Hazardous to the aquatic environment

7. Hazard Statements (H phrases) and Precautionary Statements (P phrases)

7.1 In addition to the pictograms and signal words, the GHS system uses H phrases and P phrases.

7.1.1 Hazard Statements are separated into:

- H200s for Physical Hazards
- H300s for Health Hazards
- H400s for Environmental Hazards

7.1.2 Precautionary Statements are separated into:

- P100s for General
- P200s for Prevention
- P300s for Response
- P400s for Storage
- P500s for Disposal

8. Material Safety Data Sheet

8.1 Material Safety data sheets (MSDS) provide information on chemical products that help users of those chemicals to make a risk assessment. They describe the hazards the chemical presents, and give information on handling, storage and emergency measures in case of accident.

A MSDS is not a COSHH assessment. The assessor should use the information it contains to carry out a COSHH assessment.

9. Control Measures

9.1 Using chemicals or other hazardous substances at work puts people's health at risk. The law requires employers to control exposure to hazardous substances to prevent ill health. They must protect both employees and others who may be exposed by complying with the COSHH Regulations.

Control measures must be determined by the level of risk to health and must take into account:

- elimination and/or use of alternative, less hazardous substances and materials where possible
- modification of the use or process to eliminate, isolate or reduce exposure
- elimination and/or reduction of numbers of people exposed to the hazardous substance
- the outcome of any environmental monitoring, as appropriate, which has been undertaken by a competent person
- the provision, maintenance and use of any control equipment required
- prepare plans and procedures to deal with accident, incidents and emergencies
- ensure employees are properly informed, trained and supervised
- the use of personal protective equipment (PPE) to reduce or control exposure to hazardous substances/materials. PPE should be regarded as a 'last resort' in providing protection from exposure to substances hazardous to health

Failure to comply with the identified control measures may result in disciplinary action.

9.2 Managers are responsible for ensuring that PPE, as required, is suitable for its intended purpose, appropriately maintained, cleaned, inspected, stored and replaced as required. Employees are required to use PPE provided in accordance with the training they have been given and report any faults/defects or concerns regarding PPE to their manager.

9.3 Performing COSHH Assessments:

- gather information about substances hazardous to health in your area of work i.e. establish an inventory of substances used
- identify workers likely to be exposed, but note also that account should be taken of non-employees who may be exposed, as far as reasonably practicable
- collate relevant information from material safety data sheets and / or other sources of information
- evaluate the risk for each substance is the risk significant, insignificant or not significant due to effective control measures
- determine how any risks present can be prevented or controlled
- for existing controls, determine whether these are adequate and maintained in an efficient state, working order and good repair
- ensure sufficient information, instruction and training is provided to staff and that training needs are identified and met
- record the COSHH assessment
- review the COSHH assessment biennially or sooner if circumstances change e.g. incident occurs, change in process, change in legislation
- at the date of review if no further action is required the assessment should be re-signed and dated

9.4 COSHH Register

The COSHH register must be available where any hazardous substances are used and kept in a place that is accessible to all staff. It must include:

- a list of all relevant substances used in the CCG including safety data sheets for each of those substances
- a COSHH assessment for the use of those substances
- a supply of COSHH assessment forms
- relevant COSHH documents (leaflets, information, correspondence, etc.)
- Sources of further information and support.

10. Training Requirements

- 10.1 The CCG will ensure that employees receive the necessary level of training for them to fulfil their individual responsibilities identified in this procedure. Employees must be informed of:

- the substances they work with
- the findings of COSHH assessments
- precautions to be taken to protect themselves and others
- how to use PPE
- results of any health surveillance
- emergency procedures to be followed

11. Monitoring and Review

11.1 The procedural document will be reviewed every three years, and in accordance with the following, on an as and when required basis:

- Legislative changes
- Good practice guidelines
- Case Law
- Significant incidents reported
- New vulnerabilities identified
- Changes to organisational infrastructure
- Changes in practice

	COSHH Risk Assessment	Ref
Product Name:		
Company name and contact details:	Product code & Revision date	
Describe the activity or work process. <i>(Inc. how long/ how often this is carried out and quantity substance used)</i>		
Location of process being carried out?		
Identify the persons at risk:	Employees <input type="checkbox"/>	Contractors <input type="checkbox"/> Visitors <input type="checkbox"/>
Name the substance involved in the process and its manufacturer. <i>(if known)</i>	CAS:	
Classification <i>(state the category of danger)</i>		
	<input type="checkbox"/>	
GHS-01 Explosives. Self-reactive substances and mixtures, types A, B Organic peroxides, types A,B		GHS-02 Flammable gases, aerosols, liquids or solids. Self- reactive substances and mixtures. Pyrophoric liquids and solids. Self-heating substances and mixtures Substances and mixtures, which in contact with water emit flammable gases Organic peroxides
	<input type="checkbox"/>	
GHS-03 Oxidising gases, liquids and solids		GHS-04 Compressed gases, liquids and solids.

		Liquefied gases. Refrigerated liquefied gases. Dissolved gases	
			
GHS-05 Corrosive to metals. Skin corrosion. Severe eye damage			GHS-06 Acute toxicity (Cat 1 - 3) Category 1: substances known to impair human fertility or cause developmental toxicity (i.e. harm the unborn child). Category 2: substances, which should be regarded as if they impair human fertility or cause developmental toxicity. Category 3: substances which cause concern for human fertility or which cause concern for humans owing to possible developmental toxicity effects
			
GHS-07 Acute toxicity (Cat 4) Skin and eye irritation Skin sensitisation Specific target organ toxicity Respiratory tract irritation Narcotic effects			GHS-08 Respiratory sensitisation. Germ cell mutagenicity. Carcinogenicity. Reproductive toxicity. Specific target organ toxicity. Aspiration hazard
		GHS-09 Hazardous to the aquatic environment.	
<u>Hazard statements</u>			
H?		H?	
<u>Precautionary statements</u>			
P?		P?	
<u>Engineering controls</u>			

<u>Comments</u>													
<u>Hazard type</u>													
Gas	<input type="checkbox"/>	Vapour	<input type="checkbox"/>	Mist	<input type="checkbox"/>	Fume	<input type="checkbox"/>	Dust	<input type="checkbox"/>	Liquid	<input type="checkbox"/>	Solid	<input type="checkbox"/>
<u>Route of exposure</u>													
Inhalation	Ingestion	Skin contact	Eye contact	Other – (State)									
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>									
<u>Workplace Exposure Limits (WELs)</u>													
Long-term exposure levels (8hs TWA)						Short-term exposure levels (15mins TWA)							
<u>State the risks to health from identified hazards</u>													
<u>Inhalation:</u>													
<u>Ingestion:</u>													
<u>Skin contact:</u>													
<u>Eye contact:</u>													
<u>First aid measures</u>													
<u>Inhalation:</u>													
<u>Ingestion:</u>													
<u>Skin contact:</u>													
<u>Eye contact:</u>													
<u>Control measures</u>													
Is health surveillance or monitoring required?					Yes	<input type="checkbox"/>	No	<input type="checkbox"/>					
<u>Personal Protective Equipment (state type and standard)</u>													
	<input type="checkbox"/>			<input type="checkbox"/>									
Dust masks			Visor										
	<input type="checkbox"/>			<input type="checkbox"/>									
Respirator			Eye protection										

 Gloves	<input type="checkbox"/>		 Overalls	<input type="checkbox"/>	
 Footwear	<input type="checkbox"/>		 Other	<input type="checkbox"/>	
<u>Storage</u>					
<u>Handling</u>					
<u>Spillages</u>					
<u>Disposal of substances & contaminated containers</u>					
Hazardous waste	<input type="checkbox"/>	Return to supplier	<input type="checkbox"/>	General waste	<input type="checkbox"/>
Recyclable material	<input type="checkbox"/>	Other (<i>please state</i>)	<input type="checkbox"/>		
Is exposure adequately controlled?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
<u>Risk rating following control measures</u>					
High	<input type="checkbox"/>	Medium	<input type="checkbox"/>	Low	<input type="checkbox"/>

Assessed by:	Date:
	Review Date:

Equality Impact Assessment

Title of policy or service	Control of Substances Hazardous to Health Standard Operating Procedure	
Name and role of officers completing the assessment	Ian Plummer, Health and Safety Manager	
Date assessment started/completed	08/11/2018 Reviewed 12/10/2020	08/11/2018 Reviewed 12/10/2020
Type of EIA completed	Initial EIA ' screening X 'Full' EIA process	

1. Outline

<p>Give a brief summary of your policy or service</p> <ul style="list-style-type: none"> • Aims • Objectives • Links to other policies, including partners, national or regional 	<p>The aim of the COSHH SOP is to provide adequate control of health and safety risks arising from work activities. Which will ensure the safety of staff, visitors and others who may come into contact with substances while visiting the CCG</p>
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Identifying impact:

- **Positive Impact:** will actively promote or improve equality of opportunity;
- **Neutral Impact:** where there are no notable consequences for any group;
- **Negative Impact:** negative or adverse impact causes disadvantage or exclusion. If such an impact is identified, the EIA should ensure, that as far as possible, it is justified, eliminated, minimised or counter balanced by other measures. This may result in a 'full' EIA process.

2. Gathering of Information

This is the core of the analysis; what information do you have that might *impact on protected groups, with consideration of the General Equality Duty.*

	What key impact have you identified?			For impact identified (either positive or negative) give details below:	
	Positive Impact	Neutral impact	Negative impact	How does this impact and what action, if any, do you need to take to address these issues?	What difference will this make?
Human rights		X			
Age		X			
Carers		X			
Disability		X			
Sex		X			
Race		X			
Religion or belief		X			
Sexual orientation		X			
Gender reassignment		X			
Pregnancy and maternity		X			
Marriage and civil partnership (only eliminating discrimination)		X			
Other relevant group					

IMPORTANT NOTE: If any of the above results in 'negative' impact, a 'full' EIA which covers a more in depth analysis on areas/groups impacted must be considered and may need to be carried out.

Having detailed the actions you need to take please transfer them to onto the action plan below.

3. Action plan				
Issues/impact identified	Actions required	How will you measure impact/progress	Timescale	Officer responsible

4. Monitoring, Review and Publication				
When will the proposal be reviewed and by whom?	Lead / Reviewing Officer:		Date of next Review:	

Once completed, this form **must** be emailed to Alison Hague, Equality Manager for sign off: alisonhague@nhs.net

Alison Hague signature:	
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