

# **CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH) POLICY**

**and**

## **MERCURY SPILLAGE PROCEDURE**

**LEAD DIRECTOR:** Executive Director, Estates and  
Projects

**POLICY APPROVED BY:** Executive Management Team

**DATE POLICY APPROVED:** May 2009

**IMPLEMENTATION DATE:** May 2009

**REVIEW DATE:** June 2011

**Date Equality Impact Assessment carried out:** February 2009

## Document Control Sheet

<b>Policy Title</b>	<b>Control of Substances Hazardous to Health Policy (COSHH) &amp; Mercury Spillage</b>
<b>Purpose of Policy</b>	To provide clearly defined roles and responsibilities and procedures for ensuring the health and safety of members of staff, visitors, clients and contractors.
<b>Lead Director</b>	Interim Director of Estates and Projects
<b>Lead</b>	Health and Safety Manager
<b>Version (state if final or draft)</b>	FINAL VERSION (Version 2)
<b>Date</b>	Monday 30 <sup>th</sup> February 2009
<b>Circulated for Consultation to:</b>	Central Health & Safety Group, Operational Directors, Lead Nurses, Trade Union Representatives UCATT, UNISON & RCN
<b>If draft</b>	<b>[only complete remaining boxes]</b>
<b>Draft Number</b>	
<b>Comments to</b>	

<b>Contents</b>	<b>Page</b>
1. Assurance Statement.	5
2. Equality Statement.	5
3. Background.	5
4. Aims & Objectives.	5
5. Organisational Arrangements.	6
6. Responsibilities & Duties.	7
6.1. Responsibilities for Health & Safety.	7
6.2. The Trust Board.	8
6.3. Chief Executive.	8
6.4. The Executive Management Team.	8
6.5. The Nominated Executive Director.	9
6.6. Operational Directors.	9
6.7. Managers & Team Leaders.	10
6.8 Employees and Those Working on behalf of the Trust.	10
7. Substances hazardous to health.	11
8. Substance not covered by the COSHH Regulations.	12
9. Occupational Exposure Standards (OES).	12
10. Maximum Exposure Limits (MEL).	12
11. Risk Assessment.	12
12. Control of Exposure.	14
13. Means of Control.	14
14. Implement and Maintain Controls.	14
14.1. Monitor Exposure.	15
15. Health Surveillance.	15.
16. Information, Instruction, Training and Supervision.	15

17. Contractors.	16
18. Principle legislation and Guidance Requirements.	17
Appendix 1 RISK PHRASES.	18
Appendix 2 SAFETY PHRASES.	20
Appendix 3 SAFETY CHEMICAL HAZARD DATA SHEET.	22
Appendix 4 Example of a SAFETY CHEMICAL HAZARD DATA SHEET.	23
Appendix 5 Risk Assessment.	25
Appendix 6 COSHH Risk Assessment Form Pg. 1	27
Appendix 7 COSHH Risk Assessment Form Pg. 2	28
Appendix 8 Mercury Spillage Procedure	29 - 34
Appendix 9 Equality Impact Assessment	35

## **CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH POLICY**

### **1. Assurance Statement**

The \_\_\_\_\_ NHS Foundation Trust Chief Executive and Trust Board are committed to ensuring the health, safety and welfare of its employees and others who may be affected by Trust activities so far as is reasonably practicable. This statement outlines the Trust's arrangements for dealing with risks and details the responsibilities of managers and employees.

The \_\_\_\_\_ NHS Foundation Trust will ensure the provision of adequate resources including time, staff equipment, training, information, supervision and competent advice to facilitate the implementation of this policy.

### **2. Equality Statement**

The Trust is committed in having a service that is people driven and best of class and ensuring that the Trust has systems and processes in place which meet the needs of its service users and staff. All staff will ensure that all service users are treated equally and fairly and that no individual will be judged or treated differently with regard to their ethnicity, gender, religious or belief system, disability, sexual orientation or their age.

### **3. Background**

The \_\_\_\_\_ NHS Foundation Trust has a legal responsibility to comply with the requirements relating to health and safety at work. The basis of UK health and safety law is the Health & Safety at Work etc. Act 1974 (HSWA) with its attendant Regulations and Approved Codes of Practice. It is this Act which sets out the general duties which employers have towards employees and members of the public, contractors, visitors and employees have to themselves and to each other. The law requires employers to manage properly health and safety, while the Act itself cannot contain every detail of how the content and context of how this will be enacted; the Secretary of State issues Regulations under the Act as Statutory Instruments which give that detail. The law sets minimum standards for health and safety management including the need for employers to manage risk by undertaking risk assessment and putting into place controls to either, remove the risk or to reduce it to the lowest possible level. Failure to meet these minimum legal standards can result in enforcement action, including prosecution of Chief Executives, Directors and Senior Managers.

### **4. Aims & Objectives**

The \_\_\_\_\_ NHS Foundation Trust Chief Executive and the Board recognises that the use of chemicals or other substances, including micro-organisms at work can put people's health and safety at risk. The Trust accepts its legal duty and moral responsibility, so far as is reasonably practicable, to comply with the Control of Substances Hazardous to Health (COSHH) regulations 2002.

As far as reasonably practicable, the Trust shall take such measures as to prevent, or minimise the risks associated with its activities. The elimination or substitution of substances with less hazardous and safer alternatives will always be the first choice where control measures are found to be required. If elimination or substitution is not reasonably practicable then a hierarchy of control measures will be put into place.

The Trust is committed to ensuring a healthy and safe environment for all people who work, use or visit its premises.

The Trust will ensure there is strong commitment from all parts of the organisation, from the Board who provide leadership and resources, to Operations Directors, managers and all staff who have a commitment to making and maintaining improvements in Health & Safety on a day to day basis.

## **5. Organisational Arrangements**

The purpose of this Policy is to enable the NHS Foundation Trust to comply with the requirements of the Control of Substances Hazardous to Health Regulations 2002.

The NHS Foundation Trust will ensure there is an effective and proactive Control of Substances Hazardous to Health Management system encompassing the following:

- Identification and allocation of resources for the planning and implementation of the Control of Substances Hazardous to Health Policy.
- Monitoring the implementation of plans and compliance with standards.
- Review of the policy as a result of monitoring and auditing.
- Identify substances with the potential to cause harm.
- To ensure that no work that may expose employees to any harmful substances is undertaken until inspections and risk assessments are carried out to identify risks arising from that work.
- To provide all employees with suitable and sufficient information, instruction and training about substances to which they may be exposed and the risks created by such exposure and the precautions they should take to protect themselves and other employees.
- To ensure that such exposure to harmful substances is either prevented or, where this is not reasonably practicable, then it is adequately controlled
- To ensure that where control measures have been introduced e.g. engineering controls, personal protective equipment (PPE) that these are effectively monitored, properly used and that staff are adequately trained in its purpose and its use.
- To ensure that where control measures are employed that they are regularly tested, properly maintained in good working order and that personal protective equipment is also properly maintained, clean, with adequate storage facilities and promptly replaced when the need arises.
- To ensure that where engineering control measures have been introduced, that these are inspected and tested with thorough examinations carried out: -
  - In the case of local exhaust ventilation (LEV), at least every 14 months
  - In any other case, at suitable intervals

These aims will be achieved by:

1. Regular review of the Control of Substances Hazardous to Health Policy by the Central Health and Safety Group as required, particularly where there may be changes in

legislation.

2. Effective communication of the Control of Substances Hazardous to Health Policy to all Trust employees through Management, Training and Induction Training.
3. The undertaking of Control of Substances Hazardous to Health Risk Assessments by managers based on control of work and workplace risks associated with the use of chemicals, setting priorities and objectives for hazard elimination whenever possible and thus reduction of risk.
4. Through the elimination or substitution of substances with less hazardous and safer alternatives
5. The Trust will provide adequate financial resources to enable compliance with the statutory requirements of The Control of Substances Hazardous to Health Regulations 2002. within budgetary constraints, to protect the health, safety and welfare of staff and others.
6. The Trust will ensure that it provides adequate training; information; instruction and supervision to ensure that work is conducted safely based on the training needs analysis of staff.
7. Consultation between employees and those working on behalf of the Trust, using the chain of line management, Operation Directors, Managers and Union Representatives sitting on the Trust's relevant Health and Safety Groups.
8. Ensuring a quick and effective response when deficiencies in work systems are highlighted, and by monitoring of all accidents/incidents by the Central and Local Health and Safety Groups to enable appropriate action on training to be identified to rectify any deficiencies highlighted in these reports.
9. Induction Training of all new staff that includes COSHH Safety with all topics encompassing it.

## **6. Responsibilities & Duties**

### **6.1. Responsibilities for Health and Safety**

A sustained integrated effort from all employees and those persons working on behalf of the Trust is required to promote and complement a healthy and safe working environment. Only management can provide the authority to ensure this activity is co-ordinated, directed and funded.

Employees and those persons working on behalf of the Trust will be made aware, as part of their induction, of their responsibilities and duties with regard to the obligations in respect of Health and Safety.

Each employee and those persons working on behalf of the Trust have a duty to take reasonable care for the Health and Safety of themselves and of other persons who may be affected by their acts or omissions and to co-operate with the organisation so far as is necessary to enable management to carry out its legal duties relating to Health and Safety matters. All members of staff have a duty to report any hazard or unsafe working practice in the immediate working area to the appropriate manager or supervisor.

This policy will be operated in accordance with current legislation, codes of practice and relevant case law.

## **6.2. The Trust Board**

The overall Trust Board responsibility is to ensure through the Chief Executive that the Trust complies with the requirements of the Health and Safety at Work etc. Act 1974 and all other related legislation.

## **6.3. Chief Executive**

The overall responsibility for compliance with the Health and Safety at Work etc. Act 1974, and other relevant statutory provisions lies with the NHS Foundation Chief Executive who is responsible to the Board. The Chief Executive is responsible for ensuring that the Trust's activities are undertaken safely and in compliance with all relevant health and safety legislation, including Control of Substances Hazardous to Health. The Chief Executive is also responsible for the implementation of safety guidance in all premises within the trust and is responsible for the implementation of this policy.

The responsibilities of the Chief Executive are:

1. To ensure an up to date statement of the Trust's Policy for The Control of Substances Hazardous to Health prepared and brought to the attention of all staff.
2. To ensure that the Control of Substances Hazardous to Health is regularly monitored and formally reviewed.
3. To ensure that annual Health and Safety objectives for the Trust are defined, agreed and are met.
4. To nominate an Executive Director to be responsible for The Control of Substances Hazardous to Health throughout the Trust.
5. To ensure funding for the Trust to meet its statutory requirements.
6. To ensure sufficient funding is provided for appropriate training to be given to all staff.
7. To ensure that effective communication regarding Health and Safety exists between all sections of the Trust and that as part of the induction process all staff are made aware of their obligations with regard to Health and Safety.

## **6.4. The Executive Management Team**

The Executive Management Team responsibilities are:

1. To ensure that the Trust has a jointly agreed and ratified Control of Substances Hazardous to Health Policy and promotes a positive health and safety culture.
2. To clarify the roles and responsibilities of their immediate management team and specific officers with respect to the Control of Substances Hazardous to Health.
3. To ensure that this policy is brought to the attention of all employees and other persons working on behalf of the Trust and that they receive notification of policies.



4. To ensure that all employees and other persons working on behalf of the Trust are made aware of the importance of the Control of Substances Hazardous to Health issues at the outset of their employment through the induction process.
5. To ensure that continuing Health and Safety training needs are identified and implemented.
6. To set corporate objectives to improve Health and Safety standards for the Trust Board to approve.
7. To allocate resources to improve The Control of Substances Hazardous to Health standards.
8. To promote Health and Safety as an integral management function.
9. To assess the performance of the Trust and its managers in relation to this policy and take remedial action.
10. To receive reports from relevant external organisations with regard to Health and Safety and ensure that appropriate action is taken.

#### **6.5. The Nominated Executive Director**

The Nominated Executive Director with Health & Safety responsibility is the Director of Finance and Information

The nominated Executive Director's responsibility is:

1. To report directly to the Chief Executive and the Executive Management Team on all matters relating to Health and Safety.
2. To produce regular reports to the Trust's Board and Executive Team.
3. To set Health and Safety objectives for the Trust "Competent" persons, as defined in the Management of Health and Safety at Work Regulations.

#### **6.6. Operational Directors**

Operational Directors have duties and responsibilities specified as part of their operational role. In addition they are responsible for ensuring the implementation of this The Control of Substances Hazardous to Health Policy and its requirements within their own individual directorates.

These include:

1. Integrating effective Health and Safety objectives into the day to day work for all Managers, Staff and those persons working on behalf of the Trust within their Services and through performance monitoring and evaluation ensure that those objectives are met.
2. Ensuring that effective communication exists between all sections of their service with regard to the Control of Substances Hazardous to Health.
3. Ensuring that adequate resources are available to ensure achievement of the Control of Substances Hazardous to Health and health and safety objectives.

4. Creating an environment where there is a universal awareness of the Control of Substances Hazardous to Health.
5. Will, through their line managers, review the Control of Substances Hazardous to Health Policy and introduce local health and safety procedures, where appropriate, to reflect local circumstances.
6. These local procedures will be identified, through the Control of Substances Hazardous to Health Policy, by legislative requirements and following local risk assessments.
7. Ensuring that the Control of Substances Hazardous to Health Risk Assessments are carried out and that control measures are implemented.

#### **6.7. Managers and Team Leaders**

Line managers, ward managers, supervisors etc. and all those responsible for managing or supervising staff are responsible for ensuring that this policy is complied with and that they establish the departmental system for complying with the Control of Substances Hazardous to Health Regulations, including clear individual responsibilities. In addition they have general duties. These will include:

1. It is the duty of all managers to ensure that all processes and systems of work are designed to take account of health and safety and are properly supervised at all times.
2. Implementing and publicising the Control of Substances Hazardous to Health Policy to the employees ensuring that the organisation integrates effective Health and Safety into its day to day work.
3. Managers will develop procedures for dealing with accidents and emergencies involving hazardous substances.
4. Undertake their own Control of Substances Hazardous to Health risk assessments and ensure that these are, up to date, accurate, revised if necessary, available for inspection and that any control measures identified by risk assessment are in place and understood and used by staff.
5. If any problems, identified by the Control of Substances Hazardous to Health risk assessment process cannot be overcome locally, then these must be referred formally to senior management.
6. Instructing those who work in the areas they 'supervise' precisely and clearly on their duties with regard to the Health and Safety of themselves and all others.
7. Authorising as appropriate any safety repair or remedial measures found to be necessary in the course of their duties.
8. Creating an open environment which encourages staff to raise and discuss Health and Safety issues in their own work areas.
9. Ensuring any supplied personal protective equipment (PPE), clothing or equipment supplied is safe and appropriate for the task intended.
10. Reading any Control of Substances Hazardous to Health risks assessments which may be pertinent to their areas and ensure the control measures are implemented wherever practicable.

## **6.8. Employees and Those Working on behalf of the Trust**

All employees and those persons working on behalf of the Trust have a duty:

1. To take reasonable care for the Health and Safety of themselves and consider the safety of other persons who may be affected by their acts or omissions.
2. To co-operate with the Trust so far as is necessary to enable management to carry out its legal duties relating to The Control of Substances Hazardous to Health and Health and Safety matters.
3. To report any hazard or unsafe working practise in the immediate working area to the appropriate manager or supervisor.
4. To attend Induction Training when they join the Trust.
5. To read and understand the requirements of the Control of Substances Hazardous to Health Policy, Procedures and Local Rules and carry out work in accordance with these requirements.
6. All employees are required to use any control measures or supplied personal protective equipment (PPE) in accordance with the instruction and training given.
7. To only use equipment if appropriately trained.
8. Employees must not enter designated areas unless they are authorised, trained in the use of, and using the specified PPE.
9. Employees have a duty not to interfere with or misuse any equipment or item of personal protective equipment (PPE) that has been supplied by the trust for the purpose of controlling or eliminating risk.
10. Employees must report any apparent faults with control measures including personal protective equipment (PPE) and risk assessments and these must be reported to an immediate supervisor or line manager as a matter of urgency.
11. To ensure any defects, unsafe acts, unsafe conditions, accidents, incidents or near misses are reported immediately according to the procedures laid down in the policy.
12. To ensure any ill health, which may be work related is reported immediately to their manager.
13. To follow the Health and Safety instructions given to them by their managers and supervisors.
14. To work safely and do not put themselves or others at risk.
15. To attend Trust Health and Safety training courses.

## **7. Substance hazardous to health**

All those substances or mixtures of substance classified as being toxic, very toxic, harmful, corrosive, or irritant under the chemicals (Hazard information and Packaging Information and Packaging for Supply) Regulations 2002 (CHIP 3). For all commercially available substances and

preparations this information is given on statutory warning labels on their containers and suppliers must also provide (by law) safety chemical hazard data sheets for them.

A substance for which the Health and Safety commission has approved an occupational exposure standard (OES) or maximum exposure limit (MEL). HSE publication "EH40" (revised annually) lists these limits, which apply to airborne contamination.

A biological agent (bacteria and other micro-organisms) is defined as any microorganism, cell culture, or human endoparasite and body fluids, including any which have genetically modified, which may cause any infection, allergy, and toxicity or otherwise create a risk to human health.

Dust of any kind if its average concentration in the air exceeds the levels specified in Control of Substances Hazardous to Health (COSHH) regulations 2002.

Any other substance, which creates a risk to health but which for technical reasons, may not be specifically covered by the chemicals (Hazard Information and Packaging Information and Packaging for Supply) Regulations 2002 (CHIP 3).

## **8. Substance not covered by the COSHH Regulations**

COSHH applies to virtually all substances hazardous to health with the exception of those, which are already covered by their own regulations, these include:

**Lead**, Control of Lead at Work Regulations 2002 (CLAW).

**Asbestos**, Control of Asbestos at Work Regulations 2002 (CAW)

Substances, which are hazardous only because they are:

- **radioactive**
- **asphyxiants**
- **at high pressure**
- **at extreme temperatures**
- **have explosive or flammable properties**
- **biological agents** if they are not directly connected with the work and they are outside of the employer's control, such as catching a cold from a workmate.

## **9. Occupational Exposure Standards (OES)**

The level at which an OES is set so that it is not likely to damage the health of those exposed to it, by, inhalation, based on current scientific knowledge. For substances with an OES, employers should reduce exposure to comply with that OES. However, it is acceptable to exceed an OES, provided the reason is identified and that appropriate steps are taken to reduce exposure to the OES.

## **10. Maximum Exposure Limits (MEL)**

MELs are set for substances which may cause the most serious health effects and for which it is not possible to set an OES. For substances with MEL employers are required to reduce exposure so far as is reasonably practicable and, in any case, below the MEL.

## **11. Risk Assessment**

All the hazardous substances present in the workplace must be identified, listed and assessed. Substances will include those, which have been supplied, e.g. correction fluid, toner, cleaning materials, paint etc. There are also those that are produced by work activity, e.g. dust, fumes, vapours, aerosols and waste materials etc; and those naturally or incidentally in the workplace, e.g. biological and infectious agents. It is also necessary to identify the harmful effects of these substances and how they may be encountered e.g. through breathing in, swallowing or absorbing through the skin.

Sources of information to help in identification of hazardous substances are:

- Hazard Information and Packaging information and Packaging for Supply Regulations 2002 (CHIP 3)
- Health & Safety Executives (HSE) publication EH40 'Occupational Exposure Limits.'
- Health & Safety Executive (HSE) Guidance.
- Health & Safety Executive web-site, COSHH Essentials, [www.coshh-essentials.org.uk/](http://www.coshh-essentials.org.uk/).
- Current NHS information.
- Information 'hazard' warning notices on containers.
- Safety chemical hazard data sheets, from suppliers (required by law).
- Professional institutions, trade associations, trade unions and other employers.
- Experience gained as a result of previous use of substance or similar substances.
- Staff knowledge
- The internet

For each substance, it is necessary to identify the level of risk it represents. The following list includes most factors to be considered but careful consideration must be given to any changes to current available information:

- Is there a possibility of the substance being ingested (e.g. as a result of a substance getting into the mouth from contaminated hands during eating), respired or absorbed?
- Numbers of people exposed to the substance and the length of time and frequency of exposure. This would include all groups of people including contractors, visitors and members of the public as well as staff.
- Possible harmful effects. Certain groups of people could suffer more from exposure than others, e.g. pregnant and women of child bearing age, young persons (Under 18) individuals with a suppressed immune system.
- Likelihood and level of risks from substances, which may be mixed together e.g. some household cleaning products when mixed, can produce chlorine gas.
- The handling, storage and transporting of substances.
- Emergency procedures in place for dealing with spillages, accidental releases etc.

- Ventilation in work areas.

## 12. Control of Exposure

Means of control, which are inherently safe, are always to be preferred because there are fewer opportunities for protection to fail. For example, the following is the hierarchy of control measures:

- Elimination.
- Substitution with a less hazardous material.
- Total enclosure.
- Partial enclosure with local exhaust ventilation.
- Local exhaust ventilation without enclosure.
- General ventilation, personal protective equipment.
- Using systems of work and handling procedures, which minimise chances of spills, leaks etc. or exposure to substances.

## 13. Means of Control

The COSHH Regulations require employers to prevent exposure to substances hazardous to health through the following hierarchy of control measures:

**Elimination** – Change the process or activity so that the substance is not needed or generated.

**Substitution** – it might be the material which is substituted with a safer less hazardous alternative, e.g. replacing products containing solvent with solvent free types

**Use it in safer form** - e.g.

- Applying a disinfectant with a wipe produces less airborne contamination than spraying it.
- Pouring or weighing out a toxic solid produces less airborne contamination if it is in a granular or pellets form instead of powder.

**Appropriate work processes** – Systems and engineering controls, and provide suitable work equipment and materials e.g. use processes,

- which minimise the amount of materials used.
- Use processes, which minimise the amount of material, produced in the workplace.

**Personal Protective Equipment** – Equipment worn by individuals includes face masks, respirators, protective clothing but *only as a last resort* when it is not possible to adequately control exposure by any combination of the above measures.

## 14. Implement and Maintain Controls

The precautions for adequate controls must be maintained in an efficient state. Regular checks should be made to ensure they continue to operate as intended. These checks include visual checks, inspection, and testing, servicing and remedial work e.g. local exhaust ventilation must be tested at least once every 14 months or earlier and will be normally undertaken by arrangement

with the Estates Dept. or a specialist contractor. The written record of these tests must be kept for at least 10 years.

Staff must co-operate and make full and proper use of prescribed control measure, reporting any defects. They must also participate in training and make full use of information and instructions.

#### **14.1. Monitor Exposure**

- Routine monitoring of exposure is required only where it is necessary for maintaining adequate control.
- However air monitoring should be carried out where the assessment concludes that:
  1. There could be serious risks to health if control measures failed or deteriorated.
  2. Exposure limits might be exceeded.
  3. Control measures might not be working properly
- When there is any change which would mean adequate control is no longer maintained e.g. an increase in the quantity used, changes to systems of work or plant.

Guidance on air monitoring is given in Health and Safety Executive Guidance 'monitoring strategies for Toxic Substances' ref EH42. Where monitoring is carried out records should be maintained and kept for at least 5 years.

#### **15. Health Surveillance**

Health Surveillance of staff must be undertaken when it is warranted by the degree of exposure and the nature of the effects under the following circumstances:

- Where an employee is working in one of the processes listed in schedule 6 of the COSHH Regulations.
- Where employees are exposed to a substance linked to a particular disease or adverse effect and there is a reasonable likelihood under the conditions of the work of that disease or effect occurring and it is possible to detect the disease or health effect.

Health surveillance will take place under the supervision of the Trust's SLA Occupational Health Departments and will include keeping individual health records. Where health surveillance is necessary it will be applied to all staff exposed to the risk. The local manager/supervisor is responsible for notifying the SLA Occupational Health Department of the names of those identified as being exposed to the hazardous substance in order that arrangements can be made for health surveillance.

The records will be kept for 40 years and each person will be informed of their personal health surveillance result and collective anonymised health surveillance results will be provided to staff and safety representatives.

#### **16. Information, Instruction, Training and Supervision**

Arising from the COSHH risk assessment staff, contractors and others working at Trust sites should be provided with suitable information, instruction and training about:

- The nature of the substance they work with or are exposed to and the risks created by exposed to the substances.
- The precautions they should take.
- They should also be supervised as appropriate.

**Staff should be given sufficient information and instructions on**

- Control measures and how to use them.
- Cleaning, storage and disposal arrangements.
- How to use personal protective equipment and clothing provided.
- Results of any exposure monitoring and health surveillance.
- Emergency procedures for accidental releases or spillages.
- The risk presented by exposure to such substances in combination.
- Current measures to prevent or control exposure – effectiveness and use.
- Cleaning and maintenance operations.

COSHH risk assessments once completed must be kept and a written record of the assessment s must be available within the area/workplace to which they relate.

## **17. Contractors**

- Control of contractor's employees is the responsibility of their own management and supervision. They control trade practices, procedures, risk assessments made under the COSHH Regulations, and the provision of information on the Hazards and risks which their work introduces to the Trust premises on which they are working.
- However, the Trust employs its own rules and requirements, so a level of control will be exercised by the Trusts management, project managers, Estates Department, architects and consultants working on the Trust's behalf. Such controls should be discussed with the contractor's management, prior to work beginning, so that there is a clear understanding of responsibilities, and compliance with Trust requirements.
- Ward managers, office managers, managers and supervisors carry responsibilities for all activities within their ward, office or building, if it is believed that there is a risk to staff or public from the contractor's activities, then they have the authority to stop the work and to discuss the situation, and any remedies, with the contractor's management. If a particular matter of concern is felt to be too serious or beyond the scope of local management then the Project Manager/s or Estates Department should be contacted.



- Whenever possible staff and contractors should be separated by physical barriers. If for example, painting is to be carried out, then systematically vacating areas or sections of areas is required rather than decoration being carried on around working staff, patients, clients or members of the public.

## **18. Principal Legislation and Guidance Requirements**

The Health and Safety at Work etc Act 1974

The Control of Substances Hazardous to Health (COSHH) Regulations 2002.

The Management of Health and Safety at Work Regulations 1999

Chemicals (Hazard Information and Packaging Information and Packaging for Supply) Regulations 2002 (CHIP 3).

The Transport of Dangerous Goods Regulations 1999.

## RISK PHRASES

Chemical data sheets available in many countries now contain codes for certain "risk phrases", shown as R followed by a number. These risk phrase codes have the following meanings:

- R1 Explosive when dry.
- R2 Risk of explosion by shock, friction, fire or other source of ignition.
- R3 Extreme risk of explosion by shock, friction, fire or other sources of ignition.
- R4 Forms very sensitive explosive metallic compounds.
- R5 Heating may cause an explosion.
- R6 Explosive with or without contact with air.
- R7 May cause fire.
- R8 Contact with combustible material may cause fire.
- R9 Explosive when mixed with combustible material.
- R10 Flammable.
- R11 Highly flammable.
- R12 Extremely flammable.
- R13 Extremely flammable liquefied gas
- R14 Reacts violently with water.
- R15 Contact with water liberates extremely flammable gases.
- R16 Explosive when mixed with oxidizing substances.
- R17 Spontaneously flammable in air.
- R18 In use may form inflammable/explosive vapour-air mixture.
- R19 May form explosive peroxides.
- R20 Harmful by inhalation.
- R21 Harmful in contact with skin.
- R22 Harmful if swallowed.
- R23 Toxic by inhalation.
- R24 Toxic in contact with skin.
- R25 Toxic if swallowed.
- R26 Very toxic by inhalation.
- R27 Very toxic in contact with skin.
- R28 Very toxic if swallowed.
- R29 Contact with water liberates toxic gas.
- R30 Can become highly flammable in use.
- R31 Contact with acids liberates toxic gas.
- R32 Contact with acid liberates very toxic gas.
- R33 Danger of cumulative effects.
- R34 Causes burns.
- R35 Causes severe burns.
- R36 Irritating to eyes.
- R37 Irritating to respiratory system.
- R38 Irritating to skin.
- R39 Danger of very serious irreversible effects.
- R40 Limited evidence of a carcinogenic effect.
- R41 Risk of serious damage to the eyes.
- R42 May cause sensitisation by inhalation.
- R43 May cause sensitisation by skin contact.
- R44 Risk of explosion if heated under confinement.
- R45 May cause cancer.

- R46 May cause heritable genetic damage.
- R47 May cause birth defects
- R48 Danger of serious damage to health by prolonged exposure.
- R49 May cause cancer by inhalation.
- R50 Very toxic to aquatic organisms.
- R51 Toxic to aquatic organisms.
- R52 Harmful to aquatic organisms.
- R53 May cause long-term adverse effects in the aquatic environment.
- R54 Toxic to flora.
- R55 Toxic to fauna.
- R56 Toxic to soil organisms.
- R57 Toxic to bees.
- R58 May cause long-term adverse effects in the environment.
- R59 Dangerous to the ozone layer.
- R60 May impair fertility.
- R61 May cause harm to the unborn child.
- R62 Risk of impaired fertility.
- R63 Possible risk of harm to the unborn child.
- R64 May cause harm to breastfed babies.
- R65 Harmful: may cause lung damage if swallowed.
- R66 Repeated exposure may cause skin dryness or cracking.
- R67 Vapours may cause drowsiness and dizziness.
- R68 Possible risk of irreversible effects.

## SAFETY PHRASES

Under EC legislation, data sheets available in the UK now contain codes for certain "safety phrases", shown as S followed by a number. These phrases are also extensively used elsewhere in the world. Safety phrase codes have the following meanings:

- S1 Keep locked up.
- S2 Keep out of the reach of children.
- S3 Keep in a cool place.
- S4 Keep away from living quarters.
- S5 Keep contents under ... (there follows the name of a liquid).
- S6 Keep under ... (there follows the name of an inert gas).
- S7 Keep container tightly closed.
- S8 Keep container dry.
- S9 Keep container in a well-ventilated place.
- S12 Do not keep the container sealed.
- S13 Keep away from food, drink and animal foodstuffs.
- S14 Keep away from ... (a list of incompatible materials will follow).
- S15 Keep away from heat.
- S16 Keep away from sources of ignition.
- S17 Keep away from combustible material.
- S18 Handle and open container with care.
- S20 When using, do not eat or drink.
- S21 When using do not smoke.
- S22 Do not breathe dust.
- S23 Do not breathe vapour.
- S24 Avoid contact with skin.
- S25 Avoid contact with eyes.
- S26 In case of contact with eyes, rinse immediately with plenty of water and seek medical advice.
- S27 Take off immediately all contaminated clothing.
- S28 After contact with skin, wash immediately with plenty of soapsuds.
- S29 Do not empty into drains.
- S30 Never add water to this product.
- S33 Take precautionary measures against static discharges.
- S35 This material and its container must be disposed of in a safe way.
- S36 Wear suitable protective clothing.
- S37 Wear suitable gloves.
- S38 In case of insufficient ventilation, wear suitable respiratory equipment.
- S39 Wear eye / face protection.
- S40 To clean the floor and all objects contaminated by this material, use.... (there follows suitable cleaning material).
- S41 In case of fire and / or explosion do not breathe fumes.
- S42 During fumigation / spraying wear suitable respiratory equipment.
- S43 In case of fire use ... (there follows the type of fire-fighting equipment to be used.)
- S45 In case of accident or if you feel unwell, seek medical advice immediately (show the label whenever possible.)
- S46 If swallowed, seek medical advice immediately and show this container or label.
- S47 Keep at temperature not exceeding...
- S48 To be kept wet with (there follows a material name).
- S49 Keep only in the original container.

- S50 Do not mix with ...
- S51 Use only in well ventilated areas.
- S52 Not recommended for interior use on large surface areas.
- S53 Avoid exposure - obtain special instructions before use.
- S56 Dispose of this material and its container at hazardous or special waste collection point.
- S57 Use appropriate container to avoid environmental contamination.
- S59 Refer to manufacturer / supplier for information on recovery / recycling.
- S60 This material and its container must be disposed of as hazardous waste.
- S61 Avoid release to the environment. Refer to special instructions / safety data sheets.
- S62 If swallowed, do not induce vomiting; seek medical advice immediately and show this container or label.

**SAFETY CHEMICAL HAZARD DATA SHEET**

Under the Chemicals (Hazard Information and Packaging Information and Packaging for Supply) Regulations 2002 (CHIP 3), the following information must be incorporated by the supplier in a safety chemical hazard data sheet supplied with a substance or preparation which is dangerous for supply:

- Identification of the substance or preparation.
- Composition/information on ingredients
- Hazards identification
- First aid measures
- Fire fighting measures
- Accidental release measures
- Handling & storage requirements
- Exposure controls, together with personal protection
- Physical and chemical properties
- Stability and reactivity
- Toxicological information
- Ecological information
- Disposal considerations
- Transport information
- Regulatory information
- Other information deemed appropriate.

**Example of a SAFETY CHEMICAL HAZARD DATA SHEET**

Product Name:  
Product Code:  
Date of issue

**IDENTIFICATION OF THE SUBSTANCE / PREPARATION AND COMPANY**

Physical Form  
Product Type  
Container

**COMPOSITION/INFORMATION ON INGREDIENTS**

Name	Range	STEL	TWA
------	-------	------	-----

**HAZARD IDENTIFICATION**

**FIRST AID MEASURES**

Eye  
Skin  
Ingestion  
Inhalation

**FIRE FIGHTING MEASURES**

Flammability  
Suitable Extinguishers  
Extinguishers not to be used  
Explosive Hazards  
Special Protective equipment

**ACCIDENTAL RELEASE MEASURES**

Personal Protection  
Spillage Clean Up.

**HANDLING AND STORAGE**

Handling  
Storage conditions

**EXPOSURE CONTROLS**

Protective goggles should be worn.

**PHYSICAL AND CHEMICAL PROPERTIES**

Appearance  
Solubility in water  
pH  
Viscosity at 200c  
Boiling Point  
Flash Point  
Density

**STABILITY AND REACTIVITY**

**TOXICOLOGICAL INFORMATION**

Eye

Skin

Ingestion

Inhalation

**ECOLOGICAL INFORMATION**

**DISPOSAL**

**TRANSPORT INFORMATION**

**REGULATORY INFORMATION**

**OTHER INFORMATION**



## **Appendix 5 Risk Assessment**

The Control of Substances Hazardous to Health Regulations 2002 (COSHH) governs the area of the use of chemical substances.

Under the COSHH regulations, the Trust as the employer needs to follow seven steps:

1. Assess the risks to health & safety arising from hazardous substances in the workplace.
2. Decide what precautions are needed.
3. Prevent or adequately control exposure
4. Ensure that control measures are used and maintained.
5. Monitor the exposure of employees to hazardous substances, if necessary.
6. Carry out health surveillance where necessary.
7. Ensure that employees are properly informed, trained and supervised.

### **Risk Assessment**

The main source of information on the qualities of any substance in the workplace is likely to be the supplier. Read the label and any data sheet. If a data sheet has not been supplied, then contact the supplier and request a copy, suppliers are required by law to supply data sheets. Then consider whether any of the possible hazards related to the particular substance are likely to arise in the workplace, generally or in any particular circumstances. Then review the existing controls and consider whether anything further should be done.

Following the risk assessment, action may be needed. Remember that exposure should be prevented if at all possible. If not possible, then it must be controlled. Action may include:

1. Considering eliminating or substituting the substance.
2. Ensuring that clear labelling is present on all containers. Hazardous substances must carry a black and orange label.
3. Ensuring that clear signs are present warning of hazards.
4. Providing suitable containers for all substances, including waste materials.
5. Reducing the amount used.
6. Reducing the amount of contact an employee has with the substance.
7. Providing good washing and changing facilities.
8. Providing protective clothing and equipment (PPE), for example, to prevent contact with skin or the inhalation of fumes or dust.
9. No eating or drinking in a chemical handling area.

10. Reminding employees not to put pens and pencils into their mouth, this may transfer chemicals to their mouth in the process.
11. Controlling access.
12. Taking fire precautions.
13. Ensure that substances are stored in accordance with manufacturer's recommendations.
14. Storing gas cylinders with valves uppermost, away from the main workplace, in outside storage facilities (cages).
15. Ensuring regular cleaning. If dust is a problem, using an 'H' type vacuum cleaner fitted with a double heppa filter.
16. Improving ventilation.
17. Informing and training all employees and keeping this under review.
18. Review risk assessment on a regular basis or after any significant changes.

## COSHH RISK ASSESSMENT FORM

**Page 1.**

### Risks to Health

**Premises/work area:**

**Date:**

**Assessment carried out by:**

**Position:**

Substance name/name of supplier: Quantity/containers.	
Information from suppliers: Data sheet. Available: Adequate:	
Chemical component/s	
Risk classification: Areas of body vulnerable: Exposure limit/standard – prescribed, actual.	
Quantity used	
Form of supply/storage/handling/use	
Internal data sheet prepared	
Main hazard present (gas, vapour, fume, liquid, dust, etc)	
Summary of hazard (including effect)	
Hazard identified	
Who is at risk; Age, sex, specially vulnerable	
Existing controls.	
Action required	
Review date: Signed	

## COSHH RISK ASSESSMENT FORM

### Page 2, Precautions

Prevention		
Elimination or Substitution:		
Controls		
Engineering Controls: (automation, ventilation, LEV etc.)		
Personal Protection: (skin creams, clothing, masks, respirators, etc.)		
Hygiene: (toilets, food)		
Disposal: (clean product, clear workspace, safe waste disposal)		
Managing controls:		
(warning signs, work rules, training, PPE use, personal hygiene, health surveillance, dealing with emergencies, employee duty of care)		
Monitoring Controls		
(audits, examinations, testing of equipment, risk exposure, ill health, control deficiencies)		
Dealing with Control Failure		
(spillages, fire, first - aid, medical care)		
Signature and Position of Assessor:	Date:	Area Covered:



NHS Foundation Trust

## **MERCURY SPILAGE PROCEDURE**

<b>Index</b>	<b>Page</b>
<b>1 Mercury Spillage Procedure.</b>	<b>.</b>
<b>1.1. Introduction.</b>	<b>31</b>
<b>2. Use of Mercury.</b>	<b>31</b>
<b>3. Responsibilities.</b>	<b>32</b>
<b>Appendix A Mercury Spillage Procedure</b>	<b>32</b>
<b>Appendix B Mercury Spillage Disposal Procedure</b>	<b>34</b>

## **1. MERCURY SPILLAGE PROCEDURE**

### **1.1 Introduction**

- 1.2 Mercury is a silvery white metal with a bluish tinge, and is liquid at room temperatures, melting at –38 degrees Celsius. Mercury vapour and all of its compounds are highly toxic. Departments where equipment-containing mercury is used should carry out a risk assessment, as required by the COSHH regulations. The assessment should not only cover the risks associated with normal use but should also include the risks associated with emergency situations such as spillages. Mercury has a slight vapour pressure even at room temperatures; the concentration of the mercury vapour in the air may rise to more than 100 times the current occupational exposure standard of 0.025 milligrams per cubic metre of air.

Mercury may enter the body as a vapour and through the skin. The earliest signs of mercury intoxication include a fine tremor of the fingers and mental changes, a combination of anxiety and aggression known as mercurial erythrim. One of the earliest signs is deterioration of handwriting. There is evidence that exposure to low levels of mercury can damage the kidneys.

### **2. Use Of Mercury**

- 2.1 Mercury is used mainly in instruments e.g. thermometers and sphygmomanometers. The major risks in using such instruments lie in dealing with breakage and the resulting spillage of mercury.

There is an opinion that mercury instruments will be less acceptable in the future, and that eventually they will be prohibited due to the risks during manufacture and use. It should be an objective of Departments to replace, on a rolling programme, all equipment containing mercury particularly sphygmomanometers and thermometers.

### **3. Responsibilities**

- 3.1 The responsibilities for ensuring compliance with this policy and procedure are with the employing line manager in all departments where instruments or equipment containing

mercury are utilised. The responsibility includes the need to ensure that staff are fully familiar with the policy and procedures, and have the necessary information, instruction, training and that spillage kits are available to be able to deal promptly and safely with any mercury spillages.

3.2 The key to a safe and successful mercury cleanup depends on quick response and the use of the right equipment (**spillage kits**).

#### 4. Mercury spillage kits, ordering procedure

4.1 Each area/department using equipment containing liquid mercury should have available a kit for the current collection and disposal of spilled mercury.

4.2 The approved type of spillage kits are available by contacting the  
**Supplies Dept 0844 600 1201 ext. 4463**

#### 4.3 **PASA Approved Mercury Spillage Kit.**

**Non-specific stock requisition item.**

**Kits available from:**

**RS Components**

### **Appendix A Mercury Spillage Procedure**

5. If a spillage occurs:

Do not touch spilt mercury with unprotected hands.

Segregate area to prevent people walking on the spill and to prevent unnecessary exposure.

Open windows to ensure the area is well ventilated and remains so until the mercury clean up is complete.

Wear Rubber gloves or gloves contained within the kit.

Use mercury spillage kit.

Follow the instructions supplied with the kit

Vacuum cleaners must not be used.

Wash hands when procedure is finished



**6. If a Mercury Spillage Kit is available** follow the instructions for the clean up method, use personal protective equipment provided with the kit, the actual method used will depend on the contents and instructions contained within the kit.

6.1 In the event of spillage, try to confine the affected area to a minimum.

6.2 Put on protective **GLOVES** and **MASK** to reduce dust inhalation.

6.3 Increase ventilation by opening a window.

6.4 It may be necessary to gather together the globules of liberated mercury into a small working area with a plastic dustpan or wooden spatula/scrapper usually provided with the kit.

6.5 Try to reduce the spread of the spill as much as possible; in particular avoid getting mercury on the floor.

**6.6 NEVER USE A VACUUM CLEANER OR ASPIRATOR TO PICK UP MERCURY AND NEVER DISPOSE OF MERCURY IN THE 'SHARPS' BIN.**

6.7 Using the **SCOOP**, move the globules of mercury together to form one large pool.

6.8 Pick up as much of this as possible using the **SYRINGE** (if part of kit) and place in the **WASTE CONTAINER** (part of kit).

6.9 Make a paste of equal amounts of the **ABSORBENT PASTE FORMING POWDERS** with a little water and spread onto the spillage area.

6.10 Keep mixing the paste on the spillage area using the **BRUSH** and **SCOOP** for two or three minutes - it can be used wet and does not need to dry out.

6.11 Then **BRUSH** the paste into the **SCOOP** and transfer it to the **WASTE CONTAINER**, wiping any residual paste from the **BRUSH** and **SCOOP** on the lip of the **WASTE CONTAINER**, which is then capped tightly.

6.12 Place the sealed waste container into a clear plastic bag, sealing this tightly by twisting and tying or taping.

6.13 Mark the bag with a label stating it contains hazardous waste

6.14 Store the bag, ensuring that the container within it is upright, in a secure place away from any ammonia or its products (e.g. cleaning fluids, oven cleaners), and away from acids and arrange for collection (**see Appendix B**)

6.15 Replace in the spillage kit and store this in well-ventilated place away from sources of heat.

6.16 Ensure the area of the spillage is well ventilated and arrange to replace the used items from the spillage kit immediately.

6.17 Wash hands once procedure is complete.

6.18 Complete an **IR1 Acc/Incident** form and return it to the Risk Management Dept. by post to Drop N° 150.

## Notes

- A **Vacuum cleaners must never be used to clear up mercury spillages**, as they spread the mercury vapour widely and will **not** be able to be cleaned after use and will have to be discarded
- B **Carpets** on which mercury has been spilled must be discarded immediately as hazardous

## **Appendix B Mercury Spillage Disposal Procedure**

- 1 Mercury is classified as a special waste for the purpose of disposal and as such should **never be placed in domestic or clinical waste bags or containers.**
- 2 The line manager for the **Dept.** in which the spill occurred is responsible for ensuring the safe disposal of mercury waste.

## Procedure

- 3 When the mercury waste products have been effectively and efficiently sealed into the container and clear plastic bag you should
- 4 Temporarily store in a safe place in a secure place away from any ammonia or its products (e.g. cleaning fluids, oven cleaners), and away from acids and arrange for collection.
- 5 Contact the **Contracts Monitoring Manager, 0844 600 1201 ext. 4465**, who will arrange for removal as hazardous waste by a recognised specialist company.
- 6 The Manager or staff member responsible must obtain when waste is collected by an authorised company a Hazardous Waste Carriage Notice.
- 7 The **Hazardous Waste Carriage Notice** must be kept on site for inspection by Authorised Persons

## Equality Impact Assessment Screening Tool

(Please include this as part of your policy)

<b>Directorate/Department</b>	<b>Governance &amp; Assurance</b>
<b>Policy or Procedural Guidelines Title/Service</b>	<b>Control of Substances Hazardous to Health Policy</b>
<b>New or Existing Policy/Service?</b>	<b>Review</b>
<b>Name and role of Assessor</b>	<b>Health &amp; Safety Manager</b>
<b>Date of Assessment</b>	<b>30/02/2009</b>

Please complete the following questions

		<b>Yes/No</b>	<b>Comments</b>
<b>1</b>	<b>Does the policy/guidance affect one group less or more favourably than another on the basis of:</b>	<b>No</b>	
	• Race, Ethnic origins (including, gypsies and travellers) and Nationality		
	• Gender		
	• Age		
	• Religion, Belief or Culture		
	• Disability – mental and physical disability		
	• Sexual orientation including lesbian, gay and bisexual people		
<b>2</b>	<b>Is there any evidence that some groups are affected differently?</b>	<b>No</b>	
<b>3</b>	<b>Is there a need for external or user consultation?</b>	<b>No</b>	
<b>4</b>	<b>If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?</b>	<b>No</b>	
<b>5</b>	<b>Is the impact of the policy/guidance likely to be negative?</b>	<b>No</b>	
<b>6</b>	<b>If so, can the impact be justifiable?</b>	<b>NA</b>	
<b>7</b>	<b>What alternatives are there to achieving the policy/guidelines without the impact?</b>	<b>NA</b>	
<b>8</b>	<b>Can we reduce the impact by taking different actions?</b>	<b>NA</b>	

<b>Recommendation</b>	
Full Equality Impact Assessment required:	NO <input checked="" type="checkbox"/> YES <input type="checkbox"/>
Assessor's Name:	Date: 30/02/09
Name of Director:	
Assessment authorised by: Name:	Date: April 2009
(member of the Equality and Diversity Group)	