Control of Substances Hazardous to Health (COSHH)

Version: 4

| Summary: | This document outlines Southern Health NHS Foundation Trust’s (SHFT) policy for protecting both employees and others who can be affected by SHFT employees and contractors using chemicals or other hazardous substances at work that can put people’s health at risk. This document has been produced to comply with the Control of Substances Hazardous Health Regulations (COSHH) 2002 (As Amended) |
| Keywords: | Substances, hazardous, COSHH, control of substances, health and safety. |
| Target Audience: | All Staff, Agency Workers, Temporary Staff, Volunteers, Contractors, Service Providers |
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| Author: | Brent Schwarz, Health and Safety Manager |
| Accountable Executive Lead: | Paula Anderson - Director of Finance and Corporate Services |
### Version Control

#### Change Record

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#### Reviewers / contributors

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<td>Rene Forder</td>
<td>Health and Safety Advisor</td>
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Quick Reference Guide

For quick reference, this section summarises the actions required by this arrangement. This does not negate the need to be aware of and to follow the further detail provided in this arrangement.

Ensure all substances which are hazardous to health are controlled suitably in accordance with Trust corporate policies / arrangements.

Ensure procurement procedures are followed when purchasing / considering new substances and the least harmful is considered.

Comply with all health and safety legislation and relevant industry guidance with regards to hazardous substances.

Ensure local COSHH assessments and registers are current and in date.

Each substance used has a COSHH assessment which is readily available to staff and management controls are in place.
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1. **Definitions**

1.1 **SHFT**  
Southern Health NHS Foundation Trust and/or The "Trust"

1.2 **Health and Safety Legislation (HSL)**  
HSL means any statutory provision (e.g. Law, Act, Regulation) dealing with Health and Safety matters which place duties and responsibilities on employers and of which employers need to comply with.

1.3 **Contractor / Service Provider / Supplier**  
Anyone / Organisation which is commissioned in writing or by verbal contract or by instruction, to supply goods, services or undertake work for the Trust, but is not a Trust employee.

1.3.1 **Contractors / Service Provider / Supplier include:**  
- Those working as separate businesses under a contract for services or goods  
- Temporary workers supplied by an agency.  
- Self-employed people working under a contract for services or goods, including consultants.

1.4 **COSHH**  
Control of Substances Hazardous to Health. Any substances which presents a health risk to staff, patients and others.

1.5 **Premises**  
Premises where Trust staff, service user, patient or other persons carrying out Trust business is present and / or are using the facilities.

1.6 **Authorisation to Work**  
Means a safe system for which an approved person i.e. Senior Manager, Manager, Project Officer, utilises to authorise any person including contractor or other person to carryout works and assumes responsibility that checks have been made in relation to health and safety matters.

1.7 **Permit to Work**  
Means a safe system for which an approved person i.e. Senior Manager, Manager, Project Officer, utilises to authorise any person including contractor or other person to carryout hazardous works such as hot works, working at height, confined space work to prevent any major incidents and assumes responsibility that checks have been made in relation to health and safety matters.

1.8 **IPR**  
Is the management data base which the Trust uses to record and monitor property compliance for its properties and contains records, for tests, inspection and checks.

1.9 **Contract Incident Notification**  
Is a corporate form, this form is a proforma for reporting breaches of H & S management by a contractor or service provider to the Trust’s Health and Safety Team

1.10 **Suitable and Sufficient**  
Suitable means level and complexity, for a complex project one would require more in-depth monitoring, checks, more frequent inspections etc., of the task, project, job,
organisation, contractor / supplier / service provider. Sufficient, identifies as many of the known hazards and risks as possible. Have appropriate measures, checks, inspections been identified and controls implemented.

1.11 WEL
Workplace Exposure Limits (WEL’s).
The health and safety executive 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, averaged over a reference period, to which an employee may be exposed by inhalation. Advice must be sought from the Health and Safety Team regarding exposure to dust and WEL.

2. Introduction

2.1 Work activities using substances at work can put people's health at risk and are carried out daily on Southern Health NHS Foundation Trust (SHFT) premises by employees and contracted staff. These activities can have serious implications for all staff (clinical and non-clinical) and others if not carried out in a safe and proper manner.

2.2 To control exposure to substances hazardous to health arising out of or in connection with the work the law requires employers to adequately control exposure to hazardous substances to prevent ill health and they have to protect both employees and others who may be exposed this includes Patients and Service Users.

2.3 This arrangement and its associated guidance are intended to assist Senior Managers, Managers and staff in complying with the statutory requirements of the Control Of Substances Hazardous to Health Regulation (as amended). The aim is to prevent injuries occurring and reduce acute/ chronic ill health at work.

2.4 All employers must consider how COSHH applies to the work they do and this arrangement sets out the responsibilities associated with using such substances to ensure, the health and safety of people who come into contact with them and compliance with legislation.

2.5 The exceptions to this arrangement are asbestos, lead and radioactive substances, which have their own regulations and requirements.

2.6 Medicines are also excluded from this arrangement as the COSHH requirements of these substances are covered under the Medicines Management Policy SH CP 01.

3. Responsibilities

3.1 The Trust Board and the Chief Executive of Southern Health NHS Foundation trust are responsible for ensuring the organisation complies with all legislation of which COSHH is a part.

3.2 The Trust's Health & Safety Forum is responsible for monitoring compliance with the COSHH policy, generating status reports and reporting any significant risks associated with COSHH to the Board.

3.3 Directors / Heads of Service are responsible for ensuring:
- Ensure substances/work processes that are hazardous to health are risk assessed and controls implemented to reduce the level of risk to the lowest practicable level.
- Ensure the maintenance and condition of any control measures is implemented and
3.4 Leads / Senior Managers / Managers are responsible for ensuring compliance with the arrangement and must ensure:

- Assessors attend training provided by the Trust where necessary to ensure competence when undertaking COSHH Assessment.
- Assessments are completed in accordance with this arrangement and reviews are carried out periodically.
- COSHH assessments are incorporated into the safe systems of work for any operation/work activity carried out in their area of responsibility and appropriate control measures are implemented and effectiveness monitored.
- Personal Protective Equipment (PPE) and / or Respiratory Protective Equipment (RPE) is provided and users are trained in its use, disposal and / or storage where it is identified as being required by an assessment.
- A suitable environment is provided for the safe handling and storage of substances as identified in the assessment.
- Mechanical controls are kept in efficient working order and good repair: e.g. exhaust ventilation equipment, and is tested at suitable intervals and service records are retained.
- Staff, where appropriate, receive exposure monitoring and health surveillance through Occupational Health where there is a risk to health.
- COSHH risk assessors are informed of any changes to current work arrangements / procedures, adoption of new procedures, changes in substances, etc. that can have implications of managing the control of substances hazardous to health, thus ensuring COSHH assessments are carried out, updated or revised as necessary.
- That plans are in place to deal with accidents, incidents and emergencies concerning exposure to a hazardous substance, for example an accidental spillage of a chemical (should be identified in the COSHH assessment under the section for control).
- High risk activities or known hazards are reported to the Corporate Health and Safety Team and where necessary included on the Trust's risk register.
- Staff, Patients, Service Users which are deemed vulnerable e.g. pregnant, have a medical condition, whereby they may be affected by hazardous substances, are adequately informed and advice on using substances must be sought and included in the assessment.
- Manufacturer Safety Data Sheet for all new products are obtained and kept from the supplier.
- A COSHH Register is kept, current and updated when necessary, made readily available to all staff where any hazardous substances are used.
- Where substances hazardous to health may be located in an inpatient clinical area or where patients / service user may bring with them their own or use hazardous substances, these are adequately assessed and suitable controls, supervision and access too are implemented and monitored, to ensure the safety of the patients / service users.
- During the admission process for a patient / service user, their property is checked and recorded in accordance with Trust Policy SH NCP 42.
- Patient / Service user personal property which are assessed as hazardous to health e.g. soap powder, fabric conditioner, etc. is removed and stored appropriately.
- That staff adequately assess the risk relating to the access and level of supervision when using, storing or disposing of hazardous substances for each individual patient / service user.
3.5 Employees are responsible for:

- Complying with risk assessments and control measures identified and implemented i.e. personal protective equipment, LEV, management arrangements.
- Reporting any unsafe working practices and/or unsafe work conditions including defective equipment immediately and take out of use.
- Reporting any ill-health effects (if as a result of work activities) to their line manager.
- Reporting to their line manager any health issues, or if they are deemed part of a vulnerable group e.g. pregnant or pregnancy.
- Undertaking instruction and training in the safe use, storage, transport and disposal of hazardous substances which they are exposed to at work.
- Working within the controls implemented in the safe systems of work and receive training and instruction.
- Wearing, using, storing and disposing of safely any personal protective equipment and/or respiratory equipment or hazardous substances as per the requirements set out in the COSHH assessment.
- Reporting any failure/inability to work within those controls to their Line Manager and immediately implement defined plans and procedures to control any accident, incident or emergency involving a hazardous substance and report such an incident via the Trust’s reporting system.
- Participate and cooperate with any COSHH monitoring, Face fit test and present for health surveillance as required by assessment.
- Ensuring all substances hazardous to health is adequately controlled within their area of responsibility. Including the suitable assessment, control, supervision of patient(s) / service user(s) access too and/or use of, the trust provided hazardous substances and/or their own.
- Informing themselves through COSHH Assessment of the risks in relation to the hazardous substance(s)

3.6 COSHH Assessors:

- Can be any member of staff who has been suitably trained in carrying out COSHH assessments, are conversant with the operation and procedures of the department, and have received a refresher course at least every three years or when there are changes in legislation.
- Guidance for appointing Assessors - Each work activity/procedure in a designated workplace must be assessed and where hazards involving substances that fall under the legislation for COSHH, a specific COSHH assessment should be carried out and documented as per the requirements of the COSHH regulations.

3.7 COSHH Assessors are responsible for:

- Carrying out COSHH assessments in accordance with this arrangement, a template COSHH Assessment is provided in Appendix 2 this includes a summary COSHH register as provided in appendix 3.
- Attending training and refresher training as required ensuring maintenance of competency and skill.
- Identifying appropriate control measures and communicating to the persons affected, including emergency procedures (particularly where carcinogens, mutagens or biological agents are used).
- Identifying where exposure monitoring/ health surveillance is required and involving the Trust’s Corporate Health and Safety Team and Occupational Health, through the correct management chain.
- Providing information and instruction to staff/management about controls and precautions for using hazardous substances and ensuring appropriate COSHH Records are completed and retained.
- Ensuring staff have local access to documented COSHH assessments, Safety Data Sheets and documented Safe Systems of Work including COSHH Risk Register.
- Notifying their Manager and Corporate Health and Safety Team where the COSHH
Assessment identifies issues that cannot be managed locally.
- Identifying the potential risk(s) of the hazardous substance(s) presented to patients / service users through the COSHH assessment.
- Where patient(s)/Service User(s) present with their own hazardous substances, these are COSHH assessed and included in the management of COSHH.

3.8 Contractors / Service Providers must:
- Comply with all health and safety legislation and relevant industry guidance in relation to all applicable health and safety legislation.
- Ensure equipment or products used comply with British and European standards, legislation, industry guidance and they are serviced, maintained and tested accordingly.
- Comply with all Trust Policies and Procedures.
- Ensure that all appointees, workers and sub-Contractors are competent to undertake the services required, including checking their training records, testing their knowledge and experience and seeing evidence of certification.
- Ensure that appropriate COSHH training is provided to their employees where necessary i.e. Coshh awareness.
- Be authorised to carry out the work and comply with local health and safety arrangements.
- Provide information to their workers on hazards and risks present e.g. asbestos, electricity, fragile roofs.
- Report incidents / accidents / near misses in accordance with the contract.
- Comply and assist in accident / incident investigations in line with Trust Policies and Procedures.

3.9 Procurement:
- Procurement are responsible for supporting and assisting the Divisions / Business Units / Service areas to achieve best value and improve service quality from its contractors / service providers / suppliers for non-property related procurement; they will advise on a compliant procurement route.
- Must ensure consideration is given to alternative COSHH products / services where these are harmful and the least harmful procured which would be effective.
- Ensure that all contractors / service providers / suppliers are vetted appropriately for health and safety compliance through the relevant procurement processes.
- Any contract clearly defines the service scope and identifies the necessary health and safety protocols.

4. Retention of Records

4.1 Assessments must be retained as long as a substance is in use. Obsolete COSHH assessments (for substances/activities no longer undertaken) must be retained locally for five years from the date the substance was removed from use/activity stopped.

4.2 Staff training records relating to COSHH must be retained locally for five years from the date the training took place.

4.3 Health surveillance records must be retained in accordance with Records Management: Code of Practice, Part 2 Version 2 in relation to the record retention periods (This can be up to 40 years). Occupational Health can be contacted for further guidance.

5. Training Requirements

5.1 All new staff (permanent and temporary) tasked with working with hazardous substances
must be appropriately trained and competent to carry out the task in a safe and proper manner for their environment through the appropriate Local Induction procedures.

5.2 All existing staff will cover COSHH usage requirements through the three yearly Health and Safety training.

5.3 All identified COSHH assessors must attend a COSHH assessor training to receive appropriate training inclusive of elements of theory in conducting/reviewing COSHH risk assessments and practice on the use, and application of control measures. COSHH Risk Assessors are required to attend Assessors Course at least every 3 years.

5.4 Records of training given to individual employees or specific groups of named employees to be kept locally for 5 years.

6. 

Monitoring Compliance

6.1 Corporate Health and Safety will monitor compliance with this policy and arrangements as part of day to day activities i.e. accident/incident reports, staff complaints, management requests and internal inspections and audits.

6.2 A Health and Safety Report will be presented to the Health and Safety Forum and Trust Board. It will summarise the Trust’s Health and Safety performance against this Policy and subsequent procedures, including:
   a) A report of the Trust’s Risk Assessments, which have been cross checked by Corporate Health and Safety.
   b) Benchmarking activities internally and externally.
   c) Proactive and reactive monitoring tools by departments and by Corporate Health and Safety
   d) General Service visits by Corporate Health and Safety.

6.3 Non-Compliance
   • Issues, which cannot be resolved at Service level, breaches in or failures to meet COSHH regulations, must be reported to Corporate Health and Safety and raised at Management meetings. Where applicable an Adverse Event Report must be completed.
   • Corporate Health and Safety is the designated focal point for the Health and Safety Executive (HSE) with regard to legislative accident and incident reporting requirements (RIDDOR) and is responsible for reporting to the Environmental Agency/Local Authority if a significant pollution occurs to the environment.

7. 

Main Legislation relevant to this document.

   • Health and Safety at Work etc Act
   • The Management of Health and Safety at Work Regulations
   • Control of Substances Hazardous to Health Regulations
   • Reporting of Injuries, Diseases and Dangerous Occurrences Regulations
   • COSHH Regulations - Approved Codes of Practice
   • COSHH Essentials
   • EH40/2011 Workplace Exposure Limits
   • Chemicals (Hazard Information and Packaging for Supply) Regulations
   • Classification, Labelling and Packaging of Substances and Mixtures Regulations
8. Associated Trust Documents

- COSHH Assessment Form (SH-HS-F-014)
- COSHH Register (SH-HS-F-015)
- Health and Safety Policy (SH HS 04)
- Management of Health and Safety (SH HS 14)
- Management of Patients (SH NCP 42)
- Financial Procedures
- Single Tender Waiver Procedure
- Sustainable Procurement Policy
- Sustainable Procurement Procedure
- SHFT Estate Services Contractors and Service Providers Procedure

9. Contact Address’s and Guidance Links

Health and Safety Executive
www.hse.gov.uk

Southern Health NHS Foundation Trust Corporate Health and Safety
Corporate Health and Safety
Corporate Health and Safety SharePoint
Appendix 1: Training Needs Analysis

If there are any training implications in your policy, please make an appointment with the LEaD department (Louise Hartland, Quality, Governance and Compliance Manager on 02380 874091) to complete the TNA before the policy goes through the Trust policy approval process.

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Appendix 2: Template COSHH Assessment (available on the Trust website)

Appendix 3: Template COSHH Register (available on the Trust website)