

Control of Substances Hazardous to Health (COSHH) Policy

JANUARY 2020

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Name of Policy:	Control of Substances Hazardous to Health (COSHH) Policy
Date Issued:	February 2020
Date to be reviewed:	3 rd January 2023

Policy Title:	Control of Substances Hazardous to Health (COSHH) Policy V3.0	
Supersedes: (Please List)	Control of Substances Hazardous to Health (COSHH) Policy V2.0	
Description of Amendment(s):	No material changes, updated to new template, reviewed impact assessment	
This policy will impact on:	All staff	
Policy Area:	Corporate	
Version No:	V3.0	
Author:	Helen Johnson, Health & Safety Advisor	
Effective Date:	February 2020	
Review Date:	3 rd January 2023	
Equality Impact Assessment Date:	7 th December 2019	
APPROVAL RECORD	Health Safety and Security Meeting Members	Date: December 2019
	Integrated Audit and Governance Committee	January 2020
Consultation:	Health Safety and Security Meeting Members	December 2019



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1. INTRODUCTION

The Control of Substances Hazardous to Health Regulations 2002 (as amended) covers all substances, materials, chemicals, etc used in the work place that may be considered hazardous to a person's health. This includes all substances that can enter the human body through inhalation, absorption, digestion, through an open wound or puncture injury.

It is the statutory duty of the employer to take all reasonable and practical steps to reduce the risk from hazardous substances to his employees, and anyone else who may be affected by his work activities, to a minimum. Where this is not possible the employer must provide and maintain suitable control measures, including Personal Protective Equipment.

It is the statutory duty of employees to comply with health and safety legislation and any other procedures and policies that are designed to protect them from the risks associated with hazardous materials.

2. SCOPE

This policy applies to all employees and office holders of Hull CCG and any other persons occupying or working at CCG premises, such as employees of other organisations, private contractors, agency staff and volunteers. Agency staff contracts will reflect the need for staff to adhere to this policy.

3. POLICY PURPOSE AND AIMS

Hull Clinical Commissioning Group (Hull CCG) will take all reasonable and practical steps to protect staff, patients, visitors and contractors from all substances hazardous to health that may be used in their work based activities.

This Procedure provides an overview of the Control of Substances Hazardous to Health within Hull CCG.

The objective of the Control of Substances Hazardous to Health (COSHH) risk assessment process is to ensure that exposure to hazardous substances is prevented or adequately controlled in compliance with the Control of Substances Hazardous to Health Regulations 2002 (as amended) and associated Approved Codes of Practice.

4. IMPACT ANALYSIS

4.1 Equality

All policies require an assessment for their impact on people with protected characteristics. An Equality Impact Assessment has been undertaken for this policy and as a result of performing the analysis, it is evident that there is no risk of discrimination in the implementation of this policy. The assessment can be found in

Appendix 1.

In applying this policy, the CCG 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. Standard CCG paragraph to be added

4.2 Bribery Act 2010

NHS Hull Clinical Commissioning Group has a responsibility to ensure that all staff are made aware of their duties and responsibilities arising from The Bribery Act 2010.

The Bribery Act 2010 makes it a criminal offence to bribe or be bribed by another person by offering or requesting a financial or other advantage as a reward or incentive to perform a relevant function or activity improperly performed. The penalties for any breaches of the Act are potentially severe. There is no upper limit on the level of fines that can be imposed and an individual convicted of an offence can face a prison sentence of up to 10 years.

For further information see <http://www.justice.gov.uk/guidance/docs/bribery-act-2010-quick-start-guide.pdf>.

If you require assistance in determining the implications of the Bribery Act please contact the Local Counter Fraud Specialist on telephone number 01482 866800 or email at nikki.cooper1@nhs.net.

Due consideration has been given to the Bribery Act 2010 in the development of this policy (or review, as appropriate) of this policy document and no specific risks were identified.

5. NHS CONSTITUTION

5.1 The CCG is committed to:

Designing and implementing services, policies and measures that meet the diverse needs of its population and workforce, ensuring that no individual or group is disadvantaged.

5.2 This Policy supports the NHS Constitution as follows:

The NHS aspires to the highest standards of excellence and professionalism in the provision of high-quality care that is safe, effective and focused on patient experience; in the planning and delivery of the clinical

and other services it provides; in the people it employs and the education, training and development they receive; in the leadership and management of its organisations; and through its commitment to innovation and to the promotion and conduct of research to improve the current and future health and care of the population.

6. ROLES / RESPONSIBILITIES / DUTIES

Hull CCG Director or Quality and Clinical Governance/Executive Nurse has overall responsibility for Health & Safety, and therefore the design, implementation and monitoring of the COSHH system within the organisation. Trained Assessors are appointed to oversee and assess the operation of the system on a continuous basis.

For communication purposes, procedures for the application of the COSHH system are detailed within this document. This Procedure will be published both on the Hull CCG intranet and in hard copy.

Everyone operating within the Hull CCG COSHH system does so on the understanding that it represents a system of evaluation and control demanded by the Control of Substances Hazardous to Health Regulations 2002 (as amended). Any failings of the COSHH system should be reported in the first instance to Line Management, and then to the Health and Safety Advisor.

6.1 Director with responsibility for Health and Safety

The Director with responsibility for health and safety has the overall responsibility to ensure that Hull CCG complies with all relevant health and safety legislation. Specific duties include:

- Provide reports/feedback, where appropriate, to the Board on all matters relating to the Control of Substances Hazardous to Health.
- Ensure that the Health and Safety Advisor manages the COSHH system on a day to day basis.
- Receive reports on audits of the COSHH system by the Health and Safety Advisor and ensure that, if appropriate, recommendations are acted upon and corrective actions are taken.

6.2 Health and Safety Advisor

The Health and Safety Advisor has responsibility for the ongoing management of the COSHH system. Specific duties include:

- Maintenance of the completed risk assessment records.
- Review completed assessments to ensure that they have been completed in accordance with this procedure and provide guidance as necessary to the authorised COSHH Assessors.

- Audit the COSHH system on a regular basis and provide a report to the Director with responsibility for Health and Safety on such audits.
- Provide information, instruction and training for the designated COSHH Assessors and maintain a list of said assessors.
- Review and update this procedure on a regular basis to ensure it meets regulatory requirements, and the requirements of Hull CCG Health and Safety Policy.

6.3 COSHH Assessor (undertaken by Health & Safety Advisor)

The COSHH Assessor has responsibility for the ongoing assessment of the COSHH substances used within the CCG. Specific duties include:

- Ensure that COSHH risk assessments are completed for all activities identified within their assigned area of control which may involve exposure to substances hazardous to health.
- Ensure that completed assessments are forwarded to the Health and Safety Advisor for inclusion in the assessment records.
- Ensure that completed assessments are reviewed as required.
- Maintain local copies of all COSHH assessments that are relevant to the activities being performed within their area of responsibility.
- Ensure that the findings of COSHH assessments are communicated to those who may be affected by the activity.
- Perform local checks for compliance with COSHH assessments i.e. use of control measures, including PPE.
- In the absence of a trained COSHH Assessor, this role will be undertaken by the Health & Safety Advisor.

6.4 All Staff

It is the duty of all staff and any others who may be affected by the work activities of Hull CCG to comply with the findings of all COSHH assessments. This includes the wearing and maintenance of Personal Protective Equipment (PPE) provided.

Staff should make themselves aware of the potential risks and control measures in place for all activities that may involve hazardous substances within their work routines.

It is also the duty of all staff to report any deficiencies within the COSHH system, and to cooperate (where appropriate) in developing a safe outcome to identified

deficiencies.

7. TRAINING AND AWARENESS

All staff will be made aware of the COSHH risks identified in association with their duties and will also be made aware of risk assessments and the control measures that are in place to control identified risks. Suitable training will be given in order for staff to comply with these control measures as required.

8. MONITORING AND EFFECTIVENESS

Compliance with, and effectiveness of this policy will be monitored by the Health & Safety Advisor who will annually audit the premises against the risk assessments and the policy to ensure continuing compliance. Any such audit will be recorded and retained with the copy of the risk assessments. Reports will also be submitted to the Integrated Audit & Governance Committee as and when required.

9. POLICY REVIEW

This Policy will be reviewed within 3 years of the date of implementation except where legislative changes apply, or there has been a significant event.

10. REFERENCES

The following legislation is addressed by the introduction of this procedure:

- The Health And Safety at Work Etc Act 1974
- The Management of Health and Safety at Work Regulations 1999
- The Control of Substances Hazardous to Health Regulations 2002

Each of these statutes contains provisions which stipulate that non-compliance is a criminal offence and set out the penalties for such offences. The penalties on conviction include fines, imprisonment or both. Those with managerial responsibility within Hull CCG, as well as the corporate body, may be prosecuted.

12. ASSOCIATED DOCUMENTATION

NHS Hull CCG Health & Safety Policy



Hull

Clinical Commissioning Group

HR / Corporate Policy Equality Impact Analysis:

Policy / Project / Function:	Control of Substances Hazardous to Health (COSHH) Policy
Date of Analysis:	7 th December 2019
Completed by: (Name and Department)	Helen Johnson, Health & Safety Advisor
What are the aims and intended effects of this policy, project or function?	To ensure that all staff who work with substances which may cause them harm are aware of the associated risks and are aware of how to minimise those risks To ensure that Hull CCG fulfils its obligations under the Health & Safety at Work etc. Act 1974 and the Control of Substances Hazardous to Health Regulations.
Are there any significant changes to previous policy likely to have an impact on staff / other stakeholder groups?	No material changes to previous policy
Please list any other policies that are related to or referred to as part of this analysis	NHS Hull CCG Health & Safety Policy
Who will the policy, project or function affect?	All staff employed by NHS Hull CCG who may be exposed to hazardous substances during their work
What engagement / consultation has been done, or is planned for this policy and the equality impact assessment?	This policy has been agreed by the local staff side representative Toni Yel
Promoting Inclusivity and Hull CCG's Equality Objectives.	This policy and the associated risk assessment process aims to ensure equality of all staff in relation to working with hazardous substances,

<p>How does the project, service or function contribute towards our aims of eliminating discrimination and promoting equality and diversity within our organisation?</p> <p>How does the policy promote our equality objectives:</p> <ol style="list-style-type: none"> 1. Ensure patients and public have improved access to information and minimise communications barriers 2. To ensure and provide evidence that equality is consciously considered in all commissioning activities and ownership of this is part of everyone's day-to-day job 3. Recruit and maintain a well-supported, skilled workforce, which is representative of the population we serve 4. Ensure the that NHS Hull Clinical Commissioning Group is welcoming and inclusive to people from all backgrounds and with a range of access needs 5. To demonstrate leadership on equality and inclusion and be an active champion of equalities in partnership programmes or arrangements. 	<p>regardless of any protected characteristic.</p>
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Equality Data	
<p>Is any Equality Data available relating to the use or implementation of this policy, project or function?</p> <p>Equality data is internal or external information that may indicate how the activity being analysed can affect different groups of people who share the nine <i>Protected Characteristics</i> – referred to hereafter as '<i>Equality Groups</i>'.</p> <p>Examples of <i>Equality Data</i> include: (this list is not definitive)</p> <p>1: Recruitment data, e.g. applications compared to the population profile,</p>	<p>Yes <input checked="" type="checkbox"/></p> <p>No <input type="checkbox"/></p> <p>Where you have answered yes, please incorporate this data when performing the <i>Equality Impact Assessment Test</i> (the next section of this document). If you answered No, what information will you use to assess impact?</p> <p>Please note that due to the small number of staff employed by the CCG, data with returns small enough to identify individuals cannot be published. However, the data should still be analysed as part of the EIA process, and</p>

application success rates 2: Complaints by groups who share / represent protected characteristics 4: Grievances or decisions upheld and dismissed by protected characteristic group 5: Insight gained through engagement	where it is possible to identify trends or issues, these should be recorded in the EIA.
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Assessing Impact

Is this policy (or the implementation of this policy) likely to have a particular impact on any of the protected characteristic groups?

(Based on analysis of the data / insights gathered through engagement, or your knowledge of the substance of this policy)

Protected Characteristic:	Neutral Impact:	Positive Impact:	Negative Impact:	Evidence of impact and, if applicable, justification where a <i>Genuine Determining Reason</i> ¹ exists (see footnote below – seek further advice in this case)
<p>It is anticipated that these guidelines will have a positive impact as they support policy writers to complete meaningful EIAs, by providing this template and a range of potential issues to consider across the protected characteristics below. There may of course be other issues relevant to your policy, not listed below, and some of the issues listed below may not be relevant to your policy.</p>				
Gender	X			This policy applies to all staff regardless of gender.
Age	X			This policy applies to all staff regardless of age
Race / ethnicity / nationality	X			<p>The policy applies to all staff regardless of race/ethnicity.</p> <p>Analysis of employee data indicates that the percentage of white employees is reflective of the local population. However, the proportion of BME staff is lower than that of the local population it serves</p> <p>All staff require competencies which include the ability to read and understand English or to request the</p>

1. ¹ The action is proportionate to the legitimate aims of the organisation (please seek further advice)

				information in another format available to them
Disability	X			This policy applies to all staff regardless of disability
Religion or Belief	X			This policy applies to all staff regardless of religion or belief.
Sexual Orientation	X			This policy applies to all staff, regardless of sexual orientation
Pregnancy and Maternity	X			This policy applies to all staff, regardless of pregnancy and maternity COSHH arrangements might have an adverse impact on those employees who are pregnant, however the risk assessment process will identify any specific risks and appropriate arrangements will be made.
Transgender / Gender reassignment	X			This policy applies to all staff regardless of transgender or gender reassignment
Marriage or civil partnership	X			This policy applies to all staff regardless of marriage or civil partnership.

Action Planning:

As a result of performing this analysis, what actions are proposed to remove or reduce any risks of adverse impact or strengthen the promotion of equality?

Identified Risk:	Recommended Actions:	Responsible Lead:	Completion Date:	Review Date:

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Sign-off

All policy EIAs must be signed off by Mike Napier, Associate Director of Corporate Affairs

I agree with this assessment / action plan

If *disagree*, state action/s required, reasons and details of who is to carry them out with timescales:



Signed:

Date: 16.12.19