Control of Substances Hazardous to Health

Table of Contents

1. Control of Substances Hazardous to Health 2
   1.1 Purpose 2
   1.2 Objectives 2

2. Policy Statement 2
   2.1 Arrangements 2
   2.1.1 COSHH Risk Assessments 2
   2.1.2 Supervision 3
   2.1.3 Environmental Monitoring 3
   2.1.4 Maintenance and Inspection 3
   2.1.5 Health Surveillance 3
   2.1.6 Instruction, Information and Training 4
   2.1.7 Substances Posing a Very Serious Health Hazard 4

3. Further information 5
   3.1 Staff handbook 5
   3.2 Related Policies, Procedures, Guidelines and Local Protocols 5
   3.3 Definitions & Abbreviations 5

4. Document Information 6
   4.1 Equality Impact Assessment 6
   4.2. Approvals & Renewals 6
1. Control of Substances Hazardous to Health

1.1 Purpose

To protect the health, safety and welfare of staff, students and visitors to the University from potential hazards associated with the use of harmful substances whether on or away from University premises and to comply with the requirements of the Control of Substances Hazardous to Health Regulations 2002 (as amended).

1.2 Objectives

To ensure that all relevant people are aware of:

- the responsibilities of the University and the steps it will take in relation to the control of hazardous substances
- the responsibilities of staff, students and others in relation to safe use of substances hazardous to health
- the frequency and types of testing and inspection of control systems to be undertaken

2. Policy Statement

University of Dundee recognises the risks to health caused by hazardous substances and accepts its responsibilities to comply with legislation and best practice. Besides numerous hazardous substances that are purchased or made within the University there are dusts and fumes generated as adventitious by-products of processes. All of these hazards must be assessed and appropriate control measures implemented. Separate policies cover deliberate work with micro-organisms, human and animal material, radioactive substances, asbestos, lead, substances at high temperature or pressure, latex or animal allergens.

2.1 Arrangements

The following arrangements will apply to the management of substances hazardous to health. See also the supporting staff handbook on COSHH.

2.1.1 COSHH Risk Assessments

Deans/Directors are responsible for ensuring that suitable and sufficient COSHH risk assessments have been carried out for all activities involving hazardous substances that take place in areas under their control. Risk assessments must cover all work activities associated with the hazardous substances, including storage and waste disposal. S/he can delegate this task to the senior person undertaking the work involving hazardous substances. Generic COSHH risk assessments may be used where appropriate, but care must be taken to ensure that these provide adequate control for the processes and substances covered. Deans and Directors must determine this if using generic assessments. Such generic assessments may be referred to by phrases such as “Good Laboratory Practice” or “Good
Workshop Practice”.

Deans/Directors are responsible for ensuring COSHH assessments are reviewed at appropriate intervals not exceeding three yearly and after reports of accident, ill health or upon receipt of collective anonymised health report. COSHH assessment documentation must be held for at least 5 years.

2.1.2 Supervision

Deans/Directors are responsible for ensuring that control measures detailed in the COSHH risk assessment are implemented. They may delegate the supervisory function to others, but they must ensure that it happens and take disciplinary action where failures are identified.

2.1.3 Environmental Monitoring

Head of Safety Services is responsible for arranging formal environmental monitoring if COSHH assessment, ill health reports or visual or olfactory inspections identify a need.

2.1.4 Maintenance and Inspection

A comprehensive programme of thorough examination and testing of Local Exhaust Ventilation (LEV) has been developed, utilising an accredited external contractor. All LEV systems under the control of the University of Dundee will be subject to examination and testing at least annually. Any maintenance necessary to ensure continued safe operation of LEV will be carried out when required and LEV systems will be taken out of use if suspected of not operating as per their design specification. Deans/Directors are responsible for ensuring that all LEV systems within their areas are included on the University LEV inventory.

LEV in areas under the control of NHS will be tested and maintained by the NHS-appointed LEV contractor.

Deans/Directors are responsible for ensuring that personal protective equipment, including respiratory protective equipment, is tested at appropriate intervals and repaired or replaced when necessary.

In all cases records of inspection and maintenance must be kept for five years.

2.1.5 Health Surveillance

The University Occupational Health Service is responsible for providing appropriate health surveillance or vaccination if COSHH risk assessment or ill health reports identify the need. The legal requirement for health surveillance under COSHH extends only to employees, but students (both post- and undergraduate students) will be included where risk assessment indicates this would be appropriate. Deans/Directors will arrange for all appropriate people to attend Occupational Health. The Occupational Health Service is also responsible for keeping health records for 40 years and for providing a copy of an individual’s health record to that individual on request.

The University Occupational Health Service must notify the Head of Safety Services if a member of staff, a student or a visitor appears to be suffering ill health as a result of an activity carried out on the
University’s behalf.

2.1.6 Instruction, Information and Training

Safety Services will provide training to School Safety Advisors and other staff in COSHH risk assessments. See also the staff handbook on safe working with substances hazardous to health.

Deans/ Directors are responsible for ensuring that individuals exposed to hazardous substances understand the COSHH risk assessment and the procedures they must adopt to protect their health.

Deans/ Directors must ensure that emergency arrangements, notified to all staff and students, are in place and practised to manage any spillage or accidental release of a harmful substance. Such arrangements must also ensure that other persons who might be exposed to danger are suitably protected. Where there are likely to be significant risks, the Emergency Services and other relevant parties (e.g. Estates and Campus Services or another School co-occupying a building) must be informed of those risks and the existing control measures so that they can prepare their own response procedures should an emergency arise.

Staff and students are responsible for using PPE and control measures as instructed, cleaning and storing PPE as instructed and reporting defects and deficiencies to their line manager or School Safety Advisor.

2.1.7 Substances Posing a Very Serious Health Hazard

Certain chemical substances that are procured, produced or otherwise obtained by people in the University can pose a very serious hazard to health. These substances must be stored and handled in accordance with a formal process that is commensurate with this hazard. The following classes of chemicals are covered by this duty:

Chemicals and mixtures that are assigned to one or more of the following hazard categories under the Classification, Labelling and Packaging Regulations 2009 (as amended):

- Acute Toxicity Category 1 & 2 Oral (H300), Inhalation (H330)
- Acute Toxicity Category 1 Dermal (H310)
- Contact with acid liberates very toxic gas (EUH032)
- Contact with water liberates toxic gas (EUH029)

Deans / Directors must ensure that the formal process for storing and handling these chemicals is complied with. Details of the process are within the staff handbook on safe working with substances hazardous to health.
3. Further information

3.1 Staff handbook

The staff handbook on working safely with substances hazardous health is located on the Safety Services website and provides detailed guidance on how to comply with the requirements of this policy.

3.2 Related Policies, Procedures, Guidelines and Local Protocols

- Biological Safety Management Policy
- Good Laboratory Practice
- Health Surveillance
- Ionising Radiation Management
- Asbestos Policy
- Personal Protective Equipment
- Pressure Systems Policy

3.3 Definitions & Abbreviations

**COSHh**: means Control of Substances Hazardous to Health Regulations 2002

**LEV**: Local Exhaust Ventilation

**NHS**: National Health Service

**PPE**: Personal Protective Equipment
4 Document Information

4.1 Equality Impact Assessment

This policy has undergone screening for potential impact on equality aspects and none have been identified.

4.2. Approvals & Renewals

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