COSHH Assessment Form

**ID:**  *Local Reference*

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| **Name of Assessor(s):** **Posts Held:** |  | **Date of Original Assessment:** | *Select date* |
| **Manager Responsible:** |  |
| **Department:** |  *This is a model COSHH assessment which should be reviewed and adapted to the area where the product is being used.*  |
| **Hazardous Substance** – include form e.g. solid, gas, liquid etc, amount used (Ensure that the SDS is updated to the CLP Regulation). |
| Softalind/Softa-Man ViscoRub Alcohol hand gel B. Braun.Alcoholic solution. |
| **Tasks which use the substance and who will be exposed**: |
| NHS Lothian Clinical Staff and visitors for hand disinfectant (Gel)See Leaflet from Health Protection Scotland “Hand hygiene. A guide for healthcare staff”. and for reference check NHS Lothian Infection Control intranet page. |
| **Hazard Information** (Harmful properties, exposure limits etc) from Safety Data Sheet include route of entry, hazard type e.g. sensitiser etc and how long exposure is likely to be for |
| **Hazard statements:**H225 Highly flammable liquid and vapourH318 Causes serious eye damageH336 May cause drowsiness or dizziness **Pictograms:****FlammableCorrosivehttp://www.hse.gov.uk/chemical-classification/images/pictogram-gallery/irritant.gif****Exposure limits:**This product contains Propan-1-ol (TWA, 8h 200ppm, STEL, 15 min 250ppm) and ethanol (TWA, 8h 1000ppm).**Routes of entry:**For the tasks described previously the main routes of entry are exposure by skin contact and to eyes. Other more unlikely routes are exposure by breathing and by swallowing.  |
| **Can this substance be Eliminated or Substituted?** If not, please explain why: |
| No – the problem of cross-infection transmitted by hand contacts is a serious risk for patients requiring frequent use of this product by staff and visitors at locations where it is more convenient and effective than normal soap and water. |
| **Existing Precautions** |
| Information: * When using do not eat or drink.
* Avoid contact with eyes.
* Keep away from heat, hot surfaces, sparks, open flames and other ignition sources.

Instruction: * When using the gel, clean your hands following the instructions showed in the Poster for hand hygiene (hand rubbing, gel).
* Local First Aid Procedure and referral to Occupational Health if needed.

*Reference should be made to NHS Lothian First Aid Policy and local procedures to ensure your department has the correct first aid requirements in place.* *Add additional existing precautions in your department* |
| **Storage** |
| Keep container tightly closed in a dry, cool and well-ventilated place.Keep away source of ignition.Incompatible with oxidizing agents and alkaline metals.Keep away from food and drink.  |
| **Disposal** |
| Dispose of contents/container in accordance with local waste management procedures.Do not discharge into the drains/surface water/ground water.  |
| **Is there a requirement for Health Surveillance?** Yes/no and what type e.g. skin health etc |
| No, unless you meet the criteria for skin health surveillance (wash the hands for more than 20 times a day). Health Surveillance Procedure for Managers (Skin Health). |
| **Maintenance of equipment** - including LEV test, maintenance and inspections |
| Not applicable |
| **Is there a need for Personal Protective Equipment?** YES/NO and what type |
| None required under normal use conditions. |
| **First Aid Measures** |
| **General information**Remove contaminated soaked clothing immediately.If you feel unwell, follow instructions from the Local First Aid procedure. **Eye contact**Rinse immediately with plenty of water, also under the eyelids, for at least 15 minutes.Remove contact lenses, if present and continue rinsing.Get medical attention promptly if symptoms occur after washing.**Inhalation**Move to fresh air in case of accidental inhalation of vapours.If not breathing, give artificial respiration. If breathing is difficult, give oxygen.Get medical attention promptly in the event of symptoms. **Ingestion**Drink plenty of water. If affected person is unconscious never give anything to swallow.Do not induce vomiting.Get medical attention immediately.*Reference should be made to NHS Lothian First Aid Policy and local procedures to ensure your department has the correct first aid requirements in place.*  |
| **Emergency Plans** - including spills procedures |
| Soak up with inert absorbent material. Wear suitable protective personal equipment.  |
| **Other Additional Measures** |
| **Fire fighting** – This product is a flammable liquid. Suitable extinguishing media: alcohol-resistant foam, dry chemical, carbon dioxide (CO2) and water-spray. Vapours are heavier than air and therefore spread along ground.The vapour/air mixture is explosive.**Materials to avoid (incompatibility)** Incompatible with oxidizing agents and alkaline metals. |

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| **Level of Risk** |
| Select the level which indicates the current risk level:  |
| **Green** | **Yellow** | **Orange** | **Red** |
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| **Action Plan** |
| **What further action is necessary?** | **Action By Whom** | **Action by when****(dd/mm/yy)** | **Action completed.****(dd/mm/yy)** |
| Check NHS Lothian First Aid Policy and local procedures to ensure department has the correct first aid requirements in place | *Name* | *Date* | *Date* |
| Monitor safe use of product | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |
| *Detail* | *Name* | *Date* | *Date* |

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| **Review Table** |
| **Date** **(dd/mm/yy)** | **Reviewer** | **Reasons for review** | **Approved/Not Approved by** **(dd/mm/yy)** |
| *Date* | *Name* | *Detail* | *Name & Date* |
| *Date* | *Name* | *Detail* | *Name & Date* |
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