



CONTROL OF SUBSTANCES HAZARDOUS TO HEALTH (COSHH)

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Disclosable under Freedom of Information Act 2000	Yes	

POLICY CONTEXT

The Trust acknowledges that there is potential for injury to employees from processes and substances used whilst carrying out work activities. The Trust is committed to removing/reducing such risks as far as is reasonably practicable by the provision of training, information, instruction and supervision of employees, specific substance assessment and elimination or substitution of hazardous substances with less harmful alternatives.

Where elimination of the risks is not possible the Trust will undertake to control exposure to hazardous substances to within statutory limits by engineering means where reasonably practicable.

POLICY REQUIREMENT (see Section 2)

The Control of Substances Hazardous to Health Regulations places a duty on the organisation to ensure that adequate processes are in place to manage the risks identified through the use of chemicals and other hazardous agents in the workplace. This includes the following key policy issues:

- Identify, control and manage hazardous substances
- Comply with or improve on, legislation with regards to hazardous substances
- Raise employee's awareness about their responsibilities for working with hazardous substances
- Provide guidance for employees and their managers to identify and manage risks with regards to hazardous substances

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1 INTRODUCTION

1.1 Rationale (Why)

- The Trust aims to provide a health and safe environment for all staff, service users and visitors using its premises. It is therefore the policy of the Trust to minimise any risk arising from the hazardous or dangerous substances used, in its premises by ensuring that any hazardous or dangerous substances present are identified, risk assessments are carried out and measures are introduced to prevent, or adequately control, the exposure to substances hazardous to health arising from their work or the other risks arising from dangerous substances.
- The Control of Substances Hazardous to Health Regulations 2002 (COSHH) impose requirements relating to work with substances hazardous to health and safety respectively. The regulations cover a requirement for the risk to be assessed and adequately controlled, less hazardous materials to be used where possible, equipment associated with the removal of hazardous gases, mists or vapours (LEV) to be subject to a robust inspection and maintenance programme and requirements relating to employee information, training, and, in some cases, monitoring and employee health surveillance.
- It is important to note that the Regulations apply not only to the intentional use of hazardous or dangerous materials, but also to the exposure of employees, or others, to work related risks arising incidentally by a task or process such as wood dust generated during maintenance operations or exposure to water mist containing legionella bacteria. A list of Definitions and Descriptions is contained within Appendix 2.

1.2 Scope (Where, When, Who)

- This policy applies to all employees (permanent, temporary or agency), visitors and others (e.g., contractors) who enter the premises under the management of the Trust.
- In particular, managers have a general responsibility to ensure the implementation of this policy in relation to their areas of responsibility.
- Where the Trust has employees located at other premises, e.g., prisons, accident and emergency departments, etc., then the manager will ensure that appropriate standards are met with regards to hazardous substances either via this policy or the premises policy if it is of a corresponding standard.
- The Trust in its contract with HMP Birmingham - Prison Healthcare Services and other specific contracted services. Healthcare Services has the lead for health and safety within the prison healthcare environment under its control, this includes all relevant employees (BSMHFT and prison employees) having access to the BSMHFT Health and Safety Policy and this COSHH policy where applicable. These employees also have access to health and safety training undertaken by the Trust. Incidents involving HMP Birmingham - Prison Healthcare Services and other specific contracted services activities are reported through the Trust incident reporting system.
- It covers all substances hazardous to health and potential risks in premises under the management of the Trust.
- Work that involves possible exposure to substances hazardous to health by the Trust's PFI partners and contractors, including new capital works, will also be covered by their own policies and procedures, risk assessments and method statements. The responsible Estates / Contracts Manager will ensure that these documents are of the appropriate standards.

1.3 Principles (Beliefs)

The Control of Substances Hazardous to Health Regulations place duties upon the Trust to protect its employees (permanent, temporary or agency) visitors and contractors from

the risks to their health from hazardous substances, through risk assessments, control strategies and through limiting exposure.

- The Policy reflects core health & safety principles
- The Health and Safety at Work etc. Act 1974
“It shall be the duty of every employer to ensure, so far as is reasonably practicable, the health, safety and welfare of all employees”:

Further duties extend this requirement to include non -employees who may still be affected by the work undertaking.

2 POLICY (What)

- All managers and employees shall make themselves aware of the requirements of the COSHH Regulations, this COSHH policy and ensure that they are provided with appropriate supervision, information and training.
- COSHH risk assessments will be undertaken by designated managers at department level.
- Managers shall be responsible for implementing effective safety management systems for the prevention and control of exposure to hazardous substances in their work areas. Managers must ensure that all mechanical control measures such as Local Exhaust Ventilation (LEV) are kept in efficient working order and good repair.
- Managers are required to ensure there is an inventory of any hazardous substances in their workplace in line with these regulations.
- New substances will be added to the COSHH Inventory and an assessment of the risks to health, carried out as soon as practical to do so.
- Only products approved by the Trust and sourced from approved suppliers will be used on Trust premises. Products must not be brought into work from home.
- Employees who are required to wear respiratory masks must ensure that they have received training before use.
- Managers will ensure Fit Testing for respiratory masks is carried out by properly trained & competent persons.
- Where provided, it is the responsibility of all relevant employees to wear Personal Protective Equipment (PPE) and Respiratory Protective Equipment (R.P.E) (Including disposables). Employees have a duty to ensure that it is stored in a clean and hygienic condition and checked before each use and any defects or loss are reported to the line manager.
- PPE and RPE is to be checked in accordance with the manufacturer’s instructions and guidelines, and a record of such checks retained on file.
- It is a management responsibility to inform employees (including contractors, bank and agency employees) of risks to their health and safety whilst employed by the Trust or at work on Trust premises.

3 PROCEDURES

3.1 Procedures to Ensure Compliance with the COSHH Regulations

Please refer to the ‘8 step process to COSHH assessments’ in Appendix 3.

The COSHH regulations requires the identification and control of hazardous substances and the requirement not to carry out any work that is liable to expose

persons to any substance hazardous to health unless a suitable and sufficient assessment has been made, and appropriate control measures introduced into the workplace.

A COSHH inventory of all hazardous substances used in the workplace must be developed and maintained by the Manager, see Appendix 4. Safety Data Sheets (SDS) must be obtained from the manufacturers or suppliers for all hazardous substances and attached to the relevant completed Substance Assessment Form, see Appendix 6.

The basic principles of occupational hygiene underpin the COSHH Regulations. They are:

- Assess the risk to health arising from work and decide what precautions are needed.
- Introduce appropriate control measures to prevent or control the risk.
- Ensure that control measures are used, and that equipment is properly maintained and procedures observed.
- Where necessary, monitor the exposure of the workers and carry out an appropriate form of health surveillance.
- Inform, instruct and train employees about the risks and the precautions to be taken.

Accidents involving chemical substances need to be recorded on Eclipse. Where it is considered that the incident may be reportable under the Reporting of Injuries, Diseases, and Dangerous Occurrences Regulations (RIDDOR) 2013

[The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(legislation.gov.uk\)](http://legislation.gov.uk)

Contact should be made with the Health and Safety Team before such a report is submitted.

3.2 Safety Data Sheets (SDS)

All relevant information on substances used at work is contained on the Safety Data Sheet which can be downloaded from manufacturer's / supplier's website. The manufacturer is legally responsible to produce a Safety Data Sheet and made available to their customers). A UK specification Safety Data Sheet is to be obtained which consists of 16 sections. Suppliers of substances are usually able to help obtain one. The SDS plays a vital role when completing a COSHH risk assessment as it provides key information on the hazardous substance, which is used to help identify control measures required. It is important to understand that they are *not* a replacement for the risk assessment procedure.

European Regulation (EC) No 1272/2008 on classification, labelling and packaging of substances and mixtures (CLP) was formally introduced into the UK in 2015.

The CLP Regulations adopt the United Nations Globally Harmonised system on the classification and labelling of chemicals (GHS). This approach applies to all European Countries including the UK. The significant change in the legislation has resulted in the withdrawal of the orange background and black pictogram COSHH warning symbols that have now been replaced with a pictogram that incorporates a diamond shape with a red border and a black pictogram on a white background.

When developing a COSHH risk assessment the old and new pictograms are not directly interchangeable, and will require the development of a new COSHH risk assessment.

All Safety Data Sheets obtained from chemical manufacturers or suppliers will need to

comply with the CLP Regulations and be no older than 2 years from date of issue.

3.3 COSHH Risk Assessments

COSHH risk assessments will be undertaken by designated managers at department level. The Trust's COSHH Risk Assessment Form must be used to record the assessment (see Appendix 7).

The risk assessment is an essential and absolute requirement. It will identify any potential problem and its extent before deciding what needs to be done about it.

The assessment must be a systematic review of:

- What substances are present and in what form?
- What harmful effects are possible to persons and the environment?
- Where and how are the substances used, handled and disposed of?
- What harmful substances are given off as a by-product of use?
- Who could be affected, to what extent and for how long?
- Under what circumstances the substances are used?
- How likely it is that exposure will occur, and whether the exposure is above stated legal limits Workplace Exposure Limits (WEL's)?
- What precautions exist, including emergency arrangements
- What new precautions must be taken?

All these factors must be compared against what happens in practice. No work, which is liable to expose anyone to hazardous substances, shall be undertaken unless a suitable and sufficient assessment of the risk has been made.

Following the identification of hazards to health, employees must be informed of the control measures introduced or required.

Risk assessments *must* be undertaken when a new substance is used in the workplace that is classified as a substance hazardous to health. Original assessments will state when a review is to take place.

Reviews will also be undertaken:

- Annually to ensure that hazards identified and risk control measures have not changed
- Where there has been a change in the work procedure;
- If the substance is used for a different task;
- If the substance used is changed, i.e., manufacturer or concentration;
- Upon Health and Safety Executive (HSE) direction;
- Following any adverse incident involving the substance or task.

It is the responsibility of the Trust managers to ensure that COSHH assessments are carried out for their areas of responsibility and that these are kept up to date and is relevant.

When health risks are identified the manager must consider what else needs to be done to comply with the COSHH Regulations, i.e., monitoring, health surveillance, etc.

3.4 Controlling Exposure

The COSHH assessment and monitoring enable attention to be focused on the control of the exposure to hazardous substances.

Managers will ensure that the exposure of Employees, Service Users, and Visitors to hazardous substances is prevented, where reasonably practical. Where this is not possible, options must be considered to control the exposure.

On the basis of the assessment, managers must decide which control measures are appropriate to the work situation in order to deal effectively with any hazardous substances that may be present or likely to be produced.

Choosing control measures

In order of priority:

1. Eliminate the use of a harmful product or substance and use a safer one.
2. Use a safer form of the product, egg paste rather than powder.
3. Change the process to emit less of the substance.
4. Enclose the process so that the product does not escape.
5. Extract emissions of the substance near the source (LEV)
6. Have as few employees in harm's way as possible.
7. Provide personal protective equipment (PPE) such as gloves, coveralls and a Respirator PPE/RPE must fit the wearer.

The COSHH regulations place a specific obligation on Managers to ensure that all control measures remain effective, and that items of equipment used in the management or delivery of hazardous substances are subject to routine inspection and maintenance. If control measures consist of engineering controls, they will be examined and tested at suitable intervals. For example, Local Exhaust Ventilation has to be tested at least once every 14 months and a record kept. Respirators and breathing equipment also have to be examined frequently in accordance with the manufacturer's instructions and guidelines.

A record of all examinations, tests, inspections and record of repairs carried out must be kept for a minimum of 5 years.

All control measures must perform as intended and continue to prevent or adequately control the exposure of employees to substances hazardous to health. This includes correcting as soon as possible any defects found in the controls which could result in reduced efficiency, effectiveness or levels of protection for employees.

Managers shall be responsible for implementing effective safety management systems for the prevention and control of exposure to hazardous substance in their work areas.

Employees are required to make full use of all the control measures and to report any defects, and managers must take all reasonable steps to ensure that they do so.

3.5 Health Surveillance

Routine surveillance of an individual's health must be undertaken when it is warranted by the degree of exposure and the nature of the effects.

Health surveillance of employees is required where appropriate. It will be suitable for the hazard, safe, easy to perform, non-invasive and acceptable to the employee. It can vary from a simple inspection of the skin by a supervisor/manager, in the case of skin irritants, to blood tests in the case of microbiological hazard - i.e., Hepatitis B through the Trust's Occupational Health provider. A record must be kept of any health surveillance carried out, and the results be available to both managers and employees. All records to be kept for 40 years.

Health Surveillance will:

- Ensure the continued good health of employees working with substances hazardous to health.
- Assist in the evaluation of control measures.
- Assess the immunological status of employees.
- Where there is substantial exposure to skin irritants, the regular checking of hands and forearms will be considered for early detection of dermatitis.

3.6 Monitoring Exposure

The COSHH regulations require that the exposure of employees be monitored in certain cases, for example:

- Where there could be serious risks to health if control measures were to fail or deteriorate.
- Where it is uncertain that workplace exposure limits will be exceeded.
- Where it is uncertain that controls measure are working properly.

A record must be kept of all monitoring activities. These detail when the monitoring was done, duration, location of sampling, what the results were etc.

- Monitoring normally means air sampling but it may also involve taking biological samples, exhaled air or urine. Monitoring normally makes reference to 'Workplace Exposure Limits' (WELs) published by HSE. These limits may not be exceeded (see EH40). [EH40/2005 Workplace exposure limits \(hse.gov.uk\)](#)

3.7 Personal Protective Equipment (P.P.E.) and Respiratory Protective Equipment (R.P.E)

PPE and RPE shall be provided as a last resort following all other control measures has been considered. Employees shall receive instruction and training in the correct usage, storage and maintenance of the PPE and RPE. Where PPE/RPE is required for use, it will be necessary for face fit testing to be undertaken. Contact with a member of the Health and Safety Team needs to be made in order to facilitate this.

Re-useable personnel protective clothing must be allocated clean and safe storage space as per manufacturer's guidelines with personnel marking for hygiene reasons. Disposable or single use personnel protective clothing must not be reused.

All personnel protective clothing will be provided by the Trust free of charge.

3.8 Pandemics - COVID-19/ Influenza

As an employer, we must protect people from harm. This includes doing a risk assessment to decide what reasonable steps you need to take to protect your workers and others from infectious diseases such as coronavirus (COVID-19).

The risk assessment should reflect the public health regulations and guidelines for the nation you are in.

As part of your risk assessment, you must:

- Identify what work activity or situations might cause transmission of coronavirus (COVID-19)
- Think about who could be at risk – this could include workers, visitors' contractors and delivery drivers
- Decide how likely it is that someone could be exposed

- Identify the controls needed to reduce the risk

Further information regarding IPC policies can be found on the following link:

[Clinical \(sharepoint.com\)](#)

Further information can also be found on the HSE website:

[HSE: Information about health and safety at work](#)

Line managers must review their COSHH risk assessment and include any factors such as cleaning controls, transport of specimens for example. The risk assessment should be discussed with all staff so that they are confident with the controls when dealing with substances that are hazardous to health to minimise the risk of infection.

3.9 Information, Instruction and Training of Employees

It is a management responsibility to inform employees (including contractors, bank and agency employees) of risks to their health and safety whilst employed by the Trust or at work on Trust premises. The information given will include:

- The risks to health created by their exposure
- The precautions which are to be taken
- Control measures, their purpose and how to use them
- How to use and store all personal protective equipment provided to them
- The results of any exposure monitoring and health surveillance
- The results of environmental monitoring carried out
- Emergency procedures

In conjunction with the completion of departmental COSHH risk assessments the need for information, instruction and training must be considered and appropriate arrangements made.

Managers are encouraged to consult with employees in developing safe systems of work or SOPs to make sure they are suitable for the way they carry out the work, suggest improvements, and report anything they think might be going wrong.

Reference to the use of hazardous substances is included within the Trust's e-learning package located under the Health and Safety section.

Where the employees of other departments or contractors may be affected, appropriate channels of communications must be established to ensure that they are properly informed.

3.10 Monitoring and Review

The effectiveness of the control measures in place to eliminate or minimise any hazard or risk from the use of a hazardous substance will be reviewed on a regular basis. This will be done by the following methods: -

- Completion of health and safety inspections by the Health and Safety Team, Nurses/Matrons/Supervisors/Corporate Leads
- Completion of Annual Environmental Risk Assessments, looking at control measures in place for exposure to hazardous substances

- Review of incident forms for types of adverse incidents regarding exposure to hazardous substances
- Review of department/ward COSHH risk assessment after significant incidents and amending the risk assessment where required

Any unresolved issues or lessons learnt will be reported in the first instance to the local Health and Safety Committees and as appropriate escalated to the Trust Health and Safety Committee.

Where any high risks are highlighted of exposure to hazardous substances these will also be reported at the Trust Health, Safety and Fire Committee, this will include the control measures that are or have been put in place.

4. RESPONSIBILITIES

Post(s)	Responsibilities	Ref
Executive Director	The Executive Director of Quality and Safety (Chief Nurse) has overall responsibility for this policy ensuring a safe working environment and that reasonably practicable control measures can be applied to minimise the risks from hazardous substances.	
Clinical and Corporate Directors	Clinical and Corporate Directors will ensure that Managers are made aware of their responsibilities under this policy and associated guidance.	
Policy Lead	The Policy Lead is responsible for: <ul style="list-style-type: none"> • Ensuring that this policy has been amended to reflect changes to COSHH regulations and guidance notes that are relevant to Trust Wide operations. • Provide guidance for employees and their managers to identify and manage risks with regards to hazardous substances • Monitoring compliance with this Policy 	
Health and Safety Team	The Health and Safety Team, key responsibilities include: <ul style="list-style-type: none"> • To review reported adverse incidents relating to exposure to hazardous substances, utilising the most effective strategies to further reduce incidents. • Provide support to quality review completed assessments and the subsequent implementation of control measures as necessary. • Audit and review procedures at a local level to ensure compliance with the requirements of the policy. • To highlight to Local Health and Safety Leads any areas where standards fall short of HSE or Trust policies and procedures relating to hazardous substances. • Supporting the operational leads and teams with the completion of COSHH risk assessments as required 	
Summerhill Services Limited (SSL) - Head of Estates and Facilities, Estates	SSL - Head of Estates and Facilities, Estates Teams including PFI Contractors, Facilities Teams are responsible for: <ul style="list-style-type: none"> • Ensuring that all premises and external surfaces / areas owned or leased by the Trust are as safe as is reasonably practicable and do not present a hazard to Employees, Contractors, Outside Agencies or Visitors using the Trust. 	

Teams including PFI Contractors.	<ul style="list-style-type: none"> • Ensure contracts awarded will comply with this (or procedure of a corresponding standard) and all appropriate Trust Policies and Procedures, and arrangements for the management of the control of exposure to hazardous substances. • Develop procedures and work practices based on their risk assessments that eliminate, reduce or manage the risks of exposure to hazardous substances. • Ensure that all works that fall under the requirements of the Construction (Design and Management) Regulations 2015 are adequately controlled in respect of the Control of Hazardous Substances and appropriate arrangements are noted within Construction Phase Plans. 	
Contractors/Sub Contractors	<p>Contractors/Sub Contractors must ensure that they comply with the following:</p> <ul style="list-style-type: none"> • All appropriate Trust Policies and Procedures, and arrangements for the management of the control of exposure to hazardous substances. • Provide suitable and sufficient method statements/risk assessments prior to commencement of works at Trust properties. 	
Domestic Staff	<p>Domestic Staff are responsible for ensuring that they:</p> <ul style="list-style-type: none"> • Adhere to 15 competences set out by the British Institute of Cleaning Science which includes 3 mandatory units – Licence to Practice - MU1 Chemical Competence, MU2 Safe Assembly of Equipment and MU3 Storage of Equipment and Materials. • Adhere to the Trust Infection Prevention Control Policy. • Adhere to the Trust Cleaning Policy. • Have read and understood the relevant sections under this COSHH Policy. • Adhere to local COSSH risk assessments, standard operating procedures, and product safety data sheets. • Ensuring that any chemical substances are not mixed together under any circumstances. • All chemical substances must be safely and securely stored considering vulnerable Service User groups who may have access such products. • Chemicals must not be left unattended or in unlocked/unsecured areas/trolleys/cupboards where they may be accessed by vulnerable Service Users. • Measure to limit/prevent the exposure of Service Users and staff to ingestion of cleaning products/chemicals must be in good working order i.e., locks on domestic trolleys must always work and be fit for purpose with keys removed when not use. • Ensuring that any personal protective equipment issued to them is worn in accordance with the manufacturer's instructions and guidelines and is fit for purpose, 	

	<p>maintained in a clean, hygienic condition and stored appropriately.</p> <ul style="list-style-type: none"> The use of non-Trust approved cleaning chemicals/disinfectants is NOT allowed. Changes in products or the introduction of new agents must be approved by the Infection Prevention and Control team and /or the Health and Safety Team. 	
Housekeeping Staff/Catering Staff	<p>Housekeeping staff are responsible for ensuring that they:</p> <ul style="list-style-type: none"> Adhere to the 15 competences set out by the British Institute of Cleaning Science which includes 3 mandatory units – Licence to Practice - MU1 Chemical Competence, MU2 Safe Assembly of Equipment and MU3 Storage of Equipment and Materials Adhere to the Trust Infection Prevention Control Policy. Adhere to the Trust Cleaning Policy. Ensuring that training has been received before the use or handling of any hazardous substances Ensuring that any personal protective equipment issued to them is worn in accordance with the manufacturer's instructions and guidelines and is maintained in a clean and hygienic condition and stored appropriately. Ensuring that any chemical substances are not mixed together under any circumstances Have read and understood the sections relevant to them within this COSHH Policy All chemical substances must be safely and securely stored considering vulnerable Service User groups who may have access such products. Chemicals must not be left unattended or in unlocked/unsecured areas/trolleys/cupboards where they may be accessed by vulnerable Service Users. 	
Drivers - Transport/Vehicles	<p>Transport/ Drivers are responsible for ensuring that they:</p> <ul style="list-style-type: none"> Adhere to the Trust Infection Prevention Control Policy. Adhere to the Trust Cleaning Policy. Ensuring that training has been received before the use or handling of any hazardous substances Ensuring that any personal protective equipment issued to them is worn in accordance with the manufacturer's instructions and guidelines and is maintained in a clean and hygienic condition and stored appropriately. Ensuring that any chemical substances are not mixed together under any circumstances Have read and understood the sections relevant to them within this COSHH Policy All chemical substances such as de icer/ screen wash etc must be safely and securely stored considering vulnerable Service User groups who may have access such products. 	

	<ul style="list-style-type: none"> Chemicals must not be left unattended in vehicles or in unlocked/unsecured areas where they may be accessed by vulnerable Service Users. 	
Service Managers / Heads of Corporate Functions	<p>Service Managers/ Heads of Corporate Functions have a responsibility for:</p> <ul style="list-style-type: none"> The safety of their employees and their activities. They are expected to promote a positive health and safety culture amongst all employees to ensure that this Trust Policy relating to exposure to hazardous substances is adhered to. 	
Service Health & Safety Leads	<p>Service Health & Safety Leads are responsible for:</p> <ul style="list-style-type: none"> Representing the Division at the Service Trust Health & Safety Committee and provide updates on any exposure to hazardous substances. Ensuring that where potential risks of exposure have been identified through risk assessments and other means, suitable remedial action is undertaken within time frames agreed and monitoring procedures adopted. Reviewing local adverse incidents, complaints and claims related information, advising on control measures and co-ordinating activities in liaison with Wards and Departments to reduce the risk. 	
Infection Prevention Control Team (IPC)	<p>The Infection Prevention Control Team (IPC) is responsible for:</p> <ul style="list-style-type: none"> Selecting products for the decontamination of medical equipment and hand hygiene Contributing to the Trust Cleaning Policy, including products used for the decontamination of the environment. Advising on the use of Personal Protective Equipment (PPE) including Respiratory Masks to reduce the risk of exposure to harmful pathogens such as Tuberculosis (TB) and Influenza, Coronavirus and other infectious organisms. Support and provide training for Fit Testing. 	
Occupational Health Service	<p>The Occupational Health Service are responsible for:</p> <ul style="list-style-type: none"> Ensuring that any staff exposed to hazardous materials are adequately supported and receive after care and/or monitoring appropriate to those required for the hazardous substance/ material. Ensuring that where potential risks of exposure have been identified, suitable remedial action is undertaken within time frames agreed, risk assessments reviewed, and monitoring procedures adopted. Ensuring that incidents resulting in exposure to hazardous substances are appropriately recorded in accordance with the Trust incident reporting system, see The Reporting, Management & Learning from Incidents Policy. The use of non-Trust approved cleaning chemicals/ disinfectants is NOT allowed. Changes in products or the 	

	introduction of new agents must be approved by the Infection Prevention and Control team and /or the Health and Safety Team.	
Occupational Therapy Service	<p>The Occupational Therapy Service are responsible for:</p> <ul style="list-style-type: none"> • Managing the day-to-day activities within their areas of responsibility to minimise risks regarding exposure of hazardous substances. • Ensuring that COSHH risk assessments are conducted to maintain a safe working environment and that suitable remedial action is undertaken to implement appropriate control measures. • Ensuring that incidents resulting in exposure to hazardous substances are appropriately recorded in accordance with the Trust incident reporting system, see The Reporting, Management & Learning from Incidents Policy. 	
Ward Managers/ /Matrons/ Supervisors/ Corporate Leads	<p>Ward Managers/ Matrons/ Supervisors/ Corporate Leads are responsible for:</p> <ul style="list-style-type: none"> • Managing the day-to-day activities within their areas of responsibility to minimise risks regarding exposure of hazardous substances. This can be achieved by undertaking regular health and safety inspections for chemicals in use. • Ensuring that COSHH risk assessments are conducted to maintain a safe working environment and that suitable remedial action is undertaken to implement appropriate control measures. • Ensuring that incidents resulting in exposure to hazardous substances are investigated and are appropriately recorded in accordance with the Trust incident reporting system, see The Reporting, Management & Learning from Incidents Policy. 	
All Employees	<p>All Employees are responsible for:</p> <ul style="list-style-type: none"> • Taking personal responsibility for keeping their work area safe. • Carrying out their duties in such a manner as to prevent or minimise the risk of exposure to hazardous substances. • Ensuring that all hazardous substances are delivered, transported, stored and used in accordance with the COSHH risk assessment and SDS. • Ensuring that chemical substances are stored in their original containers and never mixed together. • Ensuring all potential hazardous substance hazards and incidents are reported to their Line Manager immediately. • Attend all relevant COSHH training. • Wearing appropriate Personal Protective Equipment / Respiratory Protective Equipment in line with associated legislation and local requirements and instructions. 	

5. DEVELOPMENT AND CONSULTATION PROCESS

Consultation summary		
Date policy issued for consultation	October 2021	
Number of versions produced for consultation	1	
Committees or meetings where this policy was formally discussed		
PDMG	December 2021	
Trust Health & Safety Committee	March 2022	
Where else presented	Summary of feedback	Actions / Response

6. REFERENCE DOCUMENTS

This COSHH Policy must be read in conjunction with the following Trust Policies as follows.

- Asbestos Policy
- [Cleaning Policy](#)
- [Infection Prevention and Control Policy](#)
- [Legionella Policy](#)
- [Reporting, Management & Learning from Incidents Policy](#)

7. BIBLIOGRAPHY

- [COSHH Essentials](#)
- [HSE.gov.com](#)
- RIDDOR - [The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 \(legislation.gov.uk\)](#) and [Reporting of Injuries, Diseases & Dangerous Occurrences RIDDOR \(hse.gov.uk\)](#)
- [The Control of Substances Hazardous to Health Regulations 2002 \(as amended\) Approved Code of Practice and guidance - L5 \(Sixth edition\) Published 2013](#)
- [‘Workplace Exposure Limits’ \(WELs\)](#)
- [Working with Substances Hazardous to Health – A Brief Guide to CoSHH](#)

8. GLOSSARY

- CHIP –Chemicals (Hazard Information and Packaging for Supply)
- CLP –Classification, Labelling and Packaging
- COSHH – Control of Substances Hazardous to Health
- HSE – Health and Safety Executive
- LEV – Local Exhaust Ventilation
- PPE – Personal Protective Equipment

- RPE – Respiratory Protective Equipment
- RIDDOR – Reporting of Injuries, Diseases and Dangerous Occurrences Regulations.
- SDS'S – Safety Data Sheets
- WEL - Workplace Exposure Limits

9. AUDIT AND ASSURANCE: MONITORING TABLE

Element to be monitored	Lead(s)	Tool	Freq	Reporting Arrangements	Acting on Recommendations and Lead(S)	Change in Practice and Lessons to be shared
Safety Data Sheets are no older than 2 years to ensure currency.	Health and Safety Team Team Managers	COSHH Risk Assessments	Annually	Trust Health & Safety Committee, Risk Committee	Health and Safety Team & Team Managers Estates Teams including PFI Contractors	Via Health and Safety Committees (Trust and Local)
Chemicals in use are on the Trust Approved Supplier list.	Health and Safety Team Procurement	COSHH Risk Assessment Inventory/ Trust Approved Supplier List	Annually	Trust Health & Safety Committee	Health and Safety Team Estates Teams including PFI Contractors Procurement Lead	Via Health and Safety Committees (Trust and Local)
Identification of employees to complete COSHH risk assessments. Assessments to be completed using the CLP –Classification, Labelling and Packaging SDS and symbols.	Health and Safety Team Team Managers	Workshop training/ Connect update once COSHH policy is ratified. Training Records	Quarterly & Annually	Trust Health & Safety Committee, Risk Committee	Health and Safety Team Team Managers Estates Teams including PFI Contractors	Via Health and Safety Committee to Clinical Governance Committee
COSHH incidents.	Health and Safety Team	Eclipse data, Risk Team information.	Quarterly & Annually	Trust Health & Safety Committee, Risk Committee	Health and Safety Team	Via Health and Safety Committees (Trust and Local)
Monitor and Review completed action plans to ensure recommendations are addressed	Health and Safety Team	Health & Safety Audit Spread sheet	Monthly	Trust Health & Safety Committee	Health and Safety Team	Via Health and Safety Committees (Trust and Local) to Clinical Governance Committee

Equality Analysis Screening Form

A word version of this document can be found on the HR support pages on Connect

<http://connect/corporate/humanresources/managementsupport/Pages/default.aspx>

Title of Policy		Control of Substances Hazardous to Health Policy		
Person Completing this policy	Angela Bridges	Role or title	Health and Safety Advisor	
Division	Corporate	Service Area	Governance	
Date Started	October 2021	Date completed	October 2021	
Main purpose and aims of the proposal and how it fits in with the wider strategic aims and objectives of the organisation.				
The purpose of the policy is to make staff aware of the legal requirements of the Control of Substances Hazardous to Health regulations and what they need to do in the organisation to ensure compliance.				
Who will benefit from the proposal?				
All staff who have responsibilities under the above regulations. All patients and other third parties who would be affected by the Trust's activities that involve the use of any chemicals or other hazardous substances.				
Impacts on different Personal Protected Characteristics – Helpful Questions:				
<i>Does this proposal promote equality of opportunity?</i>		<i>Promote good community relations?</i>		
<i>Eliminate discrimination?</i>		<i>Promote positive attitudes towards disabled people?</i>		
<i>Eliminate harassment?</i>		<i>Consider more favourable treatment of disabled people?</i>		
<i>Eliminate victimisation?</i>		<i>Promote involvement and consultation?</i>		
		<i>Protect and promote human rights?</i>		
Please click in the relevant impact box or leave blank if you feel there is no particular impact.				
Personal Protected Characteristic	No/Minimum Impact	Negative Impact	Positive Impact	Please list details or evidence of why there might be a positive, negative or no impact on protected characteristics.
Age				
Including children and people over 65 Is it easy for someone of any age to find out about your service or access your proposal?				

Are you able to justify the legal or lawful reasons when your service excludes certain age groups				
Disability				
Including those with physical or sensory impairments, those with learning disabilities and those with mental health issues Do you currently monitor who has a disability so that you know how well your service is being used by people with a disability? Are you making reasonable adjustment to meet the needs of the staff, service users, carers and families?				
Gender				
This can include male and female or someone who has completed the gender reassignment process from one sex to another Do you have flexible working arrangements for either sex? Is it easier for either men or women to access your proposal?				
Marriage or Civil Partnerships				
People who are in a Civil Partnerships must be treated equally to married couples on a wide range of legal matters Are the documents and information provided for your service reflecting the appropriate terminology for marriage and civil partnerships?				
Pregnancy or Maternity				
This includes women having a baby and women just after they have had a baby Does your service accommodate the needs of expectant and post-natal mothers both as staff and service users? Can your service treat staff and patients with dignity and respect in relation to pregnancy and maternity?				
Race or Ethnicity				
Including Gypsy or Roma people, Irish people, those of mixed heritage, asylum seekers and refugees What training does staff have to respond to the cultural needs of different ethnic groups? What arrangements are in place to communicate with people who do not have English as a first language?				
Religion or Belief				
Including humanists and non-believers Is there easy access to a prayer or quiet room to your service delivery area? When organising events – Do you take necessary steps to make sure that spiritual requirements are met?				
Sexual Orientation				
Including gay men, lesbians and bisexual people Does your service use visual images that could be people from any background or are the images mainly heterosexual couples? Does staff in your workplace feel comfortable about being 'out' or would office culture make them feel this might not be a good idea?				

Transgender or Gender Reassignment				
This will include people who are in the process of or in a care pathway changing from one gender to another Have you considered the possible needs of transgender staff and service users in the development of your proposal or service?				
Human Rights				
Affecting someone's right to Life, Dignity and Respect? Caring for other people or protecting them from danger? The detention of an individual inadvertently or placing someone in a humiliating situation or position?				
If a negative or disproportionate impact has been identified in any of the key areas would this difference be illegal / unlawful? I.e., Would it be discriminatory under anti-discrimination legislation. (The Equality Act 2010, Human Rights Act 1998)				
	Yes	No		
What do you consider the level of negative impact to be?	High Impact	Medium Impact	Low Impact	No Impact
If the impact could be discriminatory in law, please contact the Equality and Diversity Lead immediately to determine the next course of action. If the negative impact is high a Full Equality Analysis will be required.				
If you are unsure how to answer the above questions, or if you have assessed the impact as medium, please seek further guidance from the Equality and Diversity Lead before proceeding.				
If the proposal does not have a negative impact or the impact is considered low, reasonable or justifiable, then please complete the rest of the form below with any required redial actions, and forward to the Equality and Diversity Lead .				
Action Planning:				
How could you minimise or remove any negative impact identified even if this is of low significance?				
How will any impact or planned actions be monitored and reviewed?				

How will you promote equal opportunity and advance equality by sharing good practice to have a positive impact other people as a result of their personal protected characteristic.

Appendix 2

Definitions and Descriptions

What is a Harmful Substance?

- Any material or substance with the potential to cause illness or injury to people who come into contact with it
- A substance may be hazardous because it is explosive, flammable, harmful, irritant, corrosive, toxic, produces a chemical reaction or an allergic reaction

Where are Harmful Substances?

- Used directly in the work process, e.g., Alcoholic Hand Gel (e.g., spiragel, paints & thinners, solvents, cleaning agents, weed killers)
- Generated during the work process, e.g., Wood dust, gases, fumes
- Naturally occurring substances, e.g., Wood dust, silica, asbestos, latex
- Biological Agents, e.g., Spores, bacteria, viruses, molds, fungus

Harmful Effects

- Cancer
- Asthma
- Lung disease
- Skin disease - dermatitis
- Burns
- Irritation – skin, eyes, lungs
- Sensitisation
- Infectious diseases - hepatitis
- Neurological damage – lead, mercury
- Birth defects
- Impaired fertility

Routes of Entry into the Body

- Inhalation – through nose or mouth
- Ingestion – Food/Drink
- Absorption – Skin/Cuts
- Injection – either medical, accident or deliberate.

Appendix 3

8 Steps to COSHH Assessments

Step 1	Assess the risks	Carry out an assessment of the risks to health from hazardous substances used in or created by your workplace activities. This will include creating a COSHH Inventory (Appendix 4)
Step 2	Decide what precautions are needed	Your employees must not carry out work without first considering the risks and the necessary precautions, and what else you need to do to comply with COSHH such as relevant training.
Step 3	Prevent or adequately control exposure	You must prevent your employees being exposed to hazardous substances. Where preventing exposure is not reasonably practicable, then you must adequately control it.
Step 4	Ensure that control measures are used and maintained	Ensure that control measures are used and maintained properly and that safety procedures are followed.
Step 5	Monitor the exposure	Monitor the exposure of employees to hazardous substances, if necessary.
Step 6	Carry out appropriate health Surveillance	Carry out appropriate health surveillance where your assessment has shown this is necessary or where COSHH sets out specific requirements.
Step 7	Prepare plans and procedures to deal with accidents, incidents and emergencies	Prepare plans and procedures to deal with accidents, incidents and emergencies involving hazardous substances, where necessary.
Step 8	Ensure employees are properly informed, trained and supervised	Provide employees with suitable and sufficient information, instruction and training.

Appendix 5

Golden Rules for COSHH Safety

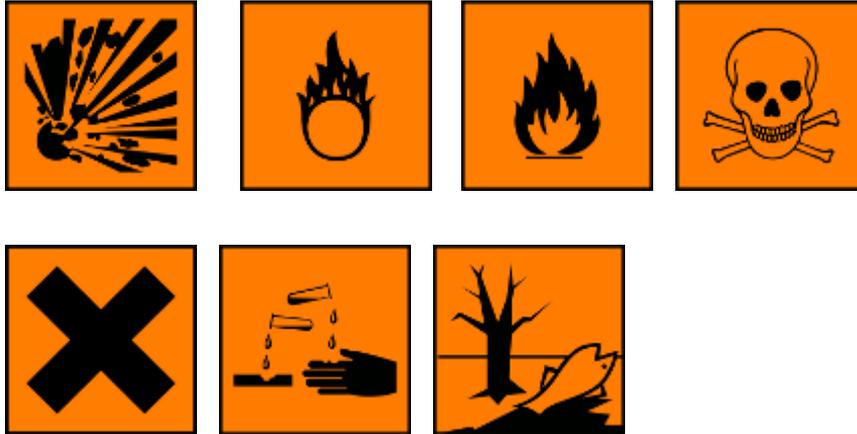
- Always check labels before use (see Appendix 6 for changes to hazard symbols)
- Only store in suitable and labelled original containers.
- Do not decanter into unsuitable containers
- Store chemicals in a secure area (where required)
- Never mix chemicals.
- Always wear PPE/RPE correctly.
- Clean up spillages immediately. Use appropriate spills kit
- Follow Safe Systems of Work
- Report any symptoms of ill health immediately
- Report any operational or equipment failures

Appendix 6

Hazard symbols and hazard pictograms

You are probably already familiar with the current CHIP hazard symbols that appear on some chemical labels:

Old CHIP symbols



These symbols help us to know that the chemicals we are using might be explosive, oxidising, highly or extremely flammable, (very) toxic, harmful, irritant, corrosive, or dangerous for the environment. One or more might appear on a single chemical.

These symbols are being replaced by others because the law on chemical classification and labelling has recently changed.

The new symbols, called pictograms, show similar images just a slightly different shape and colour.

New CLP symbols



You'll see that the harmful symbol is missing. This has been replaced by the exclamation mark pictogram:



This pictogram will refer to less serious health hazards such as skin irritancy / sensitisation.



This pictogram reflects serious longer term health hazards such as carcinogenicity and respiratory sensitisation.



This pictogram means "Contains gas under pressure"



COSHH Risk Assessment

1. SUBSTANCE INFORMATION

Substance/material: _____ Trade name: _____

What is the substance used for?
(E.g., cleaning floors, protective coating, etc.)

What are the hazardous ingredients/chemicals in the substance? (List below)

Do any of the chemicals have a:
Workplace Exposure Limit? (State opposite)

Is the substance: (Check for any 'CLP' square on the product data sheet or packaging.)

<input checked="" type="checkbox"/>							<input checked="" type="checkbox"/>		
Flammable	Gas under pressure	Oxidising	Explosive	Acute Toxicity	Serious health hazard	Corrosive	Health hazard/ Hazardous to the ozone layer	Hazardous to the environment	Not classified as Hazardous

Is the substance hazardous to health when?
 In contact with skin? Breathed in? Other (Specify below)
 In contact with eyes? Swallowed?

2. USE OF SUBSTANCE

How should the substance be used?
(E.g., diluted in water, applied with a brush, sprayed, etc.)

How much is used every week (State quantity in litres or kilos as appropriate.)

Who is exposed to the substance?
(E.g., those using it, service users, general public etc.)

Does the substance present additional risks to certain groups or individuals?
(E.g., young people, expectant mothers.)

3. CONTROL MEASURES

Can a less hazardous substance be used to do the same job? 10.2 Yes No
(If you don't know, please contact your supplier for further information.)

What controls are required for this substance, other than Personal Protective Equipment (PPE)?
(E.g., well ventilated areas, not in spray/mist form, mechanical ventilation, authorised persons only.)

Is any Personal Protective Equipment (PPE) required when using the substance?



Eye protection? (State type required)



Gloves? (State type required)



Overalls/clothing? (State type required)



Mask/respirator? (State type required)



Other? (State type required)

None

How should the substance be stored? (E.g., locked cupboard, away from other substances, etc.)

Have persons using this substance been provided with information or training on its use? Yes
(As a minimum ensure a copy of this assessment is in a known and readily accessible location.) No

NOTE: To be completed by Ward / Team Manager once instruction / training has been provided

4. OTHER PRECAUTIONS AND EMERGENCY PROCEDURES

Spillages: How should an accidental release/spillage of this substance be dealt with?

First aid: What actions should be taken if the substance is:

a) Swallowed?

b) In contact with eyes?

c) In contact with skin?

d) Inhaled?

e) Other? (Please specify.)

Fire precautions: What actions should be taken in the event of fires involving this substance?

None in normal use and within storage limits



WATER



FOAM



POWDER



CARBON
DIOXIDE

Chemical reactions: Is there any other substance that this substance must not come into contact with?

Disposal: How should the substance be disposed of (or not disposed of)?

Health surveillance: Do staff using the substance require any health surveillance?

5. ASSESSMENT OF RISK

Are all the controls detailed above currently in place? Yes No

NOTE: To be completed by Ward / Team Manager once controls are in place

If these controls are not in place, or additional controls are required, state action to be taken. Please note - COSHH substances must NOT be used if adequate control measures are not in place.

Remedial actions required	Date for completion
•	

Are hazards to health adequately controlled with all control measures in place? Yes No

NOTE: To be completed by Ward / Team Manager once controls are in place

Assessor(s) name:	3.1.1 Assessor(s) signature:	3.1.2 Date:
The Manager should sign below to show that the assessment is a correct and reasonable reflection of the hazards and of the control measures and actions required.		
Manager's name: <i>NOTE: To be completed by Ward / Team Manager <u>once</u> controls are in place</i>	3.1.3 Manager's signature:	3.1.4 Date:
Remedial actions complete: (Date)	3.1.5 Manager's signature:	3.1.6 Reviewed on: (Date)

A copy of the product safety data sheet must be attached to this assessment.

Appendix 8

Directions for Completing the COSHH Risk Assessment Form

The form used in Appendix 7 is intended for local use for undertaking assessments on work with hazardous or dangerous materials which are not covered by a standardised assessment.

COSHH assessments should only be undertaken by staff who feel confident to do so and have had prior experience developing assessments and have access to relevant information on the materials involved and their use.

Before completing the form, it is important to understand that an assessment in the use of a particular product is **only required** where the substance is 'dangerous' or "hazardous".

To assess firstly whether a product is hazardous it will be necessary to refer to the safety data sheet (SDS). Moreover, it is advisable to refer initially to Section 15 – 'Regulatory Information' on the SDS in this respect.

The 'Regulatory Information' section should indicate whether the product is classified as hazardous by nature of being, very toxic, toxic, harmful, corrosive or irritant.

In addition, the SDS should indicate whether the product contains, or produces, a substance issued with a Workplace Exposure Limit (WEL). If this is the case, the product will also be hazardous and requires a COSHH assessment to be undertaken.

Where the product does not fit into one of the above categories and does not present any comparable hazard by the nature of its use, then there is no need to continue with the completion of the COSHH assessment. In a similar way, where it is identified that the current use of a particular hazardous product will immediately be stopped, or substituted with a non-hazardous alternative, then a recorded assessment will also not be required.

The directions below provide a guide to completing the standard COSHH Risk Assessment Form

1. Title, Department, Data Sheet, Supplier

Obtain the SDS relating to the product used, and enter the name of the product, department where it is used (and premises name) date of the SDS. Provide the supplier details, name and address and contact phone number for the supplier.

2. COSHH and Substances

Enter the name(s) of the components, concentration of the hazardous substance or substance(s) contained in the mixture (%) and the workplace exposure limit. State the WEL of each component (where stated on the data sheet) and whether these exposure limits are likely to be exceeded.

3. COSHH Symbols Hazard and Dangers

Detail the hazards identified from the Hazard and Precautionary Statements or Risk Phrases and Safety Phrases noted on the SDS. Identify which COSHH symbols are applicable once again based on the information provided by the SDS. Note any hazard statements, precautionary

4. Circumstances of Use and Potential for Exposure – describe the following:

- How the product is handled and used – all details that are relevant to exposure to the substance(s).
- What quantities are used in the local application(s).

- The frequency and duration of exposure – e.g., used for approximately 15 minutes twice daily.
- The environment of use – e.g., restricted space, in a well-ventilated area in a containment system – or ventilated cabinet.
- Who uses the product, number of persons and relevant details – e.g., male/female, trainee, young person, new or expectant mother and whether they have received training in the handling and use of the product?
- The temperature of the environment – this will only normally be relevant for volatile solvents where the temperature will affect the amount of vapour given off.
- Whether dust is released from the handling and use of the product.
- Elimination and Substitution – can the mixture/substance be substituted?
- Describe, where relevant, a substance or preparation that is less hazardous and that can be substituted for the current substance/preparation. Furthermore, where relevant describe how the process may be changed so that the hazardous substance is no longer used
- Storage and spillage – any special requirements for storage
- The procedure and measures provided to deal with a spillage (where relevant).
- Personal protection – enter details of the personal protective equipment required when handling and using the substance. Be specific about exactly what is required e.g., safety goggles or visor to BSEN 166 and PVC gloves and dust respirator to EN149 and FFP2S as standard protection.
- Fire precautions – such as avoidance of ignition, anti-static precautions, control of spillages, fire resistant storage, ventilation and the use of explosion protected electrical equipment and the provision of suitable fire extinguishing media.
- Other controls – the control measures that are required given the circumstances of use and observing hierarchy of control principles – e.g., must be used in a ventilated cabinet, or adequate general ventilation must be provided. Details of the hygiene practices that must be followed. Any training requirements for the person handling the substance/preparation. Cross reference should be made to any safe systems of work and other assessments that are relevant for the task – e.g., working in a confined space.
- Monitoring and health surveillance – state whether exposure monitoring is or is not required to check that exposure limits are not exceeded. State whether health surveillance is or is not appropriate – e.g., skin inspection for dermatitis, spirometry. Where it is considered that health surveillance may be required, this should be discussed in consultation with the employee's line manager and occupational health.

5. Control Measures

Identify the required Personal Protective Equipment (PPE) from the blue symbols listed. Make any qualification with regards to control measures in the box located above the PPE symbols – e.g., “goggles are only required when clearing up spillages” of a particular material.

6. Emergency First Aid Arrangements.

State the emergency first aid precautions that are required, including access to fresh running water, or eye wash where necessary. Include all relevant routes of exposure, i.e., eye, skin, ingestion, inhalation.

7. Storage Arrangements

Identify within this section the requirements for storage of the substance in accordance with the SDS. Consider requirements for temperature, the use of bunded storage areas – particularly for liquids, and the stacking of chemical containers. Confirm the arrangements for the storage of substances such as acids and alkalis which need to be segregated. Confirm the maximum quantities of substances to be stored at any one time. Ordering and delivery of substances should also be taken into consideration as part of the assessment.

8. Fire Fighting Precautions and Measures

Using information provided on the SDS, decide what type of extinguishing media needs to be used for emergency firefighting. The additional information for firefighting gives the opportunity to record any other concerns that may be raised should the substance be subject to fire, or a fire in the vicinity of its usage, or storage area. Information may include the requirement for the use of breathing apparatus due to the toxic nature of fumes released as a result of fire, how combustible the substance is, or a particular methodology that may be required to be adopted by the fire and rescue service.

9. Disposal

Chemical substances – particularly of a complex nature cannot be merely disposed of or washed down the drain. In most cases, the services of a specialist waste contractor will be required to remove hazardous substances that have resulted from a spillage (may also be in a plastic bag or container with an inert absorbent media), or substances that are no longer required for use, or have passed their expiry date. Any contractor that is appointed to remove hazardous waste must be registered with the Environment Agency.

10. Confirmation of Control Measures

Line manager to review the COSHH risk assessment to confirm that all details are correct, a copy of the SDS is available with the COSHH risk assessment, and that all control measures identified within the COSHH risk assessment are being fully implemented in respect of transport, storage, delivery, use and disposal of the substance.

