










## COSHH ASSESSMENT FORM

EHS/F.003/A/19

Assessor- <b>Ann Maria Antony</b>	Employer/Supervisor- <b>SHIELD ME</b>		
Assessment Date- <b>25.03.2020</b>	Dates reviewed-		
	<b>01.07.2020</b>		
<b>HAZARDS IDENTIFIED</b>			
<b>Substance<sup>(5)</sup></b>	<b>Hazardous Properties<sup>(6)</sup></b>	<b>Quantity<sup>(7)</sup></b>	
Shieldme Disinfectant & Sanitizer	Nil (Not harmful to humans and animals)	*As per the project requirement	

<b>Additional information</b>	
• Workplace Exposure Limits:	
 <input type="checkbox"/>	 <input type="checkbox"/>
 <input type="checkbox"/>	 <input type="checkbox"/>
 <input type="checkbox"/>	 <input type="checkbox"/>
 <input type="checkbox"/>	
<b>Emergency Procedures</b>	
<b>No critical emergency procedures required.</b>	
<ul style="list-style-type: none"><li>• If inhaled, move to fresh air - <b>only if any irritation is felt</b>. Get medical attention if symptoms persist.</li><li>• Any irritation caused due to direct eye contact flush with water. Get medical attention if symptoms persist.</li><li>• In case of gastric distress due to ingestion, drink plenty of water. Get medical attention if symptoms persist.</li><li>• No significant risk for skin contact with the product</li><li>• Product is not flammable – no specific firefighting measures required</li></ul>	
<b>What will the chemical be used for?</b>	
Disinfection and Sanitization	
<b>Who may be exposed?</b>	
<ul style="list-style-type: none"><li>• Personnel carrying out fumigation</li><li>• People residing in the fumigating area</li></ul>	

## METHODS OF PREVENTION OR CONTROL OF EXPOSURE

<b>1. Engineering controls required<sup>(11)</sup></b>  <p style="text-align: center; color: #0070c0;">Not Required</p>	<b>2. Access control<sup>(12)</sup></b>  <p style="text-align: center; color: #0070c0;">Recommended entry restricted authorized personnel only</p>
<b>3. Special procedures<sup>(13)</sup></b>  <p style="color: #0070c0;">Avoid prolonged contact with the skin</p>	<b>4. Approved PPE<sup>(14)</sup></b> ( Note: PPE is to be used as the 'last resort' when controlling exposure)  <ul style="list-style-type: none"> <li>Disposable latex gloves</li> <li>Respirator Mask</li> <li>Mono goggles</li> <li>Disposable coverall</li> </ul>

**Disposal Procedures<sup>(15)</sup>** (Give details of waste disposal procedure to be used)  
  

- Are chemicals with risk phrases R50-R59 or hazard statements H400 – H413 (environmental Hazards) involved?

Yes / No

No Specific requirements. Disposal as per the local regulations.

**TRAINING REQUIREMENTS<sup>(16)</sup>**  
  

- How to handle the fogger machine
- Safe handling of disinfectant
- Waste Management training

**HANDLING AND STORAGE REQUIREMENTS<sup>(17)</sup>**  
  

**Handling:** As per the procedure

**Storage:** To be stored between +1°C and +49 °C

## ASSESSMENT OF RISK USING CONTROLS DETAILED ABOVE

### Authorisation by Employer/Supervisor<sup>19</sup>

I confirm that I have considered and understand the chemical to be used and the associated hazards. I am satisfied that all of the hazards have been identified and that the control measures to be followed will reduce the risks to as low a level as reasonably practicable.

Print name: **SHIELDME**

Signed:

Date: **01.07.2020**

**Declaration by Employer/Supervisor** <sup>(20)</sup>

I confirm that I have read this COSHH Assessment and that I understand the hazards and risks involved and will follow all of the safety procedures stated.

**Declaration by employee** <sup>(20)</sup>

I confirm that the employee who has signed below is competent to undertake the work. My counter-signature indicates that I am happy for the work to proceed.

Name (please print)	Signed	PI countersignature	Date
BRIAN MULLEN			01.07.2020

## **SHIELDME Guidance notes for COSHH assessment form**

This form must be completed for every hazardous chemical used within the company. The form must be signed by the employee and their employer/supervisor before the work starts.

- (1) **Assessor:** Insert the name of the person doing this assessment
- (2) **Employer/Supervisor** Insert the name of **the Employer/Supervisor**.
- (3) **Assessment Date:** Insert the date that the assessment form is completed. The assessment is valid for a maximum of 1 year. It must be reviewed after 1 year, or if a significant change occurs (change of lab, pregnancy, etc).
- (4) **Dates reviewed:** all COSHH assessments must be reviewed annually (as a minimum). The review date should be entered here, and signed by the assessor to confirm that the assessment is still valid.
- (5) **Substance:** insert name of the chemical to be used. NB. Biological hazards must not be assessed on this COSHH form.
- (6) **Hazardous properties:** insert details of all of the hazardous properties of the chemical – egg. Flammable, explosive, carcinogen, harmful by inhalation, etc).
- (7) **Quantity:** insert quantity to be used (mg, g, ml, etc)
- (8) **Additional information:** Include details of any additional information, including any workplace exposure limits. Detail fully all R/S phrases and H and P statements (it is not sufficient to simply stat R45, full details are needed).
- (9) **Emergency procedures:** provide full details of emergency procedures to be employed following contact with the chemical (skin contact, eye contact, inhalation and ingestion) – such as use of diphotrine, administration of emergency oxygen, etc. Also include details of emergency spill procedures.
- (10) **What will the chemical be used for? Who may be exposed? :** Insert title of experiment or experimental procedure that the chemical is to be used in, and detail who may be exposed (individual worker? People in close proximity? Cleaners? Engineers?).

### **Methods of prevention or control of exposure**

Sections 11-14 detail the methods for preventing or controlling exposure to the chemical. The COSHH hierarchy of control measures should be used when determining the methods to be used to prevent/control exposure, with engineering and group control measures being employed in preference to individual measures (such as individual PPE).

- (11) **Engineering controls** required: identify the control measures necessary to prevent/control exposure, such as use of a fume cupboard, LEV or blast screen, by circling/ticking/highlighting the appropriate statement(s).

- (12) **Access control:** In order to prevent/control exposure, is it necessary to restrict access to competent personnel? Are special containment facilities required? Please circle/tick/highlight the appropriate statement(s).
- (13) **Special procedures:** please identify any special procedures necessary to prevent/control exposure. This might include the need for an SOP to be developed, or for local rules to be drawn up. Please circle/tick/highlight the appropriate statement(s).
- (14) **Approved PPE:** PPE is to be used as the 'last resort' when preventing/ controlling exposure. Please detail the PPE to be used when handling the chemical. Please circle/tick/highlight the appropriate statement(s) and include details of the type of gloves, etc to be used.
- (15) **Disposal procedures:** Identify whether the chemical is an environmental hazard; Detail fully how the chemical waste is to be disposed of (down sink, by specialist contractor, etc)
- (16) **Training requirements:** detail any specialised training requirements that must be met before the work can begin – eg. Attendance on a gas safety course, etc).
- (17) **Handling and storage requirements:** Note any special requirements e.g. ventilation, chemical incompatibility, flash point, etc.
- (18) **Assessment of risk using controls detailed above:** Are the hazards/risks suitably controlled, using the control measures detailed above? Provide details; If not controlled, state the further actions required, eg. Requirement for a standard operating procedure (SOP), etc.
- (19) **Authorisation by Employer/Supervisor:** the employer/supervisor must sign and date the assessment, to confirm that they have considered and understand the chemical to be used and the associated hazards, and that they are satisfied that all of the hazards have been identified and that the control measures to be followed will reduce the risks to as low a level as reasonably practicable.
- (20) **Declaration by employee:** the employee must sign and date the assessment to confirm that they have read the COSHH Assessment, understand the hazards and risks involved and will follow all of the safety procedures stated.
- (21) **Declaration by Employer/Supervisor:** the employer/supervisor must sign and date the assessment, to confirm that the researcher is competent to undertake the work.