

STEP 1 – ASSESSMENT DETAILS

Hazard Control Ref:	CCG-010	Supplier:
Issue Number:	05	Finish Wellcroft House, Wellcroft Road Slough Berkshire SL1 4AQ
Date Completed:	25 March 2024	
Employee Participation and Inv	Jorge Garcia	
Re-Assessment Due*:	Two years from above date.	
Assessment Completed By:	Health & Safety Manager	Emergency Telephone Number:
		0845 769 7079

STEP 2– HAZARDS

Explosive	Highly Flammable	Oxidising	Corrosive	Toxic	Dangerous for the Environment	Harmful/Irritant	Serious Longer Term Health Hazards	Contains Gas under Pressure
								
						✓		

STEP 3 – PRODUCT SUMMARY

Product: Name:	Dishwasher Rinse Aid	Is There a Maximum Exposure Limit (MEL) or Occupation Exposure Limits (OEL):	N/A
Container Size:	400 ml	Is There a Safer Alternative?	No
Physical Properties:	Liquid Clear/Blue	Emergency Fire Procedures:	NON-FLAMMABLE
Product Use:	Dishwasher Rinse Aid	Typical Duration of Use:	1 – 2 hours
Hazard Classification:	Serious eye damage/ eye irritation- Category 2A	Typical Method of Use:	As per manufacturer's instructions. After use rinse and dry hands thoroughly.

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Storage:	Keep in cool, dry, ventilated storage and closed containers. Keep in original container.	Dilution Ration:	As per manufacturer's instructions.
Spillage/Accidental Release:	Small quantities may be flushed to drains with plenty of water. Large spill: absorb in vermiculite, dry sand or earth and place into containers. Send for disposal by approved waste contractor.	Additional information:	

STEP 4 – TOXICOLOGICAL INFORMATION

EYES:	Causes serious eye irritation	INGESTION:	No known significant effects or critical hazards
SKIN:	No known significant effects or critical hazards	INHALATION:	No known significant effects or critical hazards

STEP 5 – RISK ASSESSMENT (Likelihood X Severity = Risk)

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CATEGORY	HAZARD	POTENTIAL HARM	Likelihood	Severity	Risk Before Control	Risk After Control	COMMENTS
STORAGE	UNLOCKED STORES / OPEN BOTTLES / SPILLAGES/ ACCIDENTAL MIXING	Contact / Absorption / Inhalation / Ingestion Operatives / Occupiers/visitors	2	3	6	3	H&S Induction training and awareness Lock stores and cupboards Reporting and monitoring in place Toolbox talk programme in place Competent supervision Trained operatives
HANDLING / USE	Mistakenly touching eyes with exposed hands	Eye irritation	2	2	4	2	Induction form signed, Competent Supervision Product Guides & Technical info available on Toolbox talks and safety briefings to highlight awareness. Short use/duration, reporting any abnormalities No eating or drinking in force and supervised Good hygiene practices in place
OVERALL RISK RATING BEFORE CONTROL:			Very Low	Low	Medium	High	COMMENTS
				✓			
OVERALL RISK RATING AFTER CONTROL:			Very Low	Low	Medium	High	
			✓				

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LIKELIHOOD 1. IMPROBABLE OCCURRENCE 2. REMOTED OCCURRENCE 3. REASONABLY PROBABLE OCCURRENCE 4. VERY LIKELY OCCURRENCE 5. ALMOST CERTAIN OCCURRENCE	SEVERITY 1. <u>SLIGHT</u> : NO INJURY or Injury requiring first Aid treatment 2. <u>MINOR</u> : INJURY requiring medical treatment with absence from 3 days to 3 weeks 3. <u>MODERATE</u> : Injury illness resulting in temporary disability (eg. fractures) and absence over 3 weeks 4. <u>SERIOUS</u> : Severe injury or permanent disability (e.g loss of limb, sight) property and equipment damage 5. <u>MAJOR</u> : Immediate danger exists, capable of causing death, loss or damage on a wide scale and serious business disruption (e.g. Explosion, fire, structural damage, etc.)	INTERPRETATION 4 and below <u>very Low risk</u> = No further action, but ensure controls are maintained and review 5 to 8 <u>Low risk</u> = Risk can be tolerated or only for the short term. Plan introduction of measures with a defined time period 9 to 15 <u>Medium Risk</u> = Planned and introduce further control measures to mitigate the risk within a time scale 16 and Above = Stop activity and immediate action
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STEP 6 – ADDITIONAL RISK FACTORS

New or Un-Trained Employees	Pregnant Women	Visitors/Contractors/ Members of The Public	Slip Hazards	Unsafe Handling/Storage
✓		✓		✓

STEP 7 – PERSONAL PROTECTIVE EQUIPMENT (PPE) to be used

Personal Protective Equipment to be used										
										
Apron	Face Visor	Goggles	Ear Defenders	Safety Wellingtons	Safety Boots	Overall	Fume/Vapour Mask	Dust Mask	Rubber Gloves	Protective Gloves
		✓							✓	

STEP 8 – PROCEDURES TO BE CARRIED OUT BEFORE STARTING TASK

Read C.O.S.H.H. Assessment	Dilute Chemicals to Manufacturers Instructions	Trained Employees with Appropriate PPE Only to Use This Product.	Place Warning Signs at Access/Egress Point
✓			

STEP 9 – EMERGENCY, FIRST AID & DISPOSAL MEASURES

EYES:	Promptly wash eyes with plenty of water while lifting the eye lids. Check for and remove any contact lenses. Continue to rinse for at least 10 minutes. Get medical attention.	INGESTION:	Do not induce vomiting! Drink a few glasses of water or milk. Get medical attention if any discomfort continues.
SKIN:	Flush contaminated skin with plenty of water. Remove contaminated clothing and shoes. Get medical attention if symptoms occur.	INHALATION:	N/A Inhalation unlikely
DISPOSAL ARRANGEMENTS:			
Dispose of in accordance with all applicable local and national regulations.			

STEP 10 – HEALTH SURVEILLANCE & MONITORING

Details/results of health surveillance:	Not applicable
Details/results of monitoring of exposure:	Not applicable
Arrangements for monitoring compliance (including maintenance of control measures):	• Ongoing training • Tool-box-talks • Presentations (via tablets on-site or DVD at offices) • Quality & Health/Safety site inspections • Auditing process • Management monitoring

STEP 11 – ASSESSMENT FOLLOW UP & REVIEW

Following this assessment:	Review of assessment:
Employees/workers must have been informed of: • The names of substances they may be exposed to; • The risks to health created by exposure; • Any relevant occupational exposure standard, maximum exposure limit or similar self-imposed (in-house) work standard that applies to the substance; • Any information contained on any Safety Data Sheet which relates to the substance; • The significant findings of this assessment; • What precautions to take to protect themselves and others; • The results of any health surveillance; and • The results of any monitoring of exposure.	This assessment must be reviewed/updated : • As part of planned review • If alternative cleaning product/substances are used • If alternative methods or processes are used • Upon client request • Changes to the COSHH, and other relevant, regulations • After consultation with workers or other interested parties • After an accident, incident, near miss or dangerous occurrence