

COSHH ASSESSMENT Winterhalter B12N Rinse Aid



STEP 1 – ASSESSMENT DETAILS

Hazard Control Ref:	CCG-161	Supplier:
Issue Number:	01	Winterhalter Ltd Winterhalter House Roebuck Way Knowlhill Milton Keynes MK5 8WH Tel : 01908 359000 Fax : 01908 359060 chemicals@winterhalter.co.uk
Date Completed:	2 June 2026	
Employee Participation and Inv.	Dina Oliveria	
Re-Assessment Due*:	Two years from above date.	
Assessment Completed By:	Health & Safety Manager	Emergency Telephone Number:
		NHS Medical toxicology information service: 111 (24 hours)
		Emergency: 999

STEP 2 – PROCEDURES BEFORE STARTING TASK

Read C.O.S.H.H. Assessment	Training and Knowledge Company safety Site -induction form: F039	Trained Employees with Appropriate PPE Only to Use This Product.	Perform Visual Check of Equipment and Area to be cleaned	Place Warning Signs at Access/Egress Point
✓	✓	✓	✓	✓

STEP 3 – PRODUCT SUMMARY

Product: Name:	B12 N Winterhalter Rinse Aid	Symbol:	-
Container Size:	5L	Is There a Safer Alternative?	NA
Physical Properties:	Blue , liquid , pH 6-8	Emergency Fire Procedures:	Use fire-extinguishing media suitable for the surrounding fire. Wear positive-pressure self-contained breathing apparatus
Product Use:	Rinse aid for commercial dishwashers	Typical Duration of Use:	15 mins
Hazard Classification:	NC Not Classified	Typical Method of Use:	Automatic dosing through a commercial dishwasher
Storage:	Store in tightly-closed, original container in a dry, cool and well-ventilated place. Keep only in the original container.	Dilution Ration:	Rinse aid for commercial dishwashers

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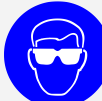
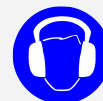


Spillage/Accidental Release:	Dispose of waste to licensed waste disposal site in accordance with the requirements of the local Waste Disposal Authority.	Additional information:	Health Effects- May cause mild eye irritation. Prolonged or repeated skin contact may cause mild irritation. Ingestion may cause discomfort.
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STEP 4 – TOXICOLOGICAL INFORMATION

EYES:	No specific health hazards known.	INGESTION:	No specific health hazards known.
SKIN:	No specific health hazards known.	INHALATION:	No specific health hazards known.

STEP 5 – PERSONAL PROTECTIVE EQUIPMENT (PPE) to be used

Personal Protective Equipment to be used										
										
Apron	Face Visor	Safety Glasses	Ear Defenders	Safety Wellingtons	Safety Boots	Overall	Fume/Vapour Mask	Dust Mask	Rubber Gloves	Protective Gloves EN1149
		✓							✓	

STEP 6 – EMERGENCY, FIRST AID & DISPOSAL MEASURES

EYES:	Remove affected person from source of contamination. Remove any contact lenses and open eyelids wide apart. Continue to rinse for at least 15 minutes and get medical attention. Continue to rinse.	INGESTION:	Never give anything by mouth to an unconscious person. Do not induce vomiting. Rinse mouth thoroughly with water. Get medical attention.
SKIN:	Remove affected person from source of contamination. Remove contaminated clothing. Wash skin thoroughly with soap and water. Get medical attention promptly if symptoms occur after washing.	INHALATION:	Remove affected person from source of contamination. Keep affected person warm and at rest. Get medical attention if any discomfort continues.
DISPOSAL ARRANGEMENTS:			
Dispose of waste to licensed waste disposal site in accordance with the requirements of the local Waste Disposal Authority.			



STEP 7 – RISK ASSESSMENT (Frequency X Severity = Risk)

CATEGORY	HAZARD	POTENTIAL HARM	Likelihood	Severity	Risk before Controls	Risk After Controls	COMMENTS
STORAGE	UNLOCKED STORES / OPEN BOTTLES / SPILLAGES/ ACCIDENTAL MIXING	Contact / Absorption / Inhalation / Ingestion Operatives / Occupiers / visitors	3	3	9	4	H&S Induction training and awareness Lock stores and cupboards Reporting and monitoring in place Tollbox talk programme in place Competent supervision Trained operatives / PPE
HANDLING	Inhalation, Ingestion, Absorption, Direct entry Contact	May result in skin redness or mild irritation Eye Irritation or damage	3	3	9	2	Relevant PPE available, Induction form signed, competent Supervision Product Guides & Technical info available on site as wall charts (Pictograms) Toolbox talks and safety briefings to highlight awareness.
DURING USE	Inhalation, Ingestion, Absorption, Direct entry Contact, poor ventilation	skin contact exposure may result in skin redness / eye Irritation	3	2	6	4	Short use / duration, reporting any abnormalities No eating or drinking in force and supervised Suitable PPE will be provided. Toolbox talks and safety briefings to highlight awareness H&S Site Induction and refresh training in place
OVERALL RISK RATING BEFORE CONTROL: 8			Very Low	Low	Medium	High	COMMENTS
					✓		
OVERALL RISK RATING AFTER CONTROL: 3.3			Very Low	Low	Medium	High	
			✓				



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 exist, 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 very Low risk = No further action, but ensure controls are maintained and review 5 to 8 Low risk = Risk Can be tolerated or for only short term. Plan introduction of measures with a defined time period 9 to 15 Medium Risk = 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 8 – ADDITIONAL RISK FACTORS

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

STEP 9 – HEALTH SURVEILLANCE & MONITORING

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
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STEP 10 – 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

