

Hazardous Substances Assessment St Chad's C.E. Primary School

1. Activity / role to be assessed	Hand Sanitizing	2. Date of risk assessment	1.9.2020
3. Person undertaking assessment	Miss Clarke	4. Location of assessment	Shared Area

Use the Material Safety Data Sheet for the substance to help complete the assessment. Substances which are similar and do not present different hazards may be grouped together for assessment. (Frequency of use = Daily-**D**, Weekly-**W**, Rarely-**R**.) (Entry Route - Inhalation = **I**, Direct contact = **DC**, Ingestion = **ING**)

Substance	Used for:	Use e D, W, R	Hazard	Entry route I, DC, ING	What is the potential harm & to whom?	W.E.L? Y/N (note 6)	Current controls	Risk rating note 5	Further action to reduce risk
1 Hand Sanitizer 70-80% Alcohol	Health Services/ Disinfectant Hand sanitizer is used <ul style="list-style-type: none"> • after any activity or contact that contaminates the hands including using the toilet, coughing, sneezing, handling waste etc. even if gloves have been worn. • Before and after personal contact with another person • Following cleaning activities 	D	Flammable Caution - Irritant	I,DC, ING	All Staff, Visitors/public, pupils. <ul style="list-style-type: none"> • Flammable will cause burns if it encounters a flame. • Slipping on spillages • Can cause Skin / eye Irritation. • Risk of inhalation of fumes. 		<ul style="list-style-type: none"> • Always follow manufacture instructions prior to use. • Avoid contact with clothing • Keep away from heat & ignition sources. • Store in an appropriate container & caps are on tightly. • Store in an appropriate location • Only use on visibly clean hands. • Do not use on hands with cuts and grazes. • Hand sanitizer should be used in the same way as 	LOW	<ul style="list-style-type: none"> • Use older stock first. • Regularly check storage area ensuring that containers are still viable. • If skin irritation occurs, wash with soap and plenty of water. • If large amounts ingested give large amount of water, seek medical help. • Flush eyes with water if irritation persists then seek medical attention. • Follow first aid protocols • If used frequently, application of hand cream will help

	<ul style="list-style-type: none"> • Before handling food • Before eating, drinking or smoking • Before taking medication • Before inserting contact lenses • After contact with body fluids • After removing gloves <p>Alcohol/antibacterial hand gels and rubs are a practical alternative to soap and water where staff do not have immediate access to suitable washing facilities.</p>						<p>washing with soap and water.</p> <ul style="list-style-type: none"> • Follow the effective hand washing regime. 		<p>keep skin moisturised.</p>
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5. Risk rating

Identify the level of toxicity of the substance across the top of the table, then identify the exposure level (side of table) and work across the table to meet the level of toxicity identified. This is the risk rating. Exposure is the level of the substance to which people are exposed.

Frequency of use and entry routes must be considered to determine the level of exposure.

Risk of process/substance

	Toxicity □	Low - Corrosive, irritant, harmful, Category 1 pathogen	Toxic - toxic, assigned WEL, category 3 pathogen	Very toxic - very toxic, carcinogens, sensitisers, assigned a WEL cat 3 or 4 pathogen
Exposure □	High	Medium	High	High
	Significant	Low	Medium	High
	Limited	Low	Low	Medium

Risk rating	Description	Action Priority
High	Exposure is likely or very likely resulting in serious health effects.	Urgent action required to reduce the risk
Medium	Exposure is possible and could result in harm to health	Medium
Low	Exposure is limited and potential risk to health low where control measures are in place.	Low priority.

6. Workplace Exposure Limit (WEL). Where workplace exposure limits are in place for a substance it may be necessary to undertake monitoring to ensure the limits are not exceeded.

Substance	WEL	What monitoring of actual exposure is required? Attach plan for monitoring.
NA		

7. Training and instruction

What training and instruction is required?	Who requires training?(groups or individuals where necessary)	Frequency of training
None		

8. Health Surveillance

It may be necessary to discuss the nature and frequency of Health Surveillance with the Occupational Health Unit

What health surveillance is necessary?	Who will carry out health surveillance?	Frequency of surveillance?
None		

9. Additional Hazards

Tick if any substance assessed impacts any of the areas below:

Manual Handling	Fire	Individual person such as Young Person, New/ Expectant Mother or Service User

If any are ticked a specific risk assessment must be completed for that hazard.

10. Further Action - Indicate any additional action required to reduce/eliminate risk and time scale for implementation**11. Assessment**

Signature of Assessor	Date assessed	Methods of communication	Date of communication
S.Clarke	1 Sept 20	Shared area/ Text	1 Sept 20

Review

Date	Reviewed by	Action required	Method of communication	Date of communication

12. Communication and Review

This assessment should be communicated to all employees and relevant persons who may come into contact with the substances/process being assessed. The Safety Data Sheet must be readily available to those involved in the process or using the substance. The assessment must be reviewed at least every 5 years or where circumstances change.