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| Title of Document | Control of Substances Hazardous to Health (COSHH) | | |
| Name of Department | Property & Facilities | | |

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| What type of document is this? | Policy | This sets out instructions for how a particular procedure in Helping Hands is to be routinely carried out | |
| Which Helping Hands SOP/W.I does this document relate to? | N/A | Index number of policy/SOP | N/A |

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| Which Operational Priority/Priorities does this document link to? | Governance Framework | Superior Client Care | People, Performance & Culture | Business Growth |
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| Custodian of document | Group Managing Director | Committee/Group responsible for this document | Policy Committee | |
| Approval date and committee chairperson signature | 27.09.24 | When is its next scheduled review? | 27.09.27 | |

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| Who does it apply to? | All Helping Hands Staff | | | | |
| | Does it apply to bank workers? | Yes | Does it apply to agency staff? | Yes | Does it apply to third party contractors? |

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| Purpose of the Policy | This policy defines Helping Hands approach of the handling of hazardous substances present in the customer's home and Helping Hands premises, and how our employees will manage such substances. To ensure reasonably practicable steps are taken to secure the health and safety of employees who may be exposed to substances hazardous to health. | | | | |
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Summary of Control of Substances Hazardous to Health Policy Requirements

ROLES AND RESPONSIBILITIES

| Role | Responsibility |
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| Senior Leadership & Operations Managers | To monitor compliance and raise awareness, to advocate the importance of health and safety |
| Branch Managers & Live-in Relationship Managers | To ensure carers and team are aware of COSHH risks and working safely as set out in training and this policy To ensure customer support plans account for the hazards presented related to COSHH and risk assessments are developed as required To actively manage the hazardous substances held on Helping Hands premises as described in this policy |
| Quality Director | To ensure safe ways of working regarding care activities account for COSHH risks such as biological hazards, medicines / drugs, infection control and cross-contamination |
| Head of Property & Facilities | To actively manage the hazardous substances held on Helping Hands premises as described in this policy |
| All Staff | To adhere to training and follow Helping Hands policy To manage and report hazards To report accidents |

1.0 Statement of Intent

- 1.1 Ensuring the safety of our customers and colleagues is our top priority, and we ensure this through training, process & supervision. As is the nature of supporting customers in their own homes, we acknowledge our control of such substances may be reduced and so appropriate controls must be implemented.

2.0 Safety Arrangements

2.1 Risk Assessment

- 2.1.1 **Business Level** – A Business level risk assessment is completed centrally which reviews our processes and management of COSHH risks across the business.

- 2.1.2 **Site Specific (Branch / Support office)** – Hazardous substances are inventoried and assessed for hazardous qualities and recommended PPE using freely available Safety Data Sheets. These should be collated from the internet. This is responsibility of the Branch Manager, or Head of Property & Facilities (Support Office).

- 2.1.3 **Customer Specific (Customers Home)** – Managing all of the hazardous products in our customer's home is not always practical or manageable. As a consequence, all products should be considered as hazardous by default in

planning and visually inspected before use. Hazards of note such as particular medicines, chemicals or environment hazards such as tobacco smoke, mould or pollution should be documented, risk-assessed and communicated clearly to those at risk.

2.2 PPE

- 2.2.1 Ample and adequate PPE is provided to all staff at risk, with no restrictions or encouragement on quantity except for that of our duty to reduce waste.
- 2.2.2 Use of PPE for common tasks and customer procedures is detailed in “HHH-POL-058 PPE Policy”
- 2.2.3 The “Recommended PPE Poster” is kept up to date with Government guidance and industry best practice. The current version of the Recommended PPE Poster should be on display in all branches and used by carers.
- 2.2.4 All Branch Managers & Live in Relationship Managers should maintain an adequate stock of;
 - Gloves – Including Latex and Nitrile, in a variety of sizes. Minimum AQL rating 1.5.
 - Aprons
 - Full body Gowns
 - Face Masks (3Ply)
 - Face shields
- 2.2.5 The Head of Property & Facilities will ensure availability of stock through preferred suppliers and monitor the environment for potential supply issues.

2.3 Supervision

- 2.3.1 Correct use of PPE, waste disposal, and safe ways of working is supervised through quarterly direct observations, which are the responsibility of the registered Branch Manager or Live in Relationship Manager and recorded on Access Care Planner.
- 2.3.2 Completion of Direct Observations is monitored at senior leadership level and performance managed accordingly through Quality “Weekly Compliance Table” and monthly dashboard.
- 2.3.3 Branch management of hazardous substances on the premises is supervised through a monthly self-audit which the Branch Manager completes on

Access Care Planner, is visually checked by Area Care Managers on site visits and by the Property & Facilities team when conducting a full branch assessment every 1-2 years (risk dependant).

2.4 Training & Communication

- 2.4.1 All Operations management staff (i.e., ACM, BCM, Care Co, CTP and LIRM) complete COSHH learning modules on the LMS with an annual refresher, as do the Property & Facilities team.
- 2.4.2 Carers complete Skills for Care Standard 13 as part of the care certificate.

3.0 Cleaning Products & Equipment

- 3.1 Products should be visually assessed before use for hazard symbology, and accompanying safety instructions for use. All products must always be used as per manufacturer's instructions, and appropriate PPE used.
- 3.2 Products should be stored appropriately as per manufacturer's instructions –
 - 3.2.1 Stored in secure, cool, dry places away from sunlight, below eye level and away from places of eating and drinking. Specific storage instructions can be found on the products safety data sheet, which can be found online.
 - 3.2.2 Care should be taken regarding vulnerable people in the premises / house such as young, pregnant, disabled or with diminished capacity.
 - 3.2.2.1 This may be difficult in customers' homes where, being sensitive of independence and freedoms, we may suggest to next of kin or customers those hazardous substances be in closed or locked containers.
 - 3.2.2.2 In Helping Hands premises cleaning products should be kept in back of house areas where customers and visitors are not permitted and stored in closed cupboards.
 - 3.2.3 Hazardous products **must never** be decanted, or have labels removed. If a product is found to have been decanted or had the label removed it should not be used.

4.0 Handling Drugs & Medicines

- 4.1 Drugs & Medicines must be kept in original packaging and not distributed into secondary dispensers such as weekly / monthly organiser pill boxes or "Dosset boxes"

- 4.2 Drugs & Medicines must be handled only in accordance with the instructions on the packaging. Instructions must be clear and legible. Where instructions are not clear and legible Helping Hands will seek authorisation of the customer and / or lead contact to contact the pharmacist and request the medication is reissued with correct labelling.
- 4.3 Drugs & Medicines must be within expiry date, and requests to use any expired products should be politely refused and the reported to the appropriate manager.
- 4.4 The customer should also be encouraged to safely dispose of or return any out of date or surplus medicine.
- 4.5 Explicit instruction on the handling of medication is detailed in “HHH-SOP-002 – Medication Management”

5.0 Customer Procedures

- 5.1 All customer care activities are planned and risk assessed with COSHH risks in mind, and appropriate PPE and safe ways of working stipulated by our Quality & Clinical teams.
- 5.2 These procedures are documented in work-instructions, trained, and supervised by competent persons such as Care Training Practitioners, Branch Care Managers / Live-in Relationship Managers and Regional Clinical Leads.

6.0 Handling Biohazardous Waste & Disposal

- 6.1 Hazardous waste should be separated and disposed of correctly and responsibly, taking adequate care for the user transporting the waste, anybody at risk during the transport, and anybody handling the waste after disposal. The safe ways of working are further explained in HHH-SOP-005 “Infection Control”.
- 6.2 Customers may be provided with specific biohazardous disposal such as a sharps disposal box or clinical waste bags / bins. Task specific risk assessment should account for safe handling and disposal of bi-products.
- 6.3 For disposal of sharps specifically, the customer should be brought the sharps bin and encouraged to dispose themselves. Helping Hands staff should avoid handling the equipment. See “HHH-W.I-083 Sharps Injury” for specific guidance on needles.

- 6.4 When transporting other soiled materials / contaminated substances / medicine the waste should be securely bagged (double if needed) to avoid spillage, and external bins used where as default.
- 6.5 Some chemicals require safe disposal, as indicated on the hazard symbols (dead fish pictogram). The safety data sheet for the product will detail what process should be followed. For product disposal in Helping Hands premises the Property & Facilities team should be contacted for support through a competent supplier.

7.0 Environmental Risks

7.1 Smoking

- 7.1.1 Second-hand smoke is extremely harmful through exposure to chemicals such as arsenic, benzene, and formaldehyde. If customers' families or visitors smoke or vape in the presence of a carer, this must be discussed and documented in the support plan at point of assessment. Carers have the right to refuse to be in the same room / home if they do not wish to be exposed to any second-hand smoke.
- 7.1.2 Vaping / use of electronic cigarettes – Whilst research is ongoing into the harmful effects of vaping, it is currently considered lower. However, the aerosol does include toxic substances such as formaldehyde, acrolein and lead which can be harmful through second hand exposure. The following safety controls should still be applied.
- 7.1.3 This section of the policy also applies in all context pipes (including water pipes such as shisha and hookah pipes), cigars and herbal cigarette to other smoking type vapours and substances.
- 7.1.4 Smoking is strictly prohibited in all Helping Hands premises, which should have a designated smoking area away from doors, windows, and access routes.
- 7.1.5 When working in a customer's home where smoking has taken place previously, the area of work should be ventilated as much as possible.

7.2 Asbestos

- 7.2.1 We acknowledge our duty to manage Asbestos as per the Asbestos Regulations 2012 in the premises for which Helping Hands have a duty of responsibility.

- 7.2.2 All Helping Hands premises will be inspected to have presence of Asbestos Containing materials confirmed if present.
- 7.2.3 Where present, the Asbestos Containing Materials will be documented in a report which shall be available to all occupants and visitors in the Branch Health & Safety Folder.
- 7.2.4 Any Asbestos Containing Materials will be controlled as per HSE guidance using competent, accredited third party suppliers.
- 7.2.5 We do not complete works with our internal staff where Asbestos containing materials may be disturbed, including non-licensable works.
- 7.2.6 Further safety arrangements regarding control of contractors can be found in HHH-SOP-007 Control of Contractors.

7.3 Legionella Disease

- 7.3.1 Where disused equipment or dead-end pipes which do not lead to outlets are identified in a Helping Hands premises, a full risk assessment will be conducted by a competent third party and management plan put in place.
- 7.3.2 Where unused outlets are identified in a HH premises such as disused taps, toilets or showers, a process must be implemented to ensure weekly flushing of the outlets on maximum heat to reduce risk of bacteria developing.
- 7.3.3 Where this is required, training and a checklist process will be implemented by the Property Department for branch team members.
- 7.3.4 When risk assessing customers care needs and environment, Branch Managers should be aware of legionella risks which may present in disused parts of the property such as upstairs bathrooms in homes where customers have consolidated to one part of the house, or outside hoses, taps, and hot-tubs / pools. These hazards should be documented in the Environmental Risk Assessment of the customers support plan and avoided.

TRAINING

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| Is training required? | Yes |
| Details of training | Learning Management System module – Control of Substances Hazardous to Health Skill for Care Standard 13 - COSHH |

COMPLIANCE

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| How is compliance with the SOP going to be monitored | Change in regulatory requirement or change in process will be monitored and will prompt a policy review |
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EQUALITY IMPACT ASSESSMENT AND PROCEDURAL INFORMATION

| | Positive / Negative / N/A | Comments |
|--|----------------------------------|---|
| Does the document have a positive or negative impact on one group of people over another on the basis of their: | | |
| • age? | N/A | |
| • disability? | N/A | |
| • gender reassignment? | N/A | |
| • pregnancy and maternity (which includes breastfeeding)? | N/A | |
| • race (including nationality, ethnic or national origins or colour)? | N/A | |
| • marriage and civil partnership? | N/A | |
| • religion or belief? | N/A | |
| • sex? | N/A | |
| • sexual orientation? | N/A | |
| If you have identified any potential impact (including any positive impact which may result in more favourable treatment for one particular group of people over another), are any exceptions valid, legal and/or justifiable? | N/A | |
| If the impact on one of the above groups is likely to be negative: | | |
| • Can the impact be avoided? | NA | |
| • What alternatives are there to achieving the document's aim without the impact? | NA | |
| • Can the impact be reduced by taking different action? | NA | |
| • Is there an impact on staff, client or someone else's privacy? | NA | <i>If yes, privacy impact assessment required</i> |

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| What was the previous version number of this document? | Version 01 |
| Changes since previous version | <p>Expanded scope to include HH premises</p> <p>Changed responsibilities and added expectations for Head of Property regarding support office, and Quality Director regarding safe ways of working.</p> <p>Added section 2.0 - safety arrangements</p> <p>Added section 2.1 - risk assessment</p> <p>Added practical detail on PPE provision in section 2.2</p> <p>Added section 2.3 - supervision</p> <p>Added practical detail on cleaning products & storage in section 3.0</p> <p>Reformatted section 4.0 - handling drugs & medicines</p> <p>Added section 5.0 - customer procedures</p> <p>Added section 6.0 - waste & disposal</p> |

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| | Added section 7.1 - smoking Added section 7.2 - asbestos | |
| Who was involved in developing/reviewing /amending the SOP? | Health, Safety & Fire Officer Senior Compliance Business Partner Clinical Manager Quality Development Lead Operations & Planning Support Manager HSQE Business Partner | |
| How confidential is this document? | Public | Can be shared freely within and outside of Helping Hands |

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| References | Health & Safety at Work etc. Act 1974 Management of Health & Safety at Work Regulations 1999 Control of Substances Hazardous to Health (COSHH) Regulations 2002 Control of Asbestos Regulations 2012 Health Act 2006 |
| Associated Documents | Access System – Accident and Incident Electronic Report Form HHH-W.I-083 – Sharps Injury WI HHH-SOP-005 – Infection Control HHH-SOP-007 – Control of Contractors HHH-SOP-002 – Medication Management |