

COSHH Task Risk Assessment

In the cases of substances hazardous to health generated when natural products are worked on (e.g. wood or stone), or produced as a by-product of the work (e.g. diesel engine exhaust fume, welding by-products and process wastes that may be gases, liquids or dusts) WCC needs to determine the hazardous properties, health effects and exposure patterns before embarking on an assessment. In order to achieve this, the following must be completed by the responsible manager, Headteacher or competent nominated person.

Part 1

To be completed by the responsible manager, Headteacher or competent nominated person

GROUP: Communities	LOCATION/PREMISE: Generic DT Woodwork – general guidance in filling out this form.	
DATE:	ASSESSOR:	COSHH RA no

1. Describe the TASK / JOB including diluting, mixing, brushing, spraying etc.:

List the activities carried out that produce wood dust. Mechanically like:

D&T technicians use the band saw to prepare softwood panels for student projects. General student activities etc.

And manually: manual drills, saws, sanding etc.

You may wish to assess the mechanical production of wood dust separate to the manual tasks that produce it. Plus Cleaning out dust collection bags /systems is a separate risk assessment.

2. Who works with this product (job titles e.g. cleaners):

Teachers, D&T Technicians, Cleaners, students / children

List other people who may be exposed and / or be at increased risk, e.g. visitors, the public, pregnant, asthmatic, vulnerable workers:

Asthma sufferers, other lung conditions, skin conditions

3. List the substances produced / generated by the task and their hazard classification e.g. Products, by-products, waste and natural products.
(current material safety data sheets (MSDS) must be attached if applicable)

Substance	Hazard Classification	WEL (MSDS)	Exposure Time (hours /day)	Entry Route (e.g.: ingestion, skin)	State (e.g. fumes)
Sawdust from Softwoods	Irritant, Harmful	5mg/m ³		Inhalation / skin / eyes	Dust, powder
Sawdust from Hardwoods	Irritant, Harmful	5mg/m ³		Inhalation / skin / eyes	Dust / powder

4. Where does the task take place? (Please indicate)

Outside

Inside

Confined Space

5. What consideration has been given for substitution of hazardous substances with less hazardous ones?

Products are Low Hazard **No Suitable Alternatives** **Task requires this (type of) product**

6. First aid Measures

INHALATION: Remove casualty to fresh air and keep at rest. If symptoms develop, seek medical attention.

INGESTION: If swallowed, rinse mouth with water (only if the person is conscious). Do not induce vomiting

SKIN CONTACT: After contact with skin, wash immediately with plenty of soap and water.

EYE CONTACT: In case of contact with eyes, rinse immediately with plenty of water and seek medical advice.

7. Fire Precautions

Airborne wood dust may cause explosive atmospheres. Settled wood dust is readily combustible. Cleanliness of workshop is important; dust should be removed as part of routine cleaning activities.

Use water to extinguish fire. Note: Priority on discovering a fire is to evacuate the area and call the fire service.

8. Actions to be taken in the event of an emergency

For serious spillages (e.g. collection bag failures) creating dust in the atmosphere, evacuate the area. Do not take any action that may produce a spark (e.g. operating electrical switches) Allow the dust to settle before entering the area, ventilating area may not be appropriate depending on wind conditions etc. Wear overalls, gloves and dust mask.

Collect dust with a vacuum cleaner with a high efficiency filter, alternatively dampen down the dust with a water spray and collect









The school D&T department may have set procedures for dealing with such emergencies based on LEV operating procedures / manuals etc. These existing procedures should be summarised or referred to here instead of the above.

9. Detail existing Control Measures e.g. safe systems of work, supervision, training, storage, LEV details if appropriate

List ways you prevent or control exposure. Refer to any training / qualifications of staff and safe working systems. Any procedure that reduces the need to generate dust for staff or students, e.g. buying in pre-cut or staff pre-cutting for students. Give brief LEV details and refer to LEV checking records and daily checks on LEV. Supervision of students when using equipment. Cleaning regimes. Note: refer to things like written procedures / records / CLEAPSS so the reader can look them up, but don't repeat the content here.

Also note any special precautions that are taken for vulnerable staff and students (asthma sufferers etc.) List when PPE is used in addition to these control measures.

List any air monitoring and/or health surveillance that is considered necessary.

Symbol								
Description	Eye protection	Hard Hat	Ear protection	Breathing protection	Protective Footwear	Gloves	Protective Clothing	Face protection
Required?	Yes			Yes				
Type	Depending on cutting task – goggles			FFP2 grade disposable dust mask				Depending on cutting task – face shield

11. Environmental Protective Equipment (EPE) e.g. air emissions/dust handling, noise prevention, bunds, drip trays, interceptors, spill kits, waste handling

List any dust capture systems that may exist. Note how dust is disposed of.

You have now completed Part 1 Task Assessment. Please forward Part 1 of the Task Assessment to the County COSHH Officer so that Part 2 can be completed. Email Part 1 to COSHH@warwickshire.gov.uk

COSHH Risk Assessment

PART 2 – Risk Assessment

COSHH RA no:	High	Med	Low
Hazard Rating of the Task	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Risk of exposure due to:	Risk Level		
The methods of use	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ingestion/Swallowing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Inhalation/Breathing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Eyes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Skin Contact	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Overall risk level with control measures /PPE in place	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
If overall risk level is high after control measures have been put in place can a lower risk substance, process or activity be used? If No please state why	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Is the exposure to hazardous substances below the WEL?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Is atmospheric sampling required and if so, at what frequency?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
Is health surveillance required and if so list requirements?	<input type="checkbox"/> Yes		<input type="checkbox"/> No
<p>Further action/controls:</p> <p><i>This section is used for any further actions or additional controls that the assessor considers necessary. Disposable dust masks must be of FFP2 standard as minimum. Basic "Nuisance dust" masks (FFP1 or below) are not suitable for use in the workplace and are not considered in law to be valid respiratory protective equipment.</i></p> <p><i>The hazards refer to "certain rare nasal cancers." Such cancers occur usually as the result of long term over exposure in the timber and carpentry industries. In education, the concern is focussed on the prevention of asthma and dermatitis, both can be disabling, life-changing illnesses.</i></p>			
Signature of Assessor (COSHH Officer):-		Date:	
Signature of Manager/Supervisor Who is responsible for the activity:-		Date:	

REVIEW LOG

By signing this form you are verifying that you have reviewed the risk assessment and there are no changes. If you need to make any changes you must complete a new COSHH risk assessment for this substance. You are also confirming that you have obtained the most up to date MSDS for this substance.

Initial Review Date:-

Signature of Manager/Supervisor

Date:

Who is responsible for the activity:-

By signing this form you are verifying that you have reviewed the risk assessment and there are no changes. If you need to make any changes you must complete a new COSHH risk assessment for this substance. You are also confirming that you have obtained the most up to date MSDS for this substance.

Next Review Date (12 months from initial review)-

Signature of Manager/Supervisor

Date:

Who is responsible for the activity:-

By signing this form you are verifying that you have reviewed the risk assessment and there are no changes. If you need to make any changes you must complete a new COSHH risk assessment for this substance. You are also confirming that you have obtained the most up to date MSDS for this substance.

Next Review Date (24 months from initial review)-

Signature of Manager/Supervisor

Date:

Who is responsible for the activity:-

Signature of COSHH Officer

Date:

By signing this form you are verifying that you have reviewed the risk assessment and there are no changes. If you need to make any changes you must complete a new COSHH risk assessment for this substance. You are also confirming that you have obtained the most up to date MSDS for this substance.

Next Review Date (36 months from initial review)-

Signature of Manager/Supervisor

Date:

Who is responsible for the activity:-

THIS RISK ASSESSMENT IS ONLY VALID FOR THE PARTICULAR SUBSTANCES, USES AND ACTIVITIES SPECIFIED ON PART 1