Carry Out Initial Risk Assessment

- 1. Identify hazardous tasks, areas and substances in use
- Apply all relevant control measures (including procedural controls, engineering solutions and PPE)
- Consider the level of exposure after control measures have been applied
- Consider any known medical / health issues or allergies of persons likely to be involved in the task
- Identify the need for health surveillance by categorising the substance / task using the guidance below



High Hazard Exposure

Exposure of an individual to certain high risk substances and / or situations at work including:

- Asbestos / lead containing materials
- Ionising radiation (>6mSv/year)
- Noise (≥ 85db(A) L_{EP.D} normalised to 8h period)
- Vibration (WBV or HAV at action level averaged over 8h)
- Work in pressurised atmosphere (e.g. diving, tunnelling)

Substances listed in CoSHH Schedule 6*

Exposure to any substances used in processes specified in Schedule 6 of the CoSHH Regulations 2002:

- Vinyl chloride monomer
- Nitro/amino derivatives of phenol or benzene
- Potassium/sodium chromates or dichromates
- Ortho-tolidine, dianisidine, dichlorobenzidine and salts
- Auramine / magenta
- Pitch (as binder in manufacture of blocks of fuel)
- Carbon disulphide, disulphur dichloride, benzene (including benzol), carbon tetrachloride, trichloroethylene

Skin / Respiratory (Uncontrolled Exposure)*

Regular exposure to any of the substances or processes listed in tables 1 or 2 either by direct skin contact or inhalation or substances in any form. Note that in most cases health surveillance is only required in cases where there is regular exposure of unprotected individuals to the substance.

Skin / Respiratory (Residual / Infrequent Exposure)

Where the level of exposure is well controlled and therefore very low or the exposure is infrequent (and below the occupational exposure levels set out in EH40) but there is still likely to be some small exposure to the substance in question.

Skin / Respiratory (Sensitive Individual)

Where the level of exposure is well controlled and therefore very low or the exposure is infrequent (and below the occupational exposure levels set out in EH40) but an individual is deemed to be particularly sensitive e.g. young persons, pre-existing health conditions, prior sensitivity, women who are pregnant or breastfeeding.

Skin / Respiratory (No Exposure)

Where exposure has been fully controlled by engineering controls such as the use of sealed systems, glove boxes, local exhaust ventilation, personal protective equipment or other robust control measures therefore ensuring that people do not come into contact with the substance.

Harmless Substance

Where the properties of a substance have been comprehensively investigated and the substance is known to present no risk of skin or respiratory ill health to exposed individuals.

Colour Key

Health surveillance will generally be required Health surveillance should be considered on an individual basis

Health surveillance unlikely to be required

^{*}Note: If an uncontrolled exposure is identified the risk assessment should be reviewed and additional control measures introduced where practical