Hazardous Substances
Procedures Manual

January 2004
Management Services Centre
Occupational Safety and Health
This Procedures Manual must be read in conjunction with the University Policy Hazardous Substances and Guidelines For The Assessment of Risk From The Use Of Hazardous Substances.

PROCEDURES & GUIDELINES

1.0 DEFINITIONS

Approved Criteria means the criteria stated in the National Occupational Health and Safety Commission’s (NOHSC) document entitled “approved criteria for classifying hazardous substances”.

Australian Standard refers to the Australian standard published by the Standards Association of Australia.

Biological Monitoring means testing for the presence of a hazardous substance, its metabolites or a biochemical change in a person’s body tissue, exhaled air of fluid.

Carcinogenic Substance means a substance that produces cancer.

Chemical Name means its scientific or technical name.

Control Measure means a method that can be used to reduce the risks to safety and health from work with hazardous substances.

Ingredient means a component (including an impurity) of a substance.

Emergency Services means the Police Force of WA, the West Australian Fire & Rescue Service and any other agency that may be required to attend an emergency involving hazardous substances.

Exposure a person is exposed to a hazardous substance if the person absorbs or is likely to absorb substances by ingestion, inhalation or through the skin or mucous membrane.

Exposure Standard means the exposure standard specified in the Exposure Standards for Atmospheric Contaminants in the Workplace in Western Australia.
**Hazardous Substance** means a substance which is listed on the National Occupational Health and Safety Commission’s List of Designated Hazardous Substances, or has been classified as a hazardous substance by the manufacturer or importer in accordance with the National Occupational Health and Safety Commissions’ Approved Criteria for Classifying Hazardous Substances.

**Hazardous Substance Name** means the scientifically recognised name given to a compound or substance based on its hazardous substance constitution.

**Health Surveillance** means the monitoring of a person for the purpose of identifying changes in health status due to occupational exposure from a hazardous substance. This includes biological monitoring.

**Manager** means the person who has direct control and management responsibility for that workplace.

**Monitoring** means the regular survey of all measures, which are used to control hazardous substances in the workplace. This includes the sampling of the atmosphere to derive a quantitative estimate of the levels of contaminants, but does not include biological monitoring.

**MSDS** Material Safety Data Sheet means a document which contains the information in relation to a substance that is required by the National Code of Practice for the Preparation of Material Safety Data Sheets, whether or not the document is in the form required by that code of practice.

**Mutagenic** means able to produce a change in the genetic structure of a cell.

**Product Name** means the brand name, trade name, code name or code number specified by a supplier of a hazardous substance.

**Register** means a readily available listing of all-hazardous substances and MSDS, which are used in the workplace.

**Research** means a systematic investigative or experimental activity conducted for the purpose of:

a) acquiring new knowledge whether or not that knowledge will have a specific practical application; or

b) creating new materials, products, devices, processes or services; or

c) improving systems.

**Risk** means the likelihood that a substance will cause harm in the circumstances of its use.

**Sharps** means objects or devices having acute rigid corners, edges, points or protuberances capable of cutting or penetrating the skin.
**Student** means a person who is enrolled at an educational institution for the purposes of study.

**Sub-Contractor** means the person partnership or corporation bound by the contractor to execute work under the contract.

**Substance** means any natural or artificial entity, composite material, mixture or formulation, other than an article.

**Supplier** means an importer, manufacturer, wholesaler or distributor of workplace substances, but excludes a retailer.

**Teratogenic** means able to cause abnormalities in developing foetus, which is causing birth defects.

**Use** means the production, handling, storage, transport or disposal of substances in the workplace.

**Workplace** means a place where employees work or are likely to be in the course of their work.

### 2.0 RESPONSIBILITIES OF UNIVERSITY STAFF

2.1 Executive Deans, Deans, Directors, Heads of Schools, Managers and Supervisors are responsible for complying with the requirement of the University’s Policy on Hazardous Substances. In addition, they have a responsibility to ensure that:

- a) staff and students who handle hazardous substances are provided with instructions, training, information and supervision relating to their use, including the health risks associated to the use of that hazardous substance;
- b) persons using hazardous substances are provided with personal protective equipment as per the requirements of the hazardous substance Material Safety Data Sheet (MSDS); and
- c) hazardous substances are used and disposed of in accordance with the provisions of the policy and the hazardous substances MSDS.

2.2 University Employees’ and students using hazardous substances shall comply with all sections of the Policy Hazardous Substances and the procedures and guidelines outlined in this document.

### 3.0 INFORMATION, INSTRUCTION, TRAINING AND SUPERVISION

3.1 Before, or upon, the first occasion a hazardous substance is to be used in the workplace, the manager and/or supervisor of the area is responsible for consulting with, and providing appropriate information, instruction training and supervision to those employees and students who are, or may be exposed to that substance in the workplace. As a minimum, the information must include:

- a) a current Material Safety Data Sheet (MSDS) for the hazardous substance to be used;
- b) an explanation to the meaning of exposure standards as detailed on the MSDS;
- c) direction to and an explanation of the acute and chronic health effects as
detailed on the MSDS;
d) the correct labelling of containers, and interpretation of information,
e) safe work practices and controls to follow when handling, storing and
disposing of hazardous substances,
f) the correct use and maintenance of personal protective equipment,
g) the procedures to be followed in case of an emergency,
h) first aid procedures,
i) the nature of, and reasons for, any monitoring or health surveillance required,
j) consultation on the introduction and use of hazardous substances, and
k) their responsibilities to report any hazardous situation or processes to their
supervisor.

3.2 Advice on the interoperation of a MSDS can be obtained from a representative of the University Occupational Safety & Health Office.

3.3 As for all training, managers and supervisors are responsible for maintaining records of instruction and training provided to employees and students regarding hazardous substances. A typical Training Register is provided at Appendix 1. Training records are to be kept for a minimum 5 years.

3.4 Any Faculty or Service Centre that engages the services of a contractor to undertake activities at a University workplace is to inquire if the contractor is to use any hazardous substances. The person who arranged the contract works has a responsibility to ensure that MSDS’ are supplied in advance of their use to the Campus Facilities Manager at that Campus.

3.5 In consultation with representatives of the OS&H Campus Working Group a risk assessment is to be undertaken to determine the potential exposure and health risks to employees, students and visitors. Should the Campus Working Group assessment indicate that persons are at significant risk they are to contact a representative of the Occupational Safety & Health Office who will provide guidance and assistance on the matter.

4.0 PURCHASE OF HAZARDOUS SUBSTANCES

4.1 A request for a MSDS shall be a standard procedure when purchasing a hazardous substance. The person responsible for signing the purchase order irrespective of the purchase method shall initiate this action. The purchase order must clearly specify:

- the precise location where the substance is to be delivered; and
- the name of the person to be contacted at the place of delivery.

4.2 An MSDS must be obtained prior to, or at the first time a hazardous substance is either used or supplied to a workplace. If a MSDS does not accompany a hazardous substance on delivery, the person responsible for signing the purchase order must immediately request from the supplier a current MSDS. The substance is not to be used until a MSDS is available.

4.3 Should a supplier fail to provide a current MSDS for a hazardous substance, that hazardous substance is to be returned unused to the point of supply. The supplier shall be notified that this course of action is due to the non-supply of a MSDS, and that no
further orders will be placed for that hazardous substance until the situation is rectified. The supplier is also to be notified that they have a legislative requirement under the Occupational Safety and Health Legislation to provide a MSDS upon request.

4.4 The person purchasing the substance must check the issue date of the last MSDS with the supplier. It is recommended that MSDS be renewed every 5 years.

4.5 Suppliers shall be responsible for ensuring that updated MSDS are provided with hazardous substance deliveries. Refer to Section 4.2.

5.0 MATERIAL SAFETY DATA SHEETS

Material Safety Data Sheets (MSDS) provide the information required for the safe handling of hazardous substances at the workplace. They are to be made available as a reference source to all employees and students. If the MSDS is not available refer to Section 4.0, Purchase of Hazardous Substances.

5.1 Prior to any hazardous substance being distributed in the workplace the supervisor who has control of that workplace must ensure that all employees have read the MSDS and that they understand the correct procedures for safe use as well as the possible health effects and recommended safety precautions.

5.2 Students shall only use hazardous substances under the direct supervision of a (qualified) staff member. The staff member shall ensure that a current MSDS is available, and they shall instruct the students of the hazards involved prior to the use of the substance.

5.3 MSDS shall be stored in a location that is readily accessible to all employees and students who are handling, or may be exposed, to hazardous substances. In addition, they should be readily accessible to Emergency Services and Medical Personnel when required. While paper copies are a minimum requirement, additional storage formats are acceptable, and may include for example;

a) microfiche collections with microfiche readers, and
b) computerised MSDS databases.

5.4 University employees shall only make alterations to a MSDS in appended form. Such additional information should be clearly marked to indicate that the appended information is not part of the original MSDS and that it is specific to the work environment in which it is located. No details presented on an MSDS may be altered or deleted.

6.0 LABELLING OF HAZARDOUS SUBSTANCES

6.1 Supervisors and employees responsible for the use, handling, storage and disposal of hazardous substances must ensure that manufacturers and/or suppliers labels on original hazardous substance container are not removed, defaced or modified. Original labels may only be removed or modified if that container is no longer to be used for holding that hazardous substance, and has been emptied and cleaned to remove any residual substance.

6.2 Where a substance is decanted from its original container to a secondary container the recommended method of labelling is as follows:
a) for substances that are to be used immediately (the same shift), no labelling other than the hazardous substance name is required on the container into which the substance is being decanted, provided that after use the container is cleaned to remove all of the decanted substance; or

b) for substances that are decanted, but not used immediately, the container into which a hazardous substance is decanted must be clearly labelled to identify the hazardous substance name. A label shall provide the following information;

- a clear identification of the hazardous substance, eg, brand name, substance name, code name or code number,
- a summary of basic safety and health information,
- details of the supplier,
- the risk and safety phrases that apply to the substance, (Appendix 6)
- name of the person decanting the substance, and
- the date prepared.

6.3 Should an employee find a container without a label, they are required to advise their supervisor immediately, and if necessary, assist in its identification.

6.4 Should a container containing a substance be found that does not have a label or is improperly labelled, action should be taken immediately to correctly identify and label the container. Until this is completed, the container should be clearly marked to warn of the unknown substance, and not be allowed for use. If the substance cannot be identified, appropriate steps should be followed to dispose of the substance.

7.0 REGISTER OF HAZARDOUS SUBSTANCES

7.1 If a hazardous substance is entered in the List of Designated Hazardous Substances under the National Model Regulations and used at the workplace, the manager or supervisor who has responsibility for that workplace is to establish and maintain a register of the substance used. This register will be referred to as the “Hazardous Substance Register” (Appendix 2) and a copy of the Register is to be forwarded to OS&H on an annual basis. Information on, and access to, the National Model Regulations may be obtained from the University OS&H Office.

7.2 If the substance is not entered in the list identified in Section 7.1, using the Approved Criteria for Classifying Hazardous Substances, determine if the proposed substance to be used is a hazardous substance. If the proposed substance is to be classified, Section 7.1 of the Procedures Manual applies. Information on, and access to, the National Model Regulations may be obtained from the University OS&H Office.

7.3 The Hazardous Substance Register created in Section 7.1 and 7.2 is to be stored in a readily accessible location where it will be available to all employees. It is to be kept for a period of 5 years from completion, or 5 years from the last entry or report. (Registers created for carcinogenic substances is detailed in Section 13.0 of this policy)

7.4 All workplace assessments are to be recorded in the Hazardous Substance Register by the manager or supervisor who has control of that workplace.
8.0 RISK ASSESSMENTS

Prior to the undertaking of any risk assessment reference should be made to Appendix 3 which provides “An Overview of the Process for the Assessment of Health Risks Arising from the Use of Hazardous Substances”. The procedure has been adopted from the National Model recommended by the National Commission Worksafe Australia.

8.1 In consultation with those employees who are, or likely to be, exposed to hazardous substances, managers and supervisors are responsible for conducting regular assessments for the purpose of determining degrees of risk associated with the use of hazardous substances by employees. In the first instance a preliminary risk assessment should be undertaken using Preliminary Risk Assessment Form Appendix 4.

8.2 If the preliminary risk assessment indicates that the risk is high or above, a detailed formal risk assessment is required. This is done by completing the “Hazardous Substances Risk Assessment” Appendix A of the “Guidelines for the Risk Assessment from the Use of Hazardous Substances”. This document is available electronically at http://www.ecu.edu.au/msc/hr/osh/Procedures/Hazard/Haz_RiskGuide.doc. In addition, completion of the “Risk Assessment Questionnaire” Appendix B of the document will provide further assistance in conducting the task. The risk assessment should give consideration to the following:
   a) identification of hazardous substances to which employees and students are to be exposed,
   b) the known health affects of exposure to that hazardous substances,
   c) the likelihood of injury or harm,
   d) concentration and the duration of exposure,
   e) procedures for safe use and handling,
   d) the type of personal protective equipment to be used, and
   g) a review of the MSDS.

8.3 Information relating to points b) and e) should be obtained from the MSDS supplied with each hazardous substance. The assessment should be recorded in the Hazardous Substance Register, and a copy of assessments is to be forwarded to the OS&H Office.

8.4 Should an assessment reveal the risk to health is being controlled in accordance with the MSDS, the assessment is complete and no further action is needed. The exercise is to be recorded in the register until the next assessment is undertaken.

8.5 Should an assessment reveal additional attention is required, a representative of the Occupational Safety & Health Office should be contacted to provide advice and assistance. This may be necessary when:
   a) there is uncertainty about the degree of risk,
   b) there is significant risk to health,
   c) more complex hazardous substance processes and/or exposures are involved,
   d) environmental monitoring is required.

**Note:** Environmental monitoring can be organised through the Occupational Safety & Health Office.

8.6 Records of further assessments are to be noted in the Hazardous Substances Register. Assessments should be reviewed whenever there is evidence to indicate that the assessment is no longer valid, or when there has been a significant change in the work to which the assessment relates, or when 5 years have elapsed since the last
assessment.
9.0 MONITORING AND HEALTH SURVEILLANCE

9.1 If, following an assessment, further monitoring of the work environment is required to
assess the degree of risk employees are exposed to, managers and supervisors should
contact OS&H for advice and assistance.

9.2 All reports or results of any monitoring, or health surveillance undertaken by an
external consultant should be recorded by managers or supervisors, noting the
procedures followed, the substances measured, results obtained and the control
measures introduced. Monitoring and health surveillance reports are to be kept for at
least 30 years from the completion, or last entry.

9.3 Results of environmental monitoring are to be made readily accessible to employees
who are, or likely to be exposed to hazardous substances.

9.4 Results of any health surveillance referred to in Section 9.2 shall be treated and
released in accordance with confidentiality and the OS&H Regulations.

9.5 If an employee requests health surveillance or environmental monitoring, the matter
must be discussed with the employee’s immediate supervisor. If there is any doubt
about the levels of exposure, an assessment of the workplace should be undertaken.
Reference should be made to Section 8 of this document.

10.0 PROVISION OF PERSONAL PROTECTIVE EQUIPMENT

10.1 As far as is practicable, the prevention or control of exposure to hazardous substances
should be controlled by means other than the provision of personal protective
equipment (PPE). It is recognised however, that this may not be appropriate for all
situations. The use of PPE as a control measure shall be limited to situations where
other control measures are not practical, or where such equipment is used in
conjunction with other measures to increase protection.

10.2 In accordance with the University’s Personal Protective Clothing and Equipment
Policy, managers and supervisors are responsible for ensuring their employees are
provided with appropriate PPE, and receive training in its use, maintenance and
replacement. The selection of PPE should proceed through a consultative process
between supervisors and employees.

10.3 Should the PPE prove to be unsuitable or cause concern to the user, a review of the
work practices as discussed in Section 8.0 should be conducted.

11.0 EMERGENCY PROCEDURES

11.1 Emergency and safety procedures as described on the MSDS must be followed by all
employees at all times unless as otherwise directed by an authorised person of the
University or a member of the emergency services.

11.2 Should an employee discover a spilled or leaking container in a workplace, they are to
contact the relevant manager/supervisor and advise them of the situation. Once
notified, the manager/supervisor shall set in place emergency procedures in accordance
with recommended actions detailed on the relevant MSDS.
11.3 Managers and supervisors must ensure that records on workplace hazardous substances used in their work areas are maintained, and are readily available to emergency service personnel if requested.

11.4 Records of emergency situations are to be taken, and forwarded to OS&H and Security for information purposes only.

12.0 DISPOSAL OF HAZARDOUS SUBSTANCES

12.1 Managers and supervisors shall be responsible for ensuring that all hazardous substances are disposed of in an approved manner as specified on the corresponding MSDS. Consultation with Local Government Agencies & Government Authorities is recommended as well as with the Water Authority of Western Australia.

12.2 Work practices and procedures shall be compiled and documented for waste collection, storage, disposal and frequency in each of the waste categories identified. The practices and procedures shall comply with legislative requirements, local government by-laws, codes of practice and those requirements as outlined on the MSDS.

12.3 Information on the types of hazardous substances, volumes and methods of disposal is to be forwarded to the University Radiation/Biosafety Committee, via OS&H on an annual basis.

12.4 Hazardous waste, disused plant and equipment shall not be allowed to accumulate in a workplace, which will have the potential for safety and health implications.

12.5 Hazardous substances contractual arrangements shall comply with legislative requirements and organisational standards. The person responsible for arranging and agreeing to the disposal contract is to review on an annual basis the disposal procedures to ensure compliance to amended standards or legislative requirements.

12.6 Contractors involved in the collection, storage and disposal of University waste and refuse shall confirm in writing that all legislative requirements, local government by-laws and organisational standards shall be met. This shall be done annually by an authorised person and shall be applicable to new and renewable contracts.

12.7 Contractors shall provide in writing evidence of safety and health practices and procedures for the collection and storage of University refuse, and waste, as well as safety and health disposal practices, locations and authorisation for disposal.

12.8 Collection, storage and disposal of medical waste shall comply with the Codes of Practice on Medical Waste Management published by the Environmental Waste Disposal Department of Western Australia.

12.9 Sharps requiring disposal are to be kept separate from other waste and must be disposed of as soon as possible.

12.10 All sharps are to be placed in a rigid puncture proof container immediately after use. The container is to be clearly marked “SHARPS ONLY” and must comply with the Guidelines for the Storage, Transport and Disposal of Medical Waste issued by the Health Department of Western Australia.
12.11 Collection, storage and disposal of University radioactive waste shall be in accordance with the Radiation Safety Act, 1975 and the Radiation Safety Regulations, 1983. Reference should be made to the section on Disposal outlined in the University Policy on Radiation.

12.12 To minimise the disposal of hazardous substance waste, the person who has control of that workplace shall in consultation with other areas using hazardous substances develop procedures on:

- “waste exchange programs” with other organisations, Faculties, Service Centres, schools and individual work areas;
- re-use of left over substances; and
- return to manufacturer/supplier.

12.13 All containers of hazardous substances designated for disposal shall be correctly labelled in accordance with the National Code of Practice on Labelling of Workplace Substances, NOHSC: 2012, 1994.

12.14 The person who has authorised the disposal of hazardous substances shall ensure that MSDS are available to identify all materials to be collected, and stored for disposal.

12.15 As required, employees shall be provided with suitable personal protective clothing and equipment as will adequately control exposure to injury, or harm from, waste material. This shall also include information, instructions and training in the use and maintenance of equipment supplied.

12.16 Hazards associated to the disposal of waste hazardous substances shall be identified and assessed on a routine basis to determine the risks to safety and health created by the work involving exposure to hazardous waste. Results of any assessments along with details of the work involved shall be included into the hazardous waste register.

12.17 Managers and supervisors are to ensure that records of all materials disposed of from their workplace including their quantities and disposal agency are kept and maintained. Names of disposal contractors shall also be included into the register. Copies of all documents are to be forwarded to the University Radiation/Biosafety Committee via OS&H on an annual basis.

12.18 The register shall be signed and dated by the person who has the management responsibility of that workplace and by the receiver. All records and the register shall be retained for a period of five (5) years.

12.19 Disposal records and information as appropriate shall be forwarded to the relevant legislative authority via the Chairperson of University Radiation/Biosafety Committee.

13.0 USE OF CARCINOGENIC SUBSTANCES

13.1 The use of carcinogenic substances shall be authorised by the Head of School/Service Centre and formally endorsed by the Chair of the University Radiation/Biosafety Committee.

13.2 Persons applying to use carcinogenic substances shall comply with Part 5, Division 3, Schedules 5.1 to 5.5 of the OS&H Regulations 1996. Access to this document is via
Prior to the use of any carcinogenic substance, the person who has control of that workplace shall communicate to all persons participating in the activity all conditions (if any) set out by the Commissioner of WorkSafe Western Australia.

Proposed users shall complete the Application Form Appendix 5 of this document. The application form is to be checked, authorised and signed by the Head of School/Service Centre before being forwarded to OS&H. The following information is to accompany the application:

- the type (names) of substances to be used, Reference Schedule 5.4 & 5.5 of the OS&H Regulations);
- volume to be used;
- the reason for its use & why it is not practicable to not use, or to substitute the substance;
- where it will be used;
- duration of its use;
- the number of persons likely to be exposed;
- name & address of the proposed supplier;
- safety precautions to prevent exposure; and
- storage, disposal and emergency procedures.

On receipt of an application, OS&H will forward the information to the University Radiation/Biosafety Committee for information and endorsement. The Committee shall forward the application to the University OS&H Policy Committee for information purposes only.

The Chair of the University Radiation/Biosafety Committee shall be responsible for forwarding the appropriate application and information to the Commissioner of WorkSafe Western Australia.

The Chair of the University Radiation/Biosafety Committee will forward WorkSafe Western Australia’s approval letter and any conditions of use to the Head of School/Service Centre.

A Hazardous Substance Register for the recording of employee exposure to carcinogenic substances is to be developed and maintained. In accordance with the legislation, this register is to be kept for a period of 30 years.

RESEARCH

All sections of the University Policy on Hazardous Substances and the requirements of the Hazardous Substances Procedures Manual apply to all workplaces and persons undertaking research.

Any person conducting research shall conduct a risk assessment of the work practices and procedures to ensure that persons involved in the activities are not exposed to hazardous or carcinogenic substances.

The risk assessment shall be documented, retained and forwarded to the Chair of the University Radiation/Biosafety Committee.

MSDS’s of all substances to be used in the research process shall be made available to
all persons involved in the activity. As appropriate, information, instructions and supervision will be provided commensurate with the risk.

15.0 PROCEDURES MANUAL IMPLEMENTATION & MAINTENANCE

The Occupational Safety & Health Office are delegated the strategic responsibility for implementing, reviewing and amending the Hazardous Substances Procedures Manual. Faculties and Service Centres are responsible for the operational implementation and management.

16.0 POLICY ACCESS

Access to the Hazardous Substances Policy and accompanying documents is available via the University web page http://www.ecu.edu.au/GPPS/policies/docs/hr116.pdf. Hard copies are available from the OS&H Office on request.

17.0 AMENDMENTS

17.1 Faculties and Service Centres, the University Occupational Safety and Health Policy Committee, the Radiation/Biosafety Committee and a representative of the Occupational Safety & Health Office may initiate amendments to this Policy and Procedures.

17.2 Amendments will be referred to the University’s OS&H Policy Committee and re-distributed as appropriate.

17.3 A general review process will be initiated on a three-year basis.

18.0 REFERENCES

- National Exposure Standards. [NOHSC: 1003 (1995)].
- Approved Criteria for Classifying Hazardous Substances [NOHSC: 1008 (1994)].
- List of Designated hazardous Substances [NOHSC: 10005 (1994)].
- Occupational Safety and Health Regulations 1996, Western Australia.
- Environmental Protection Act 1986, Western Australia.
- Health Department of Western Australia. Guidelines for the Storage, Transport and Disposal of Medical Waste.
- Health Department, Environmental Health Guide-Recycling ofSolvent Wastes. (WA).
- Food Hygiene Regulations 1973, Western Australia
- Radiation Safety Act 1975, Western Australia.
- Radiation Safety (General) Regulations 1983, Western Australia.
- Code of Practice-Medical Waste Management 1996, Department of Environmental Protection Western Australia.
• Code of Practice-Collection of Waste in Health Care Units 1996, Department of Environmental Protection Western Australia.
• Code of Practice for the Disposal of Radioactive Wastes by the User 1985, National Health and Medical Research Council, Australia.

The above documents are available for reference only via the University’s Occupational Safety & Health Office Occupational Safety and Health or the Campus Library. It is recommended that any Faculty or Service Centre requiring the use of any of these documents should obtain a copy for their own reference.

University Policy (available via the University’s home page)

• Occupational Safety and Health Policy,
• Emergency Evacuation Procedures,
• Personal Protective Clothing and Equipment,
• Contractors, Sub-contractors and their Employee’s, and
• Radiation Safety.

Websites
Worksafe (WA): http://www.worksafe.wa.gov.au
University OS&H http://www.ecu.edu.au/msc/hrs/osh/OSHindex.htm
Faculty of Computing, Health & Science OSH: http://www.chs.ecu.edu.au/org/osh

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Policy Code: n File Number: 96/3699
Originator: M. Gavin, Manager Occupational Safety and Health
Approved by: Vice Chancellor’s Executive Management Group
Date Approved: 15 June 2001
Revision Date: 15 June 2006
Amendments: Policy reformatted September 2001 into two documents:
1) Policy.
Appendix 1

HAZARDOUS SUBSTANCE TRAINING RECORD AND REGISTER

<table>
<thead>
<tr>
<th>Employee/Student Name</th>
<th>Date of Training</th>
<th>Name of Hazardous Substances</th>
<th>PPE Provided</th>
<th>MSDS Provided to Participants</th>
<th>Summary of Training Provided</th>
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Appendix 2

HAZARDOUS SUBSTANCE REGISTER AND RECORD OF ASSESSMENT

LIST OF SUBSTANCES

<table>
<thead>
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<th>Service Centre/Faculty: ______________________________</th>
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<td>School: ____________________________________________</td>
<td>Employee Name: ________________________________</td>
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<tr>
<th>Name of Substance(s)</th>
<th>Location of Substance(s)</th>
<th>MSDS Date of last issue</th>
<th>Labelled? Yes/No</th>
<th>Date of Latest R.A. If Appropriate</th>
<th>Result of R.A. (Significant/Non Significant)</th>
<th>Comments</th>
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R.A. Risk Assessment - Refer to Risk assessment Guidelines
An Overview of the Process for the Assessment of Health Risks Arising from the Use of Hazardous Substances in the Workplace

1. Decide who will do the assessment
2. Divide the work into units for assessment
3. Identify substances in the work
4. Determine any hazardous substances
   - Yes: Record results: No further action required
   - No: Obtain information on hazards(s)
5. Evaluate exposure. Conduct a 'walk through' inspection OR review the work process design. (Refer to Appendix 3)
6. Evaluate the risk
7. A person may be exposed
   - Yes: Monitor Exposure
   - No: Re-Evaluate Risks
8. Identify actions to control risks
   - Insignificant risks
   - Significant risks
   - Uncertain about risks
9. Keep records and set date for reassessment
10. Review assessment
Edith Cowan University
Risk Assessment Form

Information on the Activity to be undertaken

Brief Description of the Activity: ____________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Campus: _______ Bld No: ___________ Room No: _____________ Centre/Faculty: _______________

Person doing the Risk Assessment: _____________________________ Print Name : _______________________

Position: _____________________________ OS&H Reps Name:

Identified Hazard:
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Risk Analysis Matrix –Level of risk. Before using the Risk Matrix consider the following.

Risk analysis. This is the process of analysing the likelihood and consequences of an event and assigning the probable outcome with a risk rating. The rating, which is taken from the risk assessment matrix may be either, extreme, high substantial, medium or low.

To use the risk assessment matrix, first determine the likely consequence of the event, then the likelihood of the event occurring. The point at which the two categories converge on the risk assessment matrix provides a qualitative assessment of the level of risk. Before assigning a level of risk, an understanding of the following is necessary:

Likelihood. This terminology is used as a qualitative description of probability or frequency. For example, “Almost Certain” is expected to occur in most circumstances, “Likely” will probably occur in most circumstances, “Possible” might occur at some time, “Unlikely” could occur at some time, “Rare” may occur only in exceptional circumstances.

Frequency. Means the regularity that an event may occur over a given time frame.

Probability. The potential that the event may occur.

Consequences. Means the outcome of an event expressed as a loss, a near injury or injury expressed in terms of, Insignificant, Minor, Serious, Disastrous or Catastrophic. The severity of the outcome must be considered when assigning a consequence factor.

Example of how the Risk Matrix works. If mixing a hazardous substance and exposure to the natural skin may cause irritation or burning then:
a) Consider the likelihood of the hazardous substance making contact with the skin. For the purpose of the example we will assume that no protective clothing is being worn. Therefore assume that it is “Possible”.
b) The activity is infrequent and may occur twice a year.
c) Consequences, according to the MSDS a skin irritation or burn is “Minor”.
Using the Risk Matrix with a Likelihood of possible and a Consequence of minor, we obtain a Risk Rating of “M” representing a medium risk. With the issue of personal protective equipment such as gloves, which is a physical barrier the risk of exposure is removed.

Details of Action to be Taken. Refer to the Hierarchy of Risk Control.

Actions: (These should be determined by both the person(s) identifying/assessing the risk and the responsible manager and the elected safety and health representative).
Hierarchy of Risk Control

Elimination: is a permanent solution and should be attempted in the first instance.

Substitution: involves replacing the hazard by one of lower risk.

Engineering: controls involve physical barriers or structural changes to the environment or process.

Administrative: controls reduce hazard by altering procedures and providing instructions.

Personal protective equipment: last resort or temporary control.
Actions Taken

Provide a brief summary of the actions taken based on the hierarchy of controls.

_____________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________
_____________________________________________________________________________________________________________________________

Provide Copies of the Risk Assessment to: (1) File; (2) Employee; (3) OS&H Representative; (4) W/Place Manager.

RISK MATRIX

<table>
<thead>
<tr>
<th>CONSEQUENCES</th>
<th>Risk Analysis Matrix – level of risk</th>
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</thead>
<tbody>
<tr>
<td>Likelihood</td>
<td>Insignificant</td>
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Authorized by: _____________________________  Signature: _____________________________  Date: _____________________________
<table>
<thead>
<tr>
<th>Rare</th>
<th>L</th>
<th>L</th>
<th>L</th>
<th>L</th>
<th>M</th>
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<td>Unlikely</td>
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<tr>
<td>Possible</td>
<td>L</td>
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<tr>
<td>Likely</td>
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<tr>
<td>Almost Certain</td>
<td>M</td>
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<td>E</td>
<td>E</td>
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</table>

**L**: low risk, staff manage by routine procedures; unlikely to need specific allocation of resources.

**M**: medium Head of School, Line Manager or Supervisor responsibility, with attention to focus on the need for additional controls. Manage by specific monitoring or response procedures.

**S**: Executive Dean/Dean to action and must implement long term controls.

**H**: high risk, immediate notification, Chancellery to action.

**E**: extreme/significant risk; immediate action required; must be managed by senior management with a detailed plan, notify the OS&H Office immediately.
APPLICATION FOR THE USE OF CARCINOGENIC SUBSTANCES

Please read the following information before completing the application form.

1. Any area wishing to apply for the purchase and use of carcinogenic substances shall comply with the requirements of the Hazardous Substances Policy and the requirements of Section 13.0 of the Hazardous Substances Procedures Manual.
2. The application form is to be completed and signed by the person proposing to conduct the workplace activity.
3. The application should be forwarded to the immediate supervisor for signing and checking of the information provided.
4. If the immediate supervisor is not the Head of School/Service Centre, the form is to be forwarded on for their signature and approval.
5. The completed application will be forwarded to the University Radiation/Biosafety Committee via the OS&H Office.

PLEASE PRINT ALL DETAILS

Service Centre/Faculty: ______________________ School: _________________________
Name of Person completing the Application: __________________________________________
Position: ________________________ Telephone No: ________________ Fax No: ___________
Location of the Activity (Campus): ________________________________________________
Build No: _____________ Room No: ______________ Workplace: _______________
Process/Procedure/Activity: _________________________________________________________
Signature: ________________________ Date of Application: ________________________

PLEASE PROVIDE WRITTEN INFORMATION ON THE FOLLOWING:

- the type (names) of substances to be used, Reference Schedule 5.4 & 5.5 of the OS&H Regulations;
- volume to be used;
- the reason for its use & why it is not practicable to not use, or to substitute the substance;
- where it will be used;
- duration of its use;
- the number of persons likely to be exposed;
- name & address of the proposed supplier;
- safety precautions to prevent exposure; and
- storage, disposal and emergency procedures.

Please forward the application, complete with the above information to the University Occupational Safety and Health Office. On receipt and checking of the application, OS&H will forward the application to the University Radiation/Biosafety Committee.

Name of Person Approving the Application: __________________________________________
Position: ________________________ Telephone No: _______________ Fax No: ___________
Signature: ________________________ Date: ________________________