

G.10 Hazardous Substances Policy and Procedure

1.0 INTRODUCTION/BACKGROUND

The wide range of activities undertaken at Mercy Services involves the use of a number of substances (solid, liquid, or gas). These could be cleaning substances, products used in home maintenance, office materials or transport related products. Some of these substances are classified as “Hazardous Substances” i.e., any form of chemical that has the ability to harm human health.

Laws regarding hazardous substances and Mercy Services organisational values require that these substances be identified and the risks of using them be eliminated or reduced to safe levels.

2.0 SCOPE

This policy and procedure is to ensure consistent procedures are followed for the identification, handling and recording of all hazardous substances used by employees, contractors, volunteers and visitors at Mercy Services.

3.0 POLICY STATEMENT

Mercy Services is committed to protecting the health and safety of all employees and others in relation to the use of hazardous substances in the workplace.

4.0 PROCEDURE

4.01 Hazardous Substance Audit

Each year, the WHS Coordinator is responsible to ensure that an hazardous substances audit is conducted.

Employees and volunteers will be consulted during the audit to ensure a complete list of all substances they use. A list of all substances used by Mercy Services will then be compiled.

Mercy Services does not store hazardous substances in quantities defined by NSW Work Health and Safety Regulations as requiring a manifest.

4.02 Hazardous Substance Register

The WHS Coordinator must ensure the compilation of a Hazardous Substance Register. The Register (folder) will contain:

1. a listing of all substances used within Mercy Services (specifying if they are hazardous),

2. a Hazardous Substances Risk Assessment and Control Form (Appendix 1) for each hazardous substance, and
3. a Hazardous Substances Exposure Guideline (Appendix 2) for each hazardous substance.

The Register must be updated as new hazardous substances are introduced or as a result of new substances identified in the annual audit process. The register will also be updated when the use of a hazardous substances is discontinued.

A paper copy of the Register will be kept next to the First Aid station at each site. An electronic copy will be readily available on the server and staff members who work out in the community will be given a copy of the "Exposure Guidelines" and other relevant information for the substances they use.

Relevant public authorities (e.g. SafeWork NSW and Emergency Services) will be given access to the Register at each site, as needed.

4.03 Safety Data Sheet (SDS)

Any staff member intending to introduce a new substance is required to ensure that an SDS is obtained from the supplier of the hazardous substance either before or on the first occasion on which the hazardous substance is supplied.

Where an SDS has not been provided, it must be requested from the manufacturer. Program Coordinators use the SDS of hazardous substances to conduct an assessment of the use of hazardous substances and any necessary controls to be established in the program. The WHS Coordinator must be provided with a copy of the SDS and the risk assessment.

The WHS Coordinator will maintain copies of all hazardous substances used within Mercy Services in the Hazardous Substance Register.

4.04 Decanting and Labelling of a Hazardous Substance

a) Decanting

Generally a hazardous substance should only be decanted if necessary to do so. Decanting is to be done in accordance with the manufacturer's instructions as per the SDS.

No workplace substances will be decanted into food, drink or any other container, which could be confused as being human or animal edible products.

Where decanting is necessary, only an amount sufficient for the immediate use on an individual job will be decanted.

Where a substance is decanted and not used immediately, the container will be sealed to ensure the substance cannot escape or be spilled, and is to be labelled, as set out in 4.04c below.

When choosing containers for a substance, the material of the container is to be impervious to the actions of the substance.

b) Labelling

All containers of hazardous substances supplied to, used in or handled in Mercy Services must be appropriately labelled to allow the substances to be used safely. The manufacturer/supplier must supply the substance in a container, which is labelled in accordance with the Code of Practice for the labelling of Workplace Substances. The label should include:

- dangerous goods “diamond” and/or poisons label, where appropriate;
- the chemical name(s) of the ingredients;
- the trade name of the substance; and
- how to use the substance safely.

Any substances delivered without the above specifications must be returned at the supplier’s cost.

c) Labelling a substance that is to be decanted

When a substance is decanted, the type of labelling required will depend on whether the substance is used immediately, over a 12 hour period or over a longer period.

- Decanting for immediate use and fully used or disposed of - labelling is not required.
- Decanting for use within or after the next 12 hours - requires a label clearly stating product name, the date and time of decanting and any relevant risk and safety phrases.

The Code of Practice for the labelling of workplace substances should be referred to for guidance by the person decanting the substance.

All containers used for decanting are to remain labelled until disposed of in the manner described by the manufacturer.

Where a substance is unlabelled, the WHS Coordinator will ensure the substance is disposed of appropriately in consultation with the relevant Waste Management Authority (see Safe Work Practice Waste Disposal). All containers that have held decanted substances must be cleaned, so that they no longer contain the substance, or disposed of safely.

4.05 Purchasing of Hazardous Substances

Prior to purchasing, all chemicals are assessed and hazardous substances are not introduced into the workplace unless there is no practical alternative. The Chief Executive Officer (or delegate) will only authorise an order if a Pre-purchase Risk Assessment has been completed (see G.05 Risk Management Policy Appendix 6).

When ordering hazardous substances, the Coordinator (or delegate) must ensure that the supplier is notified to supply the substance with the required labelling, according to the Code of Practice for the labelling of Workplace Substances, and with the appropriate SDS.

The Coordinator (or delegate) will ensure that any hazardous substances delivered to the Service are labelled appropriately and accompanied by an SDS. The hazardous substance must then be stored in accordance with the SDS and the SDS added to the Hazardous Substance Register.

4.06 Risk Assessment of Hazardous Substances

The WHS Coordinator (in collaboration with the relevant Coordinator) will conduct the risk assessment for each substance identified during the Audit (see 4.01 in this Procedure) as set out on the Hazardous Substance Risk Assessment and Control Form (Appendix 1). Employees and volunteers who use the substance will be consulted as part of this risk assessment.

Each substance will be assessed to:

- determine the level of risk the substance presents to the employees; and
- provide information to ensure that any notable risks to health are eliminated or controlled within safe limits.

4.07 Hazard Controls

Following completion of the Risk Assessment, the WHS Coordinator (or delegate) will develop first aid and control procedures and record these on the Hazardous Substance Risk Assessment and Control Form (Appendix 1). Possible controls may include the following:

- SDS synopsis;
- methods of use of the substance;
- location/site of the use of the substance;
- monitoring to be carried out;
- induction and training required for employees; and/or
- changes in work practices associated with the product.

The development of controls shall be done with the input of those individuals affected and the resultant procedure will be reviewed and approved by the WHS Coordinator.

4.08 Personal Protective Equipment

Any personal protective equipment needed to secure health and safety in relation to the use of hazardous substances is provided without cost to employees, and systems are in place to ensure that the equipment is used as required (see PPE Policy).

4.09 Induction and Training

All employees and volunteers whose work may expose them to a hazardous substance will be provided with adequate induction and training regarding the hazardous substance(s).

All visitors are briefed on safety procedures and adequately supervised to ensure safety in relation to workplace hazardous substances.

The Program Coordinator will provide new staff with relevant induction/training on relevant hazardous substances issues such as:

- SDS and the interpretation of the information contained in the SDS;
- labelling requirements and interpretation of the label;
- assessment outcomes;
- health and safety hazards of the substance(s);
- control measures, including Safe Work Practices, handling, storage and disposal procedures;
- Personal Protective Equipment;
- incident reporting, first aid and emergency procedures; and
- health surveillance and monitoring procedures, what they entail and the reasons for them.

The induction and training programs shall be documented and will include:

- employees/volunteers in attendance
- date of induction/training;
- course content outline; and
- name(s) of the trainers and their status.

4.10 Records

Records are to be kept in such a way as to be accessible to appropriate people and kept for the following periods:

- Risk Assessments that indicate a need for monitoring and/or health surveillance must be kept for 30 years from the date of the last use of the product; and
- all other records, including assessment reports not indicating a need for monitoring and /or health surveillance and records of induction and training: - not less than five years.

Records should be located conveniently so that the Board of Directors' representatives, the Chief Executive Officer, employees and volunteers can gain access to the information to which they are entitled. Suitable storage systems for records include traditional book entries or electronic files.

The record of a hazardous substance on the Register shall be kept for a minimum of five years after the last date of usage of that substance.

4.11 Compliance

Compliance with this policy is being measured by:

- a) Annual updating of hazardous substances register.

4.12 Evaluation

The performance indicators for the evaluation of this policy are:

- a) 0% of incidents resulting from hazardous substances;
- b) at least 90% of Mercy Services staff giving a positive rating on how well Mercy Services is committed to safety.

5.0 REFERENCES

1. Current Issues	a) None identified
2. Australian Standards	b) AS/NZS 4804: Occupational health and safety management systems — General guidelines on principles, systems and supporting techniques
3. Legislation	a) Work Health and Safety Act 2011 (NSW) b) Work Health and Safety Regulations 2011 (NSW)
4. Professional guidelines	a) nil
5. Codes of Practice	a) Safe Work Australia (2015) Model Code of Practice - Labelling of Workplace Hazardous Chemicals http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/643/labelling-workplace-hazardous-chemicals.pdf b) Safe Work Australia (2012) Model Code of Practice - Managing Risks of Hazardous Chemicals in the Workplace http://www.safeworkaustralia.gov.au/sites/SWA/about/Publications/Documents/697/Managing%20Risks%20of%20Hazardous%20Chemicals.pdf c) Safe Work Australia (2012) Code Of Practice: How to Manage Work Health and Safety Risks http://www.safeworkaustralia.gov.au/AboutSafeWorkAustralia/WhatWeDo/Publications/Documents/633/How_to_Manage_Work_Health_and_Safety_Risks.pdf
6. Codes of Ethics	a) Australian Association of Social Workers Code of Ethics 2010 http://www.aasw.asn.au/document/item/1201 b) Australian Psychological Association Code of Ethics http://www.psychology.org.au/Assets/Files/APS-Code-of-Ethics.pdf c) Code of Ethics for Nurses in Australia 2008 http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Codes-Guidelines.aspx#codesofethics d) Integrity in the Service of the Church https://www.catholic.org.au/media-centre/media-releases/cat_view/10-organisations/38-national-committee-for-professional-standards e) Mercy Services Code of Conduct
7. Evidence	a) University of Tasmania (2013) Copier and Printer Safe Procedure http://www.utas.edu.au/_data/assets/pdf_file/0008/214748/Copier-and-Printer-Safe-Procedure.pdf b) Workplace Health and Safety Queensland (2014), Guide for handling cytotoxic drugs and related waste https://www.worksafe.qld.gov.au/_data/assets/pdf_file/0006/88710/guide-handling-cytotoxic-drugs-related-waste.pdf
8. Mercy Services Values	a) Justice, Respect, Care, Unity, Service

6.0 OTHER RELATED POLICIES AND PROCEDURES

All Policy and Procedures

7.0 RELATIONSHIP WITH STANDARDS

<i>Aged Care Accreditation Standards</i>	<i>Home Care Standards</i>	<i>Disability Standards</i>	<i>EQulP Standards</i>
1.1, 1.2, 1.7, 1.8, 4.1, 4.2, 4.4, 4.5, 4.6, 4.8	1.1, 1.2, 1.3, 1.4, 1.5, 1.6, 1.7, 1.8, 2.1, 2.2, 2.3, 2.4, 2.5, 3.1, 3.2, 3.3, 3.5	1.3, 1.4, 1.5, 6.1, 6.2, 6.3, 6.4, 6.7	2.1.2, 2.2.4, 2.3.1, 3.2.1, 3.2.2, 3.2.3

8.0 DOCUMENT CHANGES RECORD

<i>Dates of change</i>	<i>Section altered</i>	<i>Natures of changes made</i>
Nov 2004	First record of document	
06/05/2009	<ul style="list-style-type: none"> a) All sections b) 1.0, 2.0, 5.0 – 8.0 c) Old Definitions d) New 4.01 e) New 4.02 f) New 4.03 g) New 4.04a h) New 4.05 i) New 4.07 j) New 4.08 k) Old 5.8 l) Old Appendix 1 	<ul style="list-style-type: none"> a) Reformatted in new layout b) New sections c) Section deleted and relevant definitions added to the relevant section of this Policy d) OHS Coordinator rather than GM responsible for annual audit e) OHS Coordinator rather than GM responsible for Hazardous Substance Register. MSDS removed from Register as MSDS details in Exposure Guidelines and Register is too large if all MSDS included. List of where paper and electronic copies are found. f) OHS Coordinator rather than GM responsible for MSDS. g) Requirement that decanting to be into containers that could be confused as being for food. h) Program Coordinator (or delegate) responsible to ensure that substance is labelled and stored correctly. i) OHS Coordinator rather than GM responsible for control plans. Also first aid to be listed with controls. j) Added k) Deleted need for a report as Appendix 1 & 2 serve this role. Control possibilities added to New 4.07. l) Deleted as not very useful
01/03/2011	<ul style="list-style-type: none"> a) 3.0, 4.02, 4.03, 4.04a, 4.05, 4.09, 4.10 b) 4.03 c) 4.03 d) 4.03 e) 4.04.c f) 4.06 g) 4.09 h) 7.0 	<ul style="list-style-type: none"> a) Minor typo.s corrected b) Delete reference to training as this is in section 4.09 c) Onus on Program Coordinator to ensure a risk assessment is conducted using the MSDS d) Clarified that Coordinators are to training their staff in MSDS use e) OHS Coordinator rather than GM responsible for disposing of unlabelled substances f) OHS Coordinator and Program Coordinator collaborate in conducting risk assessment of hazardous substances where needed

		<ul style="list-style-type: none"> g) Delete need for visitors to get Id. Badge and PPE h) Replace HACCC Standards and CACP Standards with Common Community Care Standards
06/02/2012	<ul style="list-style-type: none"> a) All sections b) 4.11 Compliance c) 4.12 Evaluation d) 5.0 References 	<ul style="list-style-type: none"> a) Updated with how new WHS laws and Codes of Practice apply at Mercy Services b) New section c) New section d) Updated with new WHS laws and Codes of Practice
27/11/2012	All Sections	Organisation name updated
07/10/2015	<ul style="list-style-type: none"> a) All sections b) 5.0 references c) 7.0 Relationship to Standards 	<ul style="list-style-type: none"> a) Replace GM with CEO b) Update: Codes of Practice and Evidence c) Added Aged Care and updated Disability Standards
Review due 07/10/2018		

Hazardous Substances Risk Assessment and Control Form

<i>Product name and Manufacturer</i>	<i>Mercy Services Program using this substance</i>	<i>Date on SDS</i>	<i>Hazard</i>	<i>Risk rating</i>	<i>Date Acute Effects and Control measure(s) entered in Exposure Guidelines</i>

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Mercy Services: HAZARDOUS SUBSTANCES EXPOSURE GUIDELINES

PRODUCT	FIRST AID				CONTROLS
	SWALLOWED	EYE	SKIN	INHALATION	
HARPIC ACTIVE CLEANER LIQUID	Give 2 Glasses of water to drink. Contact a doctor or the Poisons Information Centre on 131126.	Wash immediately with a large amount of water. If irritation persists, contact a doctor.	Wash off with soap and water. If irritation persists, contact a doctor.	Remove to fresh air. If breathing difficulties are experienced, seek medical attention.	Ensure adequate ventilation.
SHOWER POWER	If swallowed, contact a doctor or Poisons Information Centre on 131126.	Flush eyes with plenty of water for at least 15 minutes. If irritation persists, contact a doctor.	Wash skin with soap and plenty of water. Remove contaminated clothing & wash before wearing again.	Remove person to fresh air immediately.	Provide adequate ventilation.

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