

Land & Environmental Services COSHH Risk Assessment

Reference Number:	CA	\ 809	
Assessment Date:		Review Date:	•
23.01.19		23.01.2021	

1. Product / Process Details					
Name of Product / Substance	Description of activity and/or work process:				
Roundup® Pro Vantage Safety Data Sheet Obtained / Enclosed :	Herbicide used to control unwanted plants [Parks, open spaces, riverbanks, public areas, paved areas and highways] Product supplied in 5ltr containers, used outdoors. Estimate quantity citywide: 2,500 litres per annum.				
	Product Applied: Knapsack, spray buggy and stem injection.				
Supplier: Monsanto UK Limited PO Box 663, Cambourne, Cambridge CB1 0LD E-mail:safety.datasheet@monsanto.com	Physical Form (MSDS Section 9): Liquid				
Contact Tel No: 01954 717550 National Chemical Emergency Centre: 01865 407333					
Chemical Ingredients:	Exposure Time:				
% composition must be detailed Potassium salt of glyphosate Alkylpolyglycoside Nitroryl	Min/ Max Daily exposure: 30 mins - 8 hours Seasonal Activity – April to September				
Microorganisms: N/A					
Persons at risk: Employees Members of public Cleaners Co	ontractors Young Persons New & expectant Mothers				
2. Hazard Classification (MSDS Section 2-3)					
Explosive Corrosive	Health Hazard/ Hazardous to the ozone layer Other:				
Flammable Acute Toxici	Serious Health Hazard				
Oxidising Hazardous to the Environm					
Quantity: Dust / Fume / Mist (S9):	Volatility (S9): Route of Entry (S11):				
Small Medium Large (g/ml) (kg/litres) (tonnes/cu.m)	Low Medium High Inhalation Absorption Ingestion (Skin Contact)				
Workplace Exposure Limits (WELs) please ind	licate n/a where not applicable (MSDS – Section 8)				

	osure level (8hrTWA): available		Short-term exposi No data av	ure level (15 mins): ailable				
	Can a less hazardous substance be used to do the same job ?							
(The supplier n	(The supplier may hold this information) Yes No							
Interactions w	Interactions with other substances (MSDS – Section 10):							
Reacts with ga	Reacts with galvanised steel or unlined steel to produce hydrogen, a highly flammable gas that could explode.							
3. Contr	ol Measures							
Select control and specify details below as required: Training staff for proper use/storage of chemical • Use in minimal quantities • • • • • Training staff for proper use/storage of chemical • General ventilation • Provision of facilities for washing/changing/storage of clothing • Use in minimal quantities •								
	<u>Product/Process</u> Product is supplied in 5 litre containers, mixed and used outdoors in suitable weather conditions.							
Person(s) exposed Employee compliance with safe method of work and accredited training. PPE provided and worn by employee [Nitrile gloves, disposal coveralls and rubber boots]. Face visor worn when mixing neat concentrate with water and also when using stem injection apparatus. Contaminated clothing control measures. Employees advised to cease spraying operation when in close proximity to others i.e. work colleagues, members of public and animals. Avoid inhalation of fumes, vapour and spray. Avoid contact with skin and eyes. Avoid ingestion. Do not smoke, drink or eat during application or when handling product. Good industrial practice in housekeeping and personal hygiene should be followed, wash hands and exposed skin before handling foods and/or smoking.								
Staff are traine	Work Equipment Staff are trained on work equipment [spray buggy, knapsack, stem injection apparatus] Equipment used at recommended pressure rates, to reduce spray drift and airborne particles.							
	Environmental Controls No additional controls required when recommended instructions are followed, no adverse effects are expected.							
Training Requirements Parks Personnel with NPTC Pesticides Certificate of Competence All personnel - PA01 and PA06a PA6INJ [Stem Injection] PA2a [Spray Buggy]								
Personal Protective Equipment required when using the substance (state type and standard) (S8)								
Gloves	BS EN 374 Nitrile Gloves (Chemical Hazards)	Overalls	Type 6 EN13034 Low level spray suit	Footwear	BS EN 345 Rubber boots (Wellingtons)			
Goggles		Full Face Visor	BS EN 166 (Chemical Hazards) *Required when using neat product or stem injection	Other				

OFFICIAL ace mask Respirator Respirator Health surveillance and / or monitoring required? If yes please detail: Yes 4. First Aid and Emergency Actions (S4, 5, 6) General Advice: Inhalation: If inhalation of vapour, mists or fumes Skin Contact: Wash affected skin with plenty of water. Take causes irritation of the nose or throat, or coughing off contaminated clothes, wristwatch and jewellery. Wash remove operator to fresh air. If irritation persists seek contaminated clothes and clean boots before re-use. Seek medical attention. medical advice if symptoms persist. Eye Contact: Immediately flush with plenty of water. If Swallowed: Immediately offer water to drink. DO NOT If easy to do, remove contact lenses. If there are any induce vomiting unless directed by medical personnel. If persistent symptoms, obtain medical advice. symptoms occur, seek medical attention. Fire fighting measures: Contact Emergency Services. Use extinguishing agent suitable for surround fire i.e. water, foam, dry chemical, carbon dioxide (CO2). Minimise use of water to prevent environmental contamination. Emergency Action: Do not let enter drains Spillage kit RPE Other (If Other Please State): Follow safe method of work, wear appropriate personal protective equipment as recommended. Minimise spread. Keep out of drains, sewers, ditches and waterways. Flush spill area with water for small quantities. Larger quantities of liquid to be contained using absorbent material e.g. sand or vermiculite to prevent entry into drains. Sweep up and place into containers for disposal via licenced waste contractor. Storage Arrangements (S7) Pesticide Store Open Bench Cold storage Flammable cabinet Other (If Other Please State): Keep in original container, tightly closed in a well-ventilated secure store. Store at temperatures above 15°C and not exceeding 50 °C. Storage Provisions: Stainless steel, fibreglass, plastic, glass lining. Keep away from food, drink and animal feeding products. Keep out of reach of children. Do not store in galvanised steel or unlined mild steel containers Product reacts with galvanised steel or unlined mild steel to produce hydrogen, a highly flammable gas that could explode. 6. Disposal Arrangements (\$13)

Hazardous Waste (If Other Please State):	Skip 🔀	Return to Supplier	Other	
Do not re-use empty contain Dispose of unused product v Triple rinsed containers may Contract in place for supplie	via licensed was be disposed of	as non-hazardous waste.		

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Is exposure adequately controlled?	Yes		No	
Method Statement Documentation Completed:	Yes			

7. Work Method Statement

All operatives engaged in these activities <u>must</u> follow this work method statement and work in accordance with LES Health & Safety Policy.

Product: Roundup® Pro Vantage COSHH Reference: CA 809

Description: WEED KILLER (Herbicide)

For Use By: Parks Personnel with NPTC Pesticides Certificate of Competence

All personnel - PA01 and PA06a

PA6INJ [Stem Injection] PA2a [Spray Buggy]

- 1. Read manufacturer's instructions before use and follow directions.
- Avoid contact with eyes and skin.
- 3. Good industrial practice in housekeeping and personal hygiene should be followed at all times when using product. **No** smoking, drinking or eating in work area.
- 4. Full-face shield BS EN166 (Chemical Hazards) Nitrile gloves BS EN374 (Chemical Hazards) rubber boots (Wellingtons) BS EN345 and spray suit (Type 6 EN13034 Low level spray tight suit).
- 5. Calculate the application rate/water volume and complete store record sheets.

Knapsack

Fill the spray unit with the half the required amount of clean water, calibrate equipment, open product container and measure the required amount using a clean measuring jug, add product to spray unit avoiding contact with internal components, complete process by adding the remaining required amount of water, replace spray unit cap and tighten. Agitate the spray unit to ensure the product and water is evenly mixed, pressurise unit prior to application and apply herbicide to target plant using lance in accordance with training.

Spray Buggy

Fill the spray unit with the half the required amount of clean water, calibrate equipment, open product container and measure the required amount using a clean measuring jug, add product to spray unit avoiding contact with internal components, complete process by adding the remaining required amount of water, replace spray unit cap and tighten. Agitate the spray unit to ensure the product and water is evenly mixed, pressurise unit prior to application and apply herbicide to target plant using boom and/or lance in accordance with training.

Stem Injection Apparatus

Remove apparatus from storage box, assemble needle to the injection unit, fill container with product using measuring jug to required level, re-attach/secure unit, calibrate equipment and use on target plant.

8. COSHH Assessor						
On-site Assessment Undertaken: Yes	, No	o 🔀	Date	e: 24.01.19		
Details/Location: NA						
COSHH Assessor:	Signature:			Contact No:		
COSHH matrix updated and original document passed to Officer for inclusion in management system						
Yes Date:						
COSHH Co-ordinator:	Signature:			Contact No:		

9. Approval for Use – Authorisation	by Manager			
I confirm that I have considered and understand the substance to be used and the associated hazards. I am satisfied that all of the hazards have been identified and that the control measures to be followed will reduce the risks to as low as reasonably practicable.				
Print Name:	Signed:	Date:		

COSHH RECORD OF INSTRUCTION

Product / Substance:	Roundup® Pro Vantage	Ref No: LC 809

Declaration by Manager/Supervisor

I confirm that the employee who has signed below is competent to undertake the work. My counter-signature indicates that I am happy for the work to proceed.

Declaration by Employee

I confirm that I have read this COSHH Assessment and that I understand the hazards and risks involved and will follow all of the safety procedures stated.

Employee Name [please print]	Signature	Manager/Supervisor countersignature	Date