

Dangerous Goods by Road Policy

(Movement, Handling and Management of)

(HSP 33)

V4.0

September 2024

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Data Protection Act 2018 (UK General Data Protection Regulation – GDPR) Legislation.

The Trust has a duty under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 to ensure that there is a valid legal basis to process personal and sensitive data. The legal basis for processing must be identified and documented before the processing begins. In many cases we may need consent; this must be explicit, informed, and documented. We cannot rely on opt out, it must be opt in.

Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 is applicable to all staff; this includes those working as contractors and providers of services.

For more information about your obligations under the Data Protection Act 2018 and UK General Data Protection Regulations 2016/679 please see the Information Use Framework Policy or contact the Information Governance Team.

Royal Cornwall Hospital Trust rch-tr.infogov@nhs.net

1. Introduction

- 1.1. The Royal Cornwall Hospitals NHS Trust acknowledges that during the course of its activities it will be necessary to handle and transport dangerous goods and the potential for harm to arise to staff, patients, stakeholders, the community and the environment if not adequately managed. The Trust is committed to meeting or exceeding the statutory duties placed upon it in terms of the management of dangerous goods.
- 1.2. This policy has been developed to outline the Trusts actions to ensure compliance with legislation surrounding the transportation of Dangerous Goods.
- 1.3. This version supersedes any previous versions of this document.

2. Purpose of this Policy/Procedure

In accordance with the legislation listed below, this policy outlines the Trusts actions to ensure compliance when transporting substances known to fall into one or more of the 9 hazardous/dangerous groups (classes) which are shown in Appendix 3:

- Carriage of Dangerous Goods by Road 2009, as amended 2011 (CDG).
- European Agreement concerning the international Carriage of Dangerous Goods by Road known as ADR 2017 (updated every 2 years) (ADR).

3. Scope

This policy is applicable to all Trust staff members who manage or are involved in the packing, loading, unloading, handling and carriage of Dangerous Good whilst at work or when carrying out their duties for the Trust.

4. Definitions / Glossary

The Trust	The Royal Cornwall Hospitals NHS Trust.
Trust sites	All areas, sites, buildings or premises owned, occupied or controlled by the Trust.
Staff	All persons who are employed by the Trust whether on permanent or temporary contracts (Written or implied), paid or unpaid, and shall include persons employed through recruitment and employment agency providers to assist the Trust in delivery of services, but excluding contractors and third parties undertaking works for or on behalf of the Trust.
Contractors	Any person employed by or working for a third party organisation working for or acting on behalf of the Trust.

Personal Protective Equipment (PPE)	All equipment which is intended to be worn or held by a person at work that protects them against one or more risks to their health or safety i.e. safety helmets, gloves, eye protection, high visibility clothing, safety footwear, and safety harnesses and any addition or accessory designed to meet that objective.
Risk assessment	The careful examination of what could cause harm, and the likelihood of the harm occurring; in order to decide on precautions to prevent that harm occurring.
DGSA	The Trust appointed Dangerous Goods Safety Advisor.
CDG	The Carriage of Dangerous Goods and Use of Transportable Pressure Equipment Regulations 2009.
ADR	European Agreement concerning the International Carriage of Dangerous Goods by Road.
Dangerous Goods	Liquid or solid substances and articles containing them, that have been tested and assessed against internationally agreed criteria - a process called classification - and found to be potentially dangerous (hazardous) when carried. Dangerous goods are assigned to different Classes depending on their predominant hazard (HSE 2014).
CoSHH	The Control of Substances Hazardous to Health Regulations 2002 (as amended).
Consignor	The person sending a shipment to be delivered whether by land, sea or air.
Consignee	Receiver of goods transported.
Carrier	A person, company or other agent that transports the goods.
HSE	Health and Safety Executive.

Note: Unless otherwise specified all references to the masculine must include the feminine and the singular and the plural.

5. Ownership and Responsibilities

5.1. Role of Chief Executive

- The Chief Executive has overall accountability for the organisation and management of Dangerous Good in accordance with current legislation, guidance and policies and will ensure that the requirements specified are applied to ALL relevant Care Groups. This includes the provision of resources to apply the requirements of this policy in a timely manner.
- Responsibility for the day-to-day implementation of this policy is delegated throughout the organisational management structure.

5.2. Role of the Chief Operating Officer

- The Chief Operating Officer is the nominated Executive Director with responsibility for Health and Safety across the organisation.
- To ensure that suitable and sufficient resources, including training provision, equipment, funding, etc. are provided within the Trust to ensure that the requirements of this document can be met.

5.3. Role of All Directors and Senior Managers

- The Senior Management Team are responsible for ensuring that systems are in place for the suitable and sufficient assessments of risks are undertaken and revised in their areas or responsibility. The assessment will include, where appropriate, the identification of hazardous materials and dangerous goods and the arrangements for safe movement.
- Management systems will be implemented and local enforcement of this document.
- Ensure that the role of “consignor”, “consignee” and “driver” are fully understood, and competent individuals are allocated to these roles. See also 5.8,5.9,5.10 and 5.11 below.
- Senior Managers will also ensure that there is adequate provision of training, resources, equipment etc.

5.4. Role of Heads of Nursing

The Heads of Nursing are to:

- Be aware of the Trust’s Health and Safety Strategy and Policies.
- Support the departmental manager in promoting a Health and Safety culture within your working environment, ensuring participation and involvement when requested.
- Identify potential risks and Health and Safety issues that may impact on the Trusts ability to achieve its objectives, and report concerns through your line management structure.
- Are required to take due care at work, report any accidents, incidents or untoward occurrences and comply with the Trust’s Health and Safety Policies in order that the Trust can fulfil its Health and Safety responsibilities.

5.5. Role of the Managers and Supervisors

- All Managers are responsible, within their sphere of influence, for ensuring that all hazardous materials and dangerous goods are identified, risk assessed and recorded.
- That all relevant staff are adequately trained to ensure that the requirements of this document are applied.

- To seek assistance and support, as required regarding the management of hazardous substances.
- Materials and substances have varying quantity thresholds that when exceeded command the full requirement of the ADR and associated regulations. Appendix 6 – items that can be carried in cars without adaptation provides examples of the maximum quantities of dangerous materials that can be carried without the need for additional equipment, certification and/or specially modified cars.

5.6. Role of the Staff

- Co-operating with the employer in matters relating to Health and Safety. This duty includes compliance with the requirements of this document and making use of the safe systems of work.
- Participate fully in training provided and provide evidence of in date compliance and advise when further training required.
- Utilise appropriately the personal protective equipment provided, reporting any defects or deficiencies with the equipment.
- Discuss with their manager of any role change that may require them to undertake work with dangerous goods.
- Report any incidents, regardless of outcome, or matters which may present a serious and immediate danger via the Trust reporting system and directly to the line manager.

5.7. Contractors and Contractor Sites

- The Trust may, from time-to-time, utilise the services of contractors to transport dangerous goods of various categories.
- The appointing manager shall be responsible for ensuring the competency, registration and suitability of the organisation, the individual employees and the vehicles allocated to the work.

5.8. Role of the Dangerous Goods Safety Advisor

- To advise on the Trust's Health, Safety and Environmental activities in connection with the handling and transportation of Dangerous Goods.
- Advise the Trust, via the Health and Safety Committee, of any changes to statutory or best practice requirements regarding the handling and transportation of dangerous goods.
- Periodically monitor through audit, Trust compliance with the legal requirements governing the safe transportation of Dangerous Goods and maintain procedures in accordance with regulatory Changes.

- Immediately notify the Trust of any failures or breaches regarding the handling and transportation of dangerous goods along with recommendations to address the shortfalls.
- Advise the Trust, at the earliest opportunity, of any changes to statutory requirements or changes in best practice to support the Trust in achieving and maintaining optimum compliance.
- Prepare and present the annual report for management on the undertaking of activities in the Carriage of Dangerous Goods.
- Attend the Trust Health and Safety Committee, or part thereof, as the Specialist Advisor (Dangerous Goods) as requested.
- Carrying out investigations of incident or near miss that may have affected any persons, property or the environment or had the potential to result in damage to property or the environment during the carriage, loading, unloading carried out by the undertaking concerned.
- The advisor shall, after collecting all the relevant information, prepare an incident investigation report to the Trust or to the local public authority, as appropriate. That report shall not replace any report which might be required by the Trust or under any other international or national legislation.
- Make recommendations of appropriate measures to avoid the recurrence of accidents, incidents or serious infringements.
- Undertake at least one audit, per year, of the Trust arrangements for the handling of dangerous goods, reporting to the Trust Health and Safety Manager, with recommendations to address any identified shortfalls.
- Ensuring the Trust records of appropriate training is maintained and advising on training requirement changes.
- The periodic checking of equipment used in connection with the carriage loading or unloading of dangerous goods.
- The implementation of verification procedures to ensure compliance with the requirements governing to loading and unloading.
- Maintain professional competence to undertake the DGSA role, holding the Vocational Training Certificate, valid for transport by road. That certificate shall be issued by a competent authority for a period of 5 years after which a re-qualification is required.

5.9. Head of Health and Safety

- Make recommendations and oversee the appointment of an externally sourced DGSA to undertake the role and act as the Trust's specialist advisor for Carriage of Dangerous Goods/ADR activities, including class 7 goods where appropriate.

- Arrange the presentation of the annual report from the DGSA to the Trust's Health and Safety Committee.
- Advising the Health and Safety Committee and departments of the outcomes of reports, inspections and checks by the DGSA with regards for compliance to Carriage of Dangerous Goods/ADR legislation.

5.10. Role of the Trust as Consignor

The appropriate senior manager(s) will ensure (contacting the appointed DGSA if required) that Dangerous Goods which are presented for carriage are:

- Correctly identified.
- Packaged in accordance with the appropriate packing instructions.
- Marked and labelled.
- Accompanied by the correct documentation.

5.11. Role of the Trust as a Carrier

The appropriate senior manager(s) will ensure (contacting the appointed DGSA if required) that Dangerous Goods carried as defined within the regulations and in accordance with ADR:

- Suitable vehicle used.
- Provide driver with personal protective equipment.
- Provide driver with adequate instructions and training.
- Provide operating Instructions in Writing (liW) to the driver for emergency actions.
- Transportation documentation for Dangerous Good carried.

5.12. Role of Driver

Any member of staff required to transport dangerous goods by road between, to or from any Trust site; shall:

- Ensure that the Dangerous Goods are carried in the manner as required by either the either the Carriage of Dangerous Goods Regulations or in accordance with ADR.
- Ensure that the Dangerous Goods carried in the vehicle are secured and do not present a danger to others and where necessary, segregate non compatible goods.
- Ensure that the vehicle is in road worthy condition as required by the Carriage of Dangerous Goods Regulations or in accordance with ADR.

- Take appropriate action to escalate issues to line management.
- Take appropriate action to ensure the security of the load.
- Take appropriate action in the event of an accident or incident.
- Hold the ADR Vocational Training Certificate suitable for the class of Dangerous Goods being transported when in excess of the ADR limits for 'In Scope' loads. Where a full ADR Vocational Training Certificate is not required, the driver should nevertheless ensure that they are fully trained.
- Ensure that Personal Protection Equipment and Special Equipment as required by the Carriage of Dangerous Goods or ADR are carried and are serviceable.
- Take appropriate actions in the event of an emergency, spillage or accident in accordance with Trust's protocols.

5.13. Role of the Health and Safety Committee

- Shall receive the annual report on behalf of the Trust in the Committee Terms of Reference, of inspections, audits and checks conducted by the DGSA.
- To make recommendations upon any advice or improvements required to maintain compliance. Divisional representatives will ensure that the requirements are implemented within the division or area of responsibility.

6. Standards and Practice

6.1. Training

- 6.1.1. All staff involved in the transportation of dangerous goods shall receive training/instruction, commensurate directly with their duties and as specified in ADR chapter 1.3 and be provided with suitable containment to ensure compliance with the appropriate requirements for transport. Training requests to be coordinated through the Health and Safety Team.
- 6.1.2. Training will depend on type of goods transported, the volume transported and containment provided but will consist of induction training, fact sheet (appendix 4) and driver training in competency where volumes exceed the Limited Quantities (LQ) or load size thresholds for transportation.
- 6.1.3. Fact sheets will be circulated through the Health, Safety and Moving and Handling Management Team as changes are required and following updates of ADR which are undertaken every 2 years.
- 6.1.4. The Trust nominated DGSA, will have specialist training which is renewed on a 5-year basis.
- 6.1.5. The DGSA will advise and update on changes to training requirements contained in statutory and best practice requirements as required.

6.2. Classification, Packaging and labelling Requirements

- 6.2.1. It is a requirement that all goods identified as being dangerous for transportation must be classified, packaged and labelled according to ADR.
- 6.2.2. In order for this to be undertaken all staff should undertake a risk assessment of goods transported and obtain advice from the nominated DGSA or refer to fact sheets as stated above.
- 6.2.3. Packaging instructions applies to UN3373.
- 6.2.4. UN3373 relates to samples that are carried on a day-to-day basis, see Appendix 4. Information Sheet on Transportation of Clinical Waste or Specimens for more details.
- 6.2.5. The packaging shall be of good quality, strong enough to withstand the shocks and loadings normally encountered during carriage, including trans-shipment between vehicles or containers and warehouses as well as any removal from a pallet or over pack for subsequent manual or mechanical handling. Packaging shall be constructed and closed to prevent any loss of contents that might be caused under normal conditions of carriage by vibration or by changes in temperatures, humidity or pressure.
- 6.2.6. The packaging must consist of three parts:
- A primary receptacle.
 - A secondary packaging.
 - An outer packing.
- 6.2.7. Primary receptacles(s) shall be packed in secondary packaging in such a way, that under normal conditions of carriage, they cannot break, be punctured or leak their contents into the secondary packaging.



- 6.2.8. Secondary packaging shall be secured in the outer packaging with suitable cushioning material. Any leakage of the contents shall not compromise the integrity of the cushioning material of the outer packaging.
- 6.2.9. Minimum dimensions for the diamond hazard warning label are 100mm side length.
- 6.2.10. For transport, the mark illustrated above, shall be displayed on the external surface of the outer packaging on a background of a contrasting colour and shall be clearly visible and legible. The width of the line shall be at least

2mm; the letters and numbers shall be at least 6mm high.

6.2.11. The completed package shall be capable of successfully passing a drop test set out in the regulations except that the height of the drop test shall not exceed 1.2m.

6.2.12. The smallest external dimension of the outer packaging shall not be less than 100mm.

6.3. Liquid Substances

6.3.1. The primary receptacle(s) shall be leak-proof.

6.3.2. The secondary packaging should be leak-proof.

6.3.3. If multi fragile primary receptacles are placed in a single secondary packaging, they shall be either individually wrapped or separated to prevent contact between them.

6.3.4. Absorbent material shall be placed between the primary receptacle(s) and the secondary packaging. The absorbent material shall be in quantity sufficient to absorb the entire contents of the primary receptacle(s) so that the release of the liquid substances will not compromise the integrity, of the cushioning material or of the outer packaging.

6.3.5. The primary receptacle or the secondary packaging shall be capable of withstanding, without leakage, an internal pressure of 95kPa (0.95 bar).

6.4. Solid Substances

6.4.1. The primary receptacle(s) shall be sift proof.

6.4.2. The secondary receptacle(s) shall be sift proof.

6.4.3. If the fragile primary receptacles are placed in a single secondary packaging, they shall be either individually wrapped or separated to prevent contact between them.

6.4.4. Sift proof refers to a requirement for certain types of woven plastic sacks typically used for the containment of fertilisers and granular products for example and which must be able to retain fine powder which may sift through the weft.

6.5. Refrigerated or frozen Specimens: Ice, dry ice and liquid nitrogen

6.5.1. When dry ice or liquid nitrogen is used to keep specimens cold, all applicable requirements of these regulations shall be met. When used, ice or dry ice shall be placed outside the secondary packaging or in the outside packaging or over pack. Interior supports shall be provided to secure the secondary packaging or over pack. Interior supports shall be provided to secure the secondary packaging in the original position after the ice or dry ice has dissipated. If ice is used, the outside packaging and over pack shall be leak-proof. If carbon dioxide, solid (dry ice) is used, the packaging shall be designed and constructed to permit release of carbon dioxide gas to

prevent a build-up pressure that could rupture the packaging and shall be marked Carbon Dioxide, Solid or Dry Ice.

- 6.5.2. Infectious substances assigned to UN3373 are packed and marked in accordance with this packaging instruction are not subject to any other requirement in these regulations.
- 6.5.3. Clear instructions on filling and closing such packages shall provide packaging, manufacturers and subsequent distributors to the consignor or to the person who prepares the package to enable the package to be correctly prepared for transport.
- 6.5.4. If any substance has leaked or been spilt in a vehicle or container, it may not be re-used until after it has been thoroughly cleaned and if necessary, disinfected or decontaminated. Any other goods or articles carried in the same vehicle or container shall be examined for possible contamination.

6.6. Vehicle Requirements

Where volumes of Dangerous Goods exceed the limited quantity thresholds, the DGSA should advise on specific transport arrangements.

6.7. Accidents and Incidents

- 6.7.1. All accidents and incidents involving the Carriage of Dangerous Goods must be reported directly to the manager of that department concerned and the incident reported on the Trust's accident reporting system. All incidents must also be notified to the Trust, Health, Safety and Moving and Handling Management Team without delay.
- 6.7.2. Any serious incidents will require the DGSA to prepare an incident investigation report to the management and/or local public authority as required by the ADR.
- 6.7.3. In the event of a road traffic incident involving a vehicle carrying dangerous substances the usual procedures for reporting road traffic incidents must be followed. Where it is necessary to contact the emergency services the operator should be notified of the quantity, nature and UN numbers(s) of the dangerous goods carried.

6.8. Classes and hazard Warning Signs and Symbols

ADR groups dangerous substances into thirteen classes, where each class of dangerous substances has a danger sign to show the major hazard (see Appendix 3).

7. Dissemination and Implementation

- 7.1. Document to be disseminated to the Health and Safety Committee for distribution throughout Care Groups and stored in the trust Document Library with unrestricted access for all staff.
- 7.2. Notification of the publication of the policy will be made via the email bulletin.

8. Monitoring compliance and effectiveness

Information Category	Detail of process and methodology for monitoring compliance
Element to be monitored	Compliance to Carriage of Dangerous Goods and ADR.
Lead	Health and Safety Committee.
Tool	Departments will be inspected / visited by the DGSA on a regular basis to ensure the Trust is maintaining compliance to ADR. DGSA to provide reports from visits or inspections conducted. DGSA will compile annual report to the Trust.
Frequency	Specialist report from DGSA presented to the Health and Safety Committee annually.
Reporting arrangements	Reports received by the Health and Safety Committee as detailed above and reported in accordance with the Committee Terms of Reference.
Acting on recommendations and Lead(s)	The Health and Safety Committee, supported by the specialist advisor, shall make recommendations as appropriate.
Change in practice and lessons to be shared	Where issues are identified within the report; all such comments will be fed back to the relevant department/area by the appropriate representative on the committee within a timeframe identified by the committee to undertake improvement or remedial action.

9. Updating and Review

- 9.1. This policy will need to be reviewed every 3 years, or subject to any industry and Government guidance and best practice updates.
- 9.2. Revisions can be made ahead of the review date when the procedural document requires updating. Where the revisions are significant and the overall policy is changed, the author should ensure the revised document is taken through the standard consultation, approval, and dissemination processes.
- 9.3. Where the revisions are minor for amended job titles or changes in the organisational structure, approval can be sought from the Executive Director responsible for signatory approval and can be re-published accordingly without having gone through the full consultation and ratification process.
- 9.4. Any revision activity is to be recorded in the Version Control Table as part of the document control process.

10. Equality and Diversity

10.1. This document complies with the Royal Cornwall Hospitals NHS Trust service Equality and Diversity statement which can be found in the [Equality Diversity And Inclusion Policy](#) or the [Equality and Diversity website](#).

10.2. Equality Impact Assessment

The Initial Equality Impact Assessment Screening Form is at Appendix 2.

Appendix 1. Governance Information

Information Category	Detailed Information
Document Title:	Dangerous Goods by Road Policy (HSP 033) V4.0
This document replaces (exact title of previous version):	Dangerous Goods by Road Policy (HSP 33) V3.0
Date Issued / Approved:	September 2024
Date Valid From:	September 2024
Date Valid To:	September 2027
Author / Owner:	G Griffiths, Head of Health and Safety
Contact details:	01872 252266
Brief summary of contents:	Policy procedures and guidance for the movement, handling and management of dangerous goods.
Suggested Keywords:	Dangerous Goods Safety Advisor, DGSA, Dangerous Goods, transport, moving samples, chemicals, ADR, GHS.
Target Audience:	RCHT: Yes CFT: No CIOB ICB: No
Executive Director responsible for Policy:	Chief Operating Officer.
Approval route for consultation and ratification:	Health and Safety Committee
Manager confirming approval processes:	G Griffiths, Head of Health and Safety
Name of Governance Lead confirming consultation and ratification:	G Griffiths, Head of Health and Safety

Information Category	Detailed Information
Links to key external standards:	Health and Safety at Work etc. Act 1974. Carriage of Dangerous Goods by Road 2009, as amended 2011 (CDG). European Agreement concerning the International Carriage of Dangerous Goods by Road known as ADR 2017 (updated every two years) (ADR). Control of Substances Hazardous to Health Regulations 2002. CQC 10.
Related Documents:	Health and Safety General Policy. Risk Assessment Policy. COSHH Policy. Personal Protective Equipment Policy. Ionising Radiation Safety Policy
Training Need Identified:	Yes
Publication Location (refer to Policy on Policies – Approvals and Ratification):	Internet and Intranet
Document Library Folder/Sub Folder:	Chief Operating Officer/Health and Safety.

Version Control Table

Date	Version Number	Summary of Changes	Changes Made by
January 2014	V1.0	New Document	J. Robin Gatenby, Health and Safety Manager
April 2017	V2.0	Full review of document, addition of appendix 6	Malcolm Irving Safety Advisor/Auditor Safety Advisor (External)

Date	Version Number	Summary of Changes	Changes Made by
February 2021	V3.0	Full 3 year review	Malcolm Irving, Senior Safety Advisor
August 2024	V4.0	Full 3-year review completed in conjunction with the Trust appointed DGSA and amendments made where required to update with current terminology and legislative requirements. Including the removal of References to expired legislation.	G Griffiths, Head of Health and Safety

All or part of this document can be released under the Freedom of Information Act 2000.

All Policies, Strategies and Operating Procedures, including Business Plans, are to be kept for the lifetime of the organisation plus 6 years.

This document is only valid on the day of printing.

Controlled Document.

This document has been created following the Royal Cornwall Hospitals NHS Trust [The Policy on Policies \(Development and Management of Knowledge Procedural and Web Documents Policy\)](#). It should not be altered in any way without the express permission of the author or their Line Manager.

Appendix 2. Equality Impact Assessment

Section 1: Equality Impact Assessment (EIA) Form

The EIA process allows the Trust to identify where a policy or service may have a negative impact on an individual or particular group of people.

For guidance please refer to the Equality Impact Assessment Policy (available from the document library) or contact the Equality, Diversity, and Inclusion Team
rcht.inclusion@nhs.net

Information Category	Detailed Information
Name of the strategy / policy / proposal / service function to be assessed:	Dangerous Goods by Road Policy (HSP 033) V4.0
Department and Service Area:	Chief Operating Officer/Health and Safety.
Is this a new or existing document?	Existing.
Name of individual completing EIA (Should be completed by an individual with a good understanding of the Service/Policy):	G Griffiths, Head of Health and Safety.
Contact details:	01872 252144.

Information Category	Detailed Information
1. Policy Aim - Who is the Policy aimed at? (The Policy is the Strategy, Policy, Proposal or Service Change to be assessed)	State how the provision and use of personal protective equipment will be managed by the Trust.
2. Policy Objectives	Ensure compliance with Statutory instruments, industry best practice guidance.
3. Policy Intended Outcomes	Safe transport of dangerous goods. Suitable and sufficient assessment and selection of personal protective equipment competent use, storage and maintenance.
4. How will you measure each outcome?	Regular reports to Health and Safety Committee.
5. Who is intended to benefit from the policy?	Staff.

Information Category	Detailed Information
6a. Who did you consult with? (Please select Yes or No for each category)	- Workforce: Yes - Patients/ visitors: No - Local groups/ system partners: No - External organisations: No - Other: No
6b. Please list the individuals/groups who have been consulted about this policy.	Please record specific names of individuals/ groups: Health and Safety Committee.
6c. What was the outcome of the consultation?	Approved.
6d. Have you used any of the following to assist your assessment?	National or local statistics, audits, activity reports, process maps, complaints, staff, or patient surveys: None.

7. The Impact

Following consultation with key groups, has a negative impact been identified for any protected characteristic? Please note that a rationale is required for each one.

Where a negative impact is identified without rationale, the key groups will need to be consulted again.

Protected Characteristic	(Yes or No)	Rationale
Age	No	This policy does not impact on age.
Sex (male or female)	No	This Policy does not impact on gender.
Gender reassignment (Transgender, non-binary, gender fluid etc.)	No	This Policy does not impact on gender reassignment.
Race	No	This Policy does not impact on race.
Disability (e.g. physical or cognitive impairment, mental health, long term conditions etc.)	No	This Policy does not impact on disability.
Religion or belief	No	This Policy does not discriminate with any religious or cultural beliefs.
Marriage and civil partnership	No	This Policy does not impact on marriage/ civil partnership.

Protected Characteristic	(Yes or No)	Rationale
Pregnancy and maternity	No	This Policy does not impact on pregnancy / maternity.
Sexual orientation (e.g. gay, straight, bisexual, lesbian etc.)	No	This Policy does not impact on sexual orientation.

A robust rationale must be in place for all protected characteristics. If a negative impact has been identified, please complete section 2. If no negative impact has been identified and if this is not a major service change, you can end the assessment here.

I am confident that section 2 of this EIA does not need completing as there are no highlighted risks of negative impact occurring because of this policy.

Name of person confirming result of initial impact assessment: G Griffiths, Head of Health and Safety.

If a negative impact has been identified above OR this is a major service change, you will need to complete section 2 of the EIA form available here:

[Section 2. Full Equality Analysis](#)

Appendix 3. Classes and Hazard Warning Diamonds

Class 1
Explosive substance or article



Class 2
Gases



Class 3
Flammable liquids



Class 4.1
Flammable solids,
self-reactive
and desensitised explosive



Class 4.2
Substances liable to
spontaneously combust



Class 4.3
Substances which, in contact
with water emit flammable gases



Class 5.1
Oxidizing substances



Class 5.2
Oxidizing peroxides



Class 6.1
Toxic substances



Class 6.2
Infectious substances



Class 7
Radioactive material



Class 8
Corrosive substances



Class 9
Miscellaneous dangerous
substances and articles



Environmentally hazardous /
Marine Pollutant



Elevated Temperature
Substances



Appendix 4. Information Sheet on Transportation of Clinical Waste or Specimens

1. Introduction

- 1.1. In accordance with the Carriage of Dangerous Goods legislation guidance is provided on the carriage of clinical waste and/or specimens.
- 1.2. This guidance is provided for the use of nurses/doctors involved in the production of clinical waste or taking and returning specimens to base for collection and testing at the laboratories. Trust activities can vary according to whether it is being transported by van or in small cars either leased by the Trust or owned by staff will vary if large quantities are being transported.

2. Clinical Waste and Specimens

Type of product carried	Shipping/technical name and description for transportation purpose.	UN number	Class and signage on container	*Limited quantities for transport
Clinical waste (infectious)	Clinical waste, Unspecified, NOS	UN3291	6.2 See label in appendix 3	333Kgs Unlikely to exceed limit
Day-to-day specimens – blood, urine etc. Not Highly Infectious	Biological substance, Category B	UN3373	6.2 See label in appendix 3	

*Under this threshold it is possible to legally transport without full driver training, vehicle specification etc. but staff should be provided with suitable guidance which is documented and should have awareness training as specified in ADR.

3. Container identification and use

- 3.1. There is no exemption in the packaging of either clinical waste or specimens shown above, it MUST:
 - Be in UN approved rigid, leak-proof container which has been tested and approved by an authorised body.
 - Show the UN number above.
 - Show the shipping name as shown above.
 - Show the class and any subsidiary class by labelling.

- For clinical waste all sharps bins are available on Unit 4 are UN approved for transportation purposes.
 - In addition, the following reusable container could be used to transport bagged clinical waste in the boot of a vehicle. Griff bins with the appropriate colour lid, as shown in the on-line catalogue, these bins are available in 30L or 60L size, recommended size 30L as more manageable.
- 3.2. For the safe transportation of specimens, a 7L reusable container is also available on Unit 4 under transport container. The packaging for these specimens must consist of 3 components:
- A primary receptacle (specimen container).
 - A secondary packaging (laboratory bag).
 - An outer packaging (the reusable container which is rigid). This must be closed and the lid locked into position when it is being transported.
 - Absorbent material must be placed in the container to absorb the volume of liquid being transported.
 - All specimens must be packaged in a way that under normal circumstances they cannot break or leak.
 - It is recommended that any containers used for the transportation of either waste or specimens should be carried upright in the boot of the vehicle and secured, where possible to ensure that it is stored in a cool place away from sources of heat.

4. Special Provisions for carriage (Spillage)

If any substance has leaked or there has been a spillage in the vehicle or container, it may not be reused until after it has been thoroughly cleaned following the Trust's Spillage procedure. Any other goods / articles carried at the same vehicle shall be examined for possible contamination.

5. Transportation

Provided the total quantity of the containers carried do not exceed the Limited Quantities (LQ) shown in the above table and the containers meet the specifications of the regulations, there is no requirement for vehicles used by nurses to display any further notices.

6. Orientation Arrows

Orientation arrows on a package show the 'way up or orientation' that a package must always be stored or transported.



Two black arrows on white or suitable contrasting background.

Appendix 5. Miscellaneous Equipment and Equipment for Personal Protection

Items of equipment's as listed in ADR section 8.1 are to be carried at all times when carrying fully regulated ADR loads and checked by the driver to ensure they are carried, in good condition and in date for use. 'Loads below the relevant limits only require a single 2kg fire extinguisher from the equipment list below.

- Wheel chocks.
- Reflective vest.
- Torch & spare batteries.
- 2 x self-standing warning signs.
- Fire extinguishers for cab & load area dependant on size of vehicle but probably.
- 2 x 2kg dry powder in vans less than 3.5 tonnes GVW.
- Eye wash.
- Information in Writing.
- Goggles.
- Gloves.
- Intervention equipment.
- Respirator and filters for "Toxic" substances.
- First aid kit.
- Spill kit (if required) for the substances being carried must be adequate to contain the leak/spill.

Appendix 6. Items that can be carried in cars without adaptation

- The following items can be carried by staff, in cars (and car derived vans) subject to the stated notes.
- The carriage of items exceeding the limits indicated below require alternative or modified vehicles, specialist training and equipment in accordance with the statutory requirements.
- Unless otherwise stated there is no requirement for external signage to be displayed on the vehicle if these limits are not exceeded.

Item	Minimal Requirements	Labelling	Other Notes
Entonox	Cylinder must be carried in a specifically designed case.		Maximum of two cylinders per vehicle. Full delivery equipment/set must be attached to each cylinder at all times.
Oxygen	Contained in a ridged box or restrained to prevent unnecessary movement.		
Medical Air	Must be “ready for use” i.e. connected to delivery equipment at all times.		
Biological Samples	Maximum total volume 100ml. Contained in sealed vessel, bagged & labelled and contained in ridged container.	Outer container marked with black on white diamond shaped label “3373”.  Minimum dimensions 100 x 100 mm. Outer container must not be smaller than the label.	“Limited Quantity” Training required with biennial refresher.

Item	Minimal Requirements	Labelling	Other Notes
Clinical Waste	Maximum quantity 15kg. Bags must be appropriate colour. Bags must be sealed. Bags contained in a ridged box with close fitting lid.	Outer box marked with biohazard symbol and the UN number 3291. Minimum dimensions 100 x 100 mm. 	Outer box must be "watertight" to prevent any leakage and cleanable if it is to be re-used.
Radioactive Materials	"Accepted Package" contained in a ridged outer container. Maximum total radiation emission less than 2 mSv/hr.	Radioactive sign must be clearly visible on opening the outer container. No requirements for markings on the outer container.	Carriage of Dangerous Goods Awareness Training with biennial refresher.