PURPOSE

The purpose of this Policy is to establish guidelines for employees to prevent the inhalation of airborne pathogens or chemical, biological, radiological, nuclear, or explosive (CBRNE) agents and to protect themselves from other inhaled hazards or contaminants in the workplace.

POLICY

It is the policy of the Office to use and provide respirators approved by the National Institute for Occupational Safety and Health (NIOSH) and the Occupational Safety and Health Administration (OSHA). The Office must comply with OSHA Code of Federal Regulations (CFR) 1910.134 and with the respirator manufacturer’s specifications.

DEFINITIONS

Airborne Pathogens: Microorganisms that may be present in the air and may cause disease in exposed humans.

Chemical Agents: Solid, liquid, or gaseous substances that produce an effect on a living organism by acting on the body tissue, or in an environment by interacting with air, water, and/or soil.

Chemical, Biological, Radiological, Nuclear, or Explosive (CBRNE) Agents: Natural or manufactured chemicals that can be used as one of these agents to kill and/or bring significant harm to a large number of humans or cause great damage to man-made structures such as buildings, natural structures such as mountains, or the biosphere. They are also known as Weapons of Mass Destruction (WMD).

Employee: A person currently employed with the Office in a classified, unclassified, full-time, part-time, contract, or probationary status.

Exposure: An incident where casual contact is made with a person known to be infected or suspected of being infected with an airborne pathogen during the performance of an employee’s duties.

Filtering Facepiece (Dust Mask): A negative pressure particulate respirator with a filter as an integral part of the facepiece or with the entire facepiece composed of the filtering medium.

Fit Test: The use of a protocol to qualitatively (QLFT) or quantitatively (QNFT) evaluate the fit of a respirator on an individual.

Fit Testing Coordinators: Trained and designated employees who shall ensure compliance with OSHA respiratory protection standards by ensuring respirator users receive training and pass a Fit Test before using a respirator. Qualified Training Division staff and Field Training Officers (FTOs) are included in this category.
Modified Duty Status: A temporary adjustment or change to the essential functions of an employee’s current classification, or the temporary assignment of an employee to other duties to accommodate the employee’s restrictions.

Personal Protective Equipment (PPE): Specialized clothing or instruments used by an employee for personal protection against exposure to airborne or bloodborne pathogens, or other potentially infectious materials.

Program Administrators: Employees trained within the Occupational Safety Division (OSD). The OSD is designated to run the respirator program and evaluate its effectiveness.

Respirator: An engineering apparatus or device used by a person to control the content or quality of the atmosphere that they breathe. Respirators cover a vast range of devices from an air-purifying filter to Self-Contained Breathing Apparatus (SCBA).

Self-Contained Breathing Apparatus (SCBA): An atmosphere-supplying respirator for which the breathing air source is designed to be carried by the user.

PROCEDURES

1. The Respirator Program: Respiratory or CBRNE PPE shall be approved and issued by the Office and made available to those employees identified by the Office as having a reasonable likelihood of being exposed to airborne pathogens or CBRNE agents. This program sets forth uniform procedures for the use, testing, training, maintenance, and storage of respirators and equipment. The Occupational Safety Division must approve any changes in the program.

2. Medical Evaluation: Using a respirator may place a physiological burden on an employee that varies with the type of respirator worn, the job and workplace conditions in which the respirator is used, and the medical status of the employee. A medical questionnaire to determine an employee’s ability to use a respirator shall be completed before the employee is fit tested or required to use a respirator in the workplace. The evaluation shall then be reviewed by a physician or a licensed healthcare professional to determine if further physical evaluation is required.

   A. A copy of the front sheet of the questionnaire authorizing respirator use, by the physician or licensed healthcare professional, shall be maintained in the employee’s training record. The completed questionnaire shall be kept in the Occupational Safety Division Nurse’s files.

   B. The evaluation shall be based upon the following:

      1. The type and weight of the respirator to be used.

      2. The duration and frequency of respirator use, including the use for rescue and escape.

      3. The expected physical work effort.

      4. Additional protective clothing and equipment to be worn.

      5. Temperature and humidity extremes that may be encountered.

3. Fit Testing: Employees who may be required to use a respirator with a negative or positive pressure tight-fitting facepiece must be initially Fit Tested with the same make, model, style, and size of respirator that shall be used prior to the use of the equipment. Division commanders shall ensure that Fit Testing is completed at least annually, thereafter.
A. Additional Fit Testing shall also be required whenever the employee, supervisor, licensed healthcare professional, or the Fit Testing Coordinator makes a visual observation of changes in the employee’s physical condition that could affect respirator fit. Such changes include, but are not limited to, facial scarring, dental changes, cosmetic surgery, or an obvious change in body weight.

B. As particular respirators are designed to protect against different pathogens, the Office shall specify duty positions where certain types of respirators may be necessary. The use of an improper respirator may reduce or eliminate the respirator’s effectiveness and may result in serious personal injury or death. For information regarding airborne pathogens, employees shall refer to Policy CP-7, Airborne Pathogens.

4. **Facepiece Seal Protection:** An employee using a respirator shall perform a user seal check to ensure that an adequate face-to-facepiece seal is achieved each time the respirator is worn.

A. Employees shall not have facial hair that comes between the sealing surface of the facepiece and the face for tight-fitting facepieces; that interferes with the valve function; or any condition that interferes with the face-to-facepiece seal or valve function, as specified in the OSHA, 29 CFR, 1910.134.

B. If an employee wears corrective glasses, goggles, or other PPE, the Office shall ensure that such equipment is worn in a manner that does not interfere with the seal of the facepiece to the face of the user. Employees are required to inform their supervisors if they wear corrective glasses or goggles, or other apparatus that would interfere with the seal of the facepiece.

5. **Continuing Respirator Effectiveness:** Supervisors shall maintain an appropriate level of surveillance of work area conditions and the degree of employee exposure or stress. When there is a change in work area conditions or in the degree of employee exposure that may affect respirator effectiveness, the supervisor shall reevaluate the continued effectiveness of the respirator.

6. **General Preventative Measures:** The OSD shall be responsible for any changes to the make, model, or style of the respirator identified for a specific duty position. To reduce the likelihood of exposure, the following safety measures shall be followed when entering an area where a respirator is needed:

A. A filtering facepiece, such as the N95 respirator, shall be worn by employees when entering rooms housing individuals with suspected or confirmed airborne disease, or when transporting such individuals in a closed vehicle. Before the individual is moved out of his housing unit or transported, he shall be instructed to use an N95 respirator and not to remove it until Correctional Health Services (CHS) staff deems it appropriate to remove the respirator, as specified in Policy CP-7, Airborne Pathogens. Disposable N95 respirators shall be made available for all employees deemed by the Office, to be at risk of exposure.

B. SCBAs shall be used in an atmosphere that poses an immediate danger to life or health, would cause irreversible adverse health effects, or would impair an individual’s ability to escape from a dangerous atmosphere. This would also include the physical activity of rescuing people, fire suppression, or both, when inside of buildings or enclosed structures which are involved in a fire situation beyond the initial stage.

C. Supervisors shall ensure that employees leave the respirator use area for the following:

1. To wash their faces and the respirator facepieces, as necessary, to prevent eye or skin irritation associated with the use of a respirator.
2. If they detect vapor or gas breakthrough, changes in breathing resistance, or leakage of the facepiece, the supervisor shall be notified to ensure that the respirator is cleaned, repaired, or replaced, before allowing the employee to return to the work area.

3. To replace the respirator or the filter, cartridge, or canister elements.

D. Decontamination shall be completed in a manner prescribed during employee training and at a location determined by a supervisor, and the dynamics of the incident shall be conducive to the safety of all involved. The supervisor shall also ensure proper decontamination procedures are followed and medical attention is provided to the employee when needed.

7. **Training Division Responsibilities:** The Training Division shall:

A. Implement training and testing schedules for employees in the application and use of the SCBA and define the criteria needed to successfully complete the testing.

B. Provide initial and, when necessary, remedial training to employees in the proper use and removal of the SCBA. The Training Division Commander, or his designee, shall review and, if necessary, update the SCBA training and testing annually.

C. Provide a Fit Testing Coordinator who shall oversee the respirator training, facilitate remedial training, provide updates, and coordinate with the Program Administrator in the event of any training procedural changes or cases of repeated employee failures. The Fit Testing Coordinator shall also provide remedial training for an employee who fails any portion of the Fit Testing certification and coordinate any further evaluation, as designated by his respective commander. If the FTO is aware that the respirator program is not being followed, he shall notify his supervisor and the Fit Testing Coordinator, who shall notify the Program Administrator.

8. **Training:** Employees requiring respirators, SCBAs, or CBRNE PPE in the course of their respective duties shall complete a comprehensive training program for each type of equipment they may use prior to using the equipment in their work environment.

A. Employees below the rank of lieutenant are required to demonstrate proper use of the SCBA equipment every 180 days and shall be required to demonstrate knowledge in the following areas annually for all other types of respirators:

1. Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator.

2. The limitations and capabilities of the respirators.

3. How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions.

4. How to inspect, put on and remove, use, and check the seals.

5. The procedures for maintenance and storage of the respirator.

6. How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators.

B. Additional training shall be administered when any of the following situations occur:
1. Changes in the workplace or the type of respirator render the previous training obsolete.

2. Inadequacies in the employee’s knowledge or use of the respirator indicate that the employee has not retained the requisite understanding or skill, and requires remedial training. The Fit Testing Coordinator shall provide the remedial training.

3. Any other situation arising in which retraining appears necessary to ensure safe respirator use, such as an inability to gain proper seal of the mask to skin during proficiency evaluations, or if there is any change in facial features, as specified in this Policy.

4. The Fit Testing Coordinator shall facilitate additional training of any Fit Test failure documented by a FTO, as requested by the Detention Advanced Officer Training Commander, or the employee’s division commander.
   a. If an employee is unable or fails to demonstrate proficiency to his designated FTO, he shall be referred to the Fit Testing Coordinator for remedial testing within 14 days of the initial test.
   b. A memorandum shall be forwarded to the officer’s shift supervisor and to the Training Division Commander, or his designee, stating the failure at the time of the initial testing, and the employee shall be placed in a modified duty status.
   c. Upon successful completion of the Fit Test, the officer may return to normal duty. A copy of all memorandums shall be placed in the officer’s Training File.

C. Employees shall be provided with training on the authorized use of the CBRNE PPE in the event of a Weapon of Mass Destruction (WMD) incident or Hazardous Materials (HAZMAT) incident. This equipment shall be used to protect the employees and enhance the capability of the Office to respond to, and mitigate against, emergency incidents involving the use of CBRNE attacks. It shall also enhance the capability of the Office to respond to field incidents where chemical agents may be deployed.

9. **Fit Tests Record Keeping:** The Fit Testing Coordinator shall ensure that the Office maintains a copy of failure notification memorandums, as well as Remedial Fit Test/Respirator Testing Forms and any supplementary documentation, as the result of remedial testing. The Fit Testing Coordinator shall notify the Program Administrator of any employee who fails to pass a Fit Test. The Program Administrator shall ensure that the Office maintains the following employee records in compliance with OSHA regulations:

   A. Records of medical evaluations required by the OSHA CFR must be retained and made available for the term of employment, plus 30 years.

   B. Records of the QLFTs and QNFTs administered to an employee, reflecting the following:
      1. The name or identification of the employee tested.
      2. Type of Fit Test performed.
      3. Specific make, model, style, and size of respirator tested.
      4. Date of test.
      5. The pass or fail results for QLFTs or the fit factor and strip chart recording or other recordings of the test results for QNFTs.
6. The Fit Test records for respirator users shall be retained until the next test is administered.

10. Maintenance and Care: All employees shall be responsible for immediately reporting any deficiency or malfunction of a respirator to the appropriate FTO or supervisor. The following steps are established to provide for the cleaning, disinfecting, storage, inspection, and repair of respirators used by employees:

A. Respirators shall be cleaned and disinfected according to the manufacturer’s instructions, and at the following intervals:

1. Respirators issued for the exclusive use of an employee shall be cleaned and disinfected, as often as necessary, to be maintained in a sanitary condition.

2. Respirators used during the officer’s Fit Testing, training, or emergencies shall be cleaned and disinfected after each use.

3. Respirators used by more than one employee shall be cleaned and disinfected before and after each use.

B. Respirators shall be stored as follows:

1. All respirators shall be stored in the container provided according to the manufacturer’s instructions to protect them from damage, contamination, dust, sunlight, extreme temperatures, excessive moisture, and damaging chemicals.

2. Respirators shall be packed or stored to prevent distortion or deformation of the facepiece or exhalation valve.

3. Respirators shall be kept accessible to employees in their work area and stored in compartments or in covers that are clearly marked as containing emergency respirators and emergency equipment.

11. Respirator Inspection: All respirators used in routine and emergency situations shall be inspected before each use and during cleaning. The PPE and Respirator Equipment List shall be updated to show who the equipment is issued to, its condition, and the need for replacement of the various parts.

A. Respirators shall be inspected as follows:

1. All respirators maintained for use in emergency situations shall be inspected at least monthly, in accordance with the manufacturer’s recommendations. The functional inspection shall include respirator function, tightness of connections, and the condition of various parts including, but not limited to, the facepiece, head straps, valves, connecting tubes and cartridges, canisters, or filters. The inspection shall also be made of elastic parts for pliability and signs of deterioration.

2. Facility Maintenance Officers (FMOs) shall be responsible for determining that the regulators and warning devices are functioning properly within the facilities.

3. SCBAs shall be inspected monthly. Air cylinders shall be maintained in a fully charged state and shall be recharged when the pressure falls to ninety percent of the manufacturer’s recommended pressure level.

4. Respirators shall be inspected for proper function before and after each use.
B. Inspection reports shall be maintained electronically or in hard copy at the division and facility level. Respirators maintained for emergency use shall have certification records documenting the following:

1. The date the inspection was performed.
2. The name and signature of the person who conducts the inspection.
3. The findings of the inspection to include any required remedial action.
4. The serial number and location of the inspected respirator.

C. Respirators that fail an inspection or are otherwise found to be defective shall be removed from service and adjusted, repaired, or discarded using the following procedures:

1. Repairs or adjustments to respirators shall be made only by persons who are appropriately trained to perform them.
2. Repairs shall be made according to the manufacturer’s specific recommendations for the type of respirator.
3. Only the manufacturer’s NIOSH-approved parts, specifically designed for the particular type of respirator, shall be used.
4. Adjustment or repair to the reduction or admission valves, regulators, and alarms shall only be made by a manufacturer or a technician trained by the manufacturer.

12. **Breathing Air Quality and Use:** Compressed breathing air shall meet at least the requirements for Grade D breathing air described in American National Standards Institute (ANSI)/Compressed Gas Association Commodity Specification for Air, G-7.1-1989. FMOs shall ensure that all filters, cartridges, and canisters used in the workplace are labeled and color coded with the NIOSH approval label and that the label is not removed and remains legible.

13. **Respirator Program Evaluation:** The Program Administrator, or his designee, and the Fit Testing Coordinator shall conduct evaluations of the workplace, as necessary, to ensure that the provisions of the current written program are being implemented and that it continues to be effective. Inquiries shall be made of employees to ensure that they are using respirators properly. Additionally, employees shall be asked to share their views of the program’s effectiveness and to identify any problem areas. Any problem areas identified shall be corrected, as soon as possible. Factors to be assessed include, but are not limited to:

A. Respirator fit, to include the ability to use the respirator without interfering with workplace performance.

B. Appropriate respirator selection for the hazards to which the employee is exposed.

C. Proper respirator use under the workplace conditions the employee encounters.

D. Proper respirator maintenance.