

**Policy and Procedure – Policy No.VII.F.2**

**Policy Name:** **Respiratory Protection Program**

**Policy:** *The policy serves to protect employees from potentially harmful respiratory particle exposure and to satisfy regulatory agency requirements.*

**Responsible Party:** *Individuals who physically work within the IHS health care facility at CSU including Civil Service, USPHS Commissioned Corps Officers, other personnel, consultants, contractors, temporary employees, and volunteer workers*

**Purpose:** *To establish a respiratory protection program within the Catawba Service Unit. To prevent and control the spread of infection and disease while assuring the highest quality of patient care and optimal protection and safety for patients and personnel.*

**Procedures:****I. Introduction:**

In the control of those occupational diseases caused by breathing air contaminated with dusts, fogs, fumes, mists, gases, smokes, sprays, or vapors, the primary objective shall be to prevent atmospheric contamination. This shall be accomplished as far as feasible by accepted engineering control measures (for example, enclosure or confinement of the operation, general and local ventilation, and substitution of less toxic materials). When effective engineering controls are not feasible, or while they are being instituted, appropriate respirators shall be used.

**II. Purpose and Scope:**

The practices and procedures described here constitute the respiratory protection program under which respirators are effectively utilized at Catawba Service Unit.

**III. Responsibility:**

A. Infection Control Officer is the respirator program administrator. He/she is responsible for:

1. Administering the overall program.
2. Implementing training and instruction programs.
3. Ensuring that medical evaluation procedures are implemented.
4. Selection and provision of appropriate respirators.

B. Supervisors are responsible for ensuring that the respiratory protection procedure is implemented in their particular areas. Duties of supervisors include:

1. Ensuring that employees under their supervision have received appropriate training, fit testing, and annual medical evaluations.
2. Ensuring the availability of appropriate respirators and accessories.
3. Being aware of tasks requiring the use of respiratory protection.
4. Enforcing the proper use of respiratory protection when necessary.
5. Ensuring that respirators are properly cleaned, maintained and stored according to the respiratory protection plan.
6. Ensuring that respirators fit well and do not cause discomfort.
7. Monitoring work areas and operations to identify respiratory hazards.

C. Each employee has the responsibility to wear his or her respirator when and where required and in the manner in which they were trained and:

1. Care for and maintain their respirators as instructed, and store them in a clean sanitary location.
2. Inform the supervisor if the respirator no longer fits well, and request a new one.
3. Inform the supervisor or program administrator of any respiratory hazards that they feel are not adequately addressed in the work place and of any other concerns that they have regarding the program.

#### **IV. Respirator Selection:**

Infection Control Officer and Safety Office will select respirators to be used on site, based on the hazards to which workers are exposed. He/She will conduct a hazard evaluation for each operation, process, or work area that will include:

1. Identification and development of a list of hazardous substances used in the workplace, by department, or work process.
2. Review of work processes to determine where potential exposures to these hazardous substances may occur.
3. Exposure monitoring to quantify potential hazardous exposures.

#### **V. Medical Evaluations:**

1. Infection Control Officer is responsible for seeing that medical evaluations are conducted to determine that employees who are required to, or those who are allowed to voluntarily wear respirators are medically able to do so.
2. Medical Providers of Catawba Service Unit or provider of the employee's choosing will provide the medical evaluations.
3. Medical evaluations will be conducted using Appendix C of the standard. Infection Control Officer will give a copy to all employees requiring medical evaluations to complete and return.
4. Follow-up medical exams will be granted as found necessary by the Medical Providers of the Catawba Service Unit or provider of the employee's choosing.
5. All employees will be granted an opportunity to speak with their Medical Provider about their medical evaluation, if they request to do so.

6. Infection Control Officer will provide Medical Providers of the Catawba Service Unit or provider of the employee's choosing with a copy of this program, a copy of the OSHA respirator standard, a list of hazardous substances in the work place, the employee's job title, proposed respirator type and weight, length of time required to wear respirator, expected physical work load, potential temperature and humidity extremes and protective clothing required.
7. After an employee has received clearance and begun to wear a respirator, additional medical evaluations will be provided when:
  - a. The employee reports signs/symptoms related to their ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing.
  - b. Medical Providers of the Catawba Service Unit or provider of the employee's choosing or supervisor informs the program administrator that the employee needs to be re- evaluated.
  - c. Information from this program, including observations made during fit tests and program evaluation indicates a need for re-evaluation.
  - d. A change occurs in workplace conditions that may impose an additional physiological burden on the employee.

#### **VI. Fit Tests:**

1. Infection Control Officer is responsible for conducting fit tests for all employees required to wear tight-fitting respirators.
2. Fit tests must be conducted:
  - a. Before employees are allowed to wear any tight-fitting face piece respirator.
  - b. When there are changes in the employee's physical condition that could affect respiratory fit.
  - c. At least annually thereafter.
  - d. Using the make, model, and size of respirator they will actually use.
  - e. Using OSHA approved fit test protocols found in Appendix B of the OSHA standard. The methods in use at this facility are saccharin and BITREX.

#### **VII. Respirator Use:**

1. Employees must use their respirators in accordance with the training they receive.
2. Employees shall conduct user seal checks each time they wear their respirator.
3. Employees must not be permitted to wear tight-fitting respirators if they have any condition such as facial scars, facial hair, or missing dentures, which prevents them from achieving a good seal.

4. IDLH (Immediately dangerous to life and health) procedures
  - a. One or more trained and equipped standby person stays outside the IDLH atmosphere.
  - b. Visual, voice, or signal line communication is maintained with the employee in the IDLH atmosphere.
  - c. The employer is notified before the standby person enters the IDLH atmosphere to provide emergency rescue.
  - d. The employer must provide assistance appropriate to the situation.

**VIII. Training and Information:** Effective respirator training must be provided for employees required to wear respirators. The training must be comprehensive, understandable, and must be provided before requiring an employee to use a respirator and at least annually thereafter.

1. Employees must be able to demonstrate at least:
  - a. Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protection of the respirator;
  - b. What the limitations and capabilities of the respirator are;
  - c. How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions.
  - d. How to inspect, put on and remove, use, and check the seal;
  - e. What the procedures are for maintenance and storage of the respirator;
  - f. How to recognize medical signs and symptoms that may limit or prevent the effective use of the respirator.
  - g. The general requirements of the OSHA respirator standard.
2. Retraining must be given when:
  - a. Changes in the workplace or the type of respirator used occur;
  - b. It becomes obvious by employees' knowledge or use of the respirator that the employee has not retained the necessary understanding or skill.
  - c. Other situations arise in which retraining appears necessary.

**IX. Program Evaluation:**

1. Infection Control Officer is responsible for ensuring that the written respiratory protection program is being followed and for consulting employees to see if they are using the respirators properly.
2. Infection Control Office is responsible for assessing the effectiveness of the respiratory protection program by:
  - a. Consulting employees required to use respirators to identify any problems and corrective measures necessary.
  - b. Determining if appropriate respirator selection is made for the hazards to which the employee is exposed.
  - c. Determining if respirator fit allows the use of the respirator without interfering with effective workplace performance.
  - d. Determining if respirators are being maintained properly.

## **X. Recordkeeping:**

1. A written copy of this program and the OSHA standard is kept in the infection control policies and procedures folder.
2. Infection Control Officer keeps copies of medical evaluations.
3. Infection Control Officer has copies of fit test results that show the employees' names, type of fit test performed, specific make, model, and size of respirator tested, date of test, the pass/fail results for qualitative fit tests or other recording of the fit test results for quantitative fit tests.

**References:**            *Respiratory Protection Program*. South Carolina OSHA. Accessed on: March 4, 2020. [Online]. Available: <http://www.scosha.llronline.com/scovp/pdf/wordfiles/respiratoryprotection.pdf>

**Effective Date:**        03/04/2020

**Review:**                 Annually

**Approved:**              See Signature Page at the beginning of Section VII – Infection Prevention and Control and Safety