# Division 4 Agriculture

# Respiratory Protection Program

# [name of your company]

# When respirators are REQUIRED for normal work operations and emergencies

Includes a section on voluntary use of respirators, if allowed.

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# Purpose

The purpose of this program is to ensure that employees of **[name of your company]** are protected from respiratory hazards during their work. We understand that accepted engineering controls – such as enclosing the source of contamination, removing contaminated air with general or local exhaust ventilation, and eliminating sources of air contaminants by substituting less toxic materials – are the preferred methods of protection and must be used to the extent feasible. However, for some types of tasks, during an emergency situation, and while engineering controls are being established, respirators are necessary to protect the health of our employees.

**[name of your company]** will comply with the following requirements:

* Maintain an effective, written respiratory protection program that is managed by a program administrator.
* Keep our program updated to reflect procedures specific to our worksite and changes in conditions that require the use of respirators.
* Include each employee required to use a respirator in this program.

# Scope and application

This program covers all employees who are required to wear respirators during their work and during foreseeable emergencies. Employees required to use respirators will participate in our respiratory protection program at no cost to them; for these employees, **[name of your company]** will payfor medical evaluations, fit testing, respirators, and necessary supplies.

Certain parts of this program apply to employees who, although not required to use respirators, are allowed to use certain respirators – such as dust masks for comfort.

# Responsibilities

## Program administrator

The program administrator is the knowledgeable person who is responsible for managing and overseeing this company’s respiratory protection program. The program administrator at this workplace is **[name of the program administrator]**. The program administrator may delegate specific duties to Supervisors or other employees but is responsible for ensuring that both the details and the overall effectiveness of this program are maintained. These duties include:

* Develop procedures to evaluate the respiratory hazards and to identify the work areas, processes or tasks where employees are required to use respirators.
* Manage the medical evaluation requirements for employees who use respirators.
* Select respirators that will provide effective protection for employees based on a reasonable estimate of employee exposures and an identification of the contaminant’s chemical state and physical form.
* Ensure that employees use respirators according to the respirator’s NIOSH certifications.
* Ensure that employees receive respiratory protection training.
* Ensure that employees store and maintain respirators properly.
* Manage the respirator fit testing procedures.
* Maintain the required records.
* Inform contractors of this company’s respiratory protection requirements.
* Periodically evaluate the respiratory protection program.
* Update the respiratory protection program when necessary.

## Supervisors

Supervisors ensure that the respiratory protection program is implemented in their work areas. Supervisors must understand the requirements of this program and ensure that the employees under their supervision understand and comply with these requirements. Supervisors have the following responsibilities:

* Ensure that employees they supervise have received appropriate medical evaluations, training, and fit testing.
* Ensure that appropriate respirators, spare parts and accessories are available.
* Know the work areas, processes or tasks that require respiratory protection.
* Enforce the proper use of respirators.
* Ensure that respirators are cleaned, maintained, and stored as required by this program.
* Monitor work areas to identify respiratory hazards.
* Work with the program administrator to address respiratory hazards, program concerns, and related duties.

## Employees

Employees must consistently use their respirators as required and do the following:

* Clean and maintain their respirators as instructed and store them in a sanitary location.
* Immediately inform their supervisor about any problems with the fit, seal, or function of their respirator.
* Inform their supervisor or the program administrator about any new respiratory hazards or any concerns they have about the effectiveness of the respiratory protection program.

# Respirator selection is based on hazard evaluations

The program administrator selects types of respirators based on an evaluation of the hazards to which workers are exposed and according to Oregon OSHA requirements at OAR 437-004-1041(4). Respiratory hazards are evaluated for each work process or work area where airborne contaminants may be present during routine operations or foreseeable emergencies. The evaluation includes the following:

* Identification and characterization of the contaminants that are present in the workplace, including the chemical state, physical form, and a reasonable estimate of employee exposure levels. This is achieved through a survey of the workplace, and a review of process records and chemical Safety Data Sheets. Air monitoring should be performed to quantify exposures to any substance with a Permissible Exposure Limit. Atmospheres with the potential for being immediately dangerous to life and health (IDLH) are treated as a serious hazard and appropriate (self-contained or supplied air) respiratory protection is provided.
* A review of work processes, workplace conditions, and user-factors to determine where and when exposures to these contaminants may occur. This includes conversations with employees and supervisors.

The program administrator must revise and update the hazard assessment any time there are changes in the workplace that may affect employee exposures. Employees who feel that additional respiratory protection is necessary must contact their supervisor or the program administrator about their concerns. The program administrator will evaluate the hazards and inform the employees about the results. If additional respiratory protection is necessary, all elements of this program will apply and this program will be updated as needed.

# NIOSH certifications

All respirators must be certified by the National Institute for Occupational Safety and Health (NIOSH) and used according to the terms of that certification. All filters, cartridges, and canisters must be labeled with the appropriate NIOSH-approval label; the label must not be removed or defaced. All replacement parts and accessories for respirators must be made specifically for that respirator make and model.

# Medical evaluations

Employees who are required to wear tight-fitting respirators or who are allowed to wear tight-fitting respirators other than dust masks must have a confidential medical evaluation to ensure that using the respirator will not put their health at risk. Employees are not permitted to use tight-fitting respirators until a physician or other licensed healthcare provider (PLHCP) has determined that they are medically able to do so. Any employee refusing a medical evaluation will not be permitted to work in areas that require tight-fitting respiratory protection.

A PLHCP at **[name of your medical service provider]** will conduct medical evaluations.

* The medical evaluation will be based on the questionnaire in Appendix C, 437-004-1041. The program administrator will provide a copy of the appropriate parts of this questionnaire to each employee who requires a medical evaluation.
* All affected employees will be given a copy of the medical questionnaire to complete and return to the physician in a stamped, pre-addressed envelope. Employees will be permitted to fill out the questionnaire on company time.
* The company will attempt to assist employees who are unable to read the questionnaire. However, employee responses to the questions are considered private, protected health information that is intended only for the use of the medical provider. If the employee has questions that we can not help them with for reasons of privacy, the employee may seek help from another trusted source or the company will send them directly to the medical provider for the medical evaluation.
* All employees will have the opportunity to speak to the PLHCP about their medical evaluation.
* The program administrator will provide **[name of the medical provider]** with the following information:
* A copy of this respiratory protection program, and a copy or a link to OAR 437-004-1041, including Appendix C.
* A list of hazardous substances the employee may be exposed to at work.
* All the required information in Part B, Section 2 of Appendix C, the Medical Evaluation questionnaire.
* Any employee required to wear a powered (positive-pressure) air-purifying respirator for medical reasons will be provided with a powered air-purifying respirator.

## Additional medical evaluations will be provided under the following circumstances:

* The PLHCP specifies a follow-up or other periodic re-evaluation.
* The employee reports signs or symptoms related to his or her ability to use a respirator, such as shortness of breath, dizziness, chest pains, or wheezing.
* The supervisor notices symptoms or problems and informs the program administrator that the employee needs to be re-evaluated.
* Information, including observations made during fit testing and program evaluation, indicates a need for reevaluation.
* A change occurs in workplace conditions or activities that could result in an increased physiological burden on the employee.

NOTE: Information from medical examinations and questionnaires is confidential and can be shared only between the employee and the physician.

# Fit testing

Fit testing is required for employees who wear the following types of respirators: **[identify the types of respirators].** Employees who voluntarily wear respirators may also be fit tested upon request.

Initially, employees will be provided with several models and sizes of respirators so that they may find an acceptable respirator with optimal fit. Employees will be fit tested with the make, model, and size of respirator that they will actually wear.

* Fit testing will be conducted according to an appropriate method using the fit-test procedures in 437-004-1041, Appendix A.
* Qualitative fit tests (QLFT) cannot be used for negative pressure Air-Purifying Respirators in contaminated atmospheres greater than 10 times the PEL.
* Quantitative fit tests (QNFT) must achieve a fit factor of at least 100 for a tight-fitting half mask and a fit factor of at least 500 for a tight-fitting, full face mask.

# Respirator use

Employees will use their respirators as required by this program and according to the training they receive. Respirators may only be used in a manner that is certified by NIOSH or the manufacturer.

Employees must conduct user seal checks each time that they put on their respirators. Employees must use either the positive or negative pressure check (depending on which test works best for them) specified in 437-004-1041, Appendix B-1.

Employees will be permitted to leave their work areas to clean their respirators, to change filters or cartridges, replace parts, or to inspect respirators as necessary. Employees should notify a supervisor, if possible, before leaving a work area.

Employees are NOT permitted to wear tight-fitting respirators if they have conditions – such as facial scars, facial hair, or missing dentures – that prevent them from achieving a good seal. Facial hair must not contact sealing surfaces or interfere with the valve function of the respirator. Employees are not permitted to wear headphones, jewelry, or any other articles or clothing that may interfere with the face piece-to-face seal.

## Escape respirators

Escape respirators are for emergencies only and must be inspected before being carried into the workplace. When the emergency alarm sounds, employees in **[identify work areas]** must immediately don emergency escape respirators, shut down equipment, and evacuate to designated safe areas. The **[name of your company]** emergency action plan describes emergency evacuation procedures.

## Respirator malfunction

Respirators that are defective or that have defective parts must be removed from service immediately. The employee must discontinue use and inform his or her supervisor that the respirator is not working correctly. The supervisor must ensure that the employee has the respiratory protection necessary to safely perform the work.

An employee who discovers a defect in a respirator must inform his or her supervisor and give the respirators to someone with the authority to decide whether to take the respirator out of service, fix it on the spot, or dispose of it. The program administrator will determine who has this authority.

## Locations immediately dangerous to life or health

The program administrator has identified the following locations as immediately dangerous to life or health (IDLH): **[identify IDLH locations]**

## Procedures for entry into IDLH locations – Oxygen-deficient atmospheres or other potentially fatal respiratory hazards

* Only employees with positive- pressure SCBA or positive-pressure supplied-air respirators are permitted to enter IDLH locations
* At least one person must stay immediately outside the IDLH atmosphere to respond to emergencies.
* The person entering the IDLH atmosphere and the person outside the IDLH atmosphere must maintain visual, voice, or signal contact.
* The person outside the IDLH atmosphere must be trained and equipped to respond to the emergency.
* The person outside the IDLH atmosphere must use a positive- pressure SCBA or positive-pressure supplied-air respirator with auxiliary SCBA and appropriate rescue retrieval equipment.
* The program administrator or another designated person must be notified before an emergency responder enters the IDLH atmosphere.

# Air quality in atmosphere-supplying respirators

Only Grade D breathing air will be used for atmosphere-supplying respirators. The program administrator will coordinate deliveries of compressed air with the vendor. The vendor must certify that the air in the cylinders meets Grade D breathing-air specifications.

# Cleaning, maintenance, change schedules and storage

## Cleaning

Respirators must be regularly cleaned and disinfected at the respirator cleaning station **[identify the location]**. Respirators must be cleaned as often as necessary to keep them sanitary.

Atmosphere supplying and emergency use respirators must be cleaned and disinfected after each use.

The following procedure must be used for cleaning and disinfecting respirators:

1. Disassemble respirator. Remove filters, canisters, or cartridges.
2. Wash the face piece and parts in warm water with a mild detergent. Do not use organic solvents.
3. Rinse completely in clean warm water.
4. If used by more than one individual, wipe the respirator with disinfectant wipes.
5. Air-dry the respirator in a clean area.
6. Reassemble the respirator, inspect it, and replace any defective parts.
7. Put the respirator in a clean, dry, plastic bag or other air-tight container.

The program administrator will ensure an adequate supply of appropriate cleaning and disinfection materials and appropriate replacement parts at the cleaning station. Employees should contact their supervisor or the program administrator when supplies are low.

## Maintenance

Respirators must be properly maintained to ensure that they work properly. Maintenance involves a thorough visual inspection for cleanliness and defects. Worn or deteriorated parts must be replaced. No components will be replaced or repairs made except those recommended by the manufacturer. The manufacturer must repair the regulators or alarms of atmosphere-supplying respirators.

The following checklist must be used to ensure respirators are properly inspected:

|  |  |
| --- | --- |
| **Respirator inspection checklist** | |
| **Face piece** | No cracks, tears, or holes  No facemask distortion  No cracked or loose lenses or face shields |
| **Head straps** | No breaks or tears  No broken buckles |
| **Valves** | No residue or dirt, cracks, or tears in valve material |
| **Filters and cartridges** | NIOSH approved  Gaskets seat properly  No cracks or dents in housing  Proper cartridge for hazards |
| **Air supply systems** | Breathing-quality air is used; breathing air meets requirements in **437-004-1041**  Supply hoses are in good condition  Hoses are properly connected  Settings on regulators and valves are correct |

Employees are permitted to leave their work to maintain their respirators in a designated safe area under the following circumstances:

* To wash their own faces and the respirators’ face pieces to prevent eye or skin irritation.
* To replace filters, cartridges, or canisters.
* When they detect vapor or gas breakthrough or leakage in the face piece or detect other damage to the respirator or its components.

## Change Schedules

Air-purifying particulate filters, cartridges, or filtering face pieces must be replaced when breathing resistance increases, the cartridge surface is contaminated, or when the filter is damaged.

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***Note to users of this program.*** *For gases and vapors, odor and irritation are not considered adequate warnings for replacement. Because end-of-service-life indicators (ESLI) are available for a limited number of chemicals, employers must develop change-out schedules for cartridges and canisters used with air-purifying respirators for protection against gases and vapors.*

The Worker Protection Standard contains criteria for specific change out schedules for respirator canisters and cartridges. See Division 4/W 170.240. If you use pesticides for agricultural uses, you may be subject to these requirements.

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## Respirator storage

Respirators must be stored in a clean, dry area according to the manufacturer’s recommendations. Employees must clean and inspect their respirators according to the provisions of this program and store them in a plastic bag or other approved container in their own lockers. Each employee’s name must be on the bag or container and it must only be used to store the respirator.

The program administrator will store unused respirators and respirator components in their original manufacturer’s packaging at **[identify location]**.

# Training

The program administrator will ensure training is provided to respirator users and supervisors. Employees must be trained before using a respirator. Supervisors must be trained before supervising employees who wear respirators. Training will cover the following topics:

* This respiratory protection program
* The Oregon OSHA respiratory protection standard, OAR 437-004-1041
* Workplace respiratory hazards and their potential health effects
* Selection and use of respirators
* Limitations of respirators
* How to put on respirators and perform user seal checks
* Fit testing
* Emergency procedures
* Maintenance and storage
* Medical signs and symptoms that limit the use of respirators

Employees will be retrained annually and whenever they change jobs or use a different respirator. Employees must demonstrate their comprehension through hands-on exercises.

The program administrator will document the training, including the type, model, and size of respirator for which each employee has been trained and fit tested.

# Program evaluation

The program administrator will conduct periodic evaluations of the workplace to ensure that the provisions of this program are implemented. Evaluations will include regular consultations with employees who use respirators and their supervisors, site inspections, air monitoring, and a records review. Problems discovered during evaluations must be documented in an inspection log, addressed by the program administrator, and reported to management. The report must recommend how and when to correct each problem.

# Documentation and recordkeeping

A written copy of this program and 437-004-1041 are kept in the program administrator’s office and are available to employees who wish to review them. Also maintained in the program administrator’s office are copies of training and fit-test records which are updated when new employees are trained, when employees receive refresher training, and when new fit tests are conducted.

Medical questionnaires and the physician’s documented findings are confidential and will remain at **[address of your medical service provider or other location]**. The program administrator will keep only the physician’s written recommendation about each employee’s ability to safety use a respirator.

## Voluntary use

The program administrator must authorize the voluntary use of respirators – if requested by employees not required to use respirators – on a case-by-case basis, depending on workplace conditions and type of respirator requested.

Employees who are allowed to voluntarily wear respirators at work will receive a copy of Appendix Dof 437-004-1041 that explains the requirements for and limitations of the voluntary use of respirators. Voluntary users of respirators are not subject to the fit-testing or training provisions of this program. However, voluntary users must clean, maintain, and store their respirators as required by this program and keep their respirators in a sanitary condition.

Employees must be medically evaluated as required by this program before they are allowed to voluntarily wear any tight-fitting respirator. Employees who voluntarily wear dust masks or NIOSH-certified filtering face pieces are not subject to the medical evaluation requirements of this program. An employee whose medical evaluation determines that he or she is not medically able to wear a tight-fitting respirator will not be allowed to wear this type of respirator in the workplace.

# Appendix D to §437-004-1041 (mandatory)

# Information for employees using respirators when not required under the standard

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use is encouraged, even when exposures are below the exposure limit, to provide an additional level of comfort and protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards. If your employer provides respirators for your voluntary use, of if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard.

You should do the following:

1. Read and heed all instructions provided by the manufacturer on use, maintenance, cleaning, care, and warnings regarding the respirators limitations.
2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.
3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.
4. Keep track of your respirator so that you do not mistakenly use someone else’s respirator.

# Fill-in forms:

## Form 1: Required respirators — determined through hazard assessments

Note: the first row below is an example.

|  |  |  |  |
| --- | --- | --- | --- |
| Required respirators at [name of your company] | | | |
| Respirator | **Area affected** | **Employees affected** | **Hazard** |
| *Filtering facepiece-N95* | *Hay press* |  | Local Exhaust Ventilation on the hay press conveyer is in place; but, employees continue to be exposed to dust levels above 10 mg/m3 --- theOregon OSHA Permissible Exposure Level as an 8-hour Time-Weighted Average (PEL/TWA-8). |
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# Fill-in forms:

## Form 2: Respirators allowed for voluntary use — when hazard assessments determine that respiratory protection is NOT required.

*Note: the first row below is an example.*

|  |  |  |  |
| --- | --- | --- | --- |
| Respirators allowed for voluntary use at [name of your company] | | | |
| Respirator | **Area affected** | **Employees affected** | **Hazard** |
| *(Brand)Filtering facepieces-N95* | *Barn—area near the Hay press* |  | When the hay press is operating, dust is blown into the barn. Employee exposures are less than 10 mg/m3 – the Oregon OSHA Permissible Exposure Limit as an 8-hour Time-Weighted Average (PEL/TWA-8). Respirators are not required, but dust masks are available for employee use, if desired. |
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# Fill-in forms:

## Form 3: Work areas that require escape respirators.

The following areas have stored toxic or other potentially hazardous materials that could suddenly present an oxygen-deficient or that is immediately dangerous to life and health (IDLH) atmosphere. These devices are to be used only for exiting the dangerous areas.

*Note: the first row below is an example.*

|  |  |  |
| --- | --- | --- |
| **Employees who work in the following areas must use respirators during emergencies.** | | |
| Area | **Emergency** | **Location of escape respirator** |
| *Cold storage area* | Ammonia Leak or spill | The escape respirator is located on the top shelf, in the cupboard. |
|  |  |  |
|  |  |  |
|  |  |  |

# Fill-in forms:

## Form 4: Locations immediately dangerous to life or health

The program administrator has identified the following locations as immediately dangerous to life or health (IDLH):

*Note: the first row below is an example.*

|  |  |  |  |
| --- | --- | --- | --- |
| Location | **Condition description**  **Potential hazards** | **Confined space?** | **Required respirators** |
| *Manure pit* | *Employees must periodically enter the manure pit area for cleaning activities.*  *Oxygen-deficient atmosphere and organic vapor exposure.* | *Yes*  *(Note**: If “Yes,” employees must also follow requirements in Confined and Hazardous Spaces: Division 4/J, OAR 437-004-1250.)* | *Full-face, pressure- demand, Self-Contained Breathing Apparatus (SCBA)* |
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# Fill-in forms:

## Form 5: Fit test record

Note: The person performing the fit test must follow the appropriate procedure in Appendix A, 437-004-1041, Fit Testing Procedures.

Date:

Employee name:

Job/Classification:

Department:

Fit test method:

|  |  |  |
| --- | --- | --- |
| **Type of respirator** | **Make/model/size** | **Fit factor/results** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Person performing the fit test:

Problems the employee has encountered with their respirators:

**Fill-in forms:**

## Form 6: Program evaluation summary

Evaluator:

Date:

Names of employees consulted during the evaluation:



|  |  |
| --- | --- |
| **Problems identified** | **Corrective action** |
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