

**OLIVE VIEW-UCLA MEDICAL CENTER
POLICY & PROCEDURE**

NUMBER: 8

VERSION: 3

SUBJECT/TITLE: RESPIRATORY PROTECTION PROGRAM

POLICY: Olive View-UCLA Medical Center will provide its workforce members with a safe and healthful work environment through a comprehensive Respiratory Protection Program (RPP). The program has been developed and implemented to reduce or eliminate respiratory hazards associated with duties and responsibilities of workforce members who have potential occupational exposure. This RPP has been developed in accordance with requirements contained in 8 CCR §5144 and §5199.

The Olive View-UCLA Medical Center Office of Environmental Health and Safety (Safety Officer) is responsible for oversight and management of the Respiratory Protection Program, which consists of the following elements:

- The Safety Officer, in consultation with the Infection Control Committee, Environment of Care Committee, and Employee Health Services, provides oversight of implementation, evaluation, and maintenance of the RPP;
- Guidance on the proper selection and use of respirators;
- Assist department personnel in the prevention of occupational injury or illness associated with breathing air contaminated with harmful dusts, fumes, mists, smokes, vapors, gases, or potentially infectious aerosols;
- Ensure each respirator user is physically capable of wearing assigned respirator(s) and obtaining a proper fit;
- Ensure each respirator user receives proper training in the use and care of respirators;
- Provide a method for recordkeeping and documentation of training;
- Ensure RPP requirements are being met; and
- Establish accountability.

The RPP addresses the following areas:

- Procedures for proper use of respirators in routine and reasonably-foreseeable emergency situations
- Procedures for cleaning, disinfecting, storing, inspecting, repairing, discarding, and otherwise maintaining respirators
- Procedures to ensure adequate air quality, quantity, and flow of breathing air for atmospheric-supplying respirators
- Training of workforce members in respiratory hazards to which they are potentially exposed during routine and emergency situations.

This policy, and related procedures, applies to all workforce members who are required to use respiratory protection. All applicable workforce members must

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comply with the provisions outlined in this policy and related procedures. Supervisors retain the responsibility to ensure provisions outlined in this policy and procedures are enforced.

PURPOSE: To outline the hospital's Respiratory Protection Program, to ensure compliance with the various state and federal laws and regulations governing respiratory protection, and to protect the health and safety of workforce members, patients, and the public.

DEPARTMENTS: ALL

DEFINITIONS:

PROCEDURE: I. PROGRAM DESCRIPTION

Implementation of the RPP requires participation by all members of the Olive View-UCLA Medical Center workforce. The Office of Environmental Health and Safety (Safety Officer), in conjunction with Employee Health Services and Infection Control, is responsible for the development and implementation of the hospital's RPP.

The Safety Officer provides support, leadership, and direction for the RPP and is responsible for the maintenance, review, and evaluation of all records and reports related to the operation of the program and to ensure training requirements and records are met and retained. The Safety Officer also will:

- Track regulatory requirements;
- Ensure training requirements and records are met, maintained, and documented;
- Develop and implement health and safety policies and procedures to ensure a safe work environment;
- Ensure safety inspections of work sites and equipment is conducted and documented;
- Ensure workforce members pass medical screening and mask fit test requirements prior to being issued or using a respirator;
- Identify and request the physical and financial resources necessary to maintain an effective RPP;
- Conduct or direct exposure assessments
- Identify tasks for which respiratory protection is required; and
- Formally audit the RPP annually or sooner, as needed

Department managers and supervisors must be familiar with all aspects of the respiratory protection, safe work practices, and policies and procedures as they

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relate to the work area they supervise. Managers/supervisors should always promote safe work practices and ensure that each of the workforce members under their supervision is trained and knowledgeable in respiratory protection and how it pertains to their job.

Managers/supervisors also are expected to do the following:

- Report all health and safety issues and hazards identified to the Safety Officer;
- Ensure staff compliance with the RPP and document corrective actions administered, as required;
- Provide re-training or institute corrective action for workforce members who fail to follow established safe practices;
- Communicate safety and hazard information to workforce members when new hazards are identified, or when new operations, procedures, rules, or equipment is introduced into the work place;
- Ensure that suggestions and comments about exposure conditions, respirators, personal health changes, and training issues are addressed promptly; and
- Maintain current list of workforce members included in the RPP and accurate records of trainings and fit tests.

Workforce members who are required to wear respiratory protection, as appropriate, must follow all established safe practices and procedures as documented in this RPP. Workforce members are expected to follow all safety rules, regulations and procedures, and RPP requirements, including:

1. Completing all annual medical and physical assessments as required under the RPP
2. Wearing appropriate respiratory protection equipment as required
3. Maintaining all equipment in good, clean condition and reporting any defective equipment to their supervisor
4. Reporting unsafe or hazardous conditions to their supervisor
5. Complete all required training related to respiratory protection and demonstrate knowledge and skills specific to the hazards and uses of respirators

II. GENERAL REQUIREMENTS

Olive View-UCLA Medical Center will select and provide appropriate NIOSH-certified respirators, based on the respiratory hazard(s) to which the workforce member is exposed, workplace assessment, and user factors that affect respirator performance and reliability.

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The Safety Officer will evaluate respiratory hazard(s) in the work place. This evaluation includes a reasonable estimate of the workforce member's exposure to respiratory hazard(s) and an identification of the contaminants' biological or chemical state and physical form.

When necessary for protection against potentially infectious aerosols, Olive View-UCLA Medical Center will provide a respirator that is at least as effective as a N-95 filtering face-piece respirator, unless evaluation of the respiratory hazard determines a higher level of protective respirator is necessary.

Medical Evaluation

Workforce members are provided with a medical evaluation to determine their ability to use a respirator before the workforce member is fit-tested or required to use a respirator in the workplace. The medical evaluations may be discontinued when the WFM is no longer required to use a respirator.

Olive View-UCLA Medical Center has a physician or other licensed health care professional to perform medical evaluations using a medical questionnaire or an initial medical examination that obtains the same information as the medical questionnaire.

A follow-up medical examination may be provided if the provider determines additional information is needed to make a final decision for positive responses in the questionnaires.

The medical questionnaires and examinations are administered confidentially during the WFM's normal working hours or at a time and place convenient to the WFM. The medical questionnaires are administered in a manner that ensures the WFM understands its content. The WFM has the opportunity to discuss the questionnaires and examination results with the provider.

The provider evaluates the following information prior to making a recommendation concerning the WFM's ability to use a respirator:

The type and weight of the respirator to be used by the employee;

1. The duration and frequency of respirator use (including use for rescue and escape);
2. The expected physical work effort;
3. Additional protective clothing and equipment to be worn; and
4. Temperature and humidity extremes that may be encountered.

A copy or link to the written RPP is provided to the provider.

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The provider's written recommendation regarding the WFM's ability to use the respirator will include:

1. Any limitations on respirator use related to the medical condition of the WFM, or relating to the workplace conditions in which the respirator will be used, including whether or not the WFM is medically able to use the respirator
2. The need, if any, for follow-up medical evaluations; and
3. A statement that the provider has provided the WFM with a copy of the recommendation.

DHS or designated agency provides additional medical evaluations that comply with the requirements of this section if:

1. A WFM reports medical signs or symptoms related to ability to use a respirator;
2. A provider, supervisor, or the Respiratory Protection Program Administrator (Safety Officer) informs DHS or agency that a WFM needs to be reevaluated;
3. Information from the RPP, including observations made during fit testing and program evaluation, indicates a need for WFM reevaluation; or
4. A change occurs in workplace conditions (e.g., physical work effort, protective clothing, temperature) that may result in a substantial increase in the physiological burden placed on a WFM.

Circumstances Requiring Use of Respirator

Workforce members must utilize a respirator if they:

1. Enter an Airborne Infection Isolation room or area in use for airborne infection isolation (even if the patient is mechanically ventilated);
2. Are present during the performance of procedures or services for an Airborne Infectious Disease (AirID) case or suspected case;
3. Repair, replace, or maintain air systems or equipment that may contain or generate aerosolized pathogens;
4. Work in an area occupied by an AirID case or suspected case, during decontamination procedures after the person has left the area and as required per the hospital's Aerosolized Transmissible Disease Exposure Plan;
5. Are present during the performance of aerosol-generating procedures on cadavers that are suspected of, or confirmed as, being infected with aerosol transmissible pathogens;
6. Are performing a task for which the ATD/Tuberculosis Exposure Control Plan and Chemical Hygiene Plan requires the use of respirators; or
7. Transports an AirID case or suspected case within the facility or in an enclosed vehicle (e.g., van, car, ambulance, or helicopter) when the

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engineering controls of the vehicle are such that insufficient protection is conferred even when the patient is masked.

8. In the scope of their job duties, have a risk of exposure to hazardous chemicals, gases, or drugs.

Protocol for High-Hazard Procedures: see Olive View-UCLA Medical Center Policy 3471 (Powered Air Purifying Respirator (PAPR))

III. RESPIRATORY PROTECTION EQUIPMENT EVALUATION AND TRAINING

All workforce members must be fit-tested upon initiation of employment and annually, in accordance with Policy 3473, Respiratory Protection Fit Testing.

Before a workforce member is required to use any respirator with a negative or positive pressure tight-fitting face-piece, the workforce member must be fit tested with the same make, model, style, and size of respirator that will be used. A fit test is conducted prior to initial use of the respirator, whenever a different respirator face-piece (size, style, model or make) is used, and at least annually thereafter.

All workforce members who perform high-hazard procedures shall also receive training in the use of a PAPR prior to working in an environment or performing these high-hazard procedures. Workforce member knowledge of proper PAPR use will be assessed annually.

To ensure program effectiveness and the standardization of equipment, training, and maintenance, workforce members must use NIOSH approved respirators that are provided by DHS or Olive View-UCLA Medical Center.

Maintenance and Care of Respirators

All respirators will be cleaned, disinfected, and maintained in accordance with the procedures established in 8CCR 5144, Appendix B2, or the procedures recommended by the respirator manufacturer, provided that such procedures are of equivalent effectiveness.

IV. PROGRAM EVALUATION AND DOCUMENTATION

Evaluations of the workplace are conducted to ensure that the written respiratory protection program is being properly implemented, and to consult WFMs to ensure that they are using the respirators properly. Employee Health Services will report quarterly to the hospital's Environment of Care Committee on the compliance with testing and training workforce members on respirator use.

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All written information regarding medical evaluations, fit testing, and the respirator program is retained in EHS in accordance with DHS policy #925.050, Workforce Member Medical Files.

Written materials required to be retained under this policy are made available upon request to affected workforce members and to regulatory agencies, as requested.

RECORDKEEPING

All written information regarding medical evaluations, fit testing, and the respirator program is retained in EHS in accordance with DHS policy #925.050, Workforce Member Medical Files.

Written materials required to be retained under this policy are made available upon request to affected WFMs and to the Chief of OSHA or designee for examination and copying.

References: CMS Conditions of Participation, §482.42 Title 8, California Code of Regulations, Section 5144 (Cal-OSHA) 29 CFR 1910.134 (OSHA) Joint Commission Infection Control Standards DHS Policy 925.400 (Respiratory Protection Program)	
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