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	POLICY	TITLE RESPIRATOR PROGRAM		AM

REVIEW/REVISION HISTORY:

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SUMMARY OF REVISION/REVIEW:

VI.A.1. - Adjusted language for clarification

APPROVED:

Signature on file

TIM LANG, Secretary Department of Corrections

2/11/25 Date Signed

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REFERENCES:

DOC 100.100 is hereby incorporated into this policy; <u>WAC 296-800</u>; <u>WAC 296-820</u>; <u>WAC 296-820</u>; <u>WAC 296-842</u>; DOC 670.000 Communicable Disease, Infection Prevention, and Immunization Program

POLICY:

I. The Department has established procedures to ensure the proper use of respirators to protect workers from exposure to hazardous airborne contaminants that may pose a risk to their health and safety.

DIRECTIVE:

- I. General Requirements
 - A. The Safety Unit will monitor implementation of the Respirator Program as an element of the Department's Safety Program.
 - 1. Each Superintendent, Reentry Center Manager (RCM), Field Administrator, and Health Services Administrator of a facility or program which requires the use of respirators will designate a Respirator Program Administrator (RPA) to:
 - a. Develop, implement, track, and monitor all elements of the respirator program to ensure Department and regulatory compliance.
 - b. Work with the Superintendent/RCM/Administrator to identify and select Respirator Coordinators who will assist with implementation and training, perform fit tests, and coordinate program compliance with the RPA.
 - c. Maintain program documentation (e.g., medical clearance, training acknowledgement, fit testing, hazard assessment, inspection log, manufacturer's manual for each type of respirator used).

II. Responsibilities

- A. The Department's Safety Unit, along with local site supervisors, will assess potential respiratory hazards in the workplace and determine the appropriate type of respirator.
 - 1. Respirators will be selected according to:
 - a. The nature of the hazard

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- b. The capabilities and limitations of the respirator
- c. The ability to obtain a satisfactory fit and comfort
- d. Breathing resistance, efficiency, and performance
- e. Peripheral vision impairment

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- f. Restriction of movement
- g. Interference with job
- h. Overall user satisfaction and confidence
- B. Before wearing a respirator in a hazardous environment, the wearer must:
 - 1. Be medically cleared by a health professional,
 - 2. Complete training in the following areas, and
 - a. The hazards associated with exposure to airborne contaminants
 - b. The proper use, maintenance, and storage of respirators
 - c. Fit testing procedures and the importance of a proper seal
 - d. Emergency procedures and the limitations of respirators
 - 3. Be fit tested by a qualified fit tester.
- C. The Department will only authorize/supply respirators approved by the National Institute for Occupational Safety and Health.
- D. Supervisors will:
 - 1. Ensure hazard assessments are conducted to select the proper respirator for the task and document required personal protective equipment selection on a Job Safety Analysis (JSA) or DOC 03-247 Hazard Assessment Certification and Personal Protective Equipment (PPE) Selection Worksheet.
 - 2. Monitor and enforce respirator selection and use, to include:
 - a. Respirator fit
 - b. Appropriate respirator selection for the hazard
 - c. Appropriate use of respirator under workplace conditions
 - d. The wearer is clean-shaven in the area of the seal
 - e. Respirator maintenance and storage
 - f. Wearer feedback
 - 3. Ensure that the service life of each respirator and maximum use limit of filter, cartridge, or canister does not exceed manufacturer's guidelines.

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- 4. Establish and monitor a clean, sanitary, secure, and convenient storage location.
- 5. Ensure the respirator cleaning and inspection process is followed.
- E. Respirator wearers will:
 - 1. Remain clean-shaven in the area of the respirator facepiece sealing surface (i.e., the area of the respirator designed to fit tightly against the skin) and not have facial hairstyles that could interfere with respirator fit, form, or function.
 - a. Respirator use will not be permitted if wearers have a characteristic between the face and the sealing surface of the respirator that interferes with the respirator facepiece seal or valve function, including:
 - 1) Stubble
 - 2) Moustaches, including the tips
 - 3) Sideburns
 - 4) Bangs
 - 5) Hairlines
 - 6) Scars
 - 7) Beards/goatees
 - 2. Inspect the respirator for defects prior to each use including straps, facepiece, valve(s), and filters, and ensure it is in proper working condition per the manufacturer's guidelines.
 - a. If the respirator is damaged, soiled, or grossly contaminated, the respirator will not be used until it has been repaired and/or cleaned or replaced.
 - 3. Conduct a respirator seal check to ensure proper operation and seal of the respirator prior to each use.
 - 4. Wash, sanitize, rinse, and dry respirators per WAC 296-842-17005.
 - 5. Ensure reusable respirators (e.g., half mask, full face) are cleaned and inspected after each use, or at least monthly and documented on the respirator inspection tag/log.
 - 6. Ensure proper storage to protect against dust, moisture, damaging chemicals, sunlight, excessive heat/cold, and physical damage.

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- a. Assigned respirators will be stored in a bag or container and labeled to identify the wearer.
- 7. Health services employees/contract staff may use Powered Air Purifying Respirators (PAPRs) per DOC 670.000 Communicable Disease, Infection Prevention, and Immunization Program.
 - a. A completed medical questionnaire, medical clearance, and training are required prior to use.
- III. Mandatory Use
 - A. The JSA/DOC 03-247 Hazard Assessment Certification and Personal Protective Equipment (PPE) Selection Worksheet will determine if the duties associated with a specific position and/or post potentially expose the employee/contract staff/volunteer/incarcerated worker to hazardous airborne contaminants.
 - B. Employees/contract staff in positions and/or posts that may require use are:
 - 1. Specialty Team
 - 2. Restrictive housing unit
 - 3. Health services
 - 4. Transportation
 - 5. Maintenance, and
 - 6. Correctional Industries operations.
 - C. Employees/contract staff must be medically cleared, trained, and N95 fit tested before working in a communicable disease respirator required post.
- IV. Voluntary Use
 - A. Respirators used on a voluntary basis will be implemented per WAC 296-842-11005. Advisory information for employees who voluntarily use respirators will be posted in a conspicuous location and available to respirator wearers.
 - B. Respirators used on a voluntary basis for wildfire smoke will be implemented per WAC 296-820.
- V. Standby Procedures for Immediately Dangerous to Life or Health (IDLH) Situations
 - A. The atmosphere will be considered IDLH whenever exposure cannot be measured or expected exposure cannot be reasonably estimated.
 - B. At least 2 standby employees/contract staff will be outside the IDLH atmosphere whenever a person is working in an IDLH atmosphere.

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- 1. One standby employee/contract staff is permitted when the IDLH atmosphere is well identified, hazards are addressed, and the employee/contract staff can adequately:
 - Monitor the person(s) in the IDLH atmosphere a.
 - Implement communication activities, and b.
 - Initiate rescue. C.
- C. Visual, voice, or signal line communication must be maintained between the person(s) in the IDLH atmosphere and the standby employee(s)/contract staff.
- D. Standby employees/contract staff must be trained and equipped to provide effective emergency rescue. Equipment will include:
 - 1. Pressure demand or other positive pressure Self-Contained Breathing Apparatus (SCBA),
 - 2. A pressure demand or other positive pressure supplied air respirator with auxiliary SCBA, and
 - 3. Either appropriate retrieval equipment or equivalent means for rescue when retrieval equipment is not necessary.
 - a. Retrieval equipment will be used when it contributes to the rescue and does not increase the overall risk resulting from entry.
- VI. Medical Evaluation
 - A. Before initial fit testing, a person's ability to wear a respirator will be medically evaluated, at no cost to the wearer, by a Licensed Health Care Provider (LHCP).
 - 1. The RPA will ensure employees/contract staff and incarcerated workers are provided with DOC 03-219 Respirator Medical Evaluation Questionnaire and DOC 03-314 Licensed Health Care Provider Information and Response Sheet.
 - Supervisors of incarcerated workers will ensure the packet is a. completed and submitted to health services within 5 days.
 - Correctional Industries Environmental Services will follow 1) their established process.
 - B. An additional medical evaluation is required when:

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- 1. The wearer reports medical signs or symptoms related to the ability to wear a respirator.
- 2. An LHCP, supervisor, or the RPA determines that a wearer needs to be reevaluated.
- 3. Observations made during fit testing and program evaluations indicate a need.
- 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 wearer.
- VII. Fit Testing
 - A. The minimum standard for fit testing negative pressure respirators will be qualitative fit testing. PAPR use does not require fit testing.
 - 1. When a respirator is required to be worn, fit testing will follow Department fit testing protocols and be documented on DOC 03-243 Respirator Fit Testing and Training Acknowledgement.
 - 2. Quantitative fit testing must be used for SCBA and when atmospheric concentrations are at or above 10 times the permitted exposure limit.
 - B. If a respirator wearer notifies the LHCP or supervisor that the fit of the respirator is unacceptable, a reasonable attempt will be made to select a different respirator facepiece and the new respirator will be retested.
 - C. Respirator wearers will receive initial fit testing prior to initial use or when using a different facepiece (e.g., size, style, model, make).
 - D. Annual fit testing, within 12 months of the last fit test, will occur for current assigned respirator wearers who use one of the following respirators:
 - 1. Full face masks,
 - 2. Half mask respirators, or
 - 3. Disposable tight-fitting respirators.
 - E. Respirator wearers will be fit tested if they have:
 - 1. An obvious change in body weight
 - 2. Significant facial scarring in the area of the facepiece seal
 - 3. Reconstructive or cosmetic surgery

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- 4. Significant dental changes (i.e., multiple extractions without prosthesis or acquiring dentures)
- 5. Any other condition that may interfere with facepiece sealing

VIII. Training

- A. RPAs, Respirator Coordinators, and other employees involved in providing or conducting respirator fit testing will complete DOC Respirator Program and Fit Test Training for Trainers.
- B. Employees/contract staff will complete initial and annual N-95 Respirator Awareness training in the Department's electronic training system.
- C. Persons required to wear respirators will complete training consistent with DOC 03-243 Respirator Fit Testing and Training Acknowledgement before initial fit testing, and within 12 months of the last fit test.
 - 1. Health services supervisors and employees/contract staff required to wear PAPRs will also receive PAPR training located under Health Services on the Department's internal website.
- D. Respirator training is also required when:
 - 1. Previous training is obsolete or incomplete based on changes in the workplace or the type of respirator.
 - 2. The wearer's knowledge or use of the respirator indicates the wearer does not have the skill or knowledge required for respirator use.

DEFINITIONS:

The following words/terms are important to this policy and are defined in the glossary section of the Policy Manual: Immediately Dangerous to Life and Health (IDLH). Other words/terms appearing in this policy may also be defined in the glossary section.

ATTACHMENTS:

None

DOC FORMS:

DOC 03-219 Respirator Medical Evaluation Questionnaire DOC 03-243 Respirator Fit Testing and Training Acknowledgement DOC 03-247 Hazard Assessment Certification and Personal Protective Equipment (PPE) Selection Worksheet DOC 03-314 Licensed Health Care Provider Information and Response Sheet