

BOARD OF YAKIMA COUNTY COMMISSIONERS

**IN THE MATTER OF ADOPTING POLICY NO.
HR-007, YAKIMA COUNTY RESPIRATOR
PROTECTION CONTROL POLICY**

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Resolution No. 238 -2003

WHEREAS, the Board of Yakima County Commissioners has determined the need for a Respirator Protection Control Policy; and

WHEREAS, Yakima County Human Resources Department has developed Policy No. HR-007 to provide written policy for effected departments within Yakima County that require employees to wear respirators as part of their job duties; now, therefore,

BE IT HEREBY RESOLVED by the Board of Yakima County Commissioners that Policy No. HR-007, Yakima County Respirator Protection Control Policy be adopted; and

BE IT HEREBY FURTHER RESOLVED that all Yakima County Departments and Employees implement this policy effective April 22, 2003.

DATED this 22nd day of April 2003.



Attest: Carla M. Ward

Carla M. Ward
Clerk of the Board

Jesse S. Palacios
Jesse S. Palacios, Chairman

James M. Lewis
James M. Lewis, Commissioner

Excused

Ronald F. Gamache, Commissioner
*Constituting the Board of County Commissioners
for Yakima County, Washington*

YAKIMA COUNTY
RESPIRATOR PROTECTION CONTROL POLICY
Policy No. HR-007

I. PURPOSE

The purpose of this policy is to provide written policy for effected departments within Yakima County that require employees to wear respirators as part of their job duties.

II. SCOPE OF THE POLICY

The Policy includes a job analysis of all employees who are required to wear a respirator as part of their job duties. The Policy also outlines:

1. How and when to use Personal Protective Equipment (PPE) such as Respirators
2. Respirator fit testing procedures
3. Procedures to follow if an exposure / accident occurs (also known as Post Exposure Procedures)
4. The schedule the County will follow to implement, review and update our policy and procedures
5. Records and confidentiality

III. DETERMINATION OF EFFECTED PERSONS

A. Employee Types

1. Employees

All provisions of this policy apply to employees, including part-time and temporary, that have reasonably anticipated potential to wear a respirator as a result of performing their regular duties.

2. Others

Volunteers, defined as Others in this policy are not covered under this policy. A volunteer is someone who performs services for Yakima County and is not compensated. Examples of compensation which would result in WISHA jurisdiction include but are not limited to the payment of stipends, meals, parking, uniforms etc. Reasonable reimbursement of expenses is not considered compensation.

3. Contractors

This policy does not apply to contractors. A contractor is defined as a worker who is employed via another employer to perform services on behalf of Yakima County for one of its departments or policies. An example is the *High School Students employed for the Best SELF policy*.

B. Identification of Exposed Employees

A list of job classifications in which all employees have reasonably anticipated potential to wear a respirator (Appendix A: Effected Employees) has been created.

The Exposure Control Officer will work with Elected Officials, Department Heads and /or Supervisor to revise and update this list as our job classifications, tasks and procedures change.

When a new employee is hired into one of the jobs listed in Appendix A or transfers into one of these jobs, the following process takes place within ten (10) working days to ensure that they are trained:

1. The employee's job classification and the tasks and procedures that he or she will perform is verified against the Job Classifications and List which are identified as those in which reasonable anticipated potential to wear a respirator. If the employee is transferring from one job to another within Yakima County, the job classification pertaining to his or her previous position are also verified against this list.
2. Based on this verification system, the new job classification and / or tasks and procedures which have the potential to wear a respirator are identified.
3. The employee is then provided education and fit testing by the Department. Fit for Duty Testing is to occur within thirty (30) days of assignment and completed by the County's designated medical provider and / or Department.

IV. POLICY MANAGEMENT

A. Administration and Duties

There are three major "Categories of Responsibility" that are central to the effective implementation of the Policy. These are:

1. Exposure Control Officer
2. Department Heads and/or Supervisors
3. Yakima County Employees

The following sections define the roles played by each of these groups in carrying out our policy. (Throughout this written policy, employees with specific responsibilities are identified. If, because of promotion or other reasons, a new person is assigned any of these responsibilities, the Exposure Control Officer will update the records.)

1. Exposure Control Officer

The Exposure Control Officer will be responsible for overall management and support of Yakima County's Respirator Control Policy. Activities which are delegated to the Exposure Control Officer typically include, but are not limited to:

- Overall responsibility for implementing the Respirator Control Policy for Yakima County
- Reviewing and recommending ways to improve the Respirator Control Policy, as well as to revise and update the plan when necessary
- Collecting and maintaining a suitable reference library on the respirator safety and health information
- Comprehending current legal requirements concerning the use of respirators in the workplace
- Assuring that the following tasks are carried out:
 1. Periodic facility audits are conducted to maintain an up-to-date Respirator Control Policy
 2. All medical actions required are performed and appropriate medical records are maintained;
 3. All effected employees receive the required training, that it is documented and that a copy of the Policy is accessible to employees;
 4. Required Personal Protective Equipment (PPE) and engineering controls are used.

The Human Resources Director has been appointed as Yakima County's Exposure Control Officer.

2. Elected Officials, Department Heads and/or Supervisors

Elected Officials, Department Heads and/or Supervisors are responsible for exposure control in their respective areas. Areas of responsibility include selection and purchase of respirators, initial / annual testing and training and inspection. They work directly with the Exposure Control Officer, their department's designated Respirator Program Coordinator, the effected employees and others to ensure that proper exposure control procedures are followed.

3. Yakima County Employees and Others

As with all of Yakima County's activities, our employees have the most important role in our Respirator Control Policy, for the ultimate execution of much of our Policy rests in their hands. Employees and others must:

- Know what job tasks they perform in which they have reasonably anticipated potential to wear a respirator
- Attend the testing and training sessions as required
- Plan and conduct all operations in accordance with our work practice controls
- Follow all policies and procedures or be subject to disciplinary action in accordance with Yakima County's disciplinary action policy as outlined in each union contract or Yakima County Employee Handbook.

B. Review and Update of the Policy

The policy will be reviewed and updated under the following circumstances:

1. Annually
2. Implementation of new or modified tasks and procedures that may require the use of a respirator by covered Yakima County employees
3. Revision of class specifications of our employees such that new instances of respirator usage may occur
4. Implementation of new functional positions that are established within Yakima County that may involve reasonably anticipated potential to use a respirator.
5. Implementation of new medical protocols as identified by the Medical Provider

C. RECORD KEEPING

1. Location / Availability of Policy

Copies of the Respirator Control Policy are kept within the effected Departments and in Human Resources.

Yakima County's Respirator Control Policy is available to employees and authorized representatives to review any time (WAC 296-62-05209). Employees are advised of this availability during their new employee orientation and education / training sessions. Upon written request to Yakima County Human Resources, copies will be provided within ten (10) working days to employees, their authorized representatives and the Washington State Department of Labor and Industries.

2. Location / Availability of Medical Records

To ensure that we have as much medical information available to the designated Medical Provider as soon as possible, Yakima County maintains applicable medical records on our employees.

Our Exposure Control Officer is responsible for setting up and maintaining these records, which include the following information:

1. Name of employee
2. Social security number of the employee
3. A copy of the employee's Respirator Questionnaire and / or any medical records relative to the employee's ability to wear a respirator
4. A copy of all results of examinations, medical testing, and follow-up procedures as required

All other medical records remain off-site.

All employee medical records will be kept confidential and will not be disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by the standard or other legal provisions. All medical records will be stored for thirty (30) years after the last date of employment. Employee medical records will be provided upon written request of the employee or anyone having

written consent of the employee within ten (10) working days of the receipt of the request.

3. Location / Availability of Training & Inspection / Maintenance Records

A. Training Records

To facilitate the training of our employees as well as to document the training process, the Exposure Control Officer and the medical provider maintains training records for three (3) years following the date of training (WAC 296-62-052). The records contain the following information:

- Dates of all training sessions
- Contents/summary of the training sessions
- Names and qualifications of instructors
- Names and job titles of employees attending the training sessions

Employee training records will be provided within ten (10) working days upon written request to Yakima County Human Resources to employees and their authorized representatives, as well as OSHA/WISHA and their representatives.

B. Inspection / Maintenance Records

The Facilities Services Manager and / or each Department Head will retain the inspection and maintenance records as required under this policy. Yakima County's Respirator Protection Policy inspection and maintenance records are available to employees and authorized employee representatives to review at any time (WAC 296-62-05209). Employees are advised of this availability during their new employee orientation and education / training sessions. Upon written request to Yakima County Human Resources, copies will be provided within ten (10) working days to employees, their authorized representatives and the Washington State Department of Labor and Industries.

D. INFORMATION, TRAINING AND TESTING

1. Training Methods

All effected employees and others undergo a comprehensive training policy and are furnished with as much up to date information as possible. These employees and others are identified through the respirator usage determination described in the Policy.

These employees and others are re-trained on an annual basis to keep their knowledge current. Additionally, all new employees to the identified positions, as well as employees changing into these jobs or job functions, are given any additional training their new position requires within (30) thirty days upon acceptance of the new job assignment.

2. Training Topics

The topics covered in our training policy include, but are not limited to, the following:

- Information regarding the consequences of improper fit, usage, or maintenance on respirator effectiveness.
- An explanation of the limitations and capabilities of the respirator selected for employee use that address: how the respirator operates, how the respirator provides protection (by either filtering the air, absorbing the vapor or gas, or providing clean air from an uncontaminated source, as applicable) and the limitations of the respirator.
- An explanation to understand how to use the respirator effectively in emergency situations including those in which the respirator malfunctions. Comprehensive training will be provided where respirators are used in Immediately Dangerous to Life and Health (IDLH) situations including oxygen-deficient atmospheres such as those that occur in rescue operations.
- Procedures for inspecting, storing and maintaining the respirator, donning and removing it, checking the fit and respirator seal, recognizing any problems that may threaten its continued protective capability and the steps employees are to follow if they discover any problems, to whom the problems are to be reported, and where to obtain replacement equipment if necessary.
- Medical information that is sufficient for them to recognize the signs and symptoms of medical conditions (e.g., shortness of breath, dizziness) that may limit or prevent the effective use of respirators.
- An overview of Yakima County's Respirator Program.

In addition, employees will demonstrate their understanding of the information covered in the training through hands-on exercises.

3. Training Format

Yakima County's training presentations make use of several training techniques including, but are not limited to:


- Classroom-type atmosphere with personal instruction to include questions and answer periods for employees
- Training manuals / employee handouts

Training is included within standard New Employee Orientation conducted by the Employee's Department

Provisions of this policy shall be followed, unless they conflict with negotiated labor contracts which will take precedence to the extent applicable.

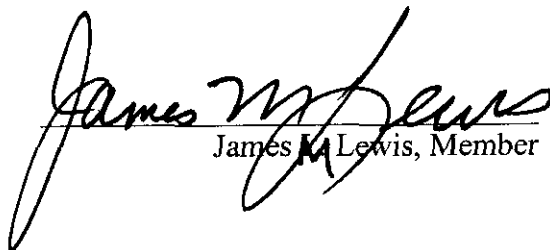
Passed and adopted by the Board of County Commissioners of Yakima County,
WA, this _____ day of _____, 2003. Effective on _____.

BOARD OF COUNTY COMMISSIONERS
YAKIMA COUNTY, WASHINGTON

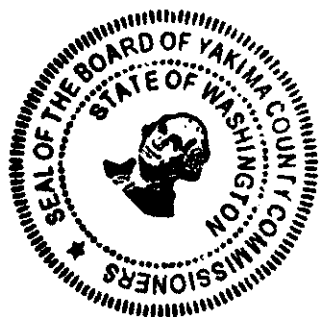

Jesse S. Palacios, Chairman

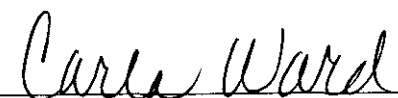
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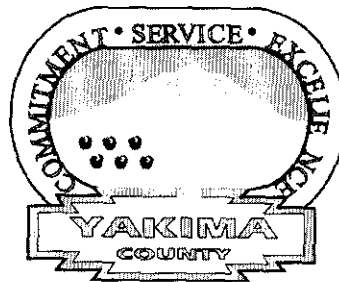
Ronald F. Gamache, Member


James M. Lewis, Member

ATTEST:




Carla Rodriguez, Clerk of the Board
WARD



RESPIRATORY PROTECTION
CONTROL PROGRAM
Revised April 2003

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Purpose

Scope of the Program

The Respirator Protection Control Program has been designed to provide written policy for the following departments within Yakima County that require employees to wear respirators as part of their job duties. The departments affected are:

Aging and Long Term Care 7500 West Nob Hill Yakima, WA 98908	Yakima County Department of Corrections - Jail 111 North Front Street Yakima, WA 98901	Yakima County Department of Corrections - Restitution Center 2403 South 18 th Street Union Gap, WA 98903	Yakima County Facilities Services 104 South 1 st Avenue Yakima, WA 98901
Yakima County Juvenile - Detention 1728 Jerome Avenue Yakima, WA 98901	Yakima County Public Works- ER & R 1216 18 th Street Yakima, WA 98901	Yakima County Public Works - Permit Services 128 North 2 nd Street Yakima, WA 98901	Yakima County TASC 128 North 2 nd Street Yakima, WA 98901
Yakima County Public Works - Solid Waste Household & Small Business Waste Collection Facility Terrace Heights Landfill 7601 Roza Hill Drive Yakima, WA 98901	Yakima County Public Works - Utilities Division 128 North 2 nd Street Yakima, WA 98901		

This program has been developed in accordance with the WISHA respiratory protection standard, WAC 296-62-071.

Yakima County uses a combination of engineering controls, work practices and respirators to provide respiratory protection, depending upon the reason for protection and nature of the hazardous situation:

- **Aging and Long Term Care:** Respirators are available for non-routine use if needed to prevent exposure to airborne pathogens (Tuberculosis).
- **Correctional / Detention Facilities:** A combination of engineering controls and work practice controls are used. Respirators are available for emergency use during emergency evacuations and for non-routine use if needed to prevent exposure to airborne pathogens (Tuberculosis).
- **Facilities Services:** A combination of engineering controls, work practice controls and respirators provide respirator protection for workers performing routine tasks.
- **Public Works – Permit Services:** A combination of engineering controls, work practice controls and respirators provide respirator protection for workers performing routine tasks.
- **Public Works – Solid Waste:** A combination of engineering controls, work practice controls and respirators provide respirator protection for workers performing routine tasks.

Purpose

- **Public Works – Utility and ERR Division:** A combination of engineering controls, work practice controls and respirators provide respirator protection for workers performing routine tasks.
- **TASC:** Respirators are available for non-routine use if needed to prevent exposure to airborne pathogens (Tuberculosis).

To assure the greatest protection when the use of respirators is involved, all respirators will be provided by Yakima County. In addition, all other elements of this program will be followed:

- Where work settings require the use of a respirator, including the use of a filtering face-piece respirator (i.e. dust mask).
- When an employee voluntarily chooses to use a respirator in situations when and /or where it is not required.

Only those employees who voluntarily choose to use a filtering face-piece respirator (i.e. dust mask) are excluded from the other requirements of this program.

In addition, in correctional settings and within Aging and Long Term Care where use of HEPA respirator may be required as protection from exposure to Tuberculosis, parameters for usage will be carried out in accordance with the parameters detailed in the Yakima County Tuberculosis Program.

Determination of Affected Persons

Employees

All provisions of this program apply to employees in the Corrections, Juvenile Detention and Public Works Departments (ERR, Permit Services, Utilities and Solid Waste), including part-time and temporary, in the positions and departments on the job classification list contained in Appendix A – Effected Employees.

In addition, where specified, sections of this policy apply to those Facilities Maintenance, Corrections, TASC and Aging and Long Term employees where donning a HEPA respirator is required on a non-routine basis only to prevent exposure to Tuberculosis.

Others

This policy does not apply to contractors or volunteers. A contractor is defined as a worker who is employed via another employer to perform services on behalf of Yakima County for one of its departments or programs. An example is the High School Students employed for the Best SELF program.

A volunteer is someone who performs services for Yakima County and is not compensated. Examples of compensation which would result in WISHA jurisdiction include but are not limited to the payment of stipends, meals, parking, uniforms etc. Reasonable reimbursement of expenses is not considered compensation.

Where specified, sections of this policy apply only to those others who work on Yakima County correctional institution premises or for Aging and Long Term Care where donning of a HEPA respirator is required on a non-routine basis only to prevent exposure to Tuberculosis.

Usage of respirators by others in any other Yakima County setting is strictly prohibited.

Program Management

Administration and Duties

Yakima County Human Resources

The Human Resources Director is responsible, in conjunction with the Respirator Program Coordinators (RPCs), for overseeing the respirator protection program and ensuring that all the requirements of this program are fully implemented. Duties of the Human Resources Director include:

- Conducting an annual review of the program for such things as: problems in respiratory protection, employee ability to sense contaminants through respiratory protection, employees not wearing protection when needed
- Updating and distributing copies of the program revisions as necessary
- Assuring RPCs or their designees carry out their responsibilities
- Assuring that medical questionnaires and evaluations are provided as required, and that documentation is maintained as required
- Negotiating and coordinating services provided by outside service providers including but not limited to: medical providers, certified industrial hygienists

Respirator Program Coordinators

The Respirator Program Coordinator (RPC) is responsible for overseeing the respirator protection program and to conduct the required evaluations of program effectiveness thereby ensuring that all the requirements of this program are fully implemented. The following persons are designated as the Respirator Program Coordinator for their respective areas:

Aging and Long Term Care -	Manager / Program Coordinator
Department of Corrections: Jail -	Corrections Manager
Department of Corrections: Restitution Center -	Restitution Manager
Facilities Services	Manager
Juvenile Detention -	Juvenile Detention Manager
Public Works - Permit Services	Manager
Public Works – ERR	Manager
Public Works – Solid Waste	Manager / Program Coordinator
Public Works – Utilities	Manager
TASC -	Manager

Duties of the RPC include:

- Identifying work areas, processes or tasks that require workers to wear respirators, and evaluating hazards
- Selecting respiratory protection options as recommended by the vendor
- Monitoring respirator use to ensure that respirators are used in accordance with their certifications
- Arranging for and /or conducting training
- Ensuring proper storage and maintenance of respirator protection equipment
- Conducting qualitative / quantitative fit testing

- Administering the medical surveillance program
- Maintaining records required of the program
- Evaluating the program
- Updating the written program as deemed necessary to reflect workplace changes that affect respirator use
- Training supervisors to educate subordinate employees on the policy and monitoring their performance to assure duties are carried out
- Ensuring that employees under their supervision (including new hires) have received appropriate training, fit testing, and medical evaluation
- Ensuring the availability of appropriate respirators and accessories
- Being aware of tasks requiring the use of respiratory protection
- Enforcing the proper use of respiratory protection when necessary
- Ensuring that respirators are properly cleaned, maintained, and stored according to the respiratory protection plan
- Ensuring that respirators fit well and do not cause discomfort
- Continually monitoring work areas and operations to identify changes in respiratory hazards
- Coordinating with the Human Resources Director on how to address respiratory hazards or other concerns regarding the program

Elected Officials, Department Heads and /or Supervisors

Elected Officials, Department Heads and/or Supervisors are responsible for the implementation of the respirator program in their respective areas, if applicable. They work directly with the Human Resources Director and our employees and others to ensure that proper procedures are followed.

Employees

Each employee has the responsibility to wear his / her respirator when and where required and in the manner in which they were trained. Employees must also:

- Care for and maintain their respirators as instructed and store them in a clean and sanitary location
- Inform their supervisor if the respirator no longer fits well and request a new one to fit properly, or of any other problems associated with using their respirator
- Inform their supervisors of any respirator hazards they feel are not adequately addressed in the workplace and of any other concerns they have regarding the program

Others

Other usage is limited to those who work on Yakima County correctional institution premises or within TASC or Aging and Long Term Care work locations where donning a HEPA respirator is required on a non-routine basis only to prevent exposure to Tuberculosis. Each other has the responsibility to carry out duties when and where required and in the manner in which they are trained. Others must also:

- Care for and maintain their respirators as instructed and store them in a clean and sanitary location

Program Management

- Inform their supervisor if the respirator no longer fits well and request a new one to fit properly, or of any other problems associated with using their respirator
- Inform their supervisors of any respirator hazards they feel are not adequately addressed in the workplace and of any other concerns they have regarding the program

Note: Currently Yakima County does not have any volunteers that are required to wear a respirator while providing services to any of the above listed facilities.

Review and Update of the Program

Yakima County recognizes that it is important to keep our Respirator Control Plan current. To ensure this, the plan will be reviewed and updated under the following circumstances:

- Annually
- Implementation of new or modified tasks and procedures that affect the use of respirators at any of the mentioned facilities
- Revision of class specifications of our employees and others such that new instances of occupational exposure to hazardous atmospheres may occur
- Implementation of new functional positions that are established within Yakima County that may involve occupational exposure to hazardous atmospheres
- Purchase of additional respirators for use by County

Whenever occupational exposure to hazardous atmosphere occurs, the circumstances, the policies in effect, Personal Protective Equipment (PPE), and the engineering and work practice controls surrounding the occurrence will be examined for possible changes to prevent occurrences.

Recordkeeping

Location / Availability of Program

Copies of the Program area available at the following locations:

Aging and Long Term Care 7500 West Nob Hill Yakima, WA 98908	Yakima County Department of Corrections - Jail 111 North Front Street Yakima, WA 98901	Yakima County Department of Corrections - Restitution Center 2403 South 18 th Street Union Gap, WA 98903	Yakima County Facilities Services 104 South 1 st Avenue Yakima, WA 98901
Yakima County Juvenile - Detention 1728 Jerome Avenue Yakima, WA 98901	Yakima County Public Works—ER & R 1216 18 th Street Yakima, WA 98901	Yakima County Public Works – Permit Services 128 North 2 nd Street Yakima, WA 98901	Yakima County TASC 128 North 2 nd Street Yakima, WA 98901
Yakima County Public Works – Solid Waste Household & Small Business Waste Collection Facility Terrace Heights Landfill 7601 Roza Hill Drive Yakima, WA 98901	Yakima County Public Works - Utilities Division 128 North 2 nd Street Yakima, WA 98901	Yakima County Human Resources 128 North 2 nd Street Rm 408 Yakima, WA 98901	

Yakima County's Respirator Protection Program is available to employees and authorized representatives to review any time (WAC 296-62-05209). Employees are advised of this availability during their new employee orientation and education / training sessions. Upon written request to Yakima County Human Resources, copies will be provided within ten (10) working days to employees, their authorized representatives and the Washington State Department of Labor and Industries.

Location / Availability of Medical Records

Yakima County Human Resources will retain a copy of the Professionally Licensed Health Care Provider's (PLHCP) written recommendation for each employee subject to medical evaluation. Each employee's completed medical questionnaire, results of relevant medical tests, examinations, and diagnosis, etc., will be maintained by the PHLCP.

All employee medical records will be kept confidential and will not be disclosed or reported without the employee's express written consent to any person within or outside the workplace except as required by the standard or other legal provisions. All medical records will be stored for a period of 30 years after the last date of employment. Employee medical records will be provided upon written request of the employee or anyone having written consent of the employee within ten (10) working days of the receipt of the request by Yakima County Human Resources.

Location / Availability of Training & Inspection / Maintenance Records

The RPC will retain:

- The original fit test records for respirator users until the next fit test is administered. The form "Yakima County Respirator Fit Test Certification" will be used to document employee fit testing.
- The original employee training records that include the names of employees trained and the dates when training was conducted.
- The inspection records.

Information and Training

Topics

The Respirator Program Coordinator or designee will cover the following information:

- Information regarding the consequences of improper fit, usage, or maintenance on respirator effectiveness.
- An explanation of the limitations and capabilities of the respirator selected for employee use that address: how the respirator operates, how the respirator provides protection (by either filtering the air, absorbing the vapor or gas, or providing clean air from an uncontaminated source, as applicable) and the limitations of the respirator.
- An explanation to understand how to use the respirator effectively in emergency situations including those in which the respirator malfunctions. Comprehensive training will be provided where respirators are used in Immediately Dangerous to Life and Health (IDLH) situations including oxygen-deficient atmospheres such as those that occur in rescue operations.
- Procedures for inspecting, storing and maintaining the respirator, donning and removing it, checking the fit and respirator seal, recognizing any problems that may threaten its continued protective capability and the steps employees are to follow if they discover any problems, to whom the problems are to be reported, and where to obtain replacement equipment if necessary.
- Medical information that is sufficient for them to recognize the signs and symptoms of medical conditions (e.g., shortness of breath, dizziness) that may limit or prevent the effective use of respirators.
- An overview of Yakima County's Respirator Program.

In addition, employees will demonstrate their understanding of the information covered in the training through hands-on exercises.

Training will be documented using the form in Appendix B: Respirator Program Training Certification.

Frequency of Training

It will be the responsibility of the RCP to ensure employees are trained on an annual basis and as deemed necessary. New employees will be trained within the first thirty (30) days of employment. Facilities Services employees and others working in correctional institutions and within Aging and Long Term Care and TASC will be trained on an as-needed basis prior to being issued a HEPA respirator.

Program Requirements

Medical Evaluations

Medical evaluations will be provided free of charge to employees and others who are required to wear respirators, including filtering face-piece respirators (dust masks). The medical evaluations for employees will be conducted by the County's designated medical provider on an annual basis. The medical evaluations for others will be provided by the County under the parameters outlined in the Yakima County Tuberculosis Program.

Employees and others will not be allowed to wear respirators until a Physician or other Licensed Health Care Professional (PLHCP) has determined that they are medically able to do so.

Any employee or other refusing the medical evaluation cannot work in an area requiring respirator use. Employees may be subject to progressive disciplinary action; others may be subject to removal from placement.

Note: Only Employees voluntarily using filtering face-piece respirators (dust masks) are exempt from the requirements of the medical evaluation program.

Confidentiality and Administration of the Questionnaire

Employees assigned to tasks requiring the use of respirators will be required to complete a Respirator Medical Evaluation Questionnaire at the time of hire and annually thereafter. (Appendix C: Respirator Medical Questionnaire). The medical evaluation questionnaire will be administered confidentially and during working hours at a place on site that is convenient to employees. A stamped and addressed envelope for mailing the questionnaire to the PLHCP will be provided. Employees will be paid their prevailing wages during questionnaire administration.

To the extent feasible for maintaining confidentiality, the RPC or his/her designee will aid employees who are unable to read the questionnaire by providing reading assistance. To ensure confidentiality, the questionnaire will not be reviewed at anytime by the RPC or designee. The RPC or designee will not review completed questions and there will be no employee/employer interaction that could be considered a breach of confidentiality. Where confidentiality cannot be maintained during administration of the questionnaire, the employee will be sent to the PLHCP for medical evaluation.

If needed, employees will have the opportunity to discuss the questionnaire content and/or examination results with the PLHCP via telephone call. During questionnaire administration, the PLHCP's phone number will be given to employees and access to a phone will be provided at no charge to the employee. All records from medical evaluations, including completed questionnaires, will remain confidential between the employee and the PLHCP.

Respirator Medical Questionnaires shall be completed immediately upon employment. Medical evaluations for new employees, if needed, shall be completed within the first thirty (30) days of employment. Follow-up medical evaluations requested by the County's designated medical provider shall be completed within thirty (30) days of written notification to employee that additional assessment is necessary. Responsibility for administering the questionnaire and

Program Requirements

assuring that all necessary medical evaluations are obtained is assigned to the RPC in conjunction with Yakima County Human Resources.

PLHCP's Written Recommendations

Yakima County Human Resources will obtain a written recommendation from the PLHCP on whether/or not the employee is medically able to wear a respirator. The recommendation must identify any limitations on the employee's use of the respirator, as well as the need for periodic or future medical evaluations that are required by the PLHCP.

The employee will receive a copy of the PLHCP's written recommendations directly from the PLHCP. Information concerning diagnosis, test results, or other confidential medical information will not be disclosed to Yakima County by the PLHCP.

Employees Unable to Wear A Respirator

Should it be determined that the employee or other is unable to wear a respirator, Human Resources shall notify the appropriate RPC. The employee will be assigned other tasks to perform while on duty. If another assignment for the other is not available, the other's services may be suspended until the environment is deemed safe.

Voluntary Use of Respirators

Employees

Should an employee voluntarily choose to use a respirator in situations where it is not required, the employee must use a respirator provided by Yakima County. These individuals will be subject to the medical evaluation, fit testing, maintenance and storage elements of this program. They will also receive training that covers proper procedures for cleaning, maintenance and storage of their respirators. In addition, the information specified in Appendix G - WAC 296-62-07117 Figure 1: Important Information About Voluntary Use of Respirators, will be provided to all employee voluntary users of respirators.

Only those employees who voluntarily choose to use a filtering face-piece respirator (i.e. dust mask) are excluded from all other requirements of this program.

Others

Voluntary usage of respirators by others in any Yakima County setting is prohibited.

Post Exposure Procedures

Medical Treatment

Employees and others must report any and all problems to their supervisors immediately so medical treatment, if necessary or requested, can be arranged as soon as possible.

Reporting

Employees will be required to complete the following forms:

- Yakima County Employee / Supervisor Incident / Exposure Form
- SIF-2 (if the employee wants to record the incident as a worker compensation claim)

Post Exposure Investigation and Follow-Up

The RPC of the appropriate area will be responsible for all aspects of post-exposure investigation and follow-up including:

- Immediately eliminating the hazard and /or protecting the employees and others from the hazard until corrective action can be carried out
- Notifying the Human Resources Director as soon as practical following the exposure incident
- Conducting a thorough investigation
- Completing and processing all documentation
- Ensuring the replacement / repair of PPE as deemed necessary

Hazardous Atmosphere Identification

Hazard Evaluation

The RPC will conduct a hazard evaluation for each operation, process, or work area where airborne contaminants may be present in routine or non-routine operations or during an emergency. For non-routine situations involving the prevention of exposure to Tuberculosis in correctional facilities and within Aging and Long Term Care, the hazard evaluation will be conducted in accordance with the parameters outlined in the Yakima County Tuberculosis Program. The hazard evaluation will include the identification of the nature of the respiratory hazards at each facility for such things as: toxic or disease-producing contaminants, oxygen deficiency, harmful dusts, fumes, mists, gases, smokes, sprays or aerosols.

Examples of hazardous atmospheres and their physical and chemical properties are outlined in Appendix F - Hazardous Atmospheres.

Yakima County has not identified any situations that can be defined as Immediately Dangerous to Life and Health (IDLH). That is, atmospheres that pose a threat to life, would cause irreversible adverse health effects, or would impair a person's ability to escape from a dangerous atmosphere.

Procedures for Immediately Dangerous to Life and Health Situations (IDLH)

Should an IDLH situation be suspected, the RPC will notify the Human Resources Director prior to any employee entry into the space. The situation will be reviewed by an Industrial Hygienist or other certified personnel as determined by the Human Resources Director for the following:

1. Review of work processed to determine where hazardous exposures occur and the magnitude of the exposures. Review(s) will be conducted by surveying the work place, reviewing process records, obtaining objective data (if available) and talking with employees and supervisors.
2. When necessary, exposure monitoring will be conducted to measure potential hazard exposures. Monitoring will be conducted by a certified industrial hygienist as contracted by Yakima County. The Department, in conjunction with Human Resources, is responsible for making the necessary arrangements.

The RPC will revise and update the hazard evaluation as needed (i.e. Any time work process changes may potentially affect employee exposure). If it is determined that respirator protection is necessary, all other elements of this program will be in effect for those tasks and this program will be updated accordingly.

The RPC will review the job operation, the equipment or tools that will be used, and any motion or travel required which can interfere with the type of respirator to be selected, and will ensure that respirators selected will not impair the worker's vision, hearing, communication, and physical movement necessary to perform jobs safely.

Monitoring Work Areas

The RPC and / or supervisor will monitor work areas where employees are using respirators, looking for such things as:

- Changes in the degree of employee exposure
- Changes in physical stress
- Changes in the fit of a respirator due to the use of other protective equipment or conditions

Note: Changing conditions may require provision of additional or different respiratory protection when necessary.

Employees will be permitted to leave the respirator use area for the following circumstances:

- Wash their faces and respirator face-pieces as needed to prevent skin or eye irritation associated with respirator use
- Replace the respirator or filter, cartridge, or canister elements whenever the respirator user can detect vapor gas breakthrough (by odor, taste, and /or irritation effects), a change in breathing resistance or leakage of the face-piece
- Replace cartridge or canister elements according to the established replacement schedule or when the end-of-service-life indicator (ESLI) shows that the canister or cartridges must be changed.
- If the respirator is not properly functioning and must be replaced, repaired or discarded. The employee will be allowed back into the respirator use area only after the respirator has been replaced or repaired.
- If the employee experiences severe discomfort in wearing the respirator or if the employee experiences sensations of dizziness, nausea, weakness, breathing difficulty, coughing, sneezing, vomiting, fever and / or chills.

Hazardous / Crisis Situation Procedures

Yakima County does recognize that some job duties may present the potential for hazardous / crisis situations. These are identified in the section: Hazardous / Crisis Situation Procedures Table listed below. Examples of hazardous / crisis situations are atmospheres where the employee may be required to enter to prevent further loss / injury are: smoke, fire and / or capsacin atmospheres.

Hazardous / Crisis Situation Procedures	
Aging and Long Term Care	Not applicable.
Department of Corrections	Employees are trained to respond to directions as outlined in DOC Policies 09.12 "Oleoresin Capsicum Aerosols" and 08.03.01 "Hazardous Materials"
Facilities Services	Employees are trained to immediately evacuate the area and contact trained medical staff on duty to treat injured personnel.
Juvenile Detention	Employees are trained to immediately evacuate the area and contact trained medical staff on duty to treat injured personnel. Employees are instructed on the emergency evacuation procedures that are listed in the facility procedures manual.
Public Works - ERR	Employees are trained to immediately evacuate the area and contact trained medical staff on duty to treat injured personnel.
Public Works – Permit Services	Employees are trained to immediately evacuate the area and contact trained medical staff on duty to treat injured personnel.
Public Works - Solid Waste	Employees are trained to pull the fire alarm evacuate the area, evacuate the area, pull the fire alarm and wait for emergency response personnel. Employees are instructed on the emergency evacuation procedures that are listed in the facility operations manual. No emergency respirators are kept at the facility as egress from the facility can be accomplished in less than 30 seconds (in most cases, within 10 seconds)
Public Works – Utilities	Employees are trained to evacuate the area, notify emergency personnel and wait for emergency response personnel.
Restitution Center	Employees are trained to respond to directions as outlined in DOC Policies 09.12 "Oleoresin Capsicum Aerosols" and 08.03.01 "Hazardous Materials"
TASC	Not applicable.

Hazardous Atmosphere Identification

Note: This list will be updated as Hazardous Crisis Situations are identified within each County department.

In addition to respiratory hazards, the following are additional conditions to be avoided during hazardous / crisis situations;

1. Conditions where gases or vapors that poison by skin absorption or contact may be present.
2. Conditions where the facility's physical surroundings (floor, ceiling, walls) are unstable to due to bombing, fire or natural catastrophe.

Emergency Contacts When an Emergency is Declared

The outside resources have been identified as backup in an emergency:

Yakima County Fire Department	911
Union Gap Fire Department	911

The following County positions have been designated as backup in an emergency:

Aging and Long Term Care	No designated backup is necessary due to limited exposure levels (Tuberculosis only)
Department of Corrections	Backup personnel are subject to the shift working when the emergency occurs. Staff will be informed to contact other staff members on duty at that time.
Facilities Services	All employees
Juvenile Detention	Detention Manager, Assistant Detention Manager, Shift Supervisor and Senior Officer
Public Works - ERR	
Public Works – Permit Services	No designated backup is assigned as exposures occur out in the field.
Public Works - Solid Waste	Program Coordinator, Program Representative or Program Specialist
Public Works – Utilities	No designated backup is necessary due to limited exposure levels (Chlorine only)
Restitution Center	Backup personnel are subject to the shift working when the emergency occurs. Staff will be informed to contact other staff members on duty at that time.
TASC	No designated backup is necessary due to limited exposure levels (Tuberculosis only)

Engineering Controls

Public Works - Solid Waste

In the Moderate Risk Waste facility, engineering controls are provided as a *first line of protection* for the workers performing their routine jobs. Engineering controls are in the form of an air exchange system that is operated by two electrical industrial fans. Fan controls are located on the main breaker panel as well as within the Solid Waste office. The switch panel located within the Solid Waste office controls speed levels as well as power. To facilitate the new heating system, a separate air exhaust system has been installed. Fan controls for this system are located in the main breaker panel area as well as the drum storage area.

Employees are trained by the Program Coordinator on proper use, operation and safety measures. All system failures (electrical) are to be reported to the Program Coordinator as soon as possible. The Program Coordinator will then contact the appropriate company to diagnose and fix the problem. The Program Coordinator is responsible for inspecting and maintaining equipment (routine filter check, replacement and removal).

Department of Corrections

In the Department of Corrections, engineering controls are provided as the first line of protection for workers performing their routing jobs with inmates identified with having tuberculosis.

The Department of Corrections will house inmates suspected of tuberculosis within their negative air flow room. The negative airflow room is located in the Northeast corner (North End L Tank) of the 2nd floor of the County jail. A manual override control is located directly outside of the negative air flow room.

All Corrections Officers and Facilities Services employees are trained by the Facilities Services Supervisor on proper use, operation and safety measures for the manual override controls. Facilities Services are also provided training for operation of the main controls. All system failures (electrical) are to be reported to the Facilities Service Supervisor as soon as possible. The Facilities Service Supervisor will then either fix the problem or contact the appropriate company to diagnose and fix the problem. The Facilities Service Supervisor or designee is responsible for inspecting and maintaining equipment.

Work Practice Controls

Safety and health regulations prohibit the use of respirators with tight-fitting face-pieces to be worn by employees who have conditions that would compromise the face-piece to face seal. Examples of these conditions include facial hairs (i.e. stubble, bangs) that interferes with the face-piece seal or valve function, absence of normally worn dentures or facial deformities (i.e. Scars, deep skin creases, prominent cheekbones) under the face-piece seal.

Corrective glasses or goggles, or other PPE, must be worn in such a way that they do not interfere with the seal of the face-piece to the face. WISHA regulations state that full-face piece respirators will be provided where either corrective glasses or eye protection is required.

Yakima County uses assignment of staff as a means of work practice controls to protect employees and other from respiratory hazards:

Department of Corrections	Assignment is determined by the employee's ability to wear a respirator. Employees that require corrective glasses, have facial hair, a deformity or any other feature that causes inability to properly wear a respirator will be paired with an employee who is able to wear a respirator should an emergency occur. The RPC is responsible for ensuring compliance.
Department of Corrections, Facilities Services and Aging and Long Term Care	Assignment of employees and usage of HEPA respirators for non-routine use to prevent the exposure to Tuberculosis are carried out in accordance with the parameters outlined in the Yakima County Tuberculosis Program. The RPC is responsible for ensuring compliance.
Public Works – ERR	Assignment is determined by the employee's ability to wear a respirator. Employees that require corrective glasses, have facial hair, a deformity or any other feature that causes inability to properly wear a respirator will be paired with an employee who is able to wear a respirator should an emergency occur. The RPC is responsible for ensuring compliance.
Public Works – Permit Services	Assignment of employees and usage of HEPA respirators for routine use to prevent the exposure to airborne construction contaminants such as sawdust, fiberglass insulation.

Work Practice Controls

Public Works – Solid Waste	All employees and others must be able to wear a respirator to perform their routine jobs. The RPC is responsible for ensuring compliance.
Public Works – Utilities	All employees and others must be able to wear a respirator to perform their routine jobs. The RPC is responsible for ensuring compliance.
TASC	Assignment of employees and usage of HEPA respirators for non-routine use to prevent the exposure to Tuberculosis are carried out in accordance with the parameters outlined in the Yakima County Tuberculosis Program. The RPC is responsible for ensuring compliance.

Respirator Selection

The RPC of each facility is responsible for selecting the appropriate respirator type(s) for each facility based on the respiratory hazards that could occur at each facility, and physical compatibility with the employees of each facility. The RPC is also responsible to ensure that the respirator selected will be adequate to effectively reduce exposure to the respirator user under all conditions of use including reasonably foreseeable emergency situations.

Selection guidelines using the assigned protection factors outlined in Appendix H: Assigned Protection Factors will be used. Only National Institute for Occupational Safety and Health (NIOSH) certified respirators will be used.

For atmosphere-supplying respirators (Air purifying respirators (APR) use cannister filters to filter out contaminants. Self Contained Breathing Apparatus (SCBA) uses gas cylinders and Supplied Air Respirators (SAR) usually have a compressor that supplies air to the user. I am not familiar with the PAPR or SCBA, unless the SCBA is referring to air systems used for diving operations in water. MEN) (PAPR or SCBA), the RPC will ensure that breathing the air will be of high purity, meets quality levels for content, and does not exceed certain contaminant levels and moisture requirements. The breathing air for the cylinders will be at least Grade D as described in the Compressed Gas Association Commodity Specification G-7-1-1996) WAC 296-62-07182(2)).

The appropriate type of filters, cartridges and canisters will be selected according to Appendix I : Color Coding of Respirator Filters, Cartridges and Canisters.

Contaminant Breakthrough Warning Systems

For vapor or gas air purifying respirators, the two systems in place to warn respirator wearers of contaminant breakthrough include using respirator cartridges equipped with an End of Service Life Indicator (ESLI) or using a cartridge replacement schedule based on manufacturer breakthrough test data.

Employees using cartridges not equipped with ESLIs must replace cartridges in accordance with the instruction and color coding identification provided by Appendix B: Color Coding of Respirator Filters, Cartridges and Canisters. For respirators worn exclusively for protection against particles, filters will be changed per the manufacturer's specifications and whenever the wearer detects a change in breathing resistance.

For atmospheres that are immediately dangerous to life and health (IDLH), the highest level of respiratory protection and reliability is required. The following respirators will be provided and used: Full face-piece pressure demand self-contained breathing apparatus (SCBA) certified for a minimum service life of 30 minutes. Currently, these are being used for hazardous / crisis situations within the Department of Corrections and Juvenile Detention.

The selections for these facilities are:

Respirator Selections			
Facility	Brand	Model	Sizes
Aging and Long Term Care	3M	N-95	One size fits all
Department of Corrections - Restitution Center	Drager	PA90 Plus	Drager: one size fits all
Department of Corrections – Jail	MSA Drager	401 PA-08-FS	MSA: (small – large) Drager: one size fits all
Facilities Services	<i>To be determined</i>		
Juvenile Detention	Drager	PA 80 Plus -- Panorama Nova	Various (small – x-large)
Public Works – ERR	<i>To be determined</i>		
Public Works – Permit Services	<i>To be determined</i>		
Public Works - Solid Waste	North	7700-30 (half face) 7600-8A (full face)	Small/Medium Medium/Large
Public Works – Utilities	Survivair	Model number not available	Medium
TASC	<i>To be determined</i>		

In addition, where HEPA respirators are required on a non-routine basis for protection from exposure to Tuberculosis in correctional facilities, TASC and within Aging and Long Term Care, all decisions made related to their selection and use will be made in accordance with the parameters as outlined in the Yakima County Tuberculosis Program.

Fit Testing of Respirators

For all employees, who wear a respirator, a fit test will be conducted before initial use of the respirator and whenever a different make or size is used, or when the employee is visually seen to have significant physical changes that may affect the correct fit of a respirator.

Fit testing for employees who are required to use a respirator on a routine or emergency basis shall be completed on an annual basis thereafter. Fit testing for employees and others who may be required to don a HEPA respirator to fit against exposure to Tuberculosis will be fit tested on an as needed basis when respirators are issued in accordance with parameters outlined in the Yakima County Tuberculosis Program.

Fit tests will be conducted by the Respirator Program Coordinator or designee in accordance with the requirements as outlined in Appendix J: Fit Test Procedures. Employees and others will be fit tested with the make, model, and size of respirator that they will actually wear. If for any reason an employee finds that the respirator fit is unacceptable, a reasonable opportunity to select a different face-piece and to be re-tested will be provided.

Fit testing will be documented using the form in Appendix K: Respirator Program Fit Test Certification; and the documentation will include the type, model, and size of respirator for which each employee has been fit tested.

Fit Check (User Seal Check) of Respirators

A user seal check (*also known as a fit check*) will be performed every time a tight-fitting respirator is put on or adjusted to ensure proper seating of the respirator to the face. The user seal check conducted must be either the positive and/or negative pressure checks described in Appendix L: User Seal Check (Fit Check) Procedures, or the manufacturer's recommended procedures when equally protective.

Respirators

Respirator Location

The following respirators are available at the specified locations:

Facility	Respirator	Quantity	Location
Aging and Long Term Care	3M N95	1 for each employee	Each satellite office
Department of Corrections - Jail	Drager PA-08-FS MSA 401	1 at each location	West Wall Secured Hallway inside Door #11 ACR
Department of Corrections - Restitution Center	Drager PA90 Plus	4	Control Room
Facilities Services	<i>To be determined</i>		
Juvenile Detention	Drager 80 Plus Panorama Nova	1 at each location	Central Control Room Control Sub-Station Booking Office
Public Works - Solid Waste	North	1 assigned to each employee	Locker Room
Public Works – ERR	<i>To be determined</i>		
Public Works – Permit Services	<i>To be determined</i>		
Public Works – Utilities	Survivair	1 assigned to each employee	Well 3 at Terrace Heights
TASC	<i>To be determined</i>		

The appropriate type of filters, cartridges and canisters will be selected and stored according to Appendix I: Color Coding of Respirator Filters, Cartridges and Canisters.

Maintenance of Respirators

Respirators shall be maintained by the RPC or designee(s). Maintenance shall include inspecting, cleaning and disinfecting each apparatus and replacement of used or worn parts as deemed necessary as required in the regulations and the manufacturer's specifications.

Inspection Procedure

All Respirators

Inspections will be conducted prior to each use and during cleaning. A record (Appendix M: Respirator Inspection Checklist) will be maintained which lists the inspection dates and the findings of such inspections in the office of the RPC. Respirator inspections will include a check of respirator function, tightness of connections and the condition of the various parts including but not limited to:

- Face-piece
- Head straps
- Valves
- Connecting tube and cartridges
- Canisters or filters
- Elastomeric parts must be evaluated for pliability and signs of deterioration
- The respirators will be checked to assure that the air and oxygen cylinders are fully charged according to the manufacturer's instructions
- The regulator and warning devices will be checked to assure that they are functioning properly
- The tightness of the connections and the condition of the face piece, headbands, valves, connecting tubes and canisters will be checked
- Rubber or elastomer parts will be inspected for pliability and signs of deterioration
- The respirator shall be cleaned with disinfectant after each use

If the inspection of the respirator reveals any defects in the respirator, the employee conducting the inspection will notify the RPC in order to have the defective part(s) replaced.

Emergency Use Respirators

The emergency use respirators shall be inspected at least once per month and after each use to assure the readiness of the respirator. A record (Appendix M: Respirator Inspection Checklist) will be maintained which lists the inspection dates and the findings of such inspections in the office of the RPC. Any defects will be reported to the RPC so that the defect can be repaired or so that the cylinder will be filled. All repairs / adjustments will be completed by the manufacturer or certified technician.

The cylinders used for the emergency use respirators are made of aluminum with a fiberglass wrap. The cylinders will be hydro-statically tested on an annual basis or as recommended by the manufacturer. Testing shall be coordinated by the RPC.

Cleaning & Disinfecting

Respirators will be cleaned and disinfected as follows:

- Respirators that are issued for the exclusive use of an employee will be cleaned and disinfected as often as necessary to be maintained in a sanitary condition. Employees will be responsible to clean and disinfect respirators issued for their exclusive use.
- Respirators used by more than one employee will be cleaned and disinfected by RPCs or their designees prior to being used by a different individual
- Respirators maintained for emergency use as well as respirators used in fit testing and training will be cleaned and disinfected after each use by RPCs or their designees.
- During fit-tests, disinfectant wipes can be used in between respirator wears to minimize the risk for spreading cold, influenza or other respiratory illness. **Note:** *The person cleaning respirators with disinfectant wipes must be so trained.* At the end of the day, each respirator will be completely disassembled and cleaned by immersion by RPCs or their designees

Respirators will be cleaned and disinfected using the procedures in Appendix K: Respirator Cleaning Procedures or by the respirator manufacturer's cleaning procedures if they are equivalent in effectiveness.

Cleaner Location

The RPC will provide Cleaner / Disinfectant to the employee for use between annual inspections. Cleaner shall be located at the following locations:

Aging and Long Term Care	Not applicable. Disposables used
Department of Corrections	Inmate Processing Office
Facilities Services	Not applicable. Disposables used
Juvenile Detention	Booking Office
Public Works - Solid Waste	Emergency Eye Wash / Shower Station Employee Locker Room / Laboratory
Public Works – ERR	To be determined
Public Works – Permit Services	Not applicable. Disposables used
Public Works – Utilities	Well # 3 Terrace Heights
Restitution Center	Shift Supervisor Office
TASC	Not applicable. Disposables used

It will be the responsibility of the employee to notify the RPC when supplies are near depletion.

Respirators

Storage

Respirators will be stored so that they are protected against damage, contamination, dust, sunlight, temperature extremes, excessive moisture, and damaging chemicals. When respirators are *packed or stored*, the face-piece and exhalation valve will be stored in a manner that prevents deformation. Each respirator should be positioned so that it retains its natural configuration.

The RPC is responsible to ensure that respirators intended for emergency use will be kept accessible to the work area. Emergency use respirators will not be kept in any area that might itself be involved in the emergency because such an area may become contaminated or inaccessible.

APPENDIX

Effected Employees

Department	Position	Work Performed Requiring Respirator Protection
Department of Corrections - Jail	Corrections Officer Corrections Sergeant Corrections Corporal	Building / Floor / Room evacuation due to fire Building / Floor / Room evacuation due to carbon monoxide / gas emission
Department of Corrections - Restitution Center	Corrections Officer Corrections Sergeant Corrections Corporal	Building / Floor / Room evacuation due to fire Building / Floor / Room evacuation due to carbon monoxide / gas emission
Facilities Services	Maintenance Technician	Non-routine donning of a HEPA mask to prevent exposure to TB Painting / sanding Demolition work
Juvenile Detention	Detention Officer Detention Supervisor	Building / Floor / Room evacuation due to fire Building / Floor / Room evacuation due to carbon monoxide / gas emission
Public Works – ERR	Mechanic	Painting / sanding
Public Works – Solid Waste	Program Coordinator Program Specialist Program Representative	Labpacking / loosepacking household chemicals into drums Bulking paints, acids and bases into drums
Public Works – Utilities	Utility Maintenance Technician	Entering confined areas where chlorine gas may be present (Well 3)
Aging and Long Term Care	Case Manager	Non-routine donning of a HEPA mask to prevent exposure to TB only
Public Works – Permit Services	Building Inspectors	Entering construction areas where sawdust and fiberglass insulation may be present
TASC	Case Manager	Non-routine donning of a HEPA mask to prevent exposure to TB only



Yakima County Respirator Program Training Certification

Employee: _____
Print Name

- ☐ Aging and Long Term Care
- ☐ Department of Corrections
- ☐ Facilities Services
- ☐ Juvenile Detention
- ☐ Public Works – Division: _____
- ☐ TASC

Date of Training: _____

I hereby certify that this employee has received Respiratory Protection training including:

- Information regarding the consequences of improper fit, usage, or maintenance on respirator effectiveness.
- An explanation of the limitations and capabilities of the respirator selected for employee use that address: how the respirator operates, how the respirator provides protection (by either filtering the air, absorbing the vapor or gas, or providing clean air from an uncontaminated source, as applicable) and the limitations of the respirator.
- An explanation to understand how to use the respirator effectively in emergency situations including those in which the respirator malfunctions. Comprehensive training will be provided where respirators are used in IDLH situations including oxygen-deficient atmospheres such as those that occur in rescue operations.
- Procedures for inspecting, storing and maintaining the respirator, donning and removing it, checking the fit and respirator seal, recognizing any problems that may threaten its continued protective capability and the steps employees are to follow if they discover any problems, to whom the problems are to be reported, and where to obtain replacement equipment if necessary.
- Medical information that is sufficient for them to recognize the signs and symptoms of medical conditions (e.g., shortness of breath, dizziness) that may limit or prevent the effective use of respirators
- An overview of Yakima County's Respirator Program

In addition, this employee demonstrated his/her understanding of the information covered in the training through hands-on exercises.

Instructor: _____
Printed name

Employee Signature: _____

Date: _____

Cc: Original – Department
Human Resources

Respirator Medical Questionnaire
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WISHA Respirator Medical Evaluation
MANDATORY QUESTIONNAIRE
WAC 296-62-07255

To the employer: You must not review employee questionnaires

To the employer's PLHCP: Answers to questions in Section 1 and question 9 in Section 2 of Part A do not require further medical evaluations.

To the employee: Your employer must allow you to answer this questionnaire during normal working hours, or at a time that is convenient to you. To maintain your confidentiality, your employer or supervisor must not look at or review your answers, and your employer must tell you how to deliver or send this questionnaire to the health care professional who will review it.

Part A. Section 1. Mandatory

The following information must be provided by every employee who has been selected to use any type of respirator (please print)

1. Today's date: _____ 2. Your name: _____
3. Your age: _____ 3a. Date of Birth _____ 4. Sex (circle one) Male Female
5. Your height: _____ ft _____ in. 6. Your weight: _____ lbs
7. Your job title: _____
8. A phone number where you can be reached by the health care professional who will review this questionnaire (include area code): _____
9. The best time to telephone you at this number: _____
10. Has your employer told you how to contact the health care professional who will review this questionnaire? (Circle one): Yes No
11. Check the type of respirator you will use (you can check more than one category):
 - a. _____ N, R, or P disposable respirator (dust mask style, half or full face-piece respirators without cartridges)
 - b. _____ Check all that apply:

<input type="checkbox"/> Half mask	<input type="checkbox"/> Full facepiece mask	<input type="checkbox"/> Helmet hood	<input type="checkbox"/> Escape
<input type="checkbox"/> Non powered cartridge or canister		<input type="checkbox"/> Powered air purifying cartridge respirator (PAPR)	
<input type="checkbox"/> Supplied-air or Air-line Self contained breathing apparatus (SCBA): Other: _____	<input type="checkbox"/> Demand	<input type="checkbox"/> Disposable filtering facepiece (for example N-95)	<input type="checkbox"/> Pressure demand
12. Have you worn a respirator? (circle one): Yes No
If yes, what type(s): _____

WISHA Respirator Medical Evaluation
MANDATORY QUESTIONNAIRE
WAC 296-62-07255

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Part A. Section 2. Mandatory

Questions 1 through 9 below must be answered by every employee who has been selected to use any type of respirator (please circle "yes" or "no")

1. Do you currently smoke tobacco, or have you smoked tobacco in the last month: Yes / No

2. Have you ever had any of the following conditions?:

Seizures (fits): Yes / No
Diabetes (sugar disease): Yes / No
Allergic reactions that interfere with your breathing?: Yes / No
Claustrophobia (fear of closed-in places): Yes / No
Trouble smelling odors?: Yes / No

3. Have you ever had any of the following pulmonary or lung problems?

Asbestosis: Yes / No
Asthma: Yes / No
Chronic Bronchitis: Yes / No
Emphysema: Yes / No
Pneumonia: Yes / No
Tuberculosis: Yes / No
Silicosis: Yes / No
Pneumothorax (collapsed lung): Yes / No
Lung cancer: Yes / No
Broken ribs: Yes / No
Any chest injuries or surgeries: Yes / No
Any other lung problem that you've been told about: Yes / No

4. Do you currently have any of the following systems of pulmonary or lung illness?

Shortness of breath: Yes / No
Shortness of breath when walking fast on level ground or walking up a slight hill or incline: Yes / No
Shortness of breath when walking with other people at an ordinary pace on level ground: Yes / No
Have to stop for breath when walking at your own pace on level ground: Yes / No
Shortness of breath when washing or dressing yourself: Yes / No
Shortness of breath that interferes with your job: Yes / No
Coughing that produces phlegm (thick sputum): Yes / No
Coughing that wakes you early in the morning: Yes / No
Coughing that occurs mostly when you are lying down: Yes / No
Coughing up blood in the last month: Yes / No
Wheezing: Yes / No
Wheezing that interferes with your job: Yes / No
Chest pain when you breathe deeply: Yes / No
Any other symptoms that you think may be related to lung problems: Yes / No

WISHA Respirator Medical Evaluation

MANDATORY QUESTIONNAIRE

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Page 3 of 4

Part A. Section 2. Mandatory (Continued)

5. Have you ever had any of the following cardiovascular or heart problems?

Heart attack:	Yes	/ No
Stroke:	Yes	/ No
Angina:	Yes	/ No
Heart failure:	Yes	/ No
Swelling in your legs or feet (not caused by walking):	Yes	/ No
Heart arrhythmia (irregular heart beat):		
High blood pressure:	Yes	/ No
Any other heart problem that you've been told about:	Yes	/ No

6. Have you ever had any of the following cardiovascular or heart problems?

Frequent pain or tightness in your chest:	Yes	/ No
Pain or tightness in your chest during physical activity:	Yes	/ No
Pain or tightness in your chest during physical activity:	Yes	/ No
Pain or tightness in your chest that interferes with your job:	Yes	/ No
In the past two years, have you noticed your heart skipping or missing a beat:	Yes	/ No
Heartburn or indigestion that is not related to eating:	Yes	/ No
Any other symptoms that you think may be related to heart or circulation problems?	Yes	/ No

7. Do you currently take medication for any of the following problems?

	Yes	/ No
Breathing or lung problems:	Yes	/ No
Heart trouble:		
Blood pressure:	Yes	/ No
Seizures (fits):	Yes	/ No

8. If you've used a respirator, have you ever had any of the following problems? (If you've never used a respirator, check the following space and go to question 9:

	Yes	/ No
Eye irritation:	Yes	/ No
Skin allergies or rashes:	Yes	/ No
Anxiety:	Yes	/ No
General weakness or fatigue:	Yes	/ No
Any other problem that interferes with your use of a respirator:	Yes	/ No
Would you like to talk to the health care professional who will review this questionnaire about your answers to this questionnaire?	Yes	/ No

MANDATORY QUESTIONNAIRE

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Page 4 of 4

Part A. Section 3. Mandatory for SCBA or Full Face-piece Respirator Users

Questions 10 through 15 below must be answered by every employee who has been selected to use either a full-facepiece respirator or a self-contained breathing apparatus (SCBA). For employees who have been selected to use other types of respirators, answering these questions is voluntary:

10. Have you ever lost vision in either eye (temporarily or permanently): Yes / No
11. Do you currently have any of the following vision problems? Yes / No
Wear contact lenses: Yes / No
Wear glasses: Yes / No
Color blind: Yes / No
Any other eye or vision problem: Yes / No
12. Have you ever had an injury to your ears, including a broken ear drum? Yes / No
13. Do you currently have any of the following hearing problems? Yes / No
Difficulty hearing: Yes / No
Wear a hearing aid: Yes / No
Any other hearing or ear problem: Yes / No
14. Have you ever had a back injury: Yes / No
15. Do you currently have any of the following musco-skeletal problems? Yes / No
Weakness in any of your arms, hands, legs or feet: Yes / No
Back pain: Yes / No
Difficulty fully moving your arms or legs: Yes / No
Pain or stiffness when you lean forward or backward at the waist: Yes / No
Difficulty fully moving your head up or down: Yes / No
Difficulty fully moving your head side to side: Yes / No
Difficulty bending your knees: Yes / No
Difficulty squatting to the ground: Yes / No
Climbing a flight of stairs or a ladder carrying more than 25 lbs: Yes / No
Any other muscle or skeletal problem that interferes with using a respirator: Yes / No

Yakima County Supervisor / Employee Incident / Exposure Form		
<p>This Report is to be completed on accidents / incidents that DO NOT require treatment from a medical provider at this time.</p> <p>This Report should be completed by the employee and verified by the supervisor before submitting to the Human Resources Department.</p>		
Name:		Department:
Address:		Telephone:
Social Security:	Sex:	Age:
Classification:		Date of Hire:
Date of Incident:	Time:	Date Reported:
Location of Incident:		Number of Days Lost:
List any Witnesses:		
Describe the incident (including equipment, materials, substance and environment:		
<p>1. Have you had any prior conditions or similar incidents happen to you?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please describe incident(s) and include date(s): </p>		
<p>2. Will you seek medical treatment other than First Aid?</p> <p> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please complete the SIF-2 Accident Report Form </p>		

<p>Are you aware of your responsibility to complete the SIF-2 Workman's compensation accident report form within one (1) year from date of injury if seeking compensation for time loss or medical treatment rendered in conjunction with the above incident?</p>		
<p>_____ Yes</p>	<p>_____ No</p>	<p>If you have any questions regarding this procedure, please contact Human Resources at 574-2210</p>
<p>4. Do you wish to complete the SIF-2 at this time? If yes, please contact your supervisor to obtain the form.</p>		
<p>NOTE: If you seek medical treatment other than First Aid rendered on the job for your injury, you must report to Human Resources preferably prior to seeking medical attention and no later than 48 hours after you obtain medical treatment for the alleged incident / accident.</p> <p>In the event that you are unable to immediately report to Human Resources, please contact 574-2210, a Human Resource representative will provide you with the necessary information.</p>		
<p>LEGAL NOTICE</p>		
<p>RCW 51.48.020, Sub-section 2 provides: Any given person claiming benefits under this title who knowingly gives false information required in any claim or application under this title shall be guilty of a felony or gross misdemeanor in accordance with the theft and anticipatory provisions of Title 9A RCW.</p> <p>I have read the above notice and understand its provisions and all the information provided on this form is true and correct to the best of my knowledge.</p>		
<p>Employee Signature: _____ Date: _____</p>		
<p>TO BE COMPLETED BY SUPERVISOR:</p>		
<p>Why did the occurrence happen or the condition exist?</p>		
<p>What could have been done or should be done to prevent this occurrence in the future?</p>		
<p>Supervisor Signature: _____ Date: _____</p>		

**Page purposely left blank as SIF-2's are numerically
accounted for by the
Department of Labor & Industries.**

Please refer to Human Resources.

Hazardous Atmospheres

Department	Atmosphere	Physical Properties	Chemical Properties
Solid Waste	1,1,1-Trichloroethylene	Colorless liquid with Chloroform like odor	1,1,1-Trichloroethylene
Solid Waste	Acetone	Clear colorless liquid with characteristic odor	Acetone
Solid Waste	Benzene	Colorless liquid with characteristic odor	Benzene (Sara III)
Solid Waste	Cyclohexane	Colorless liquid with pungent odor	Cyclohexane
Solid Waste	Ethyl Ether	Colorless liquid	Ether
Solid Waste	Isopropyl Alcohol Isopropanol	Colorless liquid with sweet alcohol odor	Isopropyl Alcohol
Solid Waste	Methyl Alcohol Methanol	Colorless liquid with faint alcohol odor	Methyl Alcohol
Solid Waste	Methyl Ethyl Ketone	Clear liquid with acetone-like odor	Methyl Ethyl Ketone, MEK
Solid Waste	Methylene Chloride Dichloromethane	Colorless liquid with ether –like odor	Dichloromethane
Solid Waste	Perchloroethylene (Dry cleaning solvent)	Colorless liquid with ether-like odor	Perchloroethylene Tetra chloroethylene
Solid Waste	Propylene Dichloride	Colorless liquid	1,2-dichloropropane
Solid Waste	Tetrachloroethylene	Colorless liquid with ether-like odor	Perchloroethylene Tetrachloroethylene
Solid Waste	Toluene	Colorless liquid with benzene-like odor	Toluene Toluol
Solid Waste	Xylene	Colorless liquid with characteristic odor	Xylene Xylol
Solid Waste	Chemical Fire	Smoke, flames	unknown
Solid Waste	Structure Fire	Smoke, flames	unknown
Juvenile	Structure Fire	Smoke, flames	unknown
Juvenile	Chemical Fire / Spill	Smoke, flames	gasoline
Juvenile	Chemical Fire / Spill	Smoke, flames	commercial insecticides (various)
Juvenile	Lye	White pellets	Sodium hydroxide
Juvenile	Anti-freeze		
Juvenile	Paint thinner		
Juvenile	Benzine	Clear colorless liquid with distinct odor	benzine
Juvenile	Acetone	Clear colorless liquid	acetone
Juvenile	hexane	Clear colorless liquid	hexane
Juvenile	lacquer	Clear colorless liquid with distinct odor	naptha
Juvenile	lacquer thinner	Clear colorless liquid with distinct odor	naptha
Juvenile	denatured alcohol	Clear colorless liquid	Ethanol

Appendices
Appendix F: Hazardous Atmospheres

		with aromatic odor	
Juvenile	ethyl alcohol	Clear colorless liquid with alcohol odor	Ethanol
Juvenile	xylene	Clear colorless liquid with xylene odor	xylene
Juvenile	toluidi		
Juvenile	methyl ether	Clear colorless liquid	ether
Juvenile	methyl ethyl ketone	Clear colorless liquid with ketone odor	methyl ethyl ketone
Juvenile	diesel fuel	Colorless liquid with kerosene odor	Hydrocarbons
Juvenile	Motor oil	Various colored liquid with oil-like odor	Mineral oil, petroleum distillates
Juvenile	Kerosene	Normally clear liquid with kerosene odor	Kerosene
Juvenile	Mineral spirits	Colorless liquid with distinctive odor	naphtha
Juvenile	Paints (oil base)		
Juvenile	Linseed oil	Golden to Dark brown oily liquid	Linseed oil
Juvenile	Mineral oil	Viscous odorless oily liquid	Mineral oil
Juvenile	Neatsfoot oil	Straw color liquid with a peculiar odor	Animal oil derived from shinbones and feet deprived of hooves from cattle
Juvenile	Sunray conditioner		
Juvenile	Guardian fluid		
Juvenile	Ammonia	Colorless liquid with sharp pungent odor	Ammonia
Juvenile	Chlorine	Clear liquid with pungent odor	Chlorine
Juvenile	Duplicating fluid		
Juvenile	Methyl Alcohol	Clear liquid with alcohol odor	Methanol
Juvenile	Muriatic Acid	White to clear liquid with pungent odor	Hydrogen Chloride
Juvenile	Caustic Soda	Clear white solid with no distinct odor	Sodium Hydroxide
Juvenile	Sulfuric Acid	Amber oily liquid with sharp sulfur odor	Sulfuric Acid
Juvenile	Tannic Acid	Yellow powder	Tannic Acid
Corrections / Restitution Center	BodyGuard Foam	Amber to light red appearance , slight ethereal odor	Oleoresin Capsicum
Corrections / Restitution Center	Structure Fire	Smoke, flames	Unknown

Appendix F: Hazardous Atmospheres

[illegible]

Note: This list will be updated as hazardous atmospheres are identified by each Department.

Important Information About Voluntary Use of Respirators
WAC 296-62-07117

THIS MUST BE GIVEN TO ALL EMPLOYEES WHO VOLUNTARILY WEAR RESPIRATORS

Note: "You" and "your" mean the employee in the following information.

Respirators protect against airborne contaminants when properly selected and worn. Respirator use is encouraged, even when exposure to contaminants are below the exposure limit(s), 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 you. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous contaminants (chemical biological) does not exceed the limits set by WISHA standards. If your employer provides respirators for your voluntary use, or if you are allowed to 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 follow all instructions provided by the manufacturer on use, maintenance, cleaning and 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 solvent vapor or smoke (since smoke particles are much smaller than dust particles).
4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

Table - Assigned Protection Factors
WAC 296-62-07131

Type of Respirator	Assigned Protection Factor^a
Air-Purifying Respirators (APRs)	
Half-facepiece ^b for:	10
• Particulate-filter	
• Vapor- or gas-removing	
• Combination particulate-filter and vapor- or gas-removing	
Full facepiece for:	100
• Particulate-filter;	
• Vapor- or gas-removing;	
• Combination particulate-filter and vapor- or gas-removing	
Powered Air-Purifying Respirators (PAPRs)	
Powered air-purifying, loose fitting facepiece	25
Powered air-purifying, half facepiece	50
Powered air-purifying, full facepiece, equipped with HEPA filters	1000
Powered air-purifying, hood or helmet equipped with HEPA filters	1000
Supplied-Air (Airline) Respirators	
Supplied-air, demand, half facepiece	10
Supplied-air, continuous-flow, loose fitting facepiece	25
Supplied-air, continuous-flow or pressure-demand type, half facepiece	50
Supplied-air, demand, full facepiece	100
Supplied-air, continuous-flow or pressure-demand type, full facepiece	1000
Supplied-air, continuous-flow, helmet or hood	1000
Self-Contained Breathing Apparatus (SCBAs)	
Self-contained breathing apparatus, demand-type, half facepiece ^b	10
Self-contained breathing apparatus, demand-type, full facepiece	100
Self-contained breathing apparatus, pressure-demand type, full facepiece	10,000

Table - Color Coding of Respirator Filters, Cartridges and Canisters
WAC 296-62-07184

Atmospheric Contaminants to be Protected Against	Colors Assigned*
Acid gases	White.
Hydrocyanic acid gas	White with 1/2 - inch green stripe completely around the canister near the bottom.
Chlorine gas	White with 1/2 - inch yellow stripe completely around the canister near the bottom.
Organic vapors	Black.
Ammonia gas	Green.
Acid gases and ammonia gas	Green with 1/2 - inch white stripe completely around the canister near the bottom.
Carbon monoxide	Blue.
Acid gases and organic vapors	Yellow.
Hydrocyanic acid gas and chloropicrin vapor	Yellow with 1/2 - inch blue stripe completely around the canister near the bottom.
Acid gases, organic vapors, and ammonia gases	Brown.
Radioactive materials, excepting tritium and noble gases	Purple (Magenta).
Particulates (dusts, fumes, mists, fogs, or smokes) in combination with any of the above cases or vapors	Canister color for contaminant, as designated above, with 1/2 - inch gray stripe completely around the canister near the top.
All of the above atmospheric contaminants	Red with 1/2 - inch gray stripe completely around the canister near the top.

*Gray must not be assigned as the main color for a canister designed to remove acids or vapors.

Note: Orange must be used as a complete body, or stripe color to represent gases not included in this table. The user will need to refer to the canister label to determine the degree of protection the canister will afford.

Fit Test Procedures
WAC 296-62-07201

Step 1: Assess Proper Fit (See WAC 296-62-07202)

THIS TEST IS APPLICABLE TO ALL DEPARTMENTS USING RESPIRATORS.

Prior to the test, staff will be shown how to properly wear the respirator, how the face piece should be positioned on the face, how to set strap tension, how to assess a "comfortable" position. Assessment of comfort shall include reviewing the following:

- ☐ Proper chin placement
- ☐ Mask strap tension
- ☐ Fit across nose bridge
- ☐ Proper room for safety glasses
- ☐ Proper distance from nose to chin
- ☐ Mouth distance to allow for talking
- ☐ Slip tendency
- ☐ Cheeks filled out
- ☐ Self observation in mirror

The employee must wear the respirator for at least five (5) minutes before any testing is conducted.

Step 2: Perform User Seal Check (Fit Check) (See WAC 296-62-07251 Appendix B1)

THIS TEST IS APPLICABLE TO ALL DEPARTMENTS USING RESPIRATORS.

This test shall be performed each time the respirator is used to ensure proper adjustment. The employee shall cover the respirator face mask with his / her hands and inhale slightly. If a leak is present, the air can be felt as it enters the mask. With the Self Contained Breathing Apparatus (SCBA), the air inlet is disconnected from the regulator and sealed with the hand as the wearer inhales. The employee should determine a lack of breathing air.

Step 3: Carry Out Exercise Regimen (See WAC 296-62-07203)

THIS TEST IS APPLICABLE TO ALL DEPARTMENTS USING RESPIRATORS.

The employee shall perform the following exercises in the order given:

- ☐ Normal Breathing: In the normal standing position, the subject shall breath normally for at least one minute.
- ☐ Deep Breathing: In the normal standing position, the subject shall breath deeply for at least one minute and pause as needed to prevent hyperventilating.
- ☐ Head Turning: Standing in place, the subject shall tilt his / her head from side to side, holding the head in the extreme position for at least five seconds. This exercise shall be performed for at least one minute.

- ❑ **Reading:** The employee shall read the following passage out loud to assure clarity of communication:

When the light strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colors. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look but one ever finds it. When a man looks for something beyond reach, his friends say he is looking for the pot of gold at the end of the rainbow.

- ❑ **Grimace:** The employee shall grimace, smile, frown and contort the face to use all facial muscles to ensure the reseal of the respirator after the original seal has been broken. This exercise shall be performed for at least 15 seconds.
- ❑ **Bending:** The employee shall kneel and lift in a manner similar to such activities performed during on-scene activities. The employee shall bend at the waist and touch his /her toes and return to the upright standing position. This exercise shall be performed for at least one minute.
- ❑ **Jogging in Place:** The employee shall jog in place for at least one minute.

If the employee fails any portion of the above testing, the employee will be refitted for a different size face mask.

Step 4: Conduct Fit Test

Qualitative Fit Test Procedure (QLFT) (See WAC 296-62-07205)

THIS TEST IS APPLICABLE TO THE DEPARTMENT OF SOLID WASTE.

Irritant Smoke (Stannic Chloride) Protocol (See WAC 296-62-07222, -07224, -07225)

1. General requirements and precautions
 - a) The respirator to be tested shall be equipped with high efficiency particulate air (HEPA) cartridges.
 - b) Only stannic chloride smoke tubes shall be used for this protocol.
 - c) No form of test enclosure or hood shall be used for the protocol.
 - d) The smoke can be irritation to the eyes, lungs, and nasal passages. The person testing shall take precautions to minimize the employee's exposure to the smoke. Sensitivity varies, and certain individuals may respond to a greater degree to irritant smoke. Care should be taken when performing the sensitivity screening checks that determine whether the employee can detect irritant smoke to use only a minimum amount of smoke necessary to elicit a response from the employee.
 - e) The fit test shall be performed in an area with adequate ventilation to prevent exposure of the conducting the test or a build up of smoke in the general atmosphere.
2. Sensitivity screening check (The employee must demonstrate their ability to detect a weak concentration of irritant smoke)

- a) The person testing shall break both ends of the ventilation tube containing stannic chloride attaching one end of the smoke tube to an aspirator squeeze bulb and the other end with a short piece of rubber tubing to prevent potential injury from the jagged end of the smoke tube.
- b) The person testing shall advise the employee that the smoke can be irritating to the eyes, lungs, and nasal passages and instruct them to keep their eyes closed during the test.
- c) The employee shall be allowed to smell a weak concentration of the irritant smoke before the respirator is donned to become familiar with its irritating properties and to determine if they can detect the smoke properties.

3. Irritant smoke fit test procedure

- a) The employee shall don the respirator without assistance, and perform the necessary seal checks.
- b) Instruct the employee to keep his eyes closed until told to open.
- c) The tester shall direct a stream of irritant smoke from the smoke tube towards the face seal area of the employee being tested beginning at least 12 inches from the facepiece and move the smoke stream around the whole perimeter of the mask.
- d) If the employee being tested shows no involuntary response and/or detects the irritant smoke, proceed with the test exercises.
- e) Have employees perform exercises required in WAC 296-62-07203 (See Fit Test Exercise Requirements identified in this section) while respirator seal is continually being challenged by smoke at a distance of 6 inches.
- f) If the employee detects irritant smoke at any time, the test is failed and the employee must retest the entire sensitivity check and fit test procedure.
- g) Employees passing the fit test without detection of the irritant smoke (involuntarily coughing or irritation), must be given a second sensitivity screening check with the same smoke tube to determine if they still react to the smoke.
- h) If a response is detected during the second sensitivity check, then the fit test is passed.

Quantitative Fit Test Procedure (QNFT) (See WAC 296-62-07230)

This test is applicable to the Department of Corrections and Juvenile Detention

The Departments of Correction and Juvenile Detention have determined that quantitative fit tests will be completed on its respirators, as these respirators are used on an emergency basis only. Quantitative Fit Testing has been contracted out to:

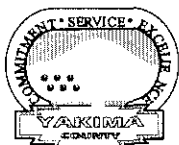
Department of Corrections	Cascade Fire & Safety Equipment
Restitution Center	Cascade Fire & Safety Equipment
Juvenile Detention	Cascade Fire & Safety Equipment

Quantitative Fit Testing is not required for the Department of Solid Waste as this facility using half mask air purifying respirators fit-tested using the Qualitative Fit Test Procedure (QLFT) described above.

Aerosol Test (This test is applicable to the Department of Corrections and Juvenile Detention)

The following chemical tests will be used on the respirators:

- ☐ Bitrex: Plastic bag



Yakima County Respirator Program Fit Test Certification

Employee: _____
Print Name

- ☐ Aging and Long Term Care
- ☐ Department of Corrections
- ☐ Facilities Services
- ☐ Juvenile Detention
- ☐ Public Works – Division: _____
- ☐ TASC

Date of Training: _____

I hereby certify that this employee has been fit tested as follows:

Facility	Brand / Model (check one)	Size Fitted (circle one)	Type of Test	Results of Fit Test
Department of Corrections	MSA 401	<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large	<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Department of Corrections	Drager PA-08-FS	<input type="checkbox"/> One size fits all	<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Department of Corrections	Drager PA-90-Plus	<input type="checkbox"/> One size fits all	<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Juvenile Detention	Drager 80 Plus Panorama Nova	<input type="checkbox"/> Small <input type="checkbox"/> Medium <input type="checkbox"/> Large <input type="checkbox"/> X-Large	<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Public Works – Solid Waste	North 7700-30M North 7600-8A North 7700-30S	<input type="checkbox"/> Small <input type="checkbox"/> Medium	<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Public Works – Division:			<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail
Other:			<input type="checkbox"/> Qualitative (QNFT) <input type="checkbox"/> Quantitative (QLFT)	<input type="checkbox"/> Attach fit factor & strip chart recording <input type="checkbox"/> Pass / Fail

Instructor: _____
Printed name

Signature: _____

Date: _____

Cc: Original – Department
Human Resources

User Seal Check (Fit Check) Procedures
WAC 296-62-07251

THESE PROCEDURES APPLY TO ALL DEPARTMENTS USING RESPIRATORS.

The individual who uses a tight-fitting respirator must perform a user seal check (fit check) to make sure that the respirator makes an adequate seal each time it is put on. Either the positive and negative pressure checks listed in this appendix, or the respirator manufacturer's recommended user seal check method, must be used.

User seal checks are not substitutes for qualitative or quantitative fit tests.

(1) Face-piece positive and/or negative pressure checks.

(a) Positive pressure check. Close off the exhalation valve and exhale gently into the face-piece. For most respirators this method of leak testing requires the wearer to first remove the exhalation valve cover before closing off the exhalation valve. The face fit is considered adequate if a slight positive pressure (inflation) can be built up inside the face-piece without any evidence of outward leakage of air at the seal. Carefully replace the exhalation valve cover, if it was removed, after the test.

(b) Negative pressure check. Close off the inlet opening of the canister or cartridge(s) by covering with the palm of the hand(s) or by replacing the filter seal(s), inhale gently so that the face-piece collapses slightly, and hold the breath for ten seconds. If the design of the inlet opening of the cartridges cannot be effectively covered with the palm of the hand, cover the inlet opening of the cartridge with a thin latex or nitrile glove. If the face-piece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is considered satisfactory.

(2) Manufacturer's recommended user seal check procedures. The respirator manufacturer's recommended procedures for performing a user seal check may be used instead of the positive and/or negative pressure check procedures describe above provided that you demonstrate that the manufacturer's procedures are equally effective.

Respirator Inspection Checklist

WAC 296-62-07178 (3):

The following respirator items are to be inspected by the Respirator Program Coordinator on a **monthly** basis or after each use:

Items to be checked:

- ☐ Cylinder Valve Closed
- ☐ Cylinder Pressure between 1800 and 2216
- ☐ Low pressure alarm bell – Follow Manufacturers instructions to verify bell sound by pressurizing the system, open the cylinder valve and close it, the alarm should ring. Bleed off excess air.
- ☐ High pressure hose (if applicable) – Check for tight fit at the tank; Check for physical damage to the hose such as bubbles, abrasions, splits
- ☐ Regulator – Shut off main line knob in closed position, By-pass knob, closed finger tight
- ☐ Gauge in good condition - Regulator gauge should read zero
- ☐ Breathing tube – Inspect for perforations, small cracks, or signs of wear, Tube should be free of moisture, Ensure gaskets are in place and not damaged
- ☐ Backpack harness and carrier – Shoulder and body straps fully opened and not deteriorated, Buckles and snaps in proper working order
- ☐ Face piece – Lens is clean and free of cracks, Visually inspect valve at facepiece
- ☐ Adjustable head straps have not deteriorated
- ☐ Nose cups in place and free of debris
- ☐ User Seal Check (Fit Check) conducted & then respirator cleaned & disinfected
- ☐ Note any dents, cuts or discoloration due to heat on the air cylinder
- ☐ Other (specify) _____

Respirator Identifier Information	Deficiencies Found (1) - (14) above	Date Reported to RPC	Date Corrected
--------------------------------------	--	----------------------	----------------

If respirator and /or any of its parts are in need of replacement, please report to the Respirator Program Coordinator (RPC).

Inspection Completed by: _____
Printed Name

Date of Inspection: _____

Respirator Cleaning Procedures WAC 296-62-07253

THESE PROCEDURES APPLY TO ALL DEPARTMENTS USING RESPIRATORS.

These procedures are provided for use when cleaning respirators. They are general in nature, and as an alternative the cleaning recommendations provided by the manufacturer of the respirators used by employees may be used, if the manufacturer's procedures are as effective as those listed here. Procedures are as effective when they meet these requirements, i.e., that must make sure that the respirator is properly cleaned and disinfected so that the respirator is not damaged and does no harm to the user.

Procedures for cleaning respirators:

- (a) Remove filters, cartridges, or canisters. Remove speaking diaphragms, demand and pressure-demand valve assemblies, hoses, or any components recommended by the manufacturer. Discard or repair any defective parts.
- (b) Wash components in warm (43°C [110°F] maximum) water with a mild detergent or with a cleaner recommended by the manufacturer. A stiff bristle (not wire) brush may be used to facilitate the removal of dirt.
- (c) Rinse components thoroughly in clean, warm (43°C [110°F] maximum), preferably running water. Drain.
- (d) When the cleaner used does not contain a disinfecting agent, respirator components should be immersed for two minutes in one of the following:
 - (i) Hypochlorite solution (50 ppm of chlorine) made by adding approximately one milliliter of laundry bleach to one liter of water at 43°C (110°F); or,
 - (ii) Aqueous solution of iodine (50 ppm iodine) made by adding approximately 0.8 milliliters of tincture of iodine (6-8 grams ammonium and/or potassium iodide/100 cc of 45% alcohol) to one liter of water at 43°C (110°F); or,
 - (iii) Other commercially available cleansers of equivalent disinfectant quality when used as directed, if their use is recommended or approved by the respirator manufacturer.
- (e) Rinse components thoroughly in clean, warm (43°C [110°F] maximum), preferably running water. Drain. The importance of thorough rinsing cannot be overemphasized. Detergents or disinfectants that dry on facepieces may result in dermatitis. In addition, some disinfectants may cause deterioration of rubber or corrosion of metal parts if not completely removed.
- (f) Components should be hand-dried with a clean lint-free cloth or air-dried.
- (g) Reassemble facepiece, replacing filters, cartridges, and canisters where necessary.
- (h) Test the respirator to make sure that all components work properly.

Note: These procedures do not apply to the disposable 3M Health Care N95 Particulate Respirator. These respirators are not designed for multiple use.