

Lake County Contractors Association

Safety News

May, 1998

Respiratory Protection

by Robert Gadon

Occupational Health & Safety, May 1998

Article edited

Having previously found that many employers covered by this regulation did not understand its requirements, OSHA has documented hundreds of cases where inadequate protection against airborne hazards resulted in needless death or injury to workers. An important goal of the revision was to clarify requirements for employers and improve respirator use, particularly among small employers.

The revised standard took effect April 8 at CFR 1910.134, while the older version will be renumbered as Part 1910.139. Employers have until Sept. 8 (150 days) to determine whether the scope of the revised rule applies to their operations. If so, they must meet the new requirements in full by Oct. 5.

General requirements in substance-specific standards (such as asbestos, benzene and lead) for respirator fit testing, face seal checks, cleaning and disinfection, medical exams, and employee training were removed and transferred to the revised standard. Unique medical exam requirements for specific air contaminants will remain in those standards. Four appendices were added to the revision that addresses respirator fit testing, face seal checks, cleaning and disinfection, medical exams, and information for employees who voluntarily wear respirators. Outdated references to MSHA/NIOSH-approved respirators were deleted, and it refers instead to NIOSH-approved respirators and current rules for equipment certification.

An entire paragraph of 35 definitions was added, and all the required elements of a respirator program were combined together in paragraph (c). Written programs must address the specific conditions and inhalation hazards of each particular worksite.

The following elements must be addressed in any written program: (1) selection of respirators, (2) employee medical evaluations, (3) fit testing procedures for tight-fitting respirators, (4) use of respirators in routine and emergency situations, (5) maintenance and care of respirators, (6) breathing air quality and use for atmosphere-supplying respirators, (7) employee training and information, and (8) program evaluation. Written programs must be updated as necessary so that they continually respond to the site conditions that affect respirator use. Each paragraph that follows paragraph (c) corresponds to the elements required in a written program.

Program Management

Respirator programs will require a management structure and a process for evaluation to ensure ongoing program effectiveness. A single administrator must be assigned to manage the entire respirator program throughout an organization. Responsibility for parts of the program can be delegated to specialists, such as health and safety professionals; it can also be delegated to others at separate sites, but accountability for the whole program resides with one person.

The standard requires the program administrator to be "suitably trained" but does not define the particular qualifications of the position. OSHA recognized that respirator programs will vary, and their complexity will depend on the type of hazards present and the level of protection required. Guidelines for choosing a program administrator and development of a written program are scheduled for publication by OSHA soon in a "Small Entity Compliance Guide" (call 202-219-4667 to order).

Medical Exams

Respirator use places a physical burden on the wearer. Employee medical exams are required to determine whether an employee is fit to use a respirator. The revised standard adds general uniform requirements for initial employee medical exams. A medical questionnaire was also developed to provide physicians or licensed health care professionals with guidelines for performing an evaluation.

Follow-up medical exams are only required if the physician or licensed health care professional determines that an employee's health status or lifestyle could increase the burden of wearing a respirator. Employers must maintain copies of the employee's medical exam records.

Fit Testing, Training

The frequency for respirator fit testing will change to once per year for all regulated air contaminants. A new test agent and several new procedures were added for qualitative and quantitative fit testing.

Employers are now required to maintain simple records on the results of employee fit tests. Detailed requirements were also added for face seal checks of tight-fitting respirators, and for cleaning and disinfection of respirator equipment.

Requirements for employee training were extensively revised. Elements of an employee training program are now provided within the standard. Employers are responsible for providing training that is comprehensive and understandable to their employees, and employees in turn must be able to demonstrate they understand the capabilities and limits of the respirator they are to use. They must also show they understand how to properly use and care for the equipment.

Retraining is required every 12 months. It must occur sooner if site hazards change that require use of a different type of respirator. Retraining is also mandated if employees show they don't know or understand how to properly use and care for their respirator. Newly hired employees who can document previous respirator training within the 12 months before hire and can demonstrate their understanding of proper respirator use and care may be exempt from the new employer's respirator training program for their first 12 months on the job.

OSHA found that 80 percent of all respirator use involved disposable, filtering face-pieces capable of being fit tested. When employers select these types of respirators in their written program, employees must undergo medical exams and fit testing before they can wear them. Employees who volunteer to use these throwaway devices when the permissible exposure limit is not exceeded do not have to be included in an employer's written program.

The revised standard allows continued use of disposable respirators until they can no longer provide effective protection. This was a concession to employers who were concerned about the costs of throwing away these devices after every use, even when they remained effective.

OSHA Region V Fatality Report -- The following fatalities occurred in the Chicago/Milwaukee area during January, February and March of this year:

January 7, 1998 - A carpenter working on a bridge, walked towards the trailer and collapsed from an apparent heart attack. Calumet Area Office

Assured Equipment Grounding Conductor Program - Red is next quarter's color for contractors following the assured equipment grounding conductor program. As of July 1, 1998, contractors should be using **red** tape when marking cords.

The assured grounding conductor program simply requires you to test new or repaired power tools and extension cords before first use, after any suspected damage, and all electrical tools and cords at the three-month intervals, marking the cords with colored tape to indicate the month tested. In addition, all cords and power tools must be visually inspected before each use, and a written description of the program and test records must be kept on file at each jobsite.

Safety News is published by the Lake County Contractors Association's Safety Committee, 1312 Washington St., Waukegan, IL – Mike Barnhart, chairman, Gary L. Dowty, executive vice president. Many articles are submitted for publication and while every effort is made to assure the accuracy of the information, LCCA cannot be held liable for any information presented.