



**Sample Respirator Protection Program**

**This model form/template must be customized to meet your Agency’s needs.**

Basic Respirator Protection Program for \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

For employers that have employees who wear respirators while working with or around chemicals, substances, pesticides, fumes, vapors, dusts, etc. This program should be reviewed and updated annually.

This template is provided to assist employers to meet the requirement of section 5144 in the California Code of Regulations (CCR). It is meant as a basic program and may not meet all requirements specific to your work situation.

1. **Elements of Respiratory Protection Program**

All of the following topics will be addressed: (edit according to your situation)

* Respirator Selection
* Medical Evaluation
* Fit Testing
* Work site-specific procedures
* Proper use for routine and emergency use of respirators
* Maintenance, cleaning, and care
* Ensure breathing air quality
* Training in respiratory hazards
* Training in donning, doffing, fit-testing, and limitations

1. **Administration**

\_\_\_\_\_\_The Respirator Program Administrator (RPA) is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

(Insert Name of Person Responsible for Program)

**District Policy** (Check which applies)

\_\_\_\_\_\_Our employees are required to use respirators when \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(List tasks, operations, exposures, etc.)

\_\_\_\_\_\_Our employees are required to wear respirators when applying

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (list of chemicals, pesticides, etc.)

\_\_\_\_\_\_ We provide employees with appropriate respirators for voluntary use and encourage, but do not require, their use.

1. **Respirator Selection**

Only respiratory protective equipment approved by NIOSH (National Institute for Occupational Safety and Health) will be used. The equipment must be approved for the specific hazard. We base our use and selection of respirators on (check all that apply)

\_\_\_\_\_Chemical \_\_\_\_Label\_\_\_\_\_Safety Data Sheets\_\_\_\_\_Manufacturer Instructions \_\_\_\_\_Regulation

1. **Training Materials**

We use the following means to train our employees in the proper use, care, and limitations of respirators: (check all that apply)

\_\_\_\_\_Chemical Safety Information, SDSs

\_\_\_\_\_Regulations (i.e. silica, asbestos, etc.)

\_\_\_\_\_Manufacturer’s Instructions

\_\_\_\_\_Atmospheric Testing/Industrial Hygiene studies

\_\_\_\_\_Audio/Video Instruction: Title \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_Outside Training/Instruction: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Instruction and Training**

Employees who are required to use respirators must be trained before wearing a respirator and at least annually thereafter. All records must be kept for at least three years and made available for inspection. After training, employees should be able to demonstrate knowledge of at least:

* Why the respirator is necessary and how improper fit, use, or maintenance can compromise its protective effect
* Limitations and capabilities of the respirator
* Effective use in emergency situations
* How to inspect, put on and remove, use and check the seals
* Inspection, maintenance, cleaning and storage requirements
* Recognition of medical signs and symptoms that may limit or prevent effective use

Respirators should be inspected by the employee before wearing it each day. All parts must be clean and in working order. The assigned supervisors and/or Program Administrator will make inspections of respirators:

Check one: \_\_\_\_ Daily \_\_\_\_Weekly \_\_\_\_Monthly \_\_\_\_ Annually: \_\_\_\_\_Other: \_\_\_\_\_\_\_\_\_\_\_\_\_

* Respirators must be stored to protect them from damage and contamination.
* Disposable filtering facepiece (dust masks) respirators shall be discarded at the end of the workday or sooner if breathing resistance becomes too great.
* Cartridges and disposable respirators with non-removable cartridges shall be discarded and replaced at the first indication of odor, taste, or irritation during use. They shall also be discarded at the end of the workday unless specific instructions are found on labels or specific manufacturer’s instructions allow for longer use. This does not apply to voluntary use respirators.

1. **Fit Testing**

All employees that are required to use a tight-fitting facepiece respirator must be fit tested before use. Check which test or tests were used:

**Qualitative Quantitative**

\_\_\_\_Iso-amyl acetate test (banana oil) \_\_\_\_Generated Aerosol

\_\_\_\_Saccharin Test \_\_\_\_Condensation Nuclei Counter

\_\_\_\_Bitrex ® Test \_\_\_\_Controlled Negative Pressure

\_\_\_\_Irritant Smoke Test

**Evaluation and Employee Consultation**

This written program shall be evaluated annually by the Program Administrator to ensure that it reflects conditions found in the workplace. During the annual training, workers should be asked about fit, maintenance, etc. to ensure worker feedback concerning their use of respirators.

The **Employee Respirator Assignment Form** will be used to document exposures, medical evaluation, respirator selection, and fit testing.

If Voluntary use of NIOSH approved filtering facepieces (dust masks) is allowed, no formal written training program or medical evaluation is needed; however, Appendix D of Section 5144 (Mandatory) Information for Employees Using Respirators When Not Required Under the Standard: <https://www.dir.ca.gov/title8/5144d.html> will be followed.

**Attachments:** (insert all that apply)

Respirator Assignment Form – Insert document

Respirator Use Required Form – Insert document

Respirator Use/Agreement to be Clean Shaven Form – Insert document

Voluntary Respirator Use Form – Insert document