

CAROLINA FAMILY HEALTH CENTERS, INC. PROCEDURE

TITLE: OSHA-200.02 Respiratory Protection Program

EFFECTIVE DATE: July 2, 2021

SECTION: OSHA

REFERENCE POLICY: OSHA-200 Respiratory Protections

RESPONSIBLE CHIEF OF STAFF: Chief Compliance Officer

RESPONSIBLE COMMITTEE: Central Compliance

REVIEWED: 02/09/2026

I. PURPOSE

The purpose of this procedure is to ensure that employees of Carolina Family Health Centers, Inc. are provided respiratory protection through the use of N95 respirators when there is a possibility of exposure to tuberculosis or COVID-19. This written program is designed to comply with the requirements of the North Carolina Department of Labor and the Occupational Safety and Health Administration (OSHA) Respiratory Protection Standard (29 CFR 1910.34).

II. PROCEDURE

Scope and Application

This program applies to all employees of Carolina Family Health Centers, Inc., who may be required to wear respirators during normal work operations or while performing duties within the scope of their job description. Employees participating in the respiratory protection program do so at no cost to them. The expense associated with training, medical evaluations, and respiratory protection equipment is the responsibility of CFHC, Inc.

Responsibilities

The Emergency Preparedness Coordinator (i.e., Director of Clinical Services) serves as the Program Administrator and is responsible for the implementation of the Respiratory Protection Program. He/she serves as the first contact for employees concerned with respiratory protection. The Director of Clinical Services' duties include the following:

- Identify work areas, processes, or tasks that require workers to don respirators.
- Evaluate hazards.
- Select appropriate respiratory protection.
- Monitor respirator use to ensure that respirators are used in accordance with their certification.
- Arrange for and /or conduct training.
- Ensure proper storage and maintenance of respiratory protection equipment.
- Administer the medical surveillance program.
- Maintain records required by the program.
- Evaluate the program for compliance.
- Update the written program as needed.

Employees, including contract staff, have the responsibility to wear his/her respirator when and where required and in the manner in which they were trained. Employees and contract staff:

- Care for and maintain their respirators as instructed, and store them in a clean, sanitary location.
- Inform the Director of Clinical Services about changes in their physical health or about any other condition that may affect respirator fit and use, and request a new one that fits properly.
- Inform the Director of Clinical Services of any respiratory hazards that they feel are not adequately addressed in the performance of their work duties and of any other concerns regarding the program.

Employee Training

CFHC, Inc. ensures that each employee wearing a respirator receives training prior to first use and if they change the type of respirator. Training is provided in a language and at a literacy level that the employees understand. No employee is permitted to work with a respirator until he or she has received training in respiratory protection. The training is provided or coordinated by the Director of Clinical Services and covers the following topics:

- Explanation of the workplace hazards and what would happen if respiratory protection were not used.
- Elements of the Respiratory Protection Program.
- Employee's responsibilities.
- Selection of respiratory protection and who is authorized to modify the selection.
- Medical Evaluation program and forms.
- Function, capabilities, and limitations of the selected respiratory protection.
- Explanation of the operation of the respiratory protection, including procedures for donning and doffing, seal check, fit, and proper wear of the respirator.
- Respirator maintenance, including cleaning, inspection, and storage.
- How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators and what to do if the employee experiences signs and symptoms.

Selection Procedures

Only respirators certified by the National Institute for Occupational Safety and Health (NIOSH) and the FDA are chosen. The selection is based upon the physical and chemical properties of the air contaminant and the concentration level likely to be encountered by the employee. The Director of Clinical Services conducts a hazard evaluation for each operation where an airborne contaminant may be present in routine operations or during an emergency. At least two different respirators, different in shape and size, are available for staff to choose from. The hazard evaluation includes:

- Identification and development of a list of hazardous substances that employees may encounter.
- Review of work processes to determine where potential exposures to these hazardous substances may occur.
- Exposure monitoring, if possible, to quantify potential hazardous exposures.

CFHC, Inc. uses N95 respirators, which are consistent with the CDC's recommendation for healthcare workers. The N95 respirator filters out at least 95% of airborne particles. It is indicated for COVID-19, tuberculosis, avian influenza, and other respiratory pathogens. The N95 respirator does not provide protection against fumes or gases.

Voluntary Use of Respirators

Voluntary use of respirators by employees or voluntary use of respirators other than those selected by the program's administrator is permitted if such use does not create a hazard to the employee. Employees who voluntarily use a respirator or use a respirator other than the one provided by CFHC, Inc., must notify the Director of Clinical Services. A copy of the *Voluntary Respirator Use Statement* is provided by the Director of Clinical Services to employees who voluntarily wear respirators (see attachment). This document details the requirements for voluntary use of respirators by employees. Employees who voluntarily choose to wear a respirator must comply with the procedures for medical surveillance, respirator use, and cleaning, maintenance, and storage.

Medical Evaluation

CFHC, Inc. provides a medical screening questionnaire to determine the employee's risk in wearing a respirator before the employee is fit tested or required to use the respirator in the workplace. If the employee screens positive, they are provided a medical evaluation by one of CFHC, Inc.'s licensed clinical medical providers. The medical screening and evaluation may be discontinued when the employee is no longer required to use a respirator. Any employee who refuses to complete the medical evaluation is not allowed to work in an area or operation requiring respirator use.

A physician or other licensed health care professional (PLHCP), as designated by the Chief Medical Officer, provides the medical screening as follows:

- All medical screening forms are reviewed by the Director of Clinical Services. He/she contacts the employees to schedule the medical evaluation if indicated.
- Follow-up medical exams are provided to employees who give a positive response to any questions numbered 1-9 in section 2 on the medical evaluation questionnaire, or if the employee experiences medical difficulties when wearing the respirator.
- The medical evaluation is conducted using the *Medical Screening Questionnaire* and *Medical Evaluation* forms (see attachments).
- The forms are returned to the Director of Clinical Services prior to fit testing and are stored in the employee's health record in human resources.
- All examinations and questionnaires are to remain confidential between the employee and physician or other licensed health care professional.

Fit Testing

When respirators are required, initial and annual fit testing is provided to employees. The employee must be fit tested with the same make, model, style, and size respirator that will be used.

Individuals with facial hair are required to remove the hair while wearing a respirator and prior to fit testing unless a medical or religious reason prevents them from doing so. In these cases,

the employee must contact human resources for accommodations. Refer to *HR-103.01 Americans with Disabilities Act – Reasonable Accommodation*.

General Procedure

Steps to providing fit testing when required:

1. The employee picks the most acceptable respirator from a sufficient number of respirator models and sizes so that the respirator is acceptable to, and correctly fits, the user.
2. Before the selection process, the test subject shall be shown how to put on a respirator, how it should be positioned on the face, how to set strap tension, and how to determine an acceptable fit. This instruction may not constitute the subject's formal training on respirator use, because it is only a review.
3. The test subject shall be informed that he/she is being asked to select the respirator that provides the most acceptable fit. Each respirator represents a different size and shape, and if fitted and used properly, provides adequate protection.
4. The test subject is instructed to hold each chosen facepiece up to the face and eliminate those that do not give an acceptable fit.
5. The more acceptable facepieces are noted in case the one selected proves unacceptable; the most comfortable mask is donned and worn for at least five minutes to assess comfort. If the test subject is not familiar with using a particular respirator, the test subject is directed to don the mask several times and to adjust the straps each time to become adept at setting proper tension on the straps.
6. Assessment of comfort shall include a review of the following points with the test subject and allowing the test subject adequate time to determine the comfort of the respirator:
 - a) Position of the mask on the nose
 - b) Room for eye protection
 - c) Room to talk
 - d) Position of mask on face and cheeks
7. The following criteria shall be used to help determine the adequacy of the respirator fit:
 - a) Chin properly placed
 - b) Adequate strap tension, not overly tightened
 - c) Fit across the nose bridge
 - d) Respirator of proper size to span the distance from nose to chin
 - e) Tendency of the respirator to slip
 - f) Self-observation in the mirror to evaluate fit and respirator position
8. The test subject shall conduct a user seal check using negative and positive pressure seal checks as demonstrated by the program administrator or his/her designee, see below. Another facepiece is selected if the test subject fails the user seal check tests.
9. The test shall not be conducted if there is any hair growth between the skin and the facepiece-sealing surface, such as stubble beard growth, beard, mustache, or sideburns that

cross the respirator-sealing surface. Any type of apparel that interferes with a satisfactory fit shall be altered or removed.

10. If a test subject exhibits difficulty in breathing during the tests, he/she shall be referred to a physician or other licensed health care professional, as appropriate, to determine whether the test subject can wear a respirator while performing his or her duties.
11. Prior to the commencement of the fit test, staff are providing training on fit testing which describes the fit test, the test subject's responsibilities during the test procedure, and a description of the test exercises that the subject is performing. The respirator to be tested is worn for at least five minutes before the start of the fit test.
12. The fit test shall be performed while the test subject is wearing any applicable safety equipment that may be worn during the actual respirator use, which could interfere with respirator fit.

Quantitative Fit Test

CFHC, Inc. conducts quantitative fit testing using the PortaCount Respirator Fit Tester. This equipment allows the tester and staff to see real-time data to determine if the respirator is sealed appropriately. CFHC, Inc. follows the manufacturer's instructions for the use and maintenance of the machine to ensure accurate fit testing. A record of the employees' fit test results is stored in the software system.

Fit Check

When a respirator is donned, staff check the air seal in the following manner:

(A) Positive pressure user seal check (i.e., blow air out). Once you have conducted proper hand hygiene and properly donned the respirator, place your hands over the facepiece, covering as much surface area as possible. Exhale gently into the facepiece. The face fit is considered satisfactory if a slight positive pressure is being built up inside the facepiece without any evidence of outward leakage of air at the seal. Examples of evidence that it is leaking could be the feeling of air movement on your face along the seal of the facepiece, fogging of your glasses, or a lack of pressure being built up inside the facepiece. If the particulate respirator has an exhalation valve, then performing a positive pressure check may not be possible unless the user can cover the exhalation valve. In such cases, a negative pressure check must be performed.

(B) Negative pressure user seal check (i.e., suck air in). Once you have conducted proper hand hygiene and properly donned the respirator, cover the filter surface with your hands as much as possible and then inhale. The facepiece should collapse on your face, and you should not feel air passing between your face and the facepiece.

CFHC, Inc. ensures that each employee corrects any problems discovered during the user seal check. In the case of either type of user seal check (positive or negative), if air leaks around the nose, use both hands to readjust how the respirator sits on your face or adjust the nosepiece, if applicable. Readjust the straps along the sides of your head until a proper seal is achieved.

When employees are required to wear a respirator and a problem with the seal check arises due to interference with the seal by an employee's facial hair, CFHC, Inc. may provide a different type of respirator to accommodate employees who cannot trim or cut facial hair due to religious beliefs.

CFHC, Inc. requires employees to discontinue use of a respirator when either the employee or a supervisor reports medical signs or symptoms (e.g., shortness of breath, coughing, wheezing, chest pain, any other symptoms related to lung problems, cardiovascular symptoms) that are related to the ability to use a respirator. Any employee who previously had a medical evaluation and was determined not to be medically fit to wear a respirator must not be provided with a respirator under this standard unless they are reevaluated and medically cleared to use a respirator.

Respirator Use

Before respirator use in the work environment, each employee must successfully complete medical screening/evaluation, respirator training, and pass the respirator fit test (when required).

- Employees use their respirators under conditions specified by this program, and in accordance with the training they received on the use of each particular model. In addition, the respirator shall not be used in a manner for which it is not certified by NIOSH or by its manufacturer.
- All employees shall conduct user seal checks each time that they wear their respirator by conducting a positive/negative pressure check.
- Employees must clean their respirators and change their filter/cartridges/canisters when required.
- Employees are not permitted to wear tight-fitting respirators if they have any condition, such as facial scars, facial hair, glasses, or missing dentures, that prevents them from achieving a good seal.
- For any malfunction of a respirator (e.g., such as a breakthrough, facepiece leakage, or improperly working valve), the respirator wearer should inform their Director of Clinical Services that the respirator is no longer performing properly.

Cleaning

Cleaning is not required for disposable respirators. If reusable respirators are used, appropriate cleaning, disinfection, and change procedures are followed according to the manufacturer's instructions.

Maintenance

Respirators are to be properly maintained at all times in order to ensure that they function properly and adequately protect the employee. Maintenance involves a thorough visual inspection for cleanliness and defects.

The following checklist may be used when inspecting disposable, tight-fitting respirators:

- Facepiece
 - Cracks, tears, or holes
 - Facemask distortion

- Head straps
 - Breaks or tears

If non-disposable respirators are used, specific maintenance procedures are followed according to the manufacturer's instructions.

Change Schedules and Storage

Disposable filtering face pieces (e.g., N-95's) worn once in the presence of a patient with a respiratory infectious disease should be considered potentially contaminated with infectious material. Touching the outside of the respirator should be avoided, and the respirator should be placed in a biohazard bag and discarded as infectious waste.

The reuse of single-use respirators (e.g., filtering facepiece respirators) is discouraged. If sufficient quantities of respirators are not available, then disposable respirators may be reused if they are not known to be soiled or damaged. CFHC, Inc. will direct staff when supplies are limited, and the following measures need to be taken.

The following must be followed for reusable respirators or for single-use respirators when they must be reused.

- The respirator must not be visibly soiled or damaged
- The respirator has been stored in a breathable storage container (e.g., paper bag) for at least five calendar days between uses and has been kept away from water and moisture
- The employee does a visual check in adequate lighting for damage to the respirator's fabric or seal
- The employee uses proper hand hygiene before putting the respirator on and conducting the user seal check
- The respirator has not been worn for more than five days total

The Director of Clinical Services provides staff with paper bags to store used respirators. The staff write their name, the date(s) the respirator was worn, and the date the respirator was placed in the bag for storage. The bag is then sealed. The Director of Clinical Services directs staff on where to store their respirators.

Program Evaluation

The Program Administrator conducts periodic evaluations of the workplace and operating conditions to ensure the provisions of this program are being implemented. The evaluation includes: regular surveys of the workplace for employee exposure to respiratory hazards, consultations with employees who use respirators to ensure correct respirator use, review and updates of all elements and records of a respiratory protection program.

Documentation and Recordkeeping

The Respiratory Protection Standard is kept on the corporate intranet and is available to all employees who wish to review it.

CFHC, Inc. maintains the following written documentation in the staff's medical record kept in human resources.

- Medical approvals

- Respiratory training records
- Fit testing records

These records are updated as new employees are trained, existing employees receive refresher training, and as new fit tests are conducted.

III. ATTACHMENT

- *Voluntary Respiratory Use Statement*
- *Medical Screening Questionnaire*
- *Medical Evaluation form*