

DOSH DIRECTIVE

Department of Labor and Industries
Division of Occupational Safety and Health

Keeping Washington Safe and Working

11.80

Temporary Enforcement Guidance

Healthcare Respiratory Protection Annual Fit-Testing for N95 Filtering Facepieces During the COVID-19 Outbreak

Date: March 17, 2020

I. Purpose

This Directive provides temporary enforcement guidance to Compliance Safety and Health Officers for enforcing Chapter 296-842 WAC, Respirators, with regard to supply shortages of N95 filtering facepiece respirators due to the COVID-19 outbreak. The Respiratory Protection standard has specific requirements, including a written program, medical evaluation, fit-testing, and training, that employers must follow to ensure workers are provided and are properly using appropriate respiratory protection when necessary to protect their health.

On March 11, 2020, the President directed the Department of Labor to take all appropriate and necessary steps to increase the availability of general use respirators for emergency use by healthcare personnel in healthcare facilities. In light of the Presidential Memorandum, OSHA provided temporary guidance for 29 CFR § 1910.134, regarding required annual fit-testing (paragraph (f)(2)), which is to take effect from the date of their memorandum and remain in effect until further notice.

II. Scope and Application

DOSH is adopting this Directive to provide direction to our staff consistent with the OSHA memorandum and guidance to Washington employers.

This temporary enforcement discretion policy will no longer apply upon notification.

III. References

- Chapter 296-842 WAC, Respirators
- Chapter 296-842-22010, Follow these fit-testing procedures for tight-fitting respirators.
- Chapter 296-842-22020, Follow procedures established for seal checking respirators.
- CDC guidance for COVID-19 infection control, <https://www.cdc.gov/coronavirus/2019-ncov/infection-control/control-recommendations.html>.

IV. Background

The Centers for Disease Control and Prevention (CDC) currently recommends that Health Care Providers (HCP), who are providing direct care of patients with known or suspected COVID-19, practice infection control procedures. These include engineering controls (e.g., airborne infection isolation rooms), administrative controls (e.g., cohorting patients, designated HCP), work practices (e.g., handwashing, disinfecting surfaces), and appropriate use of personal protective equipment (PPE), such as gloves, face shields or other eye protection, and gowns.

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Appropriate respiratory protection is required for all healthcare personnel providing direct care of these patients.

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For additional guidance, see COVID-19 Hospital Preparedness Assessment Tool, <https://www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-hospital-checklist.html>.

DOSH recommends HCP employers follow existing CDC guidelines, including taking measures to conserve supplies of these respirators while safeguarding HCP.

- One such measure is that healthcare employers may provide HCP with another respirator of equal or higher protection, such as N99 or N100 filtering facepieces, reusable elastomeric respirators with appropriate filters or cartridges, or powered air purifying respirators (PAPR).
- Another measure is that healthcare employers may change the method of fit-testing from a destructive method (i.e., quantitative) to a non-destructive method (i.e., qualitative). For filtering facepiece respirators, qualitative and quantitative fit-testing methods are both effective at determining whether the respirator fits properly. The fitted respirator can then be safely used by that employee for work tasks that require respiratory protection. Once the N95 has been used by an employee for fit-testing or any other use, no other employee is to use that same N95.

For additional guidance, see Strategies for Optimizing the Supply of N95 Respirators, <https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-supply-strategies.html>.

V. Enforcement Policy

DOSH compliance staff will exercise enforcement discretion concerning the annual fit-testing requirement of N95 respirators, WAC 296-842-15005(1)(b), as long as employers:

- Make a good-faith effort to comply with Chapter 296-842 WAC, Respirators;
- Use only NIOSH-certified respirators or foreign equivalents (see note below);
- Implement CDC and OSHA strategies for optimizing the supply of N95 filtering facepiece respirators and prioritizing their use, as discussed above;
- Perform initial fit-tests for each HCP with the same model, style, and size respirator that the worker will be required to wear for protection against COVID-19 (initial fit-testing is essential to determine if the respirator properly fits the worker and is capable of providing the expected level of protection);
- Inform workers that the employer is temporarily suspending the annual fit-testing of N95 filtering facepiece respirators to preserve and prioritize the supply of respirators for use in situations where they are required to be worn;

- Explain to workers the importance of performing a user seal check (i.e., a fit-check) at each donning to make sure they are getting an adequate seal from their respirator, in accordance with the procedures outlined in WAC 296-842-22020, Follow procedures established for seal checking respirators.
- Conduct a fit-test if they observe visual changes in the employee's physical condition that could affect respirator fit (e.g., facial scarring, dental changes, cosmetic surgery, or obvious changes in body weight) and explain to workers that, if their face shape has changed since their last fit-test, they may no longer be getting a good facial seal with the respirator and, thus, are not being adequately protected; and,
- Remind workers that they should inform their supervisor or their respirator program administrator if the integrity and/or fit of their N95 filtering facepiece respirator is compromised.

NOTE: Respirators released from strategic stockpiles, are often beyond the manufacturer's expiration date. These respirators have been evaluated by NIOSH and verified to meet NIOSH standards for filtration. As with any respirator, workers should visually inspect the N95 respirator to determine if the structural and functional integrity of the respirator has been compromised. Over time, components such as the straps, nose bridge, and nose foam material may degrade, which can affect the quality of the fit and seal. If the structural and functional integrity of any part of the respirator is compromised, or if a successful user seal check cannot be performed, discard the respirator and try another respirator.

Respirators received from strategic stockpiles may be of a different style or manufacturer than the respirators currently in use. In that case, everyone using respirators from a different manufacturer than their current respirator is required to go through a new initial fit-test. Fit-tests of one manufacturer/style does not extend to other manufacture's N95 or a different model of the same manufacturer.

Where the use of respiratory protection is required and an employer fails to comply with any other requirements, such as initial fit-testing, maintenance, care, and training in the Respiratory Protection standard, cite the applicable requirements of Chapter 296-842 WAC, Respirators.

VI. Point of Contact

DOSH staff should contact Compliance Operations if there are questions about applicability of WISHA rules to an infectious disease in the workplace. Technical Services may be contacted with technical questions about workplace practices.

VII. Review and Expiration

To emphasize, this is an enforcement discretion policy, beginning from the date of this Directive, and applicable where respirators are needed to protect healthcare personnel during the COVID-19 outbreak. This Directive will remain effective until superseded or canceled.

Approved: _____



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