RESPIRATORY PROTECTION PROGRAM

1. Purpose

The purpose of this program is to outline the mandatory respiratory protection guidelines to better protect employees from respiratory hazards that cannot be engineered out of the workplace.

2. Scope

This program covers all City of Woodburn employees who are required to wear respirators during their work and during emergencies and may have the potential of being exposed to airborne contaminants. See Appendix A.

3. Definitions

Air-purifying respirator: means a respirator with an air-purifying filter, cartridge, or canister that removes specific air contaminants by passing ambient air through the air purifying element.

Atmosphere supplying: Atmosphere supplying respirators provide the wearer with uncontaminated breathing air and include supplied air respirators (SARs) and self-containedbreathing apparatus (SCBA).

Assigned protection factor (APF): The workplace level of respiratory protection that a respirator or class of respirators is expected to provide to employees when the employer implements a continuing, effective respiratory protection program.

Canister or cartridge: means a container with a filter, sorbent, or catalyst, or combination of these items, which removes specific contaminants from the air passed through the container.

Emergency Use Respirator: A respirator designated for use only during unplanned or emergency situations—such as hazardous material releases, oxygen-deficient environments, or rescue operations—not used during routine job duties. These include escape-only respirators and SCBAs staged for emergency response.

End-of-service-life indicator (ESLI): means a system that warns the respirator user of the approach of the end of adequate respiratory protection.

Fit test: means the use of a protocol to qualitatively or quantitatively evaluate the fit of a respirator on an individual.

High efficiency particulate air (HEPA) filter: means a filter that is at least 99.97 percent efficient in removing monodisperse particles of 0.3 micrometers in diameter.

Immediately dangerous to life or health (IDLH): means an atmosphere that poses an immediate threat to life, would cause irreversible adverse health effects, or would impair an individual's ability to escape from a dangerous atmosphere.

Physician or other licensed health care professional (PLHCP): means an individual whose legally permitted scope of practice (i.e., license, registration, or certification) allows him or her to independently provide, or be delegated the responsibility to provide, some or all of the health care services required by this standard.

Qualitative fit test (QLFT): means a pass/fail fit test to assess the adequacy of respirator fit that relies on the individual's response to the test agent.

Quantitative fit test (QNFT): means an assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

Service life: means the period of time that a respirator, filter or sorbent, or other respiratory equipment provides adequate protection to the wearer.

User Seal Check: means an action conducted by the respirator user to determine if the respirator is properly seated to the face.

4. Responsibilities

Risk Management shall:

- Support departments that require the use of respirators and make recommendations as needed.
- Evaluate program effectiveness annually with departments that participate in the respiratory program.

Human Resources shall:

- Maintain training records for employees.
- Provide training on respiratory and other personal protective equipment as necessary.

Managers and Supervisors shall:

- Implement and monitor the respirator program within their department.
- Ensure employees are using the respirators properly and at appropriate times.

- Ensuring that medical evaluations are conducted to identify if employees are medically able to wear respirators in the workplace.
- Ensuring employees are trained on the use of respiratory protection.
- Maintain written records on the monthly inspection of emergency use respirators.
- Notify Risk Management if there are any program deficiencies noted or if a change in process or procedures warrants the current program invalid.
- Allocate time for employee training and fit testing as needed.

Employees shall:

- Participate in the annual fit testing and training. Employees who are required to use tight fitting respirators are responsible for completing a medical questionnaire and examination to ensure they are capable of using a respirator. Employees will be fit-tested prior to the use of the respirator, whenever a different respirator facepiece is used, and at least annually.
- Use the respirators as directed by the manufacturer and at appropriate times or job tasks.
- Follow all safety procedures as outlined in this program and Oregon-OSHA rules.
- Inspect equipment prior to use each day to ensure that the equipment is functional.
- Report any problems found with the equipment to supervisor.
- Report to their supervisors if employee's physical condition changes and it could alter or affect the respirator fit. This would include changes to weight, facial hair, facial scarring, dental changes, etc. This may trigger a repeat fit-testing.
- Report any concerns or changes in processes or procedures that warrant the current program invalid to their supervisor or Risk Management.
- Report any safety issues that occur as a result of using a respirator to their supervisor.
- Report any health-related issues that occur as a result of using a respirator to Human Resources.

5. Respirator Selection

The City of Woodburn bases its respirator selection on the potential exposure to particulate and/or various gas and vapor contaminants. Respirators and cartridges selected must effectively filter out these contaminants to ensure employee safety. Departments are responsible for selecting the appropriate respiratory equipment necessary to protect employees from harmful exposures. All protective equipment must comply with OR-OSHA standards and meet or exceed NIOSH requirements. In addition to meeting regulatory standards, departments are encouraged to consider cost-effective options and the broader city-wide impact of their purchases to ensure responsible, equitable allocation of resources across all departments. Approval of respiratory equipment purchases may require review and authorization by the HR Director, Department Head and the Risk Manager to ensure alignment with city policy and health and safety standards. For assistance with equipment selection, fit-testing, and employee training, departments should contact Risk Management.

6. Medical Evaluation for Respirator Use

All City of Woodburn employees whose job duties require them to wear a full-face respirator shall be certified by a Physician or other Licensed Health Care Professional (PLHCP) prior to first use of such respirator. Using a respirator may place a physiological burden on employees that varies with the type of respirator worn, the job and workplace conditions in which the respirator is used, and the medical status of the employee. Therefore, medical evaluations are required for all employees who wear a respirator. These medical evaluations determine the employee's ability to use a respirator before they are fit-tested or used on the job. Employees must also renew medical evaluations if conditions change that could affect respirator use.

To obtain medical certification, employees are required to complete a Respirator Medical Evaluation Questionnaire, Appendix C. Upon completion, the employee shall fax their questionnaire to the PLHCP listed on the cover page of the medical evaluation packet.

Based on the answers given on the questionnaire, the PLHCP will determine if the employee is capable of wearing a respirator. If an employee does not get certified by the PLHCP at this step, the employee will be required to schedule a follow up appointment with the PLHCP for further examination. Upon medical certification process completion, employees shall be fit tested and trained on respirator use.

The medical questionnaire and examinations will be administered confidentially during the employee's normal working hours or at a time and place convenient to the employee. Employees will have the opportunity to discuss the questionnaire and examination results with the physician or PLHCP.

7. Respirator Fit Testing

Respirator fit testing is used to test how well the tight-fitting respirator facepiece seals against the face. If there is not a good face-to-facepiece seal, the contaminants may pass around the facepiece and be breathed into the lungs. A Respirator fit is extremely important and required.

It is important to realize that not everyone can wear a respirator. OR-OSHA specifically states that a respirator should not be born if the employee:

1. Wears glasses that break the skin to mask seal (inserts are available).
2. Has facial hair passing between the sealing surface of the respirator and the face.
3. Is unable to get an adequate fit on a respirator.
4. The physician finds that the employee is medically unable to wear the respirator.

Respirator fit test is performed once an employee has properly donned the respirator and checked for any obvious gaps or leaks in the seal. The fit test is conducted while the wearer performs a series of exercises, including breathing, deep breathing, moving their head in all directions, and talking. The qualitative or quantitative procedures used are compliant with OR-OSHA fit testing protocols.

If an employee does not pass the fit test with the original respirator, then other styles

or sizes may be used, until a proper fit is made.

Fit Testing Records shall contain the following information:

- Name of employee being tested
- Type of test performed (QLFT or QNFT)
- Specific make, model, style, and size of respirator
- Type of respirator (Filtering facepiece, half-facepiece, full-facepiece, etc.)
- Date of test
- The pass/fail results of test
- Name of Person Conducting the Test

Fit testing records shall be retained for respirator users until the next fit test is administered (annually) in the employee's medical file, maintained in Human Resources.

8. Cleaning/Maintenance/Storage

Proper respirator cleaning, maintenance, and storage is essential to ensure that the respirator will function properly when needed. Respirators must be dismantled, cleaned with a disinfectant, rinsed, and air dried in a clean atmosphere. Respirators require regular inspection of the facepiece, exhalation valves, and straps for wear, deterioration, and defects. If any defects are noted, the respirator shall be immediately removed from service and repaired with manufacturer's parts or replaced entirely. See Appendix B for additional inspection criteria.

Respirators shall be stored in a cool, dry, and clean location free from contaminants. Air-purifying respirators at the worksite should be stored in a sealed plastic bag or a Tupperware-like container. If improperly stored, the inside of the respirator may become contaminated and the chemical cartridges may continue to absorb chemicals, shortening the service life.

Emergency respirators must be immediately accessible and clearly marked. Emergency respirators must be inspected monthly in accordance with the manufacturer's recommendations and will be checked for proper function before and after each use. Documentation will include the date, inspector's name, findings, any corrective actions, and respirator ID (e.g., serial number). Records must be kept with the unit—either as a tag, in the storage compartment, or in paper/electronic files—and retained until the next inspection.

9. Cartridge Change Schedule

The cartridges are immediately activated when removed from the manufacturer's packaging. Employees shall be required to write the expiration date on the cartridges immediately after opening a new package. The service life of the cartridge is dependent on several criteria. The cartridges are no longer acceptable for use when:

- The shelf life of the cartridge expires as indicated by the manufacturer.
- The contaminant penetrates the filter so that the respirator user can detect the chemical odor.

- When breathing becomes difficult.

10. Employee Training

All employees who are required to wear a respirator shall be properly trained prior to first use and annually thereafter. Training topics shall include:

- Contents of the written program and where it is located.
- Respiratory hazards to which the employees are potentially exposed to.
- Why respirators are necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator.
- Capabilities and limitations
- How to inspect, don/doff, use, and seal check the respirator
- Cleaning, maintenance, and storage.
- How to recognize the medical signs and symptoms that may limit or prevent the effective use of the respirators.
- Field Fit Tests

Retraining is necessary if an employee demonstrates the lack of knowledge of the training requirement, if new respiratory hazards are introduced to the workplace, or if there is a change in respirators styles or cartridges.

11. Other Considerations

Facial Hair

Respirators that are required to be worn cannot be donned with facial hair that interferes with the seal. Respirator users must be clean shaven.

Communication

Respirators can interfere with verbal communication in some work environments. Respirators are not to be removed in a contaminated atmosphere when speaking.

Temperature extremes

Extreme temperatures may interfere with respirator performance. At low temperatures, a full-face respirator may fog, exhalation valves may freeze and supply-air pressure connectors may leak. Face pieces may stiffen and distort when stored at low temperatures.

At high temperatures there is additional stress on the wearer, and breathing air may need cooling. Storage at extreme temperatures may distort facepieces and accelerate facepiece degradation. The user of the respirator will be responsible to monitor these conditions and evacuate the area they are working in if the respirator is malfunctioning.

12. Recordkeeping

A confidential record concerning employee's medical file will be retained at least for the

duration of employment plus 30 years. Employee exposure records must be retained for at least 30 years.

13. Review of Policy and Procedures

This policy shall be reviewed and updated every three years and whenever necessary to reflect new or modified tasks and procedures.

14. References

Appendix A: Respirator use requirements by Department and Job Title/Task

Appendix B: Inspection Criteria (Half/Full Face piece)

Appendix C: Medical Evaluation Questionnaire

Oregon OSHA www.orosha.org https://osha.oregon.gov/pages/topics/respiratory-protection.aspx

OSHA Regulation 1910.134 https://www.osha.gov/laws-regs/regulations/standardnumber/1910/1910.134

Adopted: October 2025

Appendix A: Respirator use requirements by Department and Job Title/Task

Department/ Job Title	Job Task	Frequency of Use	Duration of Use	Physical Effort	Other PPE	Environment	Mask Type
Water Treatment/ Operator	Potassium Permanganate Mixing	3 – 4 Weeks or as needed	3 minutes or less	Light	Tyvek Suit Goggles Nitrile Gloves	Ambient Room Temp.	half mask
Water Treatment/ Operator	Cleaning Reservoir Fogging Vinegar mix	Every other year	Varies	Light to moderate	Tyvek Suit Nitrile Gloves Goggles	Varies	half mask
Aquatics/ Supervisor, Pool Operator	Chemical Use	Weekly	Less than 10 minutes per week	Light to moderate	Face shield, glasses, Apron, Boots, Gloves	Indoor 85 degrees and humid	half face respirator
Wastewater/ Supervisor Collections 1 & 2	Air vacs on main	3 months or as needed	15 minutes per hole average	Moderate to heavy	Ear plugs Gas monitor Steele toe boots Gloves Hard hat Safety Glasses Head lamp	Dark environment Confined space	supplied air Full Face ultra elite
Police/ Officers assigned to Marion County SWAT	Varies	Varies	Varies	Varies	**Ear protection**: TCI Liberator II, or Safariland Liberator 4 or 5 **Eye Protection**	Varies	**Mask:** MSA 10051288 Millennium CBRN Riot Control Mask **Filter:** MSA CBRN Approved 40mm Gas Mask Filter Cartridge or a Honeywell Survivair Canister, Tear Gas (CN & CS) and P100 Filter

Appendix B: Inspection Criteria (Half/Full Face piece)

Employees that use **Half/Full Face** respirators must care for, inspect, and maintain their respirator before and after each use. The following is a list of items that need to be maintained and inspected to ensure a clean, sanitary, and properly functioning respirator:

Rubber facepiece should be checked for:

- ✓ Excessive dirt, cracks, tears, or holes
- ✓ Broken or missing mounting clips
- ✓ Tightness of connections Head

straps should be checked for:

- ✓ Breaks, tears, or loss of elasticity
- ✓ Broken or malfunctioning buckles or attachments

Inhalation and exhalation valves should be checked for:

- ✓ Detergent residue, dust particles or dirt on valveseat
- ✓ Cracks, tears or distortion in the valve material or valve seat
- ✓ Missing or defective valve covers Filter

elements should be checked for:

- ✓ Proper filter for the hazard
- ✓ Tightness of connections
- ✓ Overall condition of filter canister

Note: All rubber and elastic parts of the respirator need to be inspected for signs of deterioration or loss of elasticity.