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| **Policy:** | Respiratory Protection Program | | **Policy No:** |  |
| **Effective Date:** |  | | **Prepared By:** | Infection Prevention and Control |
| **Revised Date(s):** |  | | **Approved By:** | Infection Prevention and Control Dept. |
| **Revision No.:** |  | **Depts. Affected:** | | All Departments |

**POLICY:**

Swope Health has a Respiratory Protection Program for all workers who must use a personal respiratory protection device to prevent exposure to airborne contaminants.

The guidelines in this program are designed to aid health care workers establish a respiratory protection program. The primary objective is to prevent the transmission of tuberculosis as recommended by the Centers for Disease Control (CDC). There are other airborne viruses/diseases that this program could also prevent transmission. Where feasible, exposure to airborne contaminates will be diluted and removed by engineering controls (i.e. general and local ventilation, HEPA filtration, ionizers, UV lighting and isolation). Use of personal protection devices will be required to supplement engineering controls.

**DEFINITIONS:**

Tuberculosis (TB): A potentially serious infectious bacterial disease that mainly affects the lungs. The bacteria that cause TB are spread when an infected person coughs or sneezes.

Airborne: Airborne can be used to describe any size particle (e.g. droplet, dust, pollen) capable of travel through the air. For respiratory droplets, that can include droplets that are close to the source and those that have moved farther away. However, most infectious disease and public health experts reserve the term airborne specifically for use in the context of airborne transmission to describe infections capable of being transmitted through exposure to infectious, pathogen-containing, small droplets and particles suspended in the air over long distances and that persist in the air for long times.

Occupational Safety and Health Administration (OSHA): An agency of the US government, under the Dept. of Labor with the responsibility of ensuring safety at work and a healthful work environment.

Powered Air Purifying Respirators (PAPRs): the equipment is battery operated, consists of a half or full-face piece, breathing tube, battery-operated blower, and particulate filters (HEPA only). It uses a blower to pass contaminated air through a HEPA filter, which removes the contaminant and supplies purified air to a face piece.

**RESPONSIBILITIES**:

Management: Infection Prevention and Control will determine what specific applications require use of respiratory devices. Facilities Management will provide proper respiratory devices to meet the needs of each specific application. Employees will be provided with adequate training and instruction on all devices.

Management/Supervisory: Supervisors are responsible for insuring that all personnel are completely knowledgeable of the respiratory protection requirements for the areas in which they work. They are also responsible for insuring that these employees comply with all facets of this respiratory program.

Employees: It is the responsibility of the employee to have an awareness of the respiratory protection requirements for their work areas (as explained by management). Employees are also responsible for wearing the appropriate respiratory equipment according to proper instructions.

**PROCEDURES**

CDC Recommendations for the Prevention of Nosocomial Transmission of Tuberculosis is the guide used for this policy. Other Highly Contagious Communicable Disease (HCCD)/rash/fever/cough could also indicate usage of this program. Airborne transmission must be considered with the following: measles, chickenpox, instances with COVID-19.

1. Particulate Respirators must be worn:
2. When a patient is suspected or confirmed of active pulmonary or laryngeal tuberculosis.
3. When the patient is potentially infectious and is undergoing a procedure that is likely to produce bursts of aerosolized infectious particles or to result in copious coughing or sputum production, regardless of whether appropriate ventilation is in place.
4. When a patient is suspected or confirmed of having measles infection.
5. Employees Medical Assessment and Respirator Mask fit:
6. An Occupational Safety and Health Administration (OSHA) Respirator Medical Evaluation Questionnaire must be completed by any worker requiring a respirator mask fit. Workers with potential risk factors will be referred to a provider for evaluation.
7. The medical status of workers using a respirator should be reviewed annually by filling out their annual health assessment for respirator mask fit.
8. Identification of Groups of workers at risk
   1. Workers who routinely work in the following areas (or with the following job title) are considered at risk of contact with airborne viruses and therefore must receive comprehensive training on the Respiratory Program and be fit tested with Swope Health’s currently approved Particulate Respirator.
      1. Nursing job titles that have patient facing duties
      2. Dental job titles that have patient facing duties
      3. Radiology job titles that have patient facing duties
      4. Provider job titles that have patient facing duties
      5. Medical Assistant job titles that have patient facing duties
      6. Optometry job titles that have patient facing duties
      7. Other job titles that have patient facing duties approved by infection prevention and control department
9. High Risk Procedures
   1. Associates who routinely perform the following procedures are considered to be at risk of contact with and therefore must receive comprehensive training on the Respirator Program and be fit tested with the Swope Health’s currently approved Particulate Respirator.
      1. Autopsies
      2. Bronchoscopy
      3. Aerosoling procedures
10. Associate Fit Testing Checking
    1. In any effective personal respiratory protection program, fit testing must be performed by an employer and fit checking must be performed by an employee after each donning of their particulate respirator (PR). A proper fit is vital to protect against inhaling droplet nuclei.
    2. Associates required to wear a respirator must be fitted and tested for a proper face seal.
       1. This will be done before the associate uses the mask, if there is a weight loss or gain of 20 pounds or more.
    3. Each associate will be individually evaluated regarding their inability to use the approve respirator and the performance of their job duties.
       1. The associate who have excessive facial hair or whose facial features that do not allow adequate seal will not be fit tested for Swope Health’s currently acceptable Particulate Respirator.
       2. Powered Air Purifying Respirators (PAPRs) are available, however in limited supply at Swope Health.

1. Respirator Issue and Maintenance
   1. All associates who enter a known Airborne Precautions room must wear an N95 Particulate Respirator.
   2. The masks will be kept outside the client’s room.
   3. The associate will inspect the PR prior to each use for defects and any contamination with blood or body fluid. The PR must be changed if it becomes contaminated with blood, body fluid, becomes wet from excess humidification, or has any defects.
   4. Associate N95 PR should be kept in a clean, dry area. Placing the used N95 into a brown paper bag after use and labeled with the associate’s name is an appropriate way to store the mask.
   5. During times of short supply of N95 PR, with CDC guidance and recommendations, these masks will be issued using extended use guidelines.
   6. PAPRs should be cleaned according to manufacturer’s recommendations.
2. Associate Non-Compliance on Respirator Use
   1. Associates who are trained and fit tested to use the PR and become non-compliant on the use of the PR will be counseled by their immediate supervisor. The counseling session will include a discussion of the following:
      1. Transmission and risk of airborne nuclei
      2. Exploring associate concerns and rationale for becoming non-compliant

Occupational Health will report PPD converters and other Respiratory Protection Program issues or concerns.

**REFERENCES**

OSHA. Personal Protective Equipment. [Standards – 29 CFR 1910.134 App A].

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