NEW MEXICO HEALTH ALERT NETWORK (HAN)

ADVISORY

Occupational Safety and Health Administration (OSHA) releases Temporary Enforcement Guidance for Respirator Fit Testing Requirements

On March 14, 2020, the Occupational Safety and Health Administration (OSHA) released Temporary Enforcement Guidance - Healthcare Respiratory Protection Annual Fit-Testing for N95 Filtering Facepieces During the COVID-19 Outbreak.

A fit test is required for anyone wearing a respirator to protect against COVID-19. The annual fit test requirement can be temporarily suspended if the employee has already been fit tested to that respirator.

OSHA recommends HCP employers follow existing CDC guidelines, including taking measures to conserve supplies of these respirators while safeguarding healthcare providers (HCPs). One such measure is that healthcare employers may provide HCPs 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. See 29 CFR § 1910.134, Appendix A, Fit Testing Procedures. The fitted respirator can then be safely used for work tasks that require respiratory protection. For additional guidance, see Strategies for Optimizing the Supply of N95 Respirators, https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-supply-strategies.html.

OSHA requirements required for the Temporary Enforcement Guidance are available on the attached document and online at https://www.osha.gov/memos/2020-03-14/temporary-enforcement-guidance-healthcare-respiratory-protection-annual-fit
This memorandum provides temporary enforcement guidance to Compliance Safety and Health Officers for enforcing the Respiratory Protection standard, 29 CFR § 1910.134, 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 is providing this temporary guidance for 29 CFR § 1910.134, regarding required annual fit-testing (paragraph (f)(2)), which is to take effect from the date of this memorandum and remain in effect until further notice.

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.

Appropriate respiratory protection is required for all healthcare personnel providing direct care of these patients. For additional guidance, see COVID-19 Hospital Preparedness Assessment Tool, https://www.cdc.gov/coronavirus/2019-ncov/hcp/hcp-hospital-checklist.html.

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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. See 29 CFR § 1910.134, Appendix A, Fit Testing Procedures. The fitted respirator can then be safely used for work tasks that require respiratory protection. For additional guidance, see Strategies for Optimizing the Supply of N95 Respirators, https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-supply-strategies.html.

OSHA field offices shall exercise enforcement discretion concerning the annual fit testing requirement, 29 CFR § 1910.134(f)(2), as long as employers:

- Make a good-faith effort to comply with 29 CFR § 1910.134;

- Use only NIOSH-certified respirators;

- 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 29 CFR § 1910.134, Appendix B-1, User Seal Check Procedures. See also, OSHA tutorial videos (English, Spanish).

- 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:* 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.

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 section(s) of 29 CFR § 1910.134.

To emphasize, this is an enforcement discretion policy, beginning from the date of this memorandum, and applicable where respirators are needed to protect HCP during the COVID-19 outbreak. This temporary enforcement discretion policy will no longer apply upon notification. If you have any questions regarding this policy, please contact Dr. Dionne Williams at (202) 693-2140.

cc: DCSP
    DTSEM
    DSG


5 See OSHA respirator videos at: https://www.youtube.com/watch?v=Tzp5fko-fg (English);
   https://www.youtube.com/watch?v=jgRKuRcTGeE (Spanish).