

factors is likely to reduce cooperation of the wearers in promoting a satisfactory program. How well these problems have been overcome can be determined by observing wearers during normal activities and by soliciting comments.

- ✓ **Examination of Respirators** in Use Respiratory protection is no better than the respirator in use, even though it is worn conscientiously. Periodic inspections shall be conducted by the supervisor to ensure that respirators are properly selected, used, cleaned, and maintained.

G. EMPLOYEES USING RESPIRATORS NOT REQUIRED UNDER THE STANDARD

Employees wearing respirators (such as N95 particulate respirator) on a voluntary basis, when they are not required to by their supervisor or the OSHA standard, shall read and sign Information for Voluntary Respirator Use (See Appendix D).

Remember, voluntary use **is only permitted when your employer has determined that there is no airborne hazard that would require the use of a respirator.**

Before you can voluntarily use a respirator, your employer must ensure that its use does not present a health hazard to you. To do this, your employer must implement certain elements of a written respiratory protection program necessary to ensure that any worker using a respirator voluntarily is medically able to use that respirator. In addition, your employer must ensure that the respirator is properly cleaned, stored, and maintained so that its use does not present a health hazard to you.

However, employers do not have to develop and implement a written respiratory protection program when workers only use filtering facepiece respirators voluntarily.

If you will be voluntarily using a respirator, your employer is also required to provide you with a copy of Appendix D of OSHA's Respiratory Protection Standard or the equivalent State OSHA Agency document. This document contains certain precautions you should take when wearing a respirator voluntarily. In general, Appendix D advises you.

This video has provided you with a brief overview of OSHA's **voluntary use** requirements for respirators.

- ENGLISH <https://youtu.be/a4PjrR3zHEo>
- SPANISH <https://youtu.be/8W2t7pwV52k>

H. PANDEMIC CLOTH FACE COVERINGS

The Center for Disease Control and prevention states cloth face coverings are recommended as a simple barrier to help prevent respiratory droplets from traveling into the air and onto other people when the person wearing the cloth face covering coughs, sneezes, talks, or raises their voice. This is called source control.

Cloth face coverings may not be possible in every situation or for some people. In some situations, wearing a cloth face covering may exacerbate a physical or mental health condition, lead to a medical emergency, or introduce significant safety concerns.

Who should NOT use cloth face coverings:

- children under age 2,
- or anyone who has trouble breathing, is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

CLOTH FACE COVERINGS ARE NOT SURGICAL MASKS OR N95 RESPIRATORS.

This video has provided you with a brief overview of OSHA's the Difference Between Respirators and Surgical Masks.

- ENGLISH <https://youtu.be/ovSLAuY8ib8>
- SPANISH <https://youtu.be/K53pbXueDJw>

Adaptations and alternatives should be considered whenever possible to increase the feasibility of wearing a cloth face covering but, in some instances, it is not possible to wear one. For example,

- ✓ People who are deaf or hard of hearing—or those who care for or interact with a person who is hearing impaired
- ✓ Some people, such as people with intellectual and developmental disabilities, mental health conditions or other sensory sensitivities, may have challenges wearing a cloth face covering. They should consult with their healthcare provider for advice about wearing cloth face coverings.
- ✓ Younger children (e.g., preschool, or early elementary aged) may be unable to wear a cloth face covering properly, particularly for an extended period of time.
- ✓ People should not wear cloth face coverings while engaged in activities that may cause the cloth face covering to become wet.
- ✓ People who are engaged in high intensity activities, like running, may not be able to wear a cloth face covering if it causes difficulty breathing.
- ✓ People who work in a setting where cloth face coverings may increase the risk of heat-related illness or cause safety concerns due to introduction of a hazard (for instance, straps getting caught in machinery)

- ✓ Review Understanding Compliance with OSHA’s Respiratory Protection Standard During the Coronavirus Disease 2019 (COVID-19) Pandemic pdf

<https://www.osha.gov/sites/default/files/respiratory-protection-covid19-compliance.pdf>



The Coronavirus Disease 2019 (COVID-19) pandemic has had an unprecedented impact on the availability of respirators and fit-testing supplies. This document is intended to help employers understand and comply with OSHA’s temporary enforcement guidance for the Respiratory Protection standard (29 CFR § 1910.134).

Background

The COVID-19 pandemic has resulted in a public health emergency that has dramatically increased demand for respirators, particularly N-95 filtering facepiece respirators (FFRs), as well as fit-testing supplies ordinarily used to ensure that respirators fit workers properly and provide the expected level of protection. Shortages (either intentional or unintended) of both FFRs and fit-testing supplies have posed tremendous challenges. In order to allow essential operations to continue, many employers have had to utilize contingency and crisis strategies that are ordinarily not consistent with OSHA’s Respiratory Protection standard. Examples of contingency and crisis strategies include: extended use of disposable FFRs, disinfection and reuse of disposable FFRs, and the use of forage FFRs not approved by the National Institute for Occupational Safety and Health (NIOSH).

It is important for employers to understand that deviations from normal respirator use come with increased risk for workers that, in certain circumstances, may only be allowable during this public health emergency to increase the alternative of no respiratory protection presents a greater danger to workers. In order to ensure adequate protection for workers during the use of contingencies and crisis



strategies, OSHA has issued temporary enforcement guidance to its Compliance Safety and Health Officers (CSHOs). This guidance allows CSHOs to exercise enforcement discretion to issue no-penalty workplace exposures and an employer that is unable to comply with certain provisions of the Respiratory Protection standard because of supply shortages and has thus found it necessary to implement contingency or crisis strategies for respirator use by workers.

Understanding OSHA’s Temporary Enforcement Guidance

In response to FFR and fit-testing supply shortages during the COVID-19 pandemic, OSHA has issued several respiratory enforcement guidance memoranda allowing CSHOs to exercise enforcement discretion when

considering issuing citations under the Respiratory Protection standard and/or the equivalent respiratory protection provisions of other health standards.

COVID enforcement discretion is applied only when circumstances beyond the employer’s control prevent compliance with certain parts of the Respiratory Protection standard and the employer makes objectively reasonable efforts to obtain and conserve supplies. Employers are also expected to explore options and modify practices to assure the best available protection for workers (e.g., avoid the use of non-compliant respiratory protection when performing high hazard aerosol-generating procedures). Employers are expected to come into full compliance with the Respiratory Protection standard once supply chain issues are resolved (e.g., conduct fit-testing once fit-testing supplies become available). OSHA will revoke all of the temporary enforcement discretions and revert to the normal enforcement of the Respiratory Protection standard once the Agency determines that the additional enforcement discretion is no longer necessary.

Employers Seeking Relief Under Temporary Enforcement Guidance

It is important for employers to understand that these temporary enforcement guidance memoranda do not alter OSHA standards or provisions for such standards, including the Respiratory Protection standard (e.g., annual fit-testing requirements). Rather, they allow for enforcement discretion by CSHOs during the COVID-19 pandemic period only in circumstances where an employer can demonstrate that it made unreasonable but objectively reasonable efforts to obtain and conserve supplies of FFRs and fit-testing supplies as outlined in the memoranda.

Employers should understand that non-compliance still violates the standard. However, these temporary enforcement guidance memoranda provide CSHOs discretion, on a case-by-case basis during the COVID-19 pandemic period only, to refrain from issuing citations to employers for violating certain provisions of the Respiratory Protection standard and/or the equivalent respiratory protection provisions of other health standards, when compliance with these provisions is affected by supply shortages. Each temporary enforcement guidance memorandum has specific criteria that CSHOs will assess during an inspection, for

example, CSHOs will look for and consider documentation and other available information showing that the employer:

- Utilized strategies to prioritize and conserve the use of N95s according to CDC guidance:
 - Considerations for Selection of Stockpiled N95s
 - Beyond the Minimum: Designated Staff Title
 - Strategies for Optimizing the Supply of N95 Respirators
- Maintained a fully compliant Respiratory Protection Program (RPP) in all other regards (i.e., a written program that covers, among other required elements, procedures for medical evaluation of employees, respirator maintenance and canister/employee training)
- Reassessed their engineering and administrative controls, and work practices, and identified and implemented changes to decrease the need for FFRs without exposing employees to additional hazards (e.g., considering whether it is possible to temporarily suspend certain procedures, such as high hazard elective medical procedures, or to increase the use of other available protections, such as moving operations outdoors, using job rotation techniques, or improving the use of wet methods or portable local exhaust systems when performing dust-generating tasks)
- Monitored respirator supplies and made objectively reasonable efforts to obtain NIOSH-approved respirators, and, in healthcare settings, prioritized the best respiratory protection options available for use during high hazard aerosol-generating medical procedures
- Explored options to obtain and use other types of respirators (e.g., P-300s, non-disposable elastomeric respirators, and powered air-purifying respirators (PAPRs), as well as forage respirators that are not NIOSH-approved) that offer equivalent or higher protection when N-95s were not available and
- Monitored fit-testing supplies and made objectively reasonable efforts to obtain fit-testing supplies

If an employer can demonstrate objectively reasonable efforts to comply with the Respiratory Protection standard, and/or the equivalent respiratory protection provisions of other health standards, then OSHA may exercise enforcement discretion in accordance with the memoranda during the COVID-19 pandemic. ■

VII. REFERENCES:

- Occupational Safety and Health Administration Standards (OSHA) 29 CFR (Code of Federal Regulations) 1910.134 Respiratory Protection.
- American National Standards Institute (ANSI) Z88.2 - “Practices for Respiratory Protection.”
- American Industrial Hygiene Association (AIHA) “Respiratory Protection: A Manual and Guideline”.
- 42 CFR, Part 84 “Respiratory Protective Devices”.
- CCSD Safety Standards.
- Center for Disease Control and Prevention (CDC)