



MONTANA STATE PRISON OPERATIONAL PROCEDURE

Procedure:	MSP HS B-02.1 RESPIRATORY PROTECTION PROGRAM	
Effective Date:	06/15/2020	Page 1 of 5
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I. PURPOSE

Protect the health and safety of Health Services Bureau employees by complying with both NCCHC standards for health services in prison and OSHA. This will be achieved through:

- A. eliminating hazardous exposures where feasible;
- B. using engineering and administrative controls to minimize hazardous exposures that cannot be eliminated; and
- C. using respiratory protection and other personal protective equipment when the frequency and duration of exposures cannot be substantially reduced or eliminated.

Maximize the protection afforded by respirators when they must be used.

Establish processes necessary to meet the regulatory requirements described in OSHA's Respiratory Protection standard (29 CFR 1910.134).

II. DEFINITIONS (see Glossary)

III. REQUIREMENTS

A. Applicability

1. This program applies to:
 - a. all employees and contractors who are required to wear respiratory protection due to the nature of their work in the health services area; and
 - b. the use of air-purifying and air-supplying respirators, including filtering facepiece respirators.

B. Responsibilities

1. The MSP Infection Prevention Manager in coordination with the Director of Nursing will oversee the Respiratory Protection Program (RPP) by:
 - a. conducting a hazard assessment, selecting the appropriate level of respiratory protection for each task or job title with potential exposure, and recording this information on the *MSP HS B-02.1 (A) Respirator Assignment by Task or Location* form;
 - b. developing and monitoring respirator maintenance processes;
 - c. coordinating the purchase, maintenance, repair, and replacement of respirators;
 - d. routinely evaluating the effectiveness of the RPP, with employee input, and making any necessary changes to the program;
 - e. providing or arranging for annual training on the use and limitations of respirators;

- f. ensuring that medical evaluations are provided if necessary due to an insufficient number of PAPRs;
 - g. ensuring that annual respirator fit testing is provided if there are an insufficient number of PAPRs;
 - h. providing records to Human Resources of medical clearance and fit testing as required by 29 CFR 1910.134 and 29 CFR 1910.1020; and
 - i. maintaining a copy of the written RPP process and program evaluations and ensuring that they are readily accessible to anyone in the program.
2. The MSP Infection Prevention Manager will be responsible for ensuring employees and contractors are appropriately trained prior to using respiratory protection by:
 - a. participating in the hazard assessment by evaluating all potential exposures to respiratory hazards, including exposure to chemicals and aerosol transmissible disease pathogens, and communicating this information to the Department Infection Prevention Manager;
 - b. identifying employees and/or tasks for which respirators may be required and communicating this information to the Department Infection Prevention Manager;
 - c. ensuring that employees in their areas follow the requirements outlined in the RPP; and
 - d. scheduling employees for medical evaluations, and fit testing if there is an insufficient number of PAPRs and ensuring that they are allowed to attend these appointments during work hours if possible.

C. Respirator Selection

1. Hazard Assessment
 - a. The Infection Prevention Manager will follow recommendations of the Montana DPHHS and CDC guidelines in selecting the types of respirators to be used by health services employees based on the hazards to which employees may be exposed.
 - b. With input from the respirator user, the Department Infection Control Manager and supervisor will conduct a hazard assessment for each task, process, or work area with the potential for airborne contaminants.
 - 1) The hazard assessment will include the following as needed:
 - a) identification of potential exposures (the most common potential exposure for health services employees involved in inmate care will be pathogens such as tuberculosis);
 - b) a review of work processes to determine levels of potential exposure for all tasks and locations; and
 - c) quantification or objective determination of potential exposure levels, where possible (this may not be feasible for Aerosol Transmissible Disease (ATD) pathogens).
2. NIOSH
 - a. All respiratory protective equipment shall be approved by the National Institute for Occupational Safety and Health (NIOSH) for the configuration and environment in which it is going to be used.
3. Assignment of Respirators by Task and Location
 - a. The Infection Prevention and Control RN (IPC RN) will use the hazard assessment to assign appropriate types of respirators for use by specific types of personnel during specific processes or in specific areas of the facility.
4. Updating the Hazard Assessment
 - a. The Department Infection Control Manager in coordination with the Director of Nursing will revise and update the hazard assessment any time an employee or supervisor identifies or anticipates a new exposure or changes to existing exposures.

- b. Any employee who believes that respiratory protection is needed during a particular activity must contact the employee's supervisor or the IPC RN.
 - 1) The supervisor or IPC RN must contact the Department Infection Control Manager whenever respiratory protection is requested.
 - 2) The Department Infection Control Manager will assess the potential hazard with the employee and supervisor.
 - 3) If it is determined that respiratory protection is needed, all elements of the program will be in effect for those tasks, and the program will be updated accordingly.

D. Training

1. Annual respirator training will be provided for all employees covered by the program.
2. The training will be approved by the Department Infection Prevention Manager and provided by the Nurse Educator or designated qualified person and includes:
 - a. the general requirements of the OSHA Respiratory Protection standard;
 - b. the specific circumstances under which respirators are to be used;
 - c. respiratory hazards to which employees are potentially exposed during routine and emergency situations;
 - d. why the PAPR is necessary and how proper fit, usage, and maintenance can ensure the protective effect of the respirator as well as how improper fit, usage, and maintenance can compromise the protective effect of the respirator;
 - e. the limitations and capabilities of the respirators that will be used;
 - f. how to effectively use the respirators, including emergency situations and situations in which the respirator malfunctions;
 - g. how to inspect, put on, remove, use, and check the seals of the respirator (for tight-fitting respirators such as N95 filtering facepiece respirators);
 - h. the processes outlined in this procedure for maintenance, storage, and cleaning or disposal of respirators;
 - i. education to employees who are to wear PAPRs in protocols for:
 - 1) charging and maintaining the batteries; and
 - 2) for checking the air flow rate of the system;
 - j. how to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and
 - k. how and when to decontaminate (or safely dispose of) a respirator that has been contaminated with chemicals or hazardous and/or infectious biological materials.

E. Program Evaluation

1. The Department Infection Prevention Manager will conduct a periodic evaluation of the RPP to ensure:
 - a. all aspects of the program meet the requirements of the OSHA Respiratory Protection standard; and
 - b. the RPP is being implemented effectively to protect employees from respiratory hazards.
2. This evaluation will be done annually and as necessary.
3. Program evaluation will include, but is not limited to:
 - a. review of the written program;
 - b. completion of a program evaluation checklist based on observations of workplace practices; and
 - c. a review of feedback obtained from employees (including respirator fit, selection, use, and maintenance issues) that will be collected during the annual training session.
4. The RPP will be revised as necessary, and records of revisions will be kept on file with the written program.
 - a. Any program changes that are implemented as a result of program evaluation will be communicated to employees and reinforced by their supervisors.

IV. CLOSING

Questions about this procedure should be directed to the Medical Health Services Manager.

V. FORM

MSP HS B-02.1 (A) Respirator Assignment by Task or Location

VI. ATTACHMENT

MSP HS B-02.1 Attachment A: User Seal Check Processes



MONTANA STATE PRISON ATTACHMENT A: USER SEAL CHECK PROCESSES

Any individual who uses a tight-fitting respirator must perform a user seal check to ensure that an adequate seal is achieved each time the respirator is put on.

Either the positive and negative pressure checks or the respirator manufacturer's recommended user seal check method shall be used (*see each below*).

Note: User seal checks are not substitutes for qualitative or quantitative fit tests.

I. Facepiece Positive and/or Negative Pressure Checks

A. Positive Pressure Check

1. Close off the exhalation valve and exhale gently into the facepiece.
 - a. The face fit is considered satisfactory if a slight positive pressure can be built up inside the facepiece without any evidence of outward leakage of air at the seal.
 - b. For most respirators, this method of leak testing requires the wearer to first remove the exhalation valve cover before closing off the exhalation valve and then carefully replacing it after the test.

B. Negative Pressure Check

1. Close off the inlet opening of the canister or cartridge(s) by covering with the palm of the hand(s) or by replacing the filter seal(s), inhale gently so that the facepiece collapses slightly, and hold the breath for ten seconds.
 - a. The design of the inlet opening of some cartridges cannot be effectively covered with the palm of the hand.
 - 1) The test can be performed by covering the inlet opening of the cartridge with a thin latex or nitrile glove.
 - b. If the facepiece remains in its slightly collapsed condition and no inward leakage of air is detected, the tightness of the respirator is considered satisfactory.

II. Manufacturer's Recommended User Seal Check Processes

A. Respirator Manufacturer Recommendations

1. The respirator manufacturer's recommended processes for performing a user seal check may be used instead of the positive and/or negative pressure check processes if it is shown that the manufacturer's processes are equally effective.