D & M Painting
© 2014 RESPIRATORY PROTECTION SAFETY PLAN

D & M Painting

1759 North Batavia Street

Orange, CA 92865

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1. RESPIRATORY PROTECTION SAFETY PLAN

1. All employees will be protected from exposure to airborne radioactive, chemical, or biological contamination by installing, implementing, or instituting feasible engineering or administrative controls.

2. If these controls do not prove feasible, or while they are being installed/instituted, appropriate respiratory protection will be provided.

3. For some experiments, respiratory protection will be provided as an additional safeguard against exposure.

4. It is D & M Painting's plan is to provide employees with a safe and healthful working environment.

5. This is accomplished by utilizing facilities and equipment that have all feasible safeguards incorporated into their design.

6. When effective engineering controls are not feasible, or when they are being initiated, protection will be used to ensure employees protection.

7. This plan does not apply to contractors, as they are responsible for providing their own respiratory protection plans and respiratory protective equipment.

2. RESPIRATORY PROTECTION SAFETY DEFINITIONS

1. **Respirator –** A device provided to protect the wearer from inhalation of harmful or nuisance atmospheres. Respirators will function by air purifying and/or air supplying techniques.

2. **Air Purifying Respirator –** A respirator that filters and/or absorbs contaminants from the ambient air being inhaled by the wearer.

3. **Supplied Air Respirator –** A respirator in which clean air is supplied to the face piece from an auxiliary source away from the wearer.

4. **Self-Contained Breathing Apparatus –** A respirator in which the air supply is carried by the wearer.

5. **Atmospheric Contamination –** The term applies equally to gases such as nitrogen, carbon monoxide, and carbon dioxide; the vapors of volatile substances such as benzene and carbon tetrachloride; toxic dusts and fumes; radioactive materials; and so forth.

6. **Respirator Fit Test –** A test used to determine a proper match or fit between the face piece of the respirator and face of the wearer.

3. D & M Painting's RESPONSIBILITIES

A. D & M Painting's Supervisor:

1. Supervisors will ensure each employee under his or her supervision using a respirator has received appropriate training in its use and an annual medical evaluation.

2. Supervisors will ensure the availability of appropriate respirators and accessories, provide adequate storage facilities, and encourage proper respirator equipment maintenance.

3. Supervisors will be aware of tasks requiring the use of respiratory protection, and ensure all employees engaged in such work use the appropriate respirators at all times.

4. The Supervisors are responsible for the following:

a. Ensures that all employees who wear respiratory protective devices are thoroughly trained in their use.

b. Provides employees with the respiratory protection appropriate for the operation, and ensures the use of such devices.

c. Identifies potentially hazardous conditions and immediately notifies the Safety and Health Manager for corrective action.

5. Supervisors will contact the Safety and Health Manager prior to non-routine work that will expose workers to hazardous substances or oxygen deficient atmospheres.

6. Examples of work that will require the use of respirators includes, but are not limited to:

a. Asbestos abatement activities

b. Abrasive blasting

c. Cutting or melting lead or stripping lead-based paints from surfaces

d. Welding or burning

e. Painting, especially with epoxy or organic solvent coatings

f. Using solvents, thinners, or degreasers

g. Work that generates large amounts of dust

h. Working in a confined space

i. Using formaldehyde to decontaminate a space

j. Bio-aerosols

B. D & M Painting's Employee:

1. Uses respiratory protective equipment as instructed and required under hazardous agent protocols

2. Stores respirator properly to prevent damage and inspects prior to each use

3. Reports any malfunction of respiratory protective equipment to the immediate supervisor.

C. Others:

1. D & M Painting's other employees, inspectors, and/or visitors, who will enter an area where the use of respiratory protective equipment is required, even when their stay time in the area will be 15 minutes or less, will be provided with and use appropriate equipment, including instructions regarding use and limitations.

2. Employees will be fit tested and medically qualified to wear the respirator being issued prior to entry to the site.

3. Contractors are required to develop and implement a respiratory protection plan for their employees who will enter into or work in areas where exposure to hazardous materials cannot be controlled or avoided.

4. This plan will meet OSHA regulations and include issuance of respirators, medical evaluations, fit testing and training.

D. D & M Painting's Safety and Health Manager:

1. Develops and implements all aspects of the respiratory protection plan

2. Develops training plans and standard operating procedures to fulfill the requirements of existing OSHA regulations and amendments.

3. Purchases, selects, inspects, maintains, cleans, stores, and fit tests respiratory protective equipment.

4. Periodically inspects and replaces all respiratory protective devices stored for emergency use.

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4. RESPIRATORY PROTECTION SELECTION PROCEDURES

Respirators will be selected on the basis of the potential hazards to which the worker is exposed. The following factors will be ascertained by D & M Painting's Health and Safety Manager to ensure that the device selected for the employee will provide satisfactory protection when used properly:

1. Chemical, physical, and toxicological properties of the contaminant(s).

2. Review of actual and potential hazards to assess extent of injurious effects produced under all conditions of potential exposure.

3. Evaluation of the duties to be performed by the wearer as they relate to restriction of movement and duration of potential exposure.

4. An understanding of the principles, design, scope of use, limitations, advantages, and disadvantages of the available respirators. Respiratory equipment selected will be approved by D & M Painting or will otherwise be in accordance with existing OSHA regulations.

5. MEDICAL EVALUATIONS

It is the responsibility of D & M Painting's Health and Safety Manager to review the health status of all employees who will be required to wear respiratory equipment. In the event of prolonged respirator use, the wearer will have a medical examination to determine if he/she is medically able to wear respiratory protective equipment without aggravating a pre-existing medical condition

Medical considerations include, but are not limited to the following:

1. History of asthma or emphysema

2. Difficulty in breathing

3. Previously documented lung problems

4. High blood pressure

5. Artery diseases

6. Documented heart problems

7. Missing or arthritic fingers

8. Facial scars

9. Claustrophobia

10. Poor eyesight

6. FIT TESTING RESPIRATORS

1. D & M Painting's Safety and Health Manager prior to using the respirator will fit each individual required to use a respirator of any type.

2. A fit test will be used to determine the ability of each individual respirator wearer to obtain a satisfactory fit with any air-purifying respirator. Both quantitative and qualitative fit tests will be performed.

3. D & M Painting's employees will successfully pass the fit test before being issued an air-purifying respirator.

4. The fit test will include a demonstration of proper donning, wearing, and field fit testing techniques, an extensive leak test using a solution of isoamyl acetate as the test vapor and a quantitative fit test using a respirator fit tester.

5. Any individual with a beard or other facial hair that will prevent a proper face piece-to-face seal will not be fit tested until the hair has been removed.

6. Employees of D & M Painting's will not be permitted to wear a negative-pressure respirator in a work situation until they have demonstrated that an acceptable fit can be obtained. Respirator fitting is conducted initially upon assignment to a task requiring use of a respirator.

7. Refitting is conducted annually thereafter upon successful completion of the respirator training.

8. Fit testing will be conducted by D & M Painting's Safety and Health Manager and the test results will be the determining factor in selecting the type, model, and size of negative-pressure respirator for use by each individual respirator wearer.

9. A separate Respirator Fitting and Training Record will be maintained for each participating individual.

7. RESPIRATOR FIT CHECKING

1. Each time a respirator is donned, the user will perform positive and negative pressure fit checks.

2. These checks are not a substitute for fit testing. Employees using respirators will be properly trained in the performance of these checks and understand their limitations.

A. Negative Pressure Check;

Applicability/Limitations:

This test cannot be carried out on all respirators; however, it can be used on face pieces of air purifying respirators equipped with tight-fitting respirator inlet covers and on atmosphere supplying respirators equipped with breathing tubes which can be squeezed or blocked at the inlet to prevent the passage of air.

Procedure:

Close off the inlet opening of the respirator's canister(s), cartridge(s), or filter(s)

with the palm of the hand, or squeeze the breathing air tube or block its inlet so that it will not allow the passage of air. Inhale gently and hold for at least 10 seconds. If the face piece collapses slightly and no inward leakage of air into the face piece is detected, it can be reasonably assumed that the respirator has been properly positioned and the exhalation valve and face piece are not leaking.

B. Positive Pressure Check:

Applicability/Limitations:

This test cannot be carried out on all respirators; however, respirators equipped with exhalation valves can be tested.

Procedure:

Close off the exhalation valve or the breathing tube with the palm of the hand. Exhale gently. If the respirator has been properly positioned, a slight positive pressure will build up inside the face piece without detection of any outward air leak between the sealing surface of the face piece and the face.

8. RESPIRATOR QUALITATIVE FIT TESTING

1. Federal regulations (29 CFR 1910.1001) require qualitative fit tests of respirators and describe step-by-step procedures.

2. This test checks the employee's response to a chemical introduced outside the respirator face piece.

3. This response is either voluntary or involuntary depending on the chemical used. Several methods will be used.

4. The two most common are the irritant smoke test, and the odorous vapor test.

9. IRRITANT SMOKE

1. The irritant smoke test is an involuntary response test.

2. Air purifying respirators will be equipped with a high efficiency particulate air (HEPA) filter for this test.

3. An irritant smoke, usually either stannic chloride or titanium tetrachloride is directed from a smoke tube toward the respirator.

4. If the test employee does not respond to the irritant smoke, a satisfactory fit is assumed to have been achieved.

5. Any response to the smoke indicates an unsatisfactory fit. The irritant smoke is an irritant to the eyes, skin, and mucous membranes.

6. It will not be introduced directly onto the skin.

7. The test employee will keep his or her eyes closed during the testing if a full-face piece mask is not used.

10. ODOROUS VAPOR

1. The odorous vapor test is a voluntary response test. It relies on the employee's ability to detect an odorous chemical while wearing the respirator.

2. Air purifying respirators will be equipped with an organic cartridge or canister for this test. isoamyl acetate (banana oil) is the usual test.

3. An isoamyl acetate-saturated gauze pad is placed near the face piece-to-face seal of the respirator of the test employee's skin.

4. If the test employee is unable to smell the chemical, than a satisfactory fit is assumed to be achieved. If the employee smells the chemical, the fit is unsatisfactory.

5. If the employee cannot smell the chemical, the respirator will be momentarily pulled away from the employee's face.

6. If the employee is then able to smell the chemical, a satisfactory fit is assumed.

7. If the employee cannot smell the chemical with the respirator pulled away from the face, this test is inappropriate for this employee, and a different test will be used.

8. This test is limited by the wide variation of odor thresholds among individuals and the possibility of olfactory fatigue.

9. Since it is a voluntary response test it depends upon an honest response.

11. RESPIRATOR QUANTITATIVE FIT TESTING

1. Quantitative fit testing, using the Portacount plus fit test system, is generally performed on both full-face and half-face negative pressure respirators.

2. Fit factors are determined by comparing the particle concentration outside the respirator with the concentration inside the respirator face piece.

3. An acceptable fit is achieved when the respirator wearer successfully completes a series of six planed exercises (normal breathing, deep breathing, moving head up and down, moving head side to side, reading, and normal breathing) with a fit factor of 100 or more.

Special Problems:

1. Facial Hair:

No attempt is made to fit a respirator on an employee who has facial hair which comes between the sealing periphery of the face piece and the face, or if facial hair interferes with normal functioning of the exhalation valve of the respirator.

2. Glasses and Eye/Face Protective Devices:

Proper fitting of a respiratory protective device face piece for individuals wearing corrective eyeglasses or goggles will not be established if temple bars or straps extend through the sealing edge of the face piece. If eyeglasses, goggles, face shield or welding helmet will be worn with a respirator, they will be worn so as not to adversely affect the seal of the face piece. If a full-face piece respirator is

used, special prescription glasses inserts are available.

12. RESPIRATOR TRAINING CERTIFICATION

1. D & M Painting's Safety and Health Manager will provide training and instruction in the proper use of each type of respirator. Respirator users and their supervisors will receive training on the contents of this Respiratory Protection Plan and their responsibilities under it.

2. They will be trained on the proper selection and use, as well as the limitations of the respirator.

3. Training also covers how to ensure a proper fit before use and how to determine when a respirator is no longer providing the protection intended.

4. D & M Painting's Safety and Health Manager provides training of respirator wearers in the use, maintenance, capabilities, and limitations of respirators is initially upon assignment of employees to tasks requiring the use of respirators.

5. Retraining is given annually thereafter and only upon successful completion of the medical evaluation.

Respirator training will be properly documented with **RESPIRATOR TRAINING CERTIFICATION** and will include the type and model of respirator for which the individual has been trained and fit-tested.

This **RESPIRATOR TRAINING CERTIFICATION** training plan will include, but not be limited to:

1. Nature and degree of respiratory hazard

2. Respirator selection, based on the hazard and respirator capabilities and limitations

3. Donning procedures and fit tests including hand's-on practice to ensure an effective face piece to face seal

4. Actual handling of the respirator and wearing it for a period in a test atmosphere.

5. A discussion of respirators construction, operating principles and limitations.

6. Care of the respirator, e.g., need for cleaning, maintenance, storage, and/or replacement

7. Instruction on the nature of the hazard, including information on its physical properties, possible concentrations, modes of physiological action and means of detection.

8. Use and limitations of respirator

9. Discussions of maintenance and inspection procedures.

13. RESPIRATOR INSPECTION PROCESS

1. For sanitary and health reasons, clean respirators will be used by one individual only and will be returned to D & M Painting's Safety and Health Manager for cleaning, maintenance, and repairs.

2. Cleaning and disinfecting of reusable components of a respirator unit will be performed by utilize procedures corresponding to the exposure atmosphere.

3. The individual will discard disposable respirators properly after use.

4. Inspection frequency for all unused devices will be monthly.

5. The employee will inspect units receiving routine use before and after each use.

The inspection will include the following checks when applicable.

1. Tightness of connections

2. Condition of face piece, headbands, exhalation and inhalation valves, connecting tube, and canister

3. Pressure in cylinders (do not use if less than 1500 psi)

4. Deterioration of all rubber parts

5. Regulator mechanism

6. Lens of face pieces

7. Warning alarm (self-contained units)

8. Seal on cartridge package

14. LOCATIONS AND STORAGE OF RESPIRATORS

1. The Safety and Health Manager will control location and storage of all respiratory devices.

2. When the need for respiratory equipment is anticipated, approval by the Safety and Health Manager will be obtained in advance.

3. After inspection, cleaning, and any necessary minor repairs, store respirators to protect against sunlight, heat, extreme cold and excessive moisture, damaging chemicals or other contaminants.

4. Respirators placed at stations and work areas for emergency use will be stored in compartments built for that purpose, will be quickly accessible at all times and will be clearly marked.

5. Routinely used respirators, such as half-mask or full-face air-purifying respirators, will be placed in seal able plastic bags.

6. Respirators will be stored in such places as lockers or toolboxes only if they are first placed in carrying cases or cartons.

7. Respirators will be packed or stored so that the face piece and exhalation valves will rest in a normal position and not be crushed.

8. Emergency use respirators will be stored in a sturdy compartment that is quickly accessible and clearly marked.

15. SELF CONTAINED BREATHER APPARATUS

Emergency respirators in carrying cases will be located in areas designated by the Safety and Health Manager. D & M Painting provides these respirators for only emergency situations, and for use by authorized employees. Any conditions requiring the use of these devices will be reported to Safety and Health Manager.

16. SPECIAL REQUIREMENTS FOR CONFINED SPACES

1. In areas immediately hazardous to life or health, self-contained breathing apparatus, airline respirators or hose masks with blowers will be used. For emergency rescue, a standby person with suitable self-contained breathing apparatus will be at the nearest fresh air base.

2. Communications (visual, voice or signal line) will be maintained between all individuals present.

3. Persons using air line respirators and hose masks with blowers will be equipped with safety harnesses and safety lines for lifting or removing them from hazardous atmospheres, or other equivalent provisions for rescue from hazardous atmospheres will be used.

4. More details concerning respiratory protection for confined space entry can be found in D & M Painting's Confined Space Plan.

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17. TYPES OF RESPIRATORS

A. Air-Purifying Respirator

These respirators remove air contaminants by filtering, absorbing, adsorbing, or chemical reaction with the contaminants as they pass through the respirator canister or cartridge. This respirator is to be used only where adequate oxygen (19.5 to 23.5 percent by volume) is available. Air-purifying respirators can be classified as follows:

1. Particulate removing respirators, which filter out dusts, fibers, fumes and mists. These respirators will be single-use disposable respirators or respirators with replaceable filters.

NOTE: Surgical masks do not provide protection against air contaminants. They are never to be used in place of an air-purifying respirator. They are for medical use only.

2. Gas- and vapor-removing respirators, which remove specific individual contaminants or a combination of contaminants by absorption, adsorption or by chemical reaction. Gas masks and chemical-cartridge respirators are examples of gas- and vapor-removing respirators.

3. Combination particulate/gas- and vapor-removing respirators, which combine the respirator characteristics of both kinds of air-purifying respirators.

B. Supplied-Air Respirators

These respirators provide breathing air independent of the environment. Such respirators are to be used when the contaminant has insufficient odor, taste or irritating warning properties, or when the contaminant is of such high concentration or toxicity that an air-purifying respirator is inadequate. Supplied-air respirators, also called airline respirators, are classified as follows:

1. Demand

This respirator supplies air to the user on demand (inhalation) that creates a negative pressure within the face piece. Leakage into the face piece will occur if there is a poor seal between the respirator and the user's face.

2. Pressure-Demand

This respirator maintains a continuous positive pressure within the face piece, thus preventing leakage into the face piece.

3. Continuous Flow

This respirator maintains a continuous flow of air through the face piece and prevents leakage into the face piece.

C. Self-Contained Breathing Apparatus (SCBA)

This type of respirator allows the user complete independence from a fixed source of air and offers the greatest degree of protection but is also the most complex. Training and practice in its use and maintenance is essential. This type of device will be used in emergency situations only.

D. Identification of Respirator Cartridges and Gas Mask Canisters

Respirator cartridges and canisters are designed to protect against individual or a combination of potentially hazardous atmospheric contaminants, and are specifically labeled and color-coded to indicate the type and nature of protection they provide. An approved label on the respirator will also specify the maximum concentration of contaminant(s) for which the cartridge or canister is approved. For example, a label will read:

"DO NOT WEAR IN ATMOSPHERES IMMEDIATELY DANGEROUS TO LIFE. RESPIRATORS WILL BE USED IN AREAS CONTAINING AT LEAST 20 PERCENT OXYGEN. DO NOT WEAR IN ATMOSPHERES CONTAINING MORE THAN ONE-TENTH PERCENT ORGANIC VAPORS BY VOLUME. REFER TO COMPLETE LABEL ON RESPIRATOR OR CARTRIDGE CONTAINER FOR ASSEMBLY, MAINTENANCE, AND USE."

18. WARNING SIGNS OF RESPIRATOR FAILURE

A. Particulate Air-Purifying

When breathing difficulty is encountered with a filter respirator (due to partial clogging with increased resistance), the filter(s) will be replaced. Disposable filter respirators will be discarded.

B. Gas or Vapor Air-Purifying

If, when using a gas or vapor respirator (chemical cartridge or canister), any of the warning properties (e.g., odor, taste, eye irritation, or respiratory irritation) occur, promptly leave the area and check the following:

1. Proper face seal

2. Damaged or missing respirator parts

3. Saturated or inappropriate cartridge or canister

If no discrepancies are observed, replace the cartridge or canister. If any of the warning properties appear again, the concentration of the contaminants will have exceeded the cartridge or canister design specification. When this level is reached an airline respirator or SCBA is required.

C. Service Life of Air-Purifying Respirator Canisters and Cartridges

The canisters or cartridges of air-purifying respirators are intended to be used until filter resistance precludes further use, or the chemical sorbent is expended as signified by a specific warning property, e.g., odor, taste, etc. New canisters, cartridges or filters will always be provided when a respirator is reissued. When in doubt obtain a replacement canister or cartridge.

D. Supplied Air Respirator

When using an airlines respirator, leave the area immediately when the compressor failure alarm is activated or if an air pressure drop is sensed. When using an SCBA leave the area as soon as the air pressure alarm is activated.

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19. MAINTENANCE AND ISSUANCE OF RESPIRATORS

1. The maintenance of respiratory protective devices involves a thorough visual inspection for cleanliness and defects (i.e., cracking rubber, deterioration of straps, defective exhalation and inhalation valves, broken or cracked lenses, etc.).

2. Worn or deteriorated parts will be replaced prior to reissue. No respirator with a known defect is reissued for use.

3. No attempt is made to replace components, make adjustments or make repairs on any respirator beyond those recommended by the manufacturer.

4. Under no circumstances will parts be substituted, as such substitutions will invalidate the approval of the respirator.

4. Either the manufacturer or a qualified trained technician will conduct any repair to reducing or admission valves, regulators, or alarms.

20. CLEANING OF RESPIRATORS

1. All respirators in routine use will be cleaned and sanitized on a periodic basis.

2. Respirators used non-routinely will be cleaned and sanitized after each use and filters and cartridges replaced.

3. The employee maintains routinely used respirators.

4. Replacement cartridges and filters are obtained by contacting the Safety and Health Manager.

5. Cleaning and disinfecting of respirators will be done frequently to ensure that skin penetrating and dermatitis-causing contaminants are removed from the respirator surface.

6. Respirators maintained for emergency use or the user will clean those used by more than one person after each use.

The following procedure is recommended for cleaning and disinfecting respirators:

1. Remove and discard all used filters, cartridges, or canisters.

2. Wash face piece and breathing tube in a cleaner-disinfectant solution. A hand brush will be used to remove dirt. Solvents that can affect rubber and other parts will not be used.

3. Rinse completely in clean, warm water.

4. Air dry in a clean area in such a way as to prevent distortion.

5. Clean other respirator parts as recommended by the manufacturer.

6. Inspect valves, head straps, and other parts to ensure proper working condition.

7. Reassemble respirator and replace any defective parts.

8. Place in a clean, dry plastic bag or other suitable container for storage after each cleaning and disinfecting of the respirators.

9. Respiratory protective equipment will not be ordered, purchased, or issued to any employees unless the wearer has received respirator training and a fit tested.

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RESPIRATOR SAFETY TRAINING CERTIFICATION

D & M Painting's Safety and Health Manager hereby certifies that _____ has been trained in the proper use and limitations of the respirator issued.

The respirator safety training included the following areas:

1. Instruction on putting on, fitting, testing and wearing the respirator.

2. Instruction on inspection, cleaning, and maintaining the respirator.

3. Explanation of dangers related to misuse.

4. Instructions on emergency situations.

D & M Painting's Safety and Health Manager hereby certifies that _____ understands the use, care, and inspection of the respirator and has tested and worn the unit.

Date: _____

Signed: _____

SSN: _____

Respirator Type Issued: _____

D & M Painting's Safety and Health Manager

Training Coordinator: _____

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RESPIRATOR FIT TEST WORKSHEETS

QUALITATIVE RESPIRATOR FIT TEST

Employee: _____

SSN: _____

Clean Shaven? ___Yes ___No

Spectacle Kit? ___Yes ___No

Manufacturer/Model _____

Size: ___S ___M ___L

Irritant Smoke ___Pass ___Fail

Isoamyl Acetate ___Pass ___Fail

Manufacturer/Model_____

Size: ___S___M___L

Irritant Smoke ___Pass ___Fail

Isoamyl Acetate ___Pass ___Fail

D & M Painting's Safety and Health Manager

_____

Date_____

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RESPIRATOR FIT TEST WORKSHEETS

QUANTITATIVE RESPIRATOR FIT TEST REPORT

LAST NAME _____

FIRST NAME _____

ID NUMBER _____

NEXT TEST DUE _____

OPERATOR NAME _____

RESPIRATOR MODEL _____

SIZE _____

MANUFACTURER _____

APPROVAL NUMBER _____

NOTES _____

TEST DATE _____

TEST TIME _____

TEST DATA

Fit Factor Pass Level: 100
Ex. Ambient _____ **(Part/cc) Mask** _____ **(Part/cc) Fit Factor**
Pass/Fail NB _____ **DB** _____ **SS** _____ **UD** _____
R _____
NB _____ **OVERALL FIT FACTOR** _____
Operator _____ **Date** _____
Employee_____
Date_____