

April 30, 2008

### Pandemic Preparation and Respirator Protection for Business Continuity Frequently Asked Questions

We have received a number of inquiries regarding the role of respiratory protection as a component of business continuity preparedness planning for a disruptive event. Following are some of the most commonly asked questions.

# 1. My company doesn't manufacture anything. Do OSHA regulations still apply to us?

Occupational Safety and Health Administration (OSHA) regulations apply to all employers in the United States (with the exception of U.S. and some state and other government employees).

### 2. What does OSHA require of non-manufacturing companies?

The General Duty Clause of the Occupational Safety and Health (OSH) Act states that each employer shall provide a place of employment which is free from recognized hazards that are causing or are likely to cause death or serious physical harm to employees and that they shall comply with occupational safety and health standards promulgated under the Act. These requirements apply to both manufacturing and non-manufacturing companies. With respect to respiratory protection, OSHA has issued the General Respiratory Protection Standard, 29 CFR 1910.134 which describes the selection and use of respiratory protection for all U.S. workplaces.

#### 3. Who determines if an airborne or respiratory hazard is present?

According to the General Respiratory Protection Standard, it is the employer's responsibility to identify and evaluate the respiratory hazards in the workplace. When planning for an event such as pandemic influenza, an employer may wish to consult OSHA, Centers for Disease Control and Prevention (CDC), the Department of Health and Human Services (DHHS) and your state/local health department for current guidance related to such an event.

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## 4. If employees are wearing respirators at work for any reason, what respirators do they need to wear?

The General Respiratory Protection Standard 29 CFR 1910.134 requires the employer to evaluate respiratory hazard(s) in the workplace, identify relevant workplace and user factors, and base respirator selection on these factors. If employees are using respirators at work, they need to wear respirators approved by the National Institute for Occupational Safety and Health (NIOSH) for occupational use.

There are respirators that have been cleared by the U.S. Food and Drug Administration (FDA) for use as a surgical mask and are also NIOSH approved. These are for use during surgical settings where respiratory protection is needed.

There are also respirators that have been cleared by the U.S. Food and Drug Administration (FDA) for use by the **general public** during public health medical emergencies and are also NIOSH approved; however they are not for use at work. Employees should not bring these from home to use at work.

## 5. If I (an employer) make respirators available to my employees at work, what else do I need to do?

If the employer determines that there is an airborne hazard present or requires a respirator to be worn in a particular area, even when airborne contaminants are determined to be below all permissible exposure limits (PELs) or other recognized exposure limits, all provisions of 29 CFR 1910.134, the General Respiratory Protection standard, must be met. This use is not considered "voluntary use" of respiratory protection. The standard includes selection, use, maintenance and care of respirators as well as requirements for medical evaluation, fit testing, training and program evaluation.

### 6. What is "Voluntary Use" of respiratory protection?

Use is considered voluntary in situations when:

- The employer determines that the air does not present a hazard and / or the airborne hazards are below all PELs or other recognized exposure limits, and
- when an employer permits employees to use their own respirators or provides respirators at the request of employees, **and**
- if the employer determines that such respirator use will not in itself create a hazard.

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# 7. If the employer determines that respirators are not required, and that the use is "Voluntary", does the OSHA standard on respiratory protection (1910.134) still apply?

Yes. If the employer determines that any voluntary respirator use is permissible, the employer shall provide the respirator users with the information contained in Appendix D of 29 CFR 1910.134. This applies to voluntary use of filtering facepiece respirators as well as other types of respirators.

In addition, if respirators other than filtering facepiece respirators are used, the employer must establish and implement those elements of a written respiratory protection program necessary to ensure that any employee using a respirator voluntarily is medically able to use that respirator, and that the respirator is cleaned, stored, and maintained so that its use does not present a health hazard to the user

The attached flowchart titled "Voluntary Use Decision Tree" has been provided by 3M as a tool to help with the decision making process.

Although fit testing is not required by OSHA under voluntary use, 3M believes it is prudent and consistent with good industrial hygiene practice that whenever respirators of any type are used that a complete respiratory protection program covering the elements in 1910.134 be implemented, including fit testing, medical evaluations, and training.

#### 8. What if my employee brings a respirator to use from home?

If an employer allows them to do so, employees can provide their own respirator however, the employer is still responsible to ensure the respirator is properly selected and that the respirator use complies with the respirator standard, 29 CFR 1910.134, as either required use or under the voluntary use provisions.

# 9. I am planning on providing respirators to my employees if we have an outbreak of avian flu. Do I need to have a respirator program?

According to the General Respiratory Protection Standard, when a respirator is required to be worn, all aspects of 29 CFR 1910.134 apply. If an employer determines that voluntary use is acceptable, and decides to make respirators available to their employees or allows their employees to bring in respirators from home for other reasons such as comfort, then only certain provisions of 29 CFR 1910.134 apply. Please refer to the previous questions regarding voluntary use of respirators for details. 3M believes it is prudent and consistent with good industrial hygiene practice that whenever respirators are worn to help reduce a

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worker's exposure to an airborne contaminant, even under voluntary use, that NIOSH-approved respirators be selected and that a complete program covering the elements 29 CFR 1910.134 be implemented, including fit testing, medical evaluations, and training.

#### 10. When do I need to train and fit test my employees?

Training, and medical evaluations and fit testing when required, must be done before the employees need to wear the respirators. The employer could train and fit test as soon as they obtain the respirators or they could wait until an event might occur. Either way, it is best to plan ahead so that the employer has the necessary supplies available and the employees are trained, medically cleared and fit tested before any exposure might occur.

#### 11. Doesn't fit testing take a lot of time and expense?

Qualitative fit testing can be done by any trained individual. Individuals can be trained to give qualitative fit tests by obtaining a fit testing kit, reading through the directions and practicing. The individual can also work with someone experienced in fit testing. In addition, 3M also offers videos on our website that demonstrate fit testing with the 3M<sup>TM</sup> Qualitative Fit Test Apparatus. Respirators may also be quantitatively fit tested. The equipment needed for this is more expensive. For more information about fit testing requirements and approved methods refer to 29 CFR 1910.134.

Each fit test takes approximately fifteen minutes per individual, but with qualitative fit testing multiple fit tests can be administered at one time. The fit test is an important part of respiratory protection training and help the users understand the capabilities and limitations of the selected respirators.

## 12. What is the difference between an OSHA standard and an OSHA guidance document?

OSHA standards are the law. If OSHA finds a company to be in non-compliance with an OSHA standard they can cite that company. The General Duty Clause and the Respiratory Protection Standard (29 CFR 1910.134) are standards.

OSHA guidance documents are guidance or recommendations that have not gone through the rulemaking process. OSHA clarifies that guidance documents neither create new legal obligations nor alter existing obligations created by OSHA standards or the OSH Act. Failure to implement any recommendation from guidance documents is not automatically a violation of the General Duty Clause.

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However, the General Duty Clause still does apply to all workplaces. Citations can only be based on standards, regulations, or the General Duty Clause.

### 13. What do OSHA's guidance documents on Avian Flu say about respirator use?

OSHA's "Guidance on Preparing Workplaces for an Influenza Pandemic" (OSHA 3327-02N 2007), categorizes workplaces into an occupational risk pyramid for pandemic influenza with several exposure categories. OSHA indicates:

- The Very High Exposure Risk and High Exposure Risk categories primarily involve those who have potential exposure to patients known or suspected to be infected with pandemic influenza (i.e. healthcare employees, medical transport, laboratories, etc.). OSHA indicates that respirators should be worn by those employees who work closely with people known or suspected to be infected with pandemic influenza.
- OSHA examples for the Medium Exposure Risk category include employees with frequent contact with the general population such as "schools, high population density work environments, and some high volume retail". For the Medium Exposure Risk category OSHA suggests "use of a respirator may be considered if there is an expectation of close contact with persons who have symptomatic influenza infection or if employers choose to provide protection against risk of airborne transmission."
- Employees in the Lower Exposure Risk category are those who have minimal contact with the general public and other coworkers (e.g. office employees). Respirators are not recommended for employees in the Lower Exposure Risk category.

OSHA also has issued a draft document "Proposed Guidance on Workplace Stockpiling of Respirators and Facemasks for Pandemic Influenza" dated November 7, 2007. In the section for estimating respirator usage for the Medium Exposure Risk category, OSHA points out that employers in critical infrastructure or key resource industry sectors (e.g., utilities or banking) may consider providing a higher level of protection (i.e. respirators) based upon the essential nature of their services or the difficulty of replacing employees whose job requires extensive training or licensing. For more information on critical infrastructure sectors and guidance documents go to <a href="https://www.dhs.gov">www.dhs.gov</a>.

## 14. OSHA's guidance documents mention facemasks and surgical masks. What will those do?

Respirators are designed to help reduce the wearer's respiratory exposure to airborne contaminants. Particulate respirators may be used to reduce exposure to

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particles that are small enough to be inhaled - particles less than 100 microns ( $\mu m$ ) in size. Respirators, such as N95 filtering facepieces, are also designed to seal to the face of the wearer. Facemasks and surgical masks not certified as respirators do not have either adequate filtering or fitting attributes to provide respiratory protection for the wearer. They are designed to help prevent contamination of the work environment or sterile field from large particles generated by the wearer (e.g. spit, mucous). Surgical masks may also be used to help reduce the risk of splashes or sprays of blood, body fluids, secretions and excretions from reaching the wearer's mouth and nose.

3M does not advocate the use of products that are not NIOSH-approved for the use of reducing the wearer's exposures to airborne contaminants. Certain publications mention the use of facemasks or surgical masks if NIOSH-approved respirators are not available. At this time, there is no shortage of NIOSH-approved respirators.

# 15. How can I find out about OSHA's respiratory protection program requirements in 29 CFR 1910.134 and OSHA's guidance documents regarding preparing workplaces for an influenza pandemic?

All of OSHA's standards and guidance documents can be located on their website <a href="www.osha.gov">www.osha.gov</a>. In addition to those documents discussed, OSHA also publishes a "Small Entity Compliance Guide for the Respiratory Protection Standard" which includes a sample respiratory protection program in Appendix IV.

# 16. I am planning on providing respirators to my employees' families, for use outside of work, if we have an outbreak of Avian Flu. Do I need to have an OSHA respirator program for them?

No. The occupational safety and health standards only apply to employers. They do not regulate use of respirators by the general public so the respirator program requirements do not apply. The U.S. FDA, however, has cleared two 3M respirators, models 8612F and 8670F, for use by the general public during public health medical emergencies, such an influenza pandemic, to help reduce exposure to airborne germs. These respirators are for adults only and are not to be used by children. 3M has developed user instructions and other training materials such as fitting posters and training videos to assist the general public user in fitting and use of the respirator. Proper use of a respirator is essential to its ability to help reduce the wearer's exposure to airborne contaminants. It's advisable that those companies and organizations purchasing the 8670F and 8612F respirators for family members or members of the general public (not employees) become familiar with these training materials and advise users to follow them. The 8670F

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and the 8612F are not for use at work. Employers should not provide the 8670F or 8612F to their employees and employees should not bring them into work, even in a voluntary use situation.

#### **Additional Resources:**

CDC: http://www.cdc.gov/

DHHS: <a href="http://www.pandemicflu.gov">http://www.pandemicflu.gov</a>

WHO: <a href="http://www.who.int/en">http://www.who.int/en</a>
DHS: <a href="http://www.dhs.gov">http://www.dhs.gov</a>

#### For More Information

In the U.S., contact:

**Information Line** 

1-888-436-3636

**Technical Assistance** 

1-800-243-4630

**Sales Assistance** 

1-800-328-1667

**Fax On Demand** 

1-800-646-1655

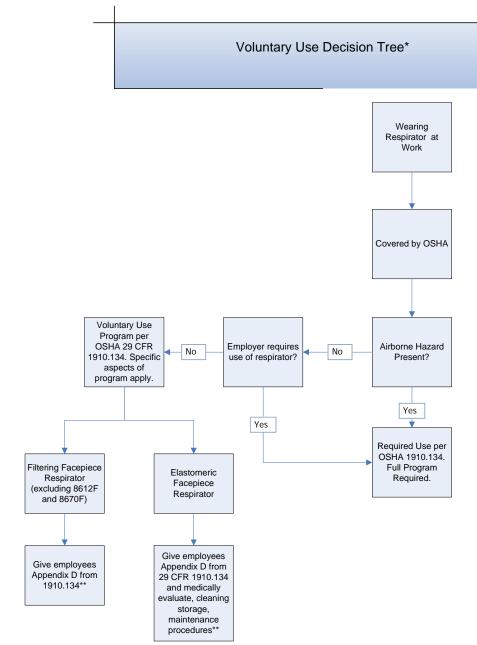
Web site

http://www.my3MN95.com http://www.3M.com/OccSafety

For other 3M products

1-800-3M HELPS

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\* This flowchart on voluntary use has been developed by 3M OH&ESD. It does not represent an official, legal nor complete interpretation of OSHA's Respiratory Protection Standard in 29 CFR 1910.134. If specific questions arise, the standard itself should be reviewed and relied on, rather than this flowchart.

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