The Racine Police Department’s Respiratory Protection Program is designed to protect members by establishing accepted practices for respirator use (Gas Mask), providing guidelines for training and explaining proper storage, use and care of respirators. This program is designed in the spirit of OSHA respiratory protection requirements found in 29 CFR 1910.134.

This program applies to all Department members approved to wear a respirator to perform assigned duties. Examples of chemicals or operations that pose potential respiratory hazards and involve respirator use are:

1. Riot Control/Civil Disturbance Agents - chlorobenzylidene malonitrile (CS gas)
2. Tactical Deployments - chlorobenzylidene malonitrile (CS gas)

The Department will provide respirators to approved members. The Department will provide respirators that are applicable and suitable for the intended purpose at no charge to affected members. Any expense associated with training, medical evaluations and respiratory protection equipment will be borne by the Department.

Members who are required to wear respirators must pass a medical review provided by the Department before being permitted to wear a respirator. Members are not permitted to wear a respirator until a licensed health care professional (Registered Nurse or Medical Doctor) has determined that they are medically able to do so. New members will be evaluated as part of their pre employment physical.

1. The medical evaluation procedures are as follows:
   a. The medical evaluation will be conducted using the questionnaire provided in Appendix C of the OSHA Respiratory Protection Standard 1910.134. The Program Administrator will provide a copy of this questionnaire to all members requiring medical evaluations.
   b. All affected personnel will receive a copy of the medical questionnaire and will be allowed to complete the questionnaire while on duty time. The questionnaire will be placed in a sealed envelope without any identification placed on the envelope and delivered to the Program Administrator. The Program Administrator will send it to a registered nurse or medical doctor for evaluation. All examinations and questionnaires are to remain confidential between the member and the licensed medical professional and/or physician.
   c. Follow up medical exams with a medical doctor will be granted to members as required by Standard 1910.134 and when requested by the registered nurse or medical doctor conducting the medical evaluation.
   f. After a member has received clearance to wear his or her respirator, additional medical evaluations will be provided if a member reports a problem using the respirator relating to their health. The member shall report the health problem to the Program Administrator.

2. The Program Administrator will only retain the written recommendations regarding each member’s ability to wear a respirator.

Members permitted to wear the Department issued respirators will be fit tested:

a. Prior to being allowed to wear any respirator.
b. Annually.
c. Whenever the member reports to the Program Administrator a need to be retested.
d. Members will be offered a choice of gas mask sizes to ensure optimal fit and comfort.

MEMBERS:

1. Members shall use the respirators under the conditions specified in this specific program and in accordance with the training they receive from the Department.
2. Immediately report any symptoms of illness that may be related to respirator usage to a supervisor.
3. Report any health concerns related to respirator usage to the Program Administrator.
4. Report any respiratory hazards not adequately addressed in the workplace or any other concerns regarding the program to a Supervisor or the Program Administrator.
5. Members shall conduct user seal checks each time they wear their respirator. Officers shall use BOTH the positive and negative pressure checks as specified in the OSHA Respiratory Protection Standard 1910.134.
   a. POSITIVE PRESSURE TEST: This test is performed by closing off the exhalation valve with your hand. Breathe air into the mask. The face fit is satisfactory if some pressure can be built up inside the mask without any air leaking out between the mask and the face of the wearer.
   b. NEGATIVE PRESSURE TEST: This test is performed by closing of the inlet openings of the cartridge with the palm of your hand. Inhale gently so that a vacuum occurs within the face piece. Hold your breath for 10 seconds. If the vacuum remains, and no inward leakage is detected, the respirator is fit properly.
6. Members are permitted to leave the area of a CS/OC gas disbursement to maintain their respirator.
7. Members shall notify a supervisor before leaving the area and the gas mask shall be decontaminated before maintenance and reuse.
8. Members are not permitted to wear respirators if they have any condition that would prevent a proper seal. Members issued Department gas masks are not permitted to have beards of any kind, wear eye glasses or wear jewelry or other items that interfere with the seal between the face and face piece.
9. Before each use and after it has been decontaminated, a member will make an inspection of tightness and the condition of the face piece, headbands, valves, filter holders and filters. Questionable items must be reported immediately to the Program Administrator. Repair of the respirator and parts for the respirator are located in the training unit.
10. Members will be trained annually or as needed. All members must demonstrate their understanding of the topics covered in the training through hands-on exercises and a written test.

GAS MASK DEPLOYMENT:

1. When it is determined that respiratory protection is necessary, all elements of the respiratory protection plan will be in effect until the “all clear” signal is given by the Incident Commander or Supervisor.
2. Member(s) on the scene of a situation where CS/OC gas is used shall don a gas mask.
   a. Members shall notify other members in the area of the threat or potential threat so that they may don gas masks.
3. Incident Commanders and Supervisors have the authority to order the use of gas masks and to give the “all clear”.

RESPIRATOR MALFUNCTIONS AND DEFECTS:

1. For any malfunction of a respirator, such as breakthrough, face piece leakage, or improperly working valve, the member should inform his/her supervisor and go to the designated safe area to maintain the respirator.
2. Defective respirators or respirators with defective parts shall be taken out of service immediately.
a. Respirator defects discovered during an inspection shall be reported to a supervisor.
b. Supervisors shall forward the defective respirator to the Program Administrator.

3. If a respirator is taken out of service for an extended period of time a replacement will be issued.

FILTER CHANGE SCHEDULES:

1. Members shall monitor the cartridge being used with their respirator.
a. Use the filter cartridge manufacturer recommendations for deployment time recommendations.
b. Filter canisters SHALL NOT BE REUSED. Discard all used filter canisters.

CLEANING:

1. Respirators shall be cleaned and disinfected after each use, during inspections or as needed.
a. The designated cleaning area is in the training unit.
b. Respirators will be cleaned as instructed and per manufacturer recommendations.
c. Cleaning agents and equipment will be available in the training unit.

MAINTENANCE:

1. Respirators are to be properly maintained at all times to ensure proper function.
2. Maintenance includes a complete visual inspection for cleanliness and defects.
3. Worn or deteriorated parts must be replaced prior to storing the gas mask.
4. No components will be replaced or repairs made beyond those recommended by the manufacturer.
5. All respirators shall be inspected and cleaned routinely before and after each use.
6. Respirators will be inspected annually to ensure that they are in working order.
7. Members will be permitted to leave a scene to perform limited maintenance on their respirator in a designated area that is free of respiratory hazards.

STORAGE:

Respirators shall be stored to protect against dust, sunlight, heat, extreme cold, excessive moisture, or damaging chemicals.
1. Respirators shall be stored in a clean, dry area, and in accordance with the manufacturer recommendations.
2. Members shall clean and inspect their own respirator (as trained and instructed) and store it in the issued holder.

SUPERVISORS:

Implement the respiratory protection program when needed and ensure the program is followed by members.
1. Identify situations which require respiratory protection.
2. Monitor operations to evaluate respiratory hazards.
3. Coordinate with the Program Administrator to address concerns regarding this program.

FIT TEST ADMINISTRATORS AND TRAINERS:

1. Conduct the annual shift/unit level training and Fit Tests during the first quarter of each year.
2. Ensure respirators fit well and do not cause discomfort.
3. Ensure officers demonstrate proper care, storage and wear of the respirator during the Fit Test training session.

PROGRAM ADMINISTRATOR:

1. Remain knowledgeable about respiratory protection and maintain awareness of current regulatory requirements and good practices.
2. Identify work areas, process or tasks that require members to wear respirators.
3. Identify respiratory protection options.
4. Monitor respirator use to ensure that respirators are used in accordance with their specifications.
5. Conduct initial and annual refresher training.
6. Conduct annual qualitative fit testing.
7. The Program Administrator shall provide the evaluating registered nurse or medical doctor with a copy of the Respiratory Protection Program and a list of hazardous
substances that could be encountered while on duty, and the following information about each member requiring evaluation:

a. Job title
b. Respirator type
c. Maximum length of time required to wear respirator
d. Expected physical work load (light, moderate, heavy)
e. Potential temperature and humidity extremes

8. Maintain records required by the program.
   a. Copies of the written medical recommendation regarding each member’s ability to wear a respirator.
   b. Respirator training; to include the type, model and size of respirator that each member has been trained and fit tested.

8. Update the program as needed.
9. Manage the Department’s supply of respirators and components.
10. Gas mask filters/cartridges shall be replaced as determined by the Program Administrator and manufacturer recommendations.
11. Ensure that all fit tests are conducted in accordance with Appendix A of the OSHA Respiratory Protection Standard 1910.134.

NOTE:
A written copy of this program and the OSHA Respiratory Protection Standard shall be kept in the Program Administrator’s office and will be made available to all members upon request.

RELATED PROCEDURES:
613 – Use of Chemical Agents
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