

Chapter 3

Personal Protective Equipment (PPE)

1. Purpose. To establish the requirements for PPE per the references and reiterate the supervisor's responsibilities for providing, enforcing, using, and maintaining PPE.
2. Policy. The PPE program will be in compliance with references (d) and (g).
3. Procedure. The Naval Clinic will provide IH surveys to outline occupational hazards in the workplace. These surveys will not outline the exact PPE required for specific tasks. A Job Hazard Analysis (JHA) will outline the process hazard with PPE requirements. MCAS Cherry Point Safety will assist work center supervisors in assessing workplaces for safety and occupational hazards and determine what PPE is required.
4. Enforcement of Program. It is the responsibility of supervisors to enforce the use/wear of appropriate PPE. Managers will ensure compliance with the prescribed use of PPE and document cases of noncompliance. Per reference (g), managers should consider disciplinary action as a corrective measure against the offender and/or supervisor, as necessary.
5. Personnel Regulations
 - a. While working in industrial areas, personnel shall not wear:
 - (1) Torn, ragged, extremely dirty, or greasy clothing.
 - (2) Outer garments made of flammable synthetic materials.
 - (3) Shoes that are in poor condition, open-toed, open heeled, high-heeled, slippers, sandals, or platform shoes.
 - (4) Eye shades or spectacle frames made of flammable substances or caps with celluloid visors.
 - (5) Loose or dangling ornamental jewelry or other articles of clothing which may be caught in machinery.
 - (6) Metal frame glasses, jewelry, belt buckles, piercings, or other adornments while performing electrical work or power distribution operations.
 - (7) Hats with brims that restrict peripheral vision.
 - b. Portable headphones, earphones, and listening devices do not enable the user to hear or respond to sirens, fire alarms, or other means of warning, therefore they are prohibited while operating a motor vehicle, jogging (except on jogging trails), walking, crossing, bicycling, or skating on/or near roads and streets. Portable headphones are not a substitute for proper hearing protection. Bluetooth/hands free devices for cell phones shall utilize only one ear.

c. Personnel shall wear required personal protective clothing and equipment while on the job.

d. Personnel on aircraft ramps/taxiways are prohibited from wearing loose clothing, badges, tags or equipment that could become a Foreign Object Damage (FOD) hazard.

6. Personnel Training. Supervisors shall provide, or coordinate with MCAS Cherry Point Safety to provide PPE training for their personnel. Personnel utilizing PPE shall be trained on the following:

- a. When PPE is necessary.
- b. What type of PPE is necessary and why.
- c. How to don, doff, adjust, and wear PPE properly.
- d. Limitations or hazards associated with the use of PPE.
- e. Proper care, maintenance, useful life, and disposal of PPE.

7. Respiratory Protection

a. The MCAS Cherry Point Respiratory Protection Program shall ensure compliance with policies and procedures established in reference (g). Chemical Biological Radiological and Nuclear (CBRN) personnel will be guided by reference (n).

b. Marine Corps personnel working in areas where they may be exposed to harmful levels of airborne dust, fogs, fumes, mists, gases, smokes, sprays, or vapors shall be provided appropriate respiratory protection at government expense. Station Safety will aid in determining the level of protection required.

c. The DSS shall designate a Respiratory Protection Program Manager (RPPM) for MCAS Cherry Point in writing (example provided at Appendix A). Directors shall establish a Respiratory Protection Program Assistant (RPPA). The RPPM designated by the DSS will provide consultation to RPPMs/RPPAs on all aspects of the Respiratory Protection Program.

d. The RPPM shall:

- (1) Complete one of the following courses before appointment:
 - (a) OSHA Training Institute Course 2220, Respiratory Protection.
 - (b) OSHA Training Institute Education Centers Course 2225, Respiratory Protection.
 - (c) Naval Occupational Safety and Health, and Environmental Training Center RPPM Course (A-493-0072).
 - (d) Respiratory Protection Course with at least 32 hours of training which covers: minimum program requirements and administration;

respirator types, selection, certification, and limitations; respirator cleaning, maintenance, and inspection; fit testing; respirator cartridge change out schedules; and medical considerations. The course must provide training in all aspects of reference (d).

(2) Assist Supervisors and RPPA's in developing written standard operating procedures (SOPs) governing the selection, issue, care, and use of respirators for their respective work centers and ensure they are posted in each general work area. SOPs shall include pertinent regulations, consensus standards, and emergency and rescue guidance, as necessary.

(3) Approve in writing, all purchases of nonstandard respiratory-protective equipment.

(4) Ensure tenants establish facilities for respirator storage, issue, cleaning, and maintenance as required.

(5) Conduct and assist RPPA's with annual training to all respirator users and their supervisors, as needed. Ensure all training is recorded.

(6) Ensure all respirator users receive a medical evaluation prior to being fit-tested. Ensure all medical information is recorded.

(7) Ensure all users of tight-fitting respirators are fit-tested initially and annually. Ensure all fit-testing is recorded.

(8) Maintain all records pertaining to respirator training and fit-testing.

(9) Conduct an annual audit of the Respiratory Protection Program using Bureau of Medicine and Surgery's (BUMED) checklist.

e. RPPAs

(1) Complete one of the following courses before appointment:

(a) Online ESAMS Respirator Protection Manager Training

(b) Respiratory protection course with at least 16 hours of training which covers: minimum program requirements and administration; respirator types, selection, certification, and limitations; respirator cleaning, maintenance, and inspection; fit testing; respirator cartridge change out schedules; and medical considerations. The course must provide training in all aspects of reference (d).

(2) Assist supervisors in developing written SOPs governing the selection, issue, care, and use of respirators for their respective work centers and insure they are posted in each general work area. SOPs shall include pertinent regulations, consensus standards, and emergency and rescue guidance, as necessary.

(3) Request an IH to conduct a health hazard evaluation of new or modified work operations to ensure appropriate respirators are specified.

(4) Inspect facilities for respirator storage, issue, cleaning, and maintenance as required.

(5) Conduct annual training for all respirator users and their supervisors as needed.

(6) Ensure all respirator users receive a medical evaluation prior to being fit-tested.

(7) Ensure all users of tight-fitting respirators are fit-tested initially and annually. Ensure all fit-testing information is documented.

(8) Maintain all records pertaining to respirator training and fit-testing. Assist with coordinating medical evaluations for user qualification or suitability and worker exposures with the Occupational Health Clinic as needed.

(9) Conduct an annual audit of the Respiratory Protection Program assigned using the BUMED checklist.

f. Supervisors shall:

(1) Assign a RPPA in writing to their department if respirators are required (example provided at Appendix A).

(2) Ensure only trained and medically qualified personnel are assigned to tasks requiring the use of respirators.

(3) Supervisors of work centers that utilize respirators shall develop work-site specific SOPs with assistance of their RPPA and post them in the general work area. SOPs shall include pertinent regulations, consensus standards, and emergency and rescue guidance, as necessary.

g. Respirator users shall:

(1) Use respirators per reference (d).

(2) Report work site problems involving use of respirators to their supervisors.

(3) Properly store, maintain, and clean the respirators issued to them.

h. Respirator Selection

(1) Respirators shall be selected by the RPPM in accordance with the guidelines of the IH Survey and reference (d).

(2) The responsible IH shall specify type of respirators.

i. Respirator Use

(1) Respirators shall be used as issued. No modifications or substitutions to the equipment are permitted.

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(2) Respirators shall be used only by the person to whom issued. Users shall inspect the respirators before donning.

(3) Respirators with tight-fitting face pieces shall not be worn by individuals with facial hair that interferes with the face piece seal to the face.

(4) Contact lenses worn with a respirator are authorized on a case-by-case basis by the Occupational Health Clinic only.

(5) A positive and negative pressure user seal check shall be performed each time an air-purifying respirator is donned.

(6) While using respiratory protection, if odor or taste from the work process is detected, difficulty in breathing is encountered, or other sign of leakage is present, the user shall leave the area without delay. Reentry shall not be permitted until the problem has been resolved by replacing cartridges or filters, adjusting respirator fit, or by other means, as necessary.

(7) When respirators are temporarily removed during breaks in work operations, removal shall be done away from the work area to prevent personnel exposure and keep the interior of the respirator face piece clean. Respirators shall be protected from contamination prior to re-donning.

(8) Chemical cartridge/canister air-purifying respirators may be used (up to their maximum use concentration) for protection against substances without good warning properties, including isocyanates, if a cartridge change out schedule is developed and implemented. Activities shall:

(a) Implement a change out schedule for chemical canisters/cartridges based on objective information or data that will ensure that canisters and cartridges are changed before the end of their service life. Activities must describe this data, along with the logic for relying on the change out schedule, in their respirator programs. The change out schedule should be included in written SOPs.

(b) Change chemical canisters/cartridges according to the manufacturer's directions, or based on objective data obtained as indicated in reference (d).

j. Voluntary Respirator Use. When respirators are not required, voluntary use of respirators are limited to a filtering face piece (Dust Mask), which will be selected by the RPPM. Marine Corps commands will supply the respirators. Personnel must be trained on the proper use and care of respirators; however, they do not have to be placed in the medical surveillance program.

k. Respirator Inspection

(1) Respirators shall be inspected before and after use.

(2) Respirators and self-contained breathing apparatuses kept for emergency use shall be inspected monthly. Records of inspection dates and findings shall be maintained.

l. Respirator Cleaning and Disinfecting. Respirators shall be cleaned and disinfected after each use. Follow procedures provided by the RPPM, manufacturer, or reference (d).

m. Storage of Respirators

(1) Clean respirators shall be stored in sealed plastic bags, away from sunlight, heat, extreme cold, excessive moisture, or damaging chemicals. The storage area shall be kept sanitary.

(2) Respirators shall be stored in such a way as to prevent crushing which can result in deformation of the face piece.

(3) Respirators shall not be stored by hanging from the head straps.

n. Repair and Maintenance

(1) Only trained and qualified personnel shall perform respirator assembly and repair.

(2) Repair of respirators shall be accomplished with the appropriate parts designated by the respirator manufacturer. Parts from one manufacturer will not be used on another manufacturer's respirators, including filters and cartridges.

(3) No attempt shall be made to replace, adjust, or repair respirator components beyond the manufacturer's recommendations.

o. Specifications. Breathing air for supplied air and self-contained breathing apparatus (SCBA) respirators must meet Grade D specifications of CGA Pamphlet G-7.1, Compressed Gas Association, Inc., Commodity Specification for Air.

p. Medical Examinations

(1) Activities shall not fit test personnel, or assign them to work in or permit them to enter, areas requiring respiratory protection unless medically evaluated by a physician or other licensed health care professional.

(2) Military personnel who have been confirmed by their command or medical activity as "Fit-for-Full Duty" based on their current periodic military physicals from Occupational Health, and their annual Preventive Health Assessment (PHA) are considered qualified to wear any type of respiratory protection.

(3) Users of prescription eye wear who must wear a full-face respirator shall be fitted with respirator spectacles as recommended by the respirator manufacturer and prescribed by an optometrist or ophthalmologist.

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q. Fit-Testing

(1) All users of negative-pressure respirators shall be fit-tested annually in a test atmosphere to ensure proper respirator fit.

(2) All users of negative-pressure air purifying respirators shall be trained in using positive and negative user seal checks prior to donning these respirators.

(3) Individuals with interfering facial hair will not be allowed to use respiratory protection equipment except for positive-pressure supplied air hoods where appropriate. Personnel with facial hair that interferes with the sealing surface of the respirator shall not be fit-tested.

(4) Fit-testing shall be performed per requirements of reference (d) and this Order.

r. Training. Personnel entered into the respiratory protection program shall be trained according to reference (d) which includes the nature and degree of respiratory hazards, respirator selection, donning, and fit-testing procedures, care of respirators (storage, cleaning, maintenance), respirator cartridge change out schedules, wear of contact lenses, and use and limitations of respirators (including signs and indications of respiratory failure). Personnel training records shall include entries for respirator training and fit testing.