

	<b>HARRISONBURG POLICE DEPARTMENT</b> General Orders	<b>Policy Number:</b> 606
	<b>Chapter:</b> Equipment/Technology	<b>Total Pages:</b> 6
	<b>Section:</b> Personal Protective Equipment	<b>Issue Date:</b> 07/02/2021
	<b>Issued By:</b> Kelley Warner, Chief of Police	<b>Effective Date:</b> 07/02/2021
	<b>Replaces:</b> All General Orders Previously Issued Relative to Subject	
<b>VALEAC Standards:</b>		

## A. POLICY AND PURPOSE

This policy identifies the different types of personal protective equipment (PPE) provided by the Department as well as the requirements and guidelines for the use of PPE.

This policy does not address ballistic vests or protection from communicable disease, as those issues are addressed in the Body Armor and Communicable Diseases policies. The Harrisonburg Police Department endeavors to protect officers by supplying certain PPE to officers as provided in this policy.

## B. ACCOUNTABILITY STATEMENT

All employees are expected to fully comply with the guidelines and timelines set forth in this policy. Responsibility rests with the supervisor to ensure that any violations of policy are investigated and appropriate training, counseling and/or disciplinary action is initiated. This directive is for internal use only and does not enlarge an employee's civil liability in any way. It should not be construed as the creation of a higher standard of safety or care in an evidentiary sense, with respect to third party claims. Violation of this directive, if proven, can only form the basis of a complaint by this department, and then only in a non-judicial administrative setting.

## C. DEFINITIONS

**Personal protective equipment (PPE)** - Equipment that protects a person from serious workplace injuries or illnesses resulting from contact with chemical, radiological, physical, electrical, mechanical or other workplace hazards.

**Respiratory PPE** - Any device that is worn by the user to protect from exposure to atmospheres where there is smoke, low levels of oxygen, high levels of carbon monoxide, or the presence of toxic gases or other respiratory hazards. For purposes of this policy, respiratory PPE does not include particulate-filtering masks such as N95 or N100 masks.

## **D. OFFICER RESPONSIBILITIES**

Officers are required to use PPE as provided in this policy and pursuant to their training.

Officers are responsible for proper maintenance and storage of issued PPE. PPE should be stored in an appropriate location so that it is available when needed.

Any officer who identifies hazards in the workplace is encouraged to recommend new or improved PPE or additional needs for PPE.

## **E. HEARING PROTECTION**

Approved hearing protection shall be used by officers during firearms training.

Hearing protection shall meet or exceed the requirements provided in 29 CFR 1910.95 and 16 VAC 25-90-1910.

## **F. EYE PROTECTION**

Approved eye protection, including side protection, shall be used by officers during firearms training. Eye protection for officers who wear prescription lenses shall incorporate the prescription (e.g., eye protection that can be worn over prescription lenses). Officers shall ensure their eye protection does not interfere with the fit of their hearing protection.

The Lead Firearms Instructor shall ensure eye protection meets or exceeds the requirements provided in 29 CFR 1910.95 and 16 VAC 25-90-1910.

## **G. HEAD AND BODY PROTECTION**

Civil Disturbance Units shall be provided ballistic head protection with an attachable face shield. Padded body protection consisting of chest, arm, leg, and groin protection should be provided as required.

## **H. RECORDS**

The Training Officer is responsible for maintaining records of all:

- a. PPE training.
- b. Initial fit testing for respiratory protection equipment.
- c. Annual fit testing.
- d. Respirator medical evaluation questionnaires and any subsequent physical examination results.
  - a. These records shall be maintained in a separate confidential medical file.

The records shall be maintained in accordance with the established records retention schedule (29 CFR 1910.1020; [16 VAC 25-90-1910](#)).

## I. RESPIRATORY PROTECTION

The Administrative Bureau Commander is responsible for ensuring a respiratory protection plan is developed and maintained by a trained and qualified member. The plan shall include procedures for (29 CFR 1910.134; [16 VAC 25-90-1910](#)):

- a. Selecting appropriate respiratory PPE based on hazards and risks associated with functions or positions.
- b. Fit testing, including identification of members or contractors qualified to conduct fit testing.
- c. Medical evaluations.
- d. PPE inventory control.
- e. PPE issuance and replacement.
- f. Cleaning, disinfecting, storing, inspecting, repairing, discarding, and otherwise maintaining respiratory PPE, including schedules for these activities.
- g. Regularly reviewing the PPE plan.
- h. Remaining current with applicable National Institute for Occupational Safety and Health (NIOSH), American National Standards Institute (ANSI), Occupational Safety and Health Administration (OSHA), Environmental Protective Agency (EPA) and state PPE standards and guidelines.

### a. RESPIRATORY PROTECTION USE

Designated officers may be issued respiratory PPE based on the officer's assignment (e.g., a narcotics investigator who is involved in clandestine lab investigations, CDU, SWAT, CNT).

Respiratory PPE may be worn when authorized by an incident commander who will determine the type and level of protection appropriate at a scene based upon an evaluation of the hazards present.

Incident commanders are responsible for monitoring members using respiratory PPE and their degree of exposure or stress. When there is a change in work area conditions or when an officer's degree of exposure or stress may affect respirator effectiveness, the incident commander shall reevaluate the continued effectiveness of the respirator and direct the officer to leave the respirator use area when the incident commander reasonably believes (29 CFR 1910.134; [16 VAC 25-90-1910](#)):

- a. It is necessary for the officer to wash his/her face and the respirator facepiece to prevent eye or skin irritation associated with respirator use.
- b. The officer detects vapor or gas breakthrough, or there is a change in breathing resistance or leakage of the facepiece.
- c. The officer needs to replace the respirator, filter, cartridge, or canister.

### b. OFFICER RESPONSIBILITIES FOR RESPIRATORY PROTECTION

Officers shall not use self-contained breathing apparatus (SCBA), full-face respirators or cartridge respirators unless they have completed training requirements for the equipment.

Officers exposed to environments that are reasonably known to be harmful due to gases, smoke or vapors shall use respiratory PPE.

Officers using respiratory PPE shall (29 CFR 1910.134; [16 VAC 25-90-1910](#)):

- a. Ensure that they have no facial hair between the sealing surface of the facepiece and the face that could interfere with the seal or the valve function. Officers also shall ensure that they have no other condition that will interfere with the face-to-facepiece seal or the valve function.
- b. Not wear corrective glasses, goggles or other PPE that interferes with the seal of the facepiece to the face, or that has not been previously tested for use with that respiratory equipment.
- c. Perform a user seal check per department-approved procedures recommended by the respirator manufacturer each time they put on a tight-fitting respirator.
- d. Leave a respiratory use area whenever they detect vapor or gas breakthrough, changes in breathing resistance or leakage of their facepiece and ensure that the respirator is replaced or repaired before returning to the affected area.

#### c. GAS MASK

Full-face air-purifying respirators, commonly referred to as gas masks, may be fitted with mechanical pre-filters or combination cartridge/filter assemblies for use in areas where gases, vapors, dusts, fumes or mists are present. Officers must identify and use the correct cartridge based on the circumstances (29 CFR 1910.134; [16 VAC 25-90-1910](#)).

A incident commander may order the use of gas masks in situations where the use of a SCBA is not necessary. These incidents may include areas where tear gas has or will be used or where a vegetation fire is burning. Gas masks shall not be used if there is a potential for an oxygen-deficient atmosphere.

Officers shall ensure their gas mask filters are replaced whenever:

- a. They smell, taste or are irritated by a contaminant.
- b. They experience difficulty breathing due to filter loading.
- c. The cartridges or filters become wet.
- d. The expiration date on the cartridges or canisters has been reached.

#### d. SELF-CONTAINED BREATHING APPARATUS

Incident commanders may direct officers to use SCBA when entering an atmosphere that may pose an immediate threat to life, would cause irreversible adverse health effects or would impair an individual's ability to escape from a dangerous atmosphere. These situations may include, but are not limited to:

- a. Entering the hot zone of a hazardous materials incident.
- b. Entering any area where contaminant levels may become unsafe without warning, or any situation where exposures cannot be identified or reasonably estimated.
- c. Entering a smoke or chemical filled area.

The use of SCBA on a scene should not cease until approved by a incident commander.

#### e. RESPIRATOR FIT TESTING

No officer shall be issued respiratory PPE until a proper fit testing has been completed (29 CFR 1910.134; [16 VAC 25-90-1910](#)).

After initial testing, fit testing for respiratory PPE shall be repeated (29 CFR 1910.134; [16 VAC 25-90-1910](#)):

- a. At least once every 12 months.
- b. Whenever there are changes in the type of SCBA or facepiece used.
- c. Whenever there are significant physical changes in the user (e.g., obvious change in body weight, scarring of the face seal area, dental changes, cosmetic surgery or any other condition that may affect the fit of the facepiece seal).

The employee must be fit tested with the same make, model, style, and size of respirator that will be used and is a tight-fitting facepiece respirator that passes an appropriate fit test, per 29 CFR 1910.134(f) and using the accepted protocols from 29 CFR 1910:134 App A.

#### f. RESPIRATORY MEDICAL EVALUATION QUESTIONNAIRE

No officer shall be issued respiratory protection that forms a complete seal around the face until (29 CFR 1910.134; [16 VAC 25-90-1910](#)):

- a. The member has completed a medical evaluation that includes a medical evaluation questionnaire.
- b. A physician or other licensed health care professional has reviewed the questionnaire.
- c. The officer has completed any physical examination recommended by the reviewing physician or health care professional.

## J. TRAINING

Officers should be trained in the respiratory and other hazards to which they may be potentially exposed during routine and emergency situations.

All officers shall be trained in the proper use and maintenance of PPE issued to them, including when the use is appropriate; how to put on, remove and adjust PPE; how to care for the PPE; and the limitations (29 CFR 1910.132; [16 VAC 25-90-1910](#)).

Officers issued respiratory PPE shall attend annual training on the proper use of respiratory protection devices (29 CFR 1910.134; [16 VAC 25-90-1910](#)).