This briefing is written for long term care employers to help leaders with basic information and where to get more help.

**Limiting the need for respirators**

Make changes to care settings and work practices to reduce the need for respiratory protection.

- Limit the number of workers providing direct care to patients. Combine tasks so additional workers don’t need to be in close proximity.
- In consultation with medical staff, consider placing COVID-19 patients together in the facility to minimize the number of staff needing to work with these patients.
- Set up staging areas away from patients so equipment and materials can be dropped off or picked up by workers without coming into close proximity.
- Use curtains or other barriers to limit the spread of contamination.
- Use other required PPE (eye protection, gloves, gowns), handwashing, use of sanitizer and good disinfection practices and following standard precautions.
- Have patients wear masks when workers are near.

**N95 Respirators and Surgical Masks**

Employees who work within six feet of suspect or confirmed COVID-19 patients are at highest risk of person-to-person spread. Employers need to assess these situations for use of face masks. Two types of masks are commonly used in these situations.

Surgical masks (also called procedure masks) are loose-fitting cloth masks, sometimes fitted with a face shield for eye protection. They primarily protect others from drops and splatter generated during coughs, sneezes, and just breathing. The wearer is protected from direct contact with large drops and sprays such as from coughs and sneezes, but is not protected from fine particles or mists that might be generated by some medical procedures that generate aerosols, such as a nebulizer treatment.

N95 respirators are masks designed to protect the wearer from fine particulates and mists. These masks form a seal with the face so all air breathed by the worker comes through the filter material. When available, an N95 respirator is preferred to ensure workers are protected from any contamination residual in the air. N95 respirators and other filtering facepiece respirators should have a NIOSH-approval “TC” number printed on the mask or in product packaging.

N95s are the minimum level of respirator filtration but provide effective protection from known COVID-19 exposure. Other types of NIOSH-approved face masks/respirators offer more protection and can be used instead of N95 respirators, such as:

- Other filtering facepiece models that are rated N99-N100, R95-R100, or P95-P100.
- Half or full-facepiece models with replaceable N-, R-, or P-, 95, 99, or 100 filters attached to a rubber-like (elastomeric) facepiece.
Hood or helmet-type Powered Air-Purifying Respirators (PAPR) equipped with P-100 (or HEPA) filters.

**Alternate strategies when N95 respirators are not available**

Face masks, such as loose-fitting surgical masks and other face masks that lack a NIOSH-approval “TC” number can be used on patients to minimize respiratory emissions; however, employers should not rely on these face masks for employees if NIOSH-approved respirator supplies are available.

When NIOSH-approved supplies are limited, employers should follow CDC guidelines to choose the best respiratory protection available under “conventional”, “contingency”, and “crisis” conditions.

**Required vs. Voluntary Use of Respirators**

In low-risk exposure situations where respirators aren’t considered necessary, employees may request to use a respirator voluntarily. Voluntary users may use other types of face masks due to possible shortages of N95 respirators and other NIOSH-approved face masks and respirators.

Before employees use an N95 respirator voluntarily, they must have been provided the information in WAC 296-842-11005 Table 2.

**Respiratory Protection Program**

Before requiring respirators at work, employers must:

- Develop a written respiratory protection program and designate a program administrator.
  - www.Lni.wa.gov/dA/d029304375/RespProtectguide2.doc
- Provide appropriate respirators such as N95 respirators, powered air purifying respirators, or elastomeric respirators.
- Ensure workers are medically cleared for use, fit-tested, and trained on proper use and maintenance. Note: Under this contingent situation for COVID-19, employees in health care who have been fit-tested for a particular mask will not need annual retesting for that mask.
- Instruct workers who use N95 respirators and other tight-fitting respirators to remain clean shaven in areas where it contacts the face to ensure an air-tight seal.
- Follow other requirements outlined in the respirator rule WAC 296-842 to ensure ongoing, reliable protection. www.Lni.wa.gov/safety-health/safety-rules/rules-by-chapter/?chapter=842

**Limited re-use of N95 respirators when caring for COVID-19 patients**

Limited re-use of N95 respirators might become necessary. However, caution should be used. Re-use should be according to CDC guidance.

**Training resources:**

- www.osha.gov/SLTC/respiratoryprotection/training_videos.html#video
- Module one at this link is a PowerPoint training for filtering facepiece respirators: www.Lni.wa.gov/safety-health/safety-training-materials/training-kits#RespProtection

**What if I have Active Covid-19 patient?**


**Get help**

For a free safety and health consultation go to www.Lni.wa.gov/SafetyConsultants or call 1-800-423-7233 or visit a local L&I office.

Upon request, foreign language support and formats for persons with disabilities are available. Call 1-800-547-8367. TDD users, call 711. L&I is an equal opportunity employer.