Summary of Worker Safety / Protection Regulations

Prepared Specifically for Urban Pesticide Use

Revised January 2010

DPR would like to thank the Sacramento County Agricultural Commissioner’s Office for development of this overview document.

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Worker Safety Summary

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Forms Attached
- Respirator Use Requirements Flow Chart
- Voluntary Respirator Use Posting [subsection (r)]
- Medical Recommendation Form [subsection (s)]
- Respirator Fit Test Record
- Respirator Program Annual Evaluation & Consultation
- Pesticide Application Record
- Written Pesticide Safety Training Program
- Pesticide Safety Training Record (English)
- Pesticide Safety Training Record (Spanish)
This summary is intended to briefly introduce those laws and regulations which pertain to the use of pesticides in **urban** situations. Urban situations commonly include structural pest control in residential, commercial & institutional settings, landscape maintenance, and non-production agriculture such as cemeteries, golf courses, parks and right of ways. This summary does NOT address all of the requirements for pesticide use in production agriculture (including nurseries, farms & timber) or research production, and is not intended as a substitute for the official copies of the laws and regulations pertaining to worker protection and hazard communication.

**Worker Safety CCR 6700-6795**

The regulations found in the Food and Agricultural Code (FAC) and Title 3 of the California Code of Regulations (CCR) specify work practices for all employees who in any way handle pesticides.

**Scope CCR 6700**

In general, the requirements are designed to reduce the risk of pesticide exposure, to assure medical services when employees are exposed, and to provide safe working conditions for workers. Each employer and employee is fully responsible for compliance with each regulation contained in this worker safety package.

**Employer Responsibility CCR 6702**

The employer is responsible for knowing the applicable safe use requirements in state and federal regulations as well as on pesticide container labels. The employer must communicate to all employees in the language they understand, the pesticide being used and the protective clothing, equipment and procedures to follow, and shall furnish necessary supervision to make certain all aspects are properly followed.

The employer must provide a safe work place and must require employees to follow safe work practices. It is the responsibility of the employer to ensure that employees handle and use pesticides in accordance with all regulations and label requirements.

**Employee Responsibility CCR 6702**

Employees shall utilize the personal protective equipment and other safety equipment required by pesticide product labeling or specified in the worker safety regulations that has been provided by the employer at the work site in a condition that will provide the safety or protection intended by the equipment.
The Director of the State Department of Pesticide Regulation (DPR) or the County Agricultural Commissioner have the right, without prior notification during business hours, to enter and inspect at reasonable times and in a reasonable manner any of the following items:

1. Records concerning work hours, training and medical monitoring of employees
2. Areas where pesticides are handled, stored or applied
3. Equipment (including protective clothing & equipment) used to store, transport or handle pesticides
4. All records pertaining to pesticide use, handling, storage or handling pesticides
5. Change areas
6. Pesticides, tank mixtures and containers suspected of containing pesticides

When investigating an alleged employee illness or a safety violation regarding the use of a pesticide, the Director or Commissioner may confidentially interview the employee during work hours.

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**Worker Safety Summary**

**Definitions of Regulatory Terms**

**DEFINITIONS – (CCR 6000)**

The following definitions are provided to facilitate a better understanding of the regulations in this summary. Please refer to the regulations for a complete list of definitions.

*“Assure” or “Ensure”* means to take all reasonable measures so that the behavior, activity or event in question occurs. When the behavior, activity or event in question involves or concerns an employee, reasonable measures by an employer include determining that the employee has the knowledge to comply; providing the means to comply; supervising the work activity; and having and enforcing a Written Workplace Disciplinary Policy covering the employer’s requirements, as well as other reasonable measures required by pesticide law or this division.

*“Air–purifying respirator”* means a respirator with an air-purifying filter, cartridge or canister that removes specific air contaminants by passing ambient air through the air-purifying element.

*“Confidential reader”* is a person chosen by an employee required to wear a respirator to read to him/her the Medical Evaluation Questionnaire required under CCR Section 6739 in a language primarily understood by the employee. This includes, but is not limited to, a coworker, family member, friend or an independent translator provided by the employer. The employer or the employer’s direct agent (such as supervisor, manager, foreman or secretary) are not included and are prohibited from being confidential readers.
“Coverall” means a one or two piece garment of closely woven fabric or equivalent that covers the entire body (except the head, hands and feet) and must be provided by the employer as personal protective equipment. Coverall differs from and should not be confused with work clothing that can be required to be provided by the employee.

“Employee” means any person who, for any kind of compensation, performs work, services or activities covered by this division.

“Employer” means any person who exercises primary direction and control over the work, services or activities of an employee. A foreman, crew leader, supervisor, or similarly situated person represents the employer when hiring an employee or when exercising, or have responsibility for exercising, the primary direction and control, but is not considered the employer himself or herself.

“Filtering face piece (dust mask type respirator)” means a negative pressure particulate respirator with a filter as an integral part of the face piece or with the entire face piece composed of the filtering medium.

“Handle” means mixing, loading, transferring, applying (including chemigation) or assisting with the application (including flagging) of pesticides, servicing, repairing, cleaning or handling equipment used in these activities that may contain residues, working with opened (including emptied but not rinsed) containers of pesticides, adjusting, repairing or removing treatment site coverings, incorporating (mechanical or watered-in) pesticides into the soil, entering a treated area during any application or before the inhalation exposure level listed on pesticide product labeling has been reached or greenhouse ventilation criteria have been met, or performing the duties of a crop advisor, including field checking or scouting, making observations of the well being of the plants, or taking samples during an application or any restricted entry interval listed on pesticide product labeling. Handle does not include local, state, or federal officials performing inspections, sampling or other similar official duties.

“Personal Protective Equipment” (PPE) means apparel and devices worn to minimize human contact with pesticides or pesticide residues, that must be provided by an employer and are separate from, or in addition to, work clothing. PPE may include chemical resistant suits, chemical resistant gloves, chemical resistant footwear, respiratory protection devices, chemical resistant aprons, chemical resistant headgear, protective eyewear, or a coverall (one or two piece garment).

“Pesticide” means
(a) Any substance or mixture of substances that is a pesticide as defined in the Food & Agriculture Code and includes mixtures and dilutions of pesticides;
(b) As the term is used in Section 12995 of the Food & Agriculture Code, includes any substance or product that the user intends to be used for the pesticidal poison purposes specified in Sections 12753 & 12758 of the Food & Ag Code.

“Pesticide Safety Information Series (PSIS)” means a series of leaflets that summarize health and safety aspects of various pesticides and groups of pesticides.

“Pesticides in toxicity category 1” means pesticide products which are required to prominently display the signal word “DANGER” on the label.
“Pesticides in toxicity category 2” means pesticide products which are required to prominently display the signal word “WARNING” on the label.

“Pesticides in toxicity category 3” means pesticide products which prominently display the signal word “CAUTION” on the label.

“Physician or other licensed health care professional (PLHCP)” means an individual whose legally permitted scope of practice allows him or her to independently provide, or be delegated the responsibility to provide some or all of the health care services required by these regulations.

“Qualitative fit test (QLFT)” means a pass/fail test to assess the adequacy of respirator fit that relies on the individual’s response to the test agent.

“Quantitative fit test (QNFT)” means an assessment of the adequacy of respirator fit by numerically measuring the amount of leakage into the respirator.

“Respirator Program Administrator” is a person who is qualified by appropriate training or experience that is commensurate with the complexity of the respiratory protection program and demonstrates knowledge necessary to administer a respiratory protection program. Such training or experience includes, but is not limited to, reading and understanding either the American National Standard for Respiratory Protection Publication (ANSI Z88.2) or the US Dept. of Labor’s “Small Entity Compliance Guide for the Revised Respiratory Protection Standard”; or completing specific course work on developing a respiratory protection program from college or a respirator manufacturer’s authorized representative; or is an American Board of Industrial Hygiene Certified Industrial Hygienist.

“Work clothing” means garments such as long sleeved shirts, short sleeved shirts, long pants, short pants, shoes and socks. Work clothing is not considered personal protective equipment although pesticide product labeling or regulations may require specific work clothing during some activities. Work clothing differs from and should not be confused with a coverall. While coveralls shall be provided by the employer, work clothing can be required to be provided by the employee. Short sleeved shirts and short pants are acceptable work clothing only under conditions expressly permitted by pesticide product labeling.

No person under 18 years of age shall be permitted to mix or load a pesticide that requires use of SCBA, closed system or full body chemical resistant protective clothing (CCR 6612).
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Handler Training

HAZARDOUS COMMUNICATION – CCR 6723

Employers must provide workers with information about pesticides. Employers must display for workers a copy of DPR’s PSIS N-8 (non-production ag) in an accessible area. Before displaying, employers must fill-in the spaces provided on the leaflet with information regarding emergency medical care, the location of pesticide use records and MSDS’s.

HANDLER TRAINING – CCR 6724

Employers shall assure that employees who handle pesticides are trained before the employee is allowed to handle any pesticides. After the initial training, training must be conducted every 12 months (annually) thereafter. The training must also be updated throughout the year when new pesticides are to be handled. The training must be given in a language and/or manner the employee understands. This training shall be documented, signed by the employer & employee, and retained by the employer for two years.

NOTE: A valid current certified applicator (i.e. QAL or QAC holder, structural field representative or structural operator) is considered trained for the purposes of this section. The training shall include, at minimum, information from the product labels, MSDS & PSIS. The training shall cover, for each pesticide or chemically similar group of pesticides, to be used:

- Understanding and recognizing the information on the pesticide label that relates to human health hazards (i.e. the precautionary statements)
- The health hazards of pesticides, including acute & chronic effects, delayed effects and sensitization that are identified in the label, MSDS or Pesticide Safety Information Series (PSIS)
- Routes by which pesticides enter the body
- Signs & symptoms of overexposure
- Emergency first aid for pesticide overexposure
- How to obtain emergency medical care
- Routine & emergency decontamination procedures, including spill clean up and the need to thoroughly shower with soap & water following the exposure period
- PPE – the need for, proper use, limitations and sanitation of
- Heat related illness – prevention, recognition and first aid
- Safety requirements and procedures for handling, transporting, storing & disposing of pesticides
- Environmental concerns such as drift, runoff & wildlife hazards
- Warnings about taking pesticides or pesticide containers home
- The laws & regulations relating to pesticide safety, MSDS & PSIS
- The employees rights including:
  - The right to personally receive info about pesticides to which they may be exposed
  - The right for their physician or employee representative to receive that same info
  - Protection against retaliatory action due to the exercise of any of their rights
EMERGENCY MEDICAL CARE - CCR 6726

Employers must plan for emergency medical care for employees *before* they handle pesticides. The employer shall locate a facility where emergency medical care is available for employees who will be handling pesticides.

The employer shall post at the office and in the work vehicles, the name, address, and telephone number of a facility able to provide emergency medical care whenever employees will be handling pesticides.

When there are “reasonable grounds” to suspect that an employee has a pesticide related illness or when exposure to a pesticide has occurred, the employer shall ensure that the employee is *taken* to a physician immediately. Reasonable grounds includes the employee being visibly contaminated, such as splashed or drenched, or showing pesticide related symptoms.

TRAINING PROGRAM/TRAINING RECORDS – 6724

The employer must maintain a written training program that describes the materials used to train employees and identifies the person that provides the training.

The employer must maintain training records for each employee that handles pesticides. The records must contain the date (day, month, year) and extent of initial and subsequent training, verified by the employee’s signature and accessible at a central location. The records must be maintained for two years. (This packet contains a sample training record)

**Reminder:** The training must be conducted *prior* to handling pesticides, continually updated to include new pesticides and must be conducted every 12 months (annually).
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Decontamination/ Coveralls/ PPE

HANDLER DECONTAMINATION FACILITIES – CCR 6734

When employees handle pesticides with the signal word “Danger” or “Warning”, the employer shall assure that sufficient water, soap, and single use towels for routine washing of hands and face and for emergency eye flushing and washing of the entire body are available. The decontamination facility shall be within 100 feet of the mix/load site.

COVERALLS – CCR 6736

The employer shall provide coveralls for each employee who handles any pesticide with the signal word “Danger” or “Warning” on the label. (See CCR section 6000 for definition of coveralls)

The employer shall assure that:

- The employees handling category 1 or 2 pesticides start each work day wearing coveralls
- The employees wear the coveralls when handling category 1 or 2 pesticides
- The employees change out of their coveralls and wash at the end of the work day
- Potentially contaminated coveralls are removed at the worksite or headquarters and are not taken home by the employee
- Employees who do not return to headquarters at the end of the work day, remove and store potentially contaminated coveralls in a sealable container outside their living quarters for later return to the employer

EXEMPTION: This section does not apply to employees using fumigants unless the pesticide label expressly requires the use of coveralls.

PERSONAL PROTECTIVE EQUIPMENT – CCR 6738

NOTE: Protective eyewear and chemical resistant gloves are required to be worn at minimum to comply with worker safety requirements, even if the product labeling does not specify that eye protection and gloves must be used when handling the product (unless prohibited by labeling).

(a) PPE PROVISION AND MAINTENANCE

The employer shall provide all necessary personal protective equipment and provide for its daily inspection, cleaning, repair and replacement if needed. The employer shall further assure that all clean personal protective equipment be stored in a clean, pesticide-free designated place separate from personal clothing. All personal protective equipment provided by the employer shall remain the property of the employer. The employer shall keep and wash potentially contaminated personal protective equipment separately from other clothing or laundry & inform anyone hired to clean such equipment of the nature of the possible contamination and proper handling.
(b) CHEMICAL RESISTANT EYEWEAR

The employer shall assure that employees wear protective eyewear when applying pesticides by hand or ground application.

Protective eyewear includes:

1. Safety glasses with front, temple and brow protection
   
   **NOTE:** Common eyeglasses, including sunglasses, do NOT meet this requirement!

2. Goggles

3. Face shield

4. Full face mask in conjunction with respirator

If the pesticide label specifies a certain type of eye protection, such as goggles, then that type of eye protection must be worn.

**EXEMPTIONS:** Protective eyewear is not required when (1) vertebrate baits are placed without being propelled from application equipment or solid fumigants are applied to vertebrate burrows (2) baiting insect monitoring traps (3) applying solid non-insecticidal lures (4) when injecting or incorporating pesticides into soil from ground equipment (5) when working in an enclosed cab (6) when spray nozzles are located below the employee and nozzles are pointed downward.
How To Verify That Safety Glasses Are Acceptable.

Follow these simple steps to determine if proper safety glasses are being used.

Step 1. Determine if protective eyewear has acceptable brow and temple protection.

Figure A

This is **not considered** acceptable protective eyewear. The pencil test shown in Figure A indicates that the pencil can easily be placed between the glasses and the face and freely rotate within the surrounding space. This illustration shows that there is no supplemental "brow and temple protection" provided by these glasses.

Figure B

This is **considered** acceptable protective eyewear. The pencil test shown in Figure B indicates that the pencil cannot easily be placed between the glasses and the face and freely rotate within the surrounding space. This illustration shows that there is supplemental "brow and temple protection" provided by these glasses.

Step 2. Determine if protective eyewear is approved for use.

Figure C

The ANSI Z87.1 marking will be printed or stamped somewhere on the glasses as shown in Figure C.
The following table provides examples of acceptable eye protection PPE.

<table>
<thead>
<tr>
<th>Labeling Statement</th>
<th>Acceptable PPE</th>
<th>Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protective eyewear</td>
<td>• Shielded safety glasses; or</td>
<td>Safety glasses with supplemental brow and temple protection</td>
</tr>
<tr>
<td>-OR-</td>
<td>• Face shield; or</td>
<td></td>
</tr>
<tr>
<td>Safety glasses</td>
<td>• Goggles; or</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Full-face respirator</td>
<td></td>
</tr>
<tr>
<td>Goggles</td>
<td>• Goggles; or</td>
<td>Goggles</td>
</tr>
<tr>
<td></td>
<td>• Full-face respirator</td>
<td></td>
</tr>
<tr>
<td>Face shield</td>
<td>• Face shield; or</td>
<td>Face shield</td>
</tr>
<tr>
<td></td>
<td>• Full-face respirator</td>
<td></td>
</tr>
<tr>
<td>Full-face respirator</td>
<td>• Full-face respirator</td>
<td>Full-face respirator</td>
</tr>
</tbody>
</table>
(c) CHEMICAL RESISTANT GLOVES

The employer shall assure that employees wear gloves when they are engaged in applying, mixing, loading, cleaning, or using application equipment that contains pesticides. They must also wear gloves when making a pesticide application by hand or using hand held equipment.

Gloves must be chemical resistant. Often labeling will specify the type of glove that is resistant to the pesticide being used. If the labeling does not require a specific type of glove, then gloves made of rubber, neoprene or other chemical resistant material that provides equivalent or better protection must be used. Employees must not use gloves made of leather or cotton, or gloves with cloth linings unless expressly permitted by the pesticide label.

Flocked or lined gloves are prohibited but disposable separate glove liners are allowed under certain conditions to make wearing chemical resistant gloves more comfortable.

The use of glove liners is allowed only when the following conditions are met:
- Pesticide product labeling does not prohibit the use of glove liners
- Gloves liners must be separable from the chemical resistant gloves
- Liners must be discarded at the end of the work day
- Liners must be discarded immediately if directly contacted by the pesticide.
- Contaminated liners must be disposed of in accordance with Federal, state or local regulations.
- Liners must not extend outside the gloves

When glove liners are utilized improperly, the responsible person is in violation of Title 3CCR §6738(c)(2).

NOTES:
- Check the gloves for tears and determine the manufacturer’s specifications. Excessively contaminated, ripped or cracked gloves are not adequate protective equipment and are not in compliance.
- Latex gloves are only considered chemical resistant for dry or aqueous-based formulations that are designated as category “A” on the pesticide label. This glove type is designated as “natural rubber” and should be a minimum 14 mils thick according to U.S. EPA guidelines.
- Disposable gloves are generally not suitable for hand protection while handling pesticides. Use may be allowed for short-term, light-duty situations if the glove is rated for the chemical resistance to the pesticide(s) used and little stress is places on the glove.
- Some fumigant labeling prohibits wearing gloves when handling the fumigant.
How To Verify That Gloves Are Acceptable

**WPS glove categories**

The federal Worker Protection Standard requires that labeling of pesticides used on farms, forests, nurseries and greenhouses list the type of gloves that must be worn with each product. Labeling will refer to chemical-resistance categories (A-H) for gloves.

Gloves in these categories are made of materials that the pesticide cannot pass through and are often based on the solvents used in the pesticides, **not** the pesticides themselves. Therefore, there will be instances where the same pesticide with two different formulations (for example, a wettable powder and an emulsifiable concentrate) of the same pesticide will require gloves from two different chemical-resistance categories.

**Glove table**

The following table provides guidance on what glove types are acceptable PPE for hand protection.

<table>
<thead>
<tr>
<th>Labeling Statement</th>
<th>Acceptable PPE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waterproof gloves</td>
<td>Any rubber or plastic gloves sturdy enough to remain intact throughout the task being performed</td>
</tr>
<tr>
<td>Chemical-resistant gloves</td>
<td>Any gloves that are resistant to the chemical(s) being handled.</td>
</tr>
<tr>
<td>or Chemical-resistant gloves such as butyl or nitrile</td>
<td>Barrier-laminate gloves; or other gloves as referenced below in the glove category selection key (see below) or the DPR wallet-sized card.</td>
</tr>
</tbody>
</table>

**Glove category selection key**

The following text box contains the same information found on the DPR distributed wallet-sized cards mentioned above.

<table>
<thead>
<tr>
<th>DPR GLOVE CATEGORY SELECTION KEY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Labeling Code</td>
</tr>
<tr>
<td>---------------</td>
</tr>
<tr>
<td>A</td>
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<tr>
<td>B</td>
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<td>C</td>
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<td>F</td>
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<tr>
<td>G</td>
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<tr>
<td>H</td>
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</tbody>
</table>

All but Laminate and Polyethylene must be 14 mils or thicker.
(d) CHEMICAL RESISTANT FOOTWEAR

When chemical resistant footwear is specified by the product labeling, one of the following types of footwear is required:

- Chemical resistant shoes
- Chemical resistant boots or
- Chemical resistant coverings worn over boots or shoes

(e) CHEMICAL RESISTANT HEADGEAR

When the pesticide labeling specifies chemical resistant headgear, either a chemical resistant hood or a chemical resistant hat with a wide brim is required.

(f) CHEMICAL RESISTANT APRON

When the pesticide labeling specifies chemical resistant apron, a chemical resistant garment that covers the front of the body from mid chest to the knees is required.

(g) CHEMICAL RESISTANT SUIT

When the pesticide labeling or regulations specify chemical resistant suit, waterproof or impervious pants and coat or a rain suit, a chemical resistant suit that covers the torso, head, arms and legs is worn.

SAFE EQUIPMENT – CCR 6742

The employer shall assure that equipment used for mixing, loading, transferring, or applying pesticides is inspected before each day of use and equipment with any safety defect is repaired or altered to remove the hazard before further use. All openings on mix or spray tanks shall be equipped with covers that will prevent splashes and spills.

Any mix or spray tank with a capacity of more than 49 gallons used for category 1 or 2 pesticides, shall either have means to indicate externally the internal liquid level in the tank such as a sight gauge; or the tank or the filler hose nozzle shall have a device that will automatically stop filling before the pesticide liquid mixture spills over the top.

EQUIPMENT MAINTENANCE – CCR 6744

Persons who own or operate pesticide mixing, loading or application equipment shall inform each employee under their control who may be involved in the cleaning, servicing or repair of that equipment the hazards of the pesticides that person may encounter and the methods of protection against personal injury.

If such cleaning, servicing or repairing is to be performed by persons not under the control of the owner or operator of the equipment, he shall notify the person in charge of performing these services.

Employees who clean, service or repair mixing and application equipment shall be provided with any necessary protective equipment or clothing by their employer and shall be instructed and supervised in the maintenance operation in a manner that will reduce work hazards.
RESPIRATORY PROTECTION – CCR 6739 (Effective January 1, 2008)

New Respiratory Protection regulations have recently been adopted by the California Department of Pesticide Regulation (DPR), which were patterned after Cal-OSHA’s regulations. This handout outlines the major changes in the regulations and the requirements that the regulated industry must meet to be in compliance.

You may refer to our website at http://www.agcomm.saccounty.net for useful links related to the new regulations. On our homepage, select the “News & Updates – Resource Page on the Respiratory Protection Regulations” box. The complete text of the new regulations (Section 6739, Title 3, California Code of Regulations), as well as a generic guidance document (HS-1513) for developing a respirator program, are both available as links for you to review. You may also refer to DPR’s website for current updates at http://www.cdpr.ca.gov.

In any workplace where respirators are required by label, restricted materials permit condition, regulation or employer, the employer shall establish a written Respiratory Protection Program with specific work site procedures. The Respirator Program Administrator designated by the employer (see definitions) shall administer the Respiratory Protection Program in compliance with this section. The employer shall provide respirators, training & medical evaluations at no cost to the employee.

The employer shall include the following procedures/provisions in the written Respiratory Protection Program:

(a) Procedures for selecting respirators for use in the workplace
(b) Medical evaluations of employees required to use respirators
(c) Fit testing procedures
(d) Procedures for proper & routine use of respirators
(e) Procedures & schedules for cleaning, disinfecting, storing, inspecting, repairing, discarding & maintenance
(f) Procedures to ensure adequate air quality, quantity & flow of breathing air for atmosphere-supplying respirators
(g) Training of employees in the respiratory hazards to which they are potentially exposed during routine & emergency situations
(h) Training in the proper use of respirators, including putting on & removing them, limitations of use, & maintenance
(i) Procedures for evaluating the effectiveness of the program

The following are some of the most important requirements in the new respiratory regulation.

(1) Medical Evaluations: The employer must ensure that a medical evaluation is conducted to determine the employee’s ability to use a respirator before the employee is fit tested or required to use the respirator in the workplace.

(2) The employer must identify a physician or PLHCP (see definitions) to perform medical evaluations using the medical questionnaire in CCR Section 6738, subsection (q) or an equivalent form. (See copy of form attached to this packet) The medical questionnaire & examinations shall be administered confidentially during the employee’s normal working hours or at a time & place that is convenient to the employee and in a manner that ensures that the employee understands its content. The physician shall perform the medical evaluation using the medical questionnaire or by an initial medical examination.
employer must provide additional evaluations if the employee reports medical symptoms that are related to the ability to use a respirator, a physician/supervisor informs the employer that an employee needs to be reevaluated or information from the Respiratory Program Administrator, including observations made during fit testing & program evaluation, indicates a need for employee reevaluation.

(3) Provide the PLHCP with a copy of the Written Respiratory Protection Program and a copy of Title 3, CCR Section 6739.

(4) **Medical Recommendations**: obtain a written medical recommendation from the PLHCP regarding the employee’s ability to use the respirator which must be provided on the form in CCR 6739, subsection (s) or in substantially similar wording. (see copy of form attached to this packet)

(5) **Program Evaluations**: conduct evaluations of the workplace as necessary to ensure that the Written Respiratory Program is being followed. The employer must annually consult employees required to use respirators to assess the employees’ views on program effectiveness and to identify any problems. Problems identified during the assessment must be corrected.

A written record of these evaluations and consultations must be documented and contain at least:

(a) Name of workers consulted.
(b) Date of evaluation/consultations.
(c) Description of any finding from the evaluation/consultation

(6) **Recordkeeping**: retain written information regarding medical evaluations, fit testing and the respirator program. Records must be maintained while the employee is required to use respiratory protection and for three (3) years after the end of employment conditions requiring respiratory protection. These records must be available for inspection by the employer, the commissioner or the Director (DPR) and will be reviewed during the annual Headquarters inspection.

(7) **Fit Testing**: The employer must assure that employees using tight fitting facepieces pass an appropriate fit test prior to initial use of a respirator and at least annually thereafter.

(8) **Training & Information**: Training must be conducted prior to an employee using a respirator. Retraining must be done annually and when the following situations occur: (1) changes in the workplace or respirator render previous training obsolete (2) inadequacies in the employee’s knowledge or use of a respirator indicate retraining is necessary or (3) any other situation arises in which retraining appears necessary.

Among other things, the employer must ensure that the employee can demonstrate the following knowledge:

- Why the respirator is necessary
- What the limitations & capabilities of the respirator are
- How to inspect & maintain the respirator
- How to recognize medical signs & symptoms that may limit or prevent effective use of the respirator

Other requirements in Section 6739 not specifically discussed in this summary include the following topics: selection of respirators, facepiece seal protection, procedures for Immediately
Dangerous to Life or Health (IDLH) atmospheres, cleaning & disinfecting, storage of emergency respirators, inspection & repair, breathing air quality & use, identification of filters, cartridges & canisters & end of service life.

It is the employer’s responsibility to understand the respirator regulations and to implement the applicable portions at the worksite. DPR’s guidance document HS-1513 mentioned earlier was developed to be used as a template to develop a Written Respirator Program. Employers may want to check with their insurance carriers or with respirator manufacturer representatives for help in developing a respirator protection program. As always, the Agricultural Commissioner’s Office will provide direction & advice to help individuals & businesses comply with the regulations.

**Voluntary Respirator Provision**

An employer may provide respirators at the request of employees or permit employees to use their own respirators for use on a voluntary basis, if the employer determines that such respirator use will not in itself create a hazard. If voluntary respirator use is allowed, the employer must:

- Provide & Display CCR Section 6739, subsection (r) alongside the PSIS N-8, at a central location in the workplace. (Copy of form is attached to this packet)

<table>
<thead>
<tr>
<th>Voluntary Use Scenario 1:</th>
<th>Employer or Employee Supplied Filtering Face Piece</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If the employer allows the voluntary use of a filtering face piece respirator (dust mask type respirators), whether employer or employee supplied, the employer does not need to provide a medical evaluation, fit test or training. Only posting of subsection (r) is required. No respirator program, training, fit test or medical evaluation is required.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Voluntary Use Scenario 2:</th>
<th>Employer Supplied Cartridge Type Respirator</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If the employer allows the voluntary use of a cartridge type respirator (elastomeric, canister, etc.) and the respirator is employer supplied, medical evaluations are required. A Respirator Program Administrator is required to supervise/oversee the respirator program, which must include, at minimum, guidance for cleaning, storage &amp; maintenance of the respirator. No fit test or training is required.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Voluntary Use Scenario 3:</th>
<th>Employee Supplied Cartridge Respirator</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>If the employer allows the voluntary use of a cartridge type respirator (elastomeric, canister, etc.) and the respirator is employee supplied, only posting of subsection (r) is required. No respirator program, training, fit test or medical evaluation is required.</td>
</tr>
</tbody>
</table>

**NOTE: See Attached Flow Chart of Respirator Use for Clarification**
Respirator-Use Requirements Flow Chart
(CCR Section 6739)

Are respirators:
• Required by the employer, label, or regulation?

YES

The employer must establish and implement a **Written Respirator Program** with work site-specific procedures that cover:
• Respirator selection
• Medical evaluations
• Fit testing
• Use of respirators
• Maintenance and care of respirators
• Breathing air quality and use
• Training and information (annual)
• Program evaluation (annual)
(See HS-1513 at www.agcomm.saccounty.net)

NO

Does the employer permit voluntary use of respirators?
(either employee or employer provided)

YES

STOP

NO

Does the only use of respirators involve the voluntary use of filtering facepieces (dust masks type respirators)?

YES

• The employer determines that the respirator itself does not create a hazard.
• Provide and post CCR Section 6739(r) along side PSIS N8 or A8.
• No medical evaluation by a PLHCP required.
• No written respirator program is required.
• No annual training.

NO

(i.e. Cartridge type Respirators – elastomeric, canister, etc.)

Respirator Supplied by Employer

Respirator Supplied by Employee

• Designate a Respirator Program Administrator
• Provide Medical evaluation by a PLHCP
• Issue written guidance for cleaning, storage and maintenance
• No fit testing required
• No annual training required
Information for Employees Using Respirators

Respirators are an effective method of protection against designated hazards when properly selected and worn. Respirator use, even when exposures are below the exposure limit, may provide an additional level of comfort and perceived protection for workers. However, if a respirator is used improperly or not kept clean, the respirator itself can become a hazard to the worker. Sometimes, workers may wear respirators to avoid exposures to hazards, even if the amount of hazardous substance does not exceed the limits set by OSHA standards or Department of Pesticide Regulation guidelines. If your employer provides respirators for your voluntary use, or if you provide your own respirator, you need to take certain precautions to be sure that the respirator itself does not present a hazard. You should do the following:

1. Read and follow all instructions provided by the manufacturer on use, maintenance, cleaning and care, and warnings regarding the respirators limitations.

2. Choose respirators certified for use to protect against the contaminant of concern. NIOSH, the National Institute for Occupational Safety and Health of the U.S. Department of Health and Human Services, certifies respirators. A label or statement of certification should appear on the respirator or respirator packaging. It will tell you what the respirator is designed for and how much it will protect you.

3. Do not wear your respirator into atmospheres containing contaminants for which your respirator is not designed to protect against. For example, a respirator designed to filter dust particles will not protect you against gases, vapors, or very small solid particles of fumes or smoke.

4. Keep track of your respirator so that you do not mistakenly use someone else's respirator.

5. Air filtering respirators DO NOT supply oxygen. Do not use in situations where the oxygen levels are questionable or unknown.
Medical Recommendation Form.

A physician or other licensed health care professional's report of evaluation and approval for respirator use must be on file with the employer before work requiring respirator use is allowed. The following or substantially similar statement from a physician is acceptable.

On ______________________.

(Date)

I evaluated

________________________________.

(Patient's Name)

At this time there (are)/(are not) medical contraindications to the employee named above wearing a respirator while working in potential pesticide exposure environments.

The patient (does)/(does not) require further medical evaluation at this time. Any restrictions to wearing a respirator or to the type of respiratory protection are given below.

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

____________________________________________________________________

I have provided the above-named patient with a copy of this form.

______________________________             __________________

Physician                                                  Date
Appendix One

Respirator Fit Test Record for ORGANIZATION

ID Number: ________________  Date of Test: __________

Employee Last Name: __________________________________________

Employee First Name: __________________________________________

Age: ________________  Sex: ______

Trainer: __________________________________________

Respirator Name: ________________  Size/Type: ______

Tests Used: ____________________________

(This form provides a basic example of the information that may be recorded on a fit test record. Other data recording methods that record the same basic information are acceptable.)
Respiratory Protection Program
Annual Evaluation and Consultation

Employee Name_______________________________________________   Date_______________

Respirator Type________________________________________________________________________

EVALUATION QUESTIONS TO BE COMPLETED BY THE EMPLOYEE:

1. In your opinion, is the current Respiratory Protection Program effective?         Yes / No
   If not, describe how it can be improved _______________________
   ____________________________________________________________________________

2. Is the respirator you currently use appropriate for the pesticides you use during
   the scope of your work?              Yes / No

3. Is the respirator you currently use appropriate for the workplace conditions
   you encounter?               Yes / No

4. Are you able to use the respirator in a manner which does not interfere with
   effective workplace performance?             Yes / No

5. Does your respirator fit consistently and properly on your face?        Yes / No

6. Does the strap fit snugly and comfortably during use?           Yes / No

7. Do you detect any odors while using the respirator?            Yes / No

8. While using the respirator, do you have difficulty breathing?          Yes / No

9. How are you currently maintaining your respirator?
   (Cleaning, cartridge change, inspection, storage?)  _____________________________________
   ____________________________________________________________________________

10. Have you had any changes in your medical condition that affects your
    respirator usage?  Yes / No
   If “Yes”, please speak with your Respirator Program Administrator.
   ____________________________________________________________________________

___________________________________________________________________________________

Employee signature Employe Signature

******************************************************************************************************

TO BE COMPLETED BY THE EMPLOYER:
Description of findings, and modifications to the program: _____________________________________

_____________________________________________________________________________________

Date modifications were implemented: ____________________

Completion of this form annually by employees who are issued or assigned respirators meets the requirements of California Code of Regulations Section 6739(n).