Fit2Fit Companion

to HSE INDG 479
Guidance on Respiratory Protective Equipment (RPE) fit testing

Qualitative Method v2

HSE Statement

“In preparing the Fit2Fit RPE Fit Testers Accreditation Scheme, BSIF and other industry stakeholders have worked closely with the experts in the Health and Safety Executive (HSE). Following this scheme is not compulsory and employers are free to take other actions to comply with the law. But if you follow this scheme you will be doing enough to demonstrate good practice.”
This guidance document has been produced by the British Safety Industry Federation (BSIF) Fit2Fit competence scheme technical committee as a companion document to the Health and Safety Executive (HSE) INDG 479 Guidance on respiratory protective equipment (RPE) fit testing.

The purpose of this companion is to provide complementary practical guidance to the requirements set out in HSE INDG 479 on conducting fit testing in the Qualitative method. Practical guidance on quantitative methods: ambient particle counting and controlled negative pressure are also available in this “Fit2Fit Companion” series.

In this document you will find the relevant HSE INDG 479 requirements referenced as H1, H2, H3 and so on and beneath that the complementary Fit2Fit guidance on the practical elements necessary to deliver effective fit testing, numbered F1, F2, F3 and so on.

Following this guidance is recommended to ensure the correct application of the fit test method.

The Control of Substances Hazardous to Health Regulations (CoSHH) Approved Code of Practice (ACoP) requires that fit testing is conducted by a competent person. The BSIF Fit2Fit Accreditation scheme is designed to provide a means by which fit testers can demonstrate their competence.

A fit tester may not be deemed competent just by following this guidance alone. Experience gained within the development of the scheme clearly demonstrates that to be a competent fit tester both training and practical experience is required.

Fit testing is a vital element of an effective RPE programme and therefore this practical guidance while, aimed at fit testers, is also useful for technical specialists such as occupational hygienists and consultants.

Fit2Fit Companions can be found at www.fit2fit.org
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Introduction

This guide gives advice on fit testing for the employer and those conducting fit tests. This guide provides:

- information on fit test methods;
- information on what can be achieved from a fit test; and
- the core information to be included in a fit test report.

Following this guidance is not compulsory and you are free to take other actions to comply with the requirements of the law. But if you do follow the guidance you will normally be doing enough to comply with the law. Health and safety inspectors seek to secure compliance with the law and may refer to this guidance as illustration of good practice.

HSE does not approve nor recommend any particular fit testing equipment. Any equipment included in this guidance provides representative information.

Further advice on the practical aspects of fit testing is provided by the British Safety Industry Federation (BSIF); this can be found at www.fit2fit.org.

Fit testing should be conducted by a competent person. Competence can be demonstrated by accreditation under the Fit2Fit RPE Fit Test Providers Accreditation Scheme. This scheme has been developed by the BSIF, together with industry stakeholders, and is supported by HSE. The scheme is not compulsory and employers are free to take other action to comply with the law. Further details on the scheme can be found at www.fit2fit.org.

Where respiratory protective equipment (RPE) is used as a control measure under health and safety legislation, it is vital that the selected RPE is both adequate and suitable. General advice on selection of RPE is covered in the HSE guidance document Respiratory protective equipment at work: A practical guide (HSG53).¹

To ensure that the selected RPE has the potential to provide adequate protection for individual wearers, the Approved Codes of Practice (ACOPs) supporting the Control of Substances Hazardous to Health Regulations (COSHH)² the Control of Lead at Work Regulations,³ the Control of Asbestos Regulations,⁴ the Confined Space Regulations⁵ and the Ionising Radiations Regulations⁶ stipulate that tight-fitting RPE should be fit tested as part of the selection process.

The performance of tight-fitting facepieces depends on achieving a good contact between the wearer’s skin and the face seal of the facepiece. People’s faces vary significantly in shape and size so it is unlikely that one particular model or size of RPE facepiece will fit everyone. Inadequate fit will significantly reduce the protection provided to the wearer. Any reduction in protection may lead to immediate or long-term ill health or can even put the RPE wearer’s life in danger.

Fit testing is therefore a method for checking that a specific model and size of tight-fitting facepiece matches the wearer’s facial features and seals adequately to the wearer’s face. It will also help to identify unsuitable facepieces which should not be used.

A pre-use wearer-seal check should be carried out each time a fit-tested facepiece is worn and before entering the hazardous environment. This check is to determine whether the wearer has correctly donned a facepiece before entering a contaminated work area. The RPE manufacturer will provide instructions on how to carry it out. Note, however, that a pre-use wearer-seal check is not a substitute for fit testing.
Tight-fitting facepieces (often referred to as masks) rely on having a good seal with the wearer’s face. These are available as both non-powered and powered respirators, and breathing apparatus (BA) with either a half mask or a full-face mask.

Their performance, irrespective of whether they are non-powered (negative pressure), powered or constant-flow airline BA relies heavily on the quality of fit of the facepiece to the wearer’s face. An inadequate fit will significantly reduce the protection provided to the wearer.

Examples of types of tight-fitting facepieces are shown in Figures 1, 2 and 3.

Please note that the Qualitative method cannot be used for face fit testing of Full Face masks. Full face masks can only be face fit tested using Quantitative methods, (Ambient Particle Counting and or Controlled Negative Pressure).
This guidance assumes that you have chosen to use tight-fitting RPE as part of your control regime following an appropriate risk assessment. It also assumes that you have considered the wider aspects of RPE provision found on the HSE website at: http://www.hse.gov.uk/respiratory-protective-equipment/index.htm and in the guidance document Respiratory protective equipment at work: A practical guide (HSG53).

It is important to know that some pre-existing medical conditions (for example, breathing disorders such as asthma; skin allergies; or even heart problems) may restrict or prevent some workers wearing any RPE, or certain types of RPE. You will need to ensure that workers are fit to wear the selected and required RPE. If you are unsure, you (the employer) should arrange for appropriate medical assessment.

Powered or constant-flow airline BA RPE with loose-fitting hoods or helmets do not require fit testing. Tight-fitting powered or constant-flow airline BA RPE under positive pressure still requires fit testing as studies have shown that during heavy exertion, inward leakage is possible.

A fit test should be carried out as part of the initial selection of the RPE. A fit test should be repeated whenever there is a change to the RPE type, size, model or material or whenever there is a change to the circumstances of the wearer that could alter the fit of the RPE; for example:

- weight loss or gain;
- substantial dental work;
- any facial changes (scars, moles, effects of ageing etc) around the face seal area;
- facial piercings;
- introduction or change in other head-worn personal protective equipment (PPE).

As part of your RPE programme, it is good practice to have a system in place to review when a repeat fit test may be required. For example, face shape will change through ageing alone.

*In support of the points above, Fit2Fit recommends that a suitable interval for repeat fit testing is 2 years. In some situations, however, more frequent repeat fit testing may be appropriate, particularly where RPE is being used as a primary or sole means of control.*

*If there is a change in the make, model or size of RPE in use, a fit test is to be conducted prior to its first use.*

*Good practice is to discuss repeat fit testing at the initial fit testing stage so that an appropriate retest period can be entered into the fit test report.*
Qualitative fit testing (QLFT) is a pass/fail test based on the wearer's subjective assessment of any leakage through the face seal region by detecting the introduction of bitter- or sweet-tasting aerosol as a test agent.

QLFT methods are suitable for disposable and reusable half masks; they are not suitable for full-face masks. Although this type of test is based on subjective detection and response by the wearer of the RPE, it is important that it is administered by a fit tester competent in using this method.

Quantitative fit testing (QNFT) provides a numerical measure of how well a facepiece seals against a wearer’s face; this is called a fit factor. These tests give an objective measure of face fit.

QNFT methods are suitable for disposable and reusable half masks and full face masks. Examples of QNFT methods are:

- ambient particle counting
- controlled negative pressure (CNP)

Principles of operation: Qualitative

Qualitative Fit Testing (QLFT) requires the use of equipment specified in BS ISO 16975-3 and relies on a wearer’s taste response to a bitter or sweet tasting test solution to determine whether or not a facepiece provides an adequate fit. If QLFT is carried out correctly then any test solution detected by the wearer can be assumed to have come from face seal leakage, indicating a poor fit.

A QLFT compromises two elements:

(i) The sensitivity test (no mask worn)
(ii) The fit test (mask worn)

Both elements require the wearer to have a clean palate prior to commencement.

The purpose of the sensitivity test is to determine both:

⇒ The wearer’s ability to taste the sensitivity solution and...
⇒ The wearer’s level of sensitivity to the solution.
The type of fit test method used depends on the type of RPE to be fit tested. Table 1 shows which fit test methods are applicable.

<table>
<thead>
<tr>
<th>RPE (type and mask)</th>
<th>Quantitative (QNFT)</th>
<th>Qualitative (QLFT)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ambient particle counting</td>
<td>Controlled negative pressure</td>
</tr>
<tr>
<td>Disposable respirator</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Reusable respirator</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Powered respirator</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Constant flow airline BA</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Fresh air hose BA</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Demand valve BA</td>
<td>Half mask</td>
<td>Yes</td>
</tr>
<tr>
<td></td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
<tr>
<td>Escape BA</td>
<td>Full-face mask</td>
<td>Yes</td>
</tr>
</tbody>
</table>

*a* Any leakage through the exhalation valve has to be eliminated.

*b* The ambient particle counting instrument may require additional functionality, such as the TSI N95 technology, to eliminate penetration of ambient particles through the filter material for masks with assigned protection factors (APFs) of 4 (FFP1) and 10 (FFP2).

APF is the workplace level of respiratory protection the facepiece is expected to provide, and is used when selecting adequate RPE.

If it is not possible for the wearer to obtain an adequate fit with the first choice of facepiece you should attempt fit testing using an alternative make, model or size of tight-fitting facepiece. Where you cannot achieve an adequate fit you should select another type of RPE that does not rely on a tight-fitting face seal, such as a loose-fitting respirator hood or helmet.

You should record the fit test by means of a report or certificate which should clearly state whether the result of the fit test was a pass or fail. Annex 1 shows the content that you should provide in a fit test report.

The fit test report should be available to the employee and accessible to others such as enforcement authorities. Collective reports should be available to safety representatives. You should record RPE examinations and tests – and, where appropriate, any repairs made – and retain them for at least five years.

The employer is responsible for meeting the cost of fit testing.
Guidance for fit testers

General

H29- As a fit tester you have duties under Health and Safety at Work legislation because if you do not carry out a fit test properly the wearer could be exposed to substances hazardous to health due to facepiece leakage.

H30- RPE fit testing should be carried out by a competent person. A fit tester should have adequate knowledge, and have received adequate instruction and training in the following areas:

- selection of adequate and suitable RPE;
- examination of RPE and the ability to identify poorly maintained facepieces;
- ability to correctly fit a facepiece and perform pre-use wearer-seal checks;
- ability to recognise a poorly fitting facepiece;
- awareness of external factors that may affect the fit of the facepiece or the fit test result;
- the purpose and applicability of fit testing;
- the differences between, and the appropriate use of, QNFT and QLFT methods;
- the purpose of the fit test exercises;
- preparation of facepieces for fit testing;
- how to carry out diagnostic checks on the facepiece and the fit test equipment;
- capabilities and limitations of the fit test equipment;
- how to perform a correct fit test with the chosen method;
- awareness and knowledge of how to prevent and correct problems during fit testing;
- interpretation of fit test results;
- an understanding of the differences between fit factor, workplace protection factor (WPF),* assigned protection factor and nominal protection factor (NPF)**; and
- HSE ACOPs and guidance that deal with fit testing of RPE.

*WPF is the protection provided by the RPE when used and measured in the workplace and is the ratio between the breathing zone concentration of the contaminant inside and outside of the facepiece.

**NPF is the level of respiratory protection the facepiece is expected to provide under laboratory conditions and is the pass/fail for the particular European standard.

Fit2Fit Guidance

Following the guidance outlined in this document will help you to gain competence and comply with your duties as a fit tester. You can demonstrate competence in fit testing by gaining Fit2Fit Accreditation in your chosen fit test method(s).

Fit2Fit Accreditation is achieved by passing both theoretical and practical examinations set by the Fit2Fit scheme. It is an assessment of the individual and it is the individual that achieves accredited status which is valid for up to three years. Accreditation can only be awarded through the Fit2Fit Scheme operated by the BSIF.
The Fit2Fit Accreditation scheme covers qualitative fit testing (QLFT), ambient particle counting (APC) and controlled negative pressure (CNP) fit testing methods. Both APC and CNP methods are included under the heading of “quantitative fit testing”. Fit testers can become accredited for any or all of these methods. The Fit2Fit scheme competencies are based on those set out in INDG479.

Experience gained within the development of the Fit2Fit Accreditation scheme clearly demonstrates that to be a competent fit tester, both appropriate training and mentored practical experience is required.

Facepieces used for fit testing can be one of the following:
- the wearer’s individually assigned facepiece;
- a test facepiece of the same type, class and size; or
- a surrogate facepiece with the same sealing surfaces, materials, head straps and breathing resistance as the facepiece assigned to the wearer. You should confirm this with the RPE manufacturer/supplier.

Where facepieces are issued on an individual basis it is recommended that the wearer is fit tested using their issued facepiece.

Where this is not practicable use a test facepiece that exactly matches the wearer’s facepiece.

Fit test half and full-face masks as negative-pressure facepiece respirators by attaching a P3 filter, or a combined filter that incorporates a P3 filter, directly to the facepiece. Where practicable, the filter (or facepiece adapter) should be identical to, or similar to, the type of filter normally used with the respirator, ie of similar breathing resistance and weight. You will need to temporarily convert facepieces used with compressed-air-supplied BA and power-assisted respirators to negative-pressure respirators. Alternatively you may use an identical negative-pressure respirator facepiece with the same sealing surface (ie same mould of face blank and material) if available.

The mask being used for the fit test should be in good condition and it must be equipped with particulate filters (or combination with particulate filters). When fit testing a negative pressure half mask the filter(s) should be as close as possible to the weight and dimensions of those used in the workplace.
Guidance for fit testers

H35- Facepieces are available in several different sizes and shapes. The wearer may obtain a better fit (ie pass a fit test) by trying a respirator of a different size, model or make.

H36- The practice of multiple repeat fit tests with the aim of achieving a pass with a given facepiece, ie force fitting, should not be carried out. If after two fit tests the result is still a fail, an alternative facepiece should be tried.

H37- Visually examine the facepiece to be used for fit testing before carrying out a fit test. The examination should include the condition of the facepiece, especially around the face seal and facepiece connectors, the exhalation valve(s) and the head harness. You should properly inspect test facepieces and maintain them in accordance with the manufacturer’s instructions.

H38- The fit tester should ensure that test facepieces are cleaned and disinfected before being used by different individuals. Test facepieces that cannot be adequately disinfected (eg disposable half masks) should not be used by more than one individual.

H39- The fit tester should ensure that the fit testing equipment is in good working order, properly set up and checked or tested before conducting the fit test. Maintain and calibrate the fit test equipment in accordance with the manufacturer’s instructions.

H40- Variation from the procedures and fit test equipment specified in this guidance may invalidate the fit test results unless the procedures and equipment used have previously been validated. The criteria for evaluating fit test methods given in BS ISO 16975-3 Annex C are recommended.

F7- Fit testing should be conducted in a safe and clean location which provides a degree of privacy.

Qualitative fit testing should be conducted in a well-ventilated room to avoid a build-up of the fit test solution.

H41- The following standards are recommended as suitable references:

- European Standards covering inward leakage testing: BS EN 136, BS EN 140 and BS EN 149.

Preparing the wearer

H42- The fit tester should explain to the wearer the purpose of the fit test, what they will have to do, and the meaning of the fit test results.

H43- When you are conducting a qualitative fit test, you should advise wearers not to eat, drink (except still, unflavoured water), smoke or chew gum for at least 30 minutes before the test.

H44- Do not conduct fit tests if there is any hair growth between the wearer’s skin and the facepiece sealing surface, such as stubble beard growth, beard, moustache, sideburns or low hairline, which cross the respirator sealing surface. You should ensure that any type of non-PPE apparel or adornment (eg piercing) does not interfere with the fit of the facepiece.

H45- Inform wearers that they should be clean-shaven in the region of the face seal whenever they wear a tight-fitting facepiece at work.
Guidance for Fit Testers

Fit tests should not be conducted if there is any hair growth between the skin and the mask sealing surface, such as stubble beard growth, beard, moustache, sideburns or low hairline which crosses the respirator sealing surface.

This is also your opportunity to help wearers to understand the importance of always being clean shaven in the region of the face seal not only for the fit test, but every time that they are required to wear the mask in the workplace.

Research carried out by the HSE has demonstrated that protection could be significantly reduced where stubble or facial hair was present in the seal area.\(^{11}\)

Figure 5 Example showing the face seal region (area underneath the red line) that must be clean shaven for a half mask or Filtering Face Piece (FFP)

For clarity the definition of “clean shaven” in this context means that the wearer’s face should have been shaved (in the area of the face seal) within 8 hours of the work shift commencing.\(^{12}\)

The fit tester should instruct the wearer in the test exercises appropriate to the fit test method used as shown in Annex 2.

Some wearers may be capable of wearing a respirator safely in the workplace, but be unable to complete all the exercises within the fit test protocol due to an underlying health issue. Under these circumstances, adaptations to the fit test exercises may be made to better reflect the wearer’s range of movements. Any adaptations should be recorded. For those with short-term conditions, the fit test should be carried out after they have recovered.

The fit tester should ascertain that the wearer is medically fit to wear RPE and seek confirmation (preferably in writing) from the employer.

The wearer should have received training in correct donning of the facepiece before the fit test. If you are also providing RPE training, you should show the wearer how to put on a facepiece, position it on the face, set the strap tension and determine an acceptable fit. A mirror should be available to assist the wearer in evaluating the fit and positioning of the facepiece.

The wearer should be able to don the facepiece in accordance with the manufacturer’s instructions, in the manner in which they have been trained, and without assistance from the fit tester.
The fit tester should closely observe the donning process to ensure that the mask has been donned correctly in accordance with the manufacturer’s instructions and should closely inspect the fit for gaps etc.

If the wearer needs to use in-facepiece spectacles they should wear them during the fit test. Wearsers should wear any other PPE that could potentially interfere with the fit of the facepiece during the fit test. If they cannot wear the PPE properly without affecting the function of the RPE or vice versa, choose alternative PPE.

The details (make and model) of the other PPE such as eyewear or safety helmets or associated equipment worn during the fit test should be recorded on the fit test report itself.

Preparing for a qualitative fit test based on taste

To achieve a pass in a qualitative fit test the wearer must not taste the test agent at any time during any of the test exercises.

The test solution concentrations and the fit test equipment including hood size are specified in BS ISO 16975-3.

Maintain and use all QLFT equipment in accordance with the manufacturer’s recommendations.

Before carrying out a qualitative fit test using a distinctive taste, establish the taste threshold of the wearer. This screening test is carried out to check that the wearer can detect the taste of the test aerosol. This is often referred to as a sensitivity test. If the wearer cannot detect the taste during the screening test, the fit test method cannot be used and you should choose a different method.

Conduct the fit test as a continuous test, allowing sufficient time between the sensitivity test and the fit test for the wearer to clear their palate. Should a fit tester not wish to continue directly from the sensitivity test to the fit test for practical reasons, they should complete the fit test on the same day. The wearer should refrain from smoking, eating or drinking (except for water) during the intervening period.

It is good practice that the fit test itself follows the sensitivity test having allowed enough time for the wearer’s palate to clear. Only fresh water should be consumed by the wearer between the sensitivity test and the fit test.

The sensitivity test may be completed on additional wearers prior to conducting the fit test on each wearer in turn. No food or drink (except water) should be consumed by the wearers in the intervening period between the two elements of their test (sensitivity and fit test).
The sensitivity test must be carried out with the test hood in place on the wearer, but with no mask worn. Using the nebuliser, the sensitivity solution is introduced into the test hood worn by the wearer. The purpose of the hood is to contain the atomised solution. The Fit Tester records the number of applications of solution required for the wearer to taste the solution. If the wearer does not taste the sensitivity solution after 30 squeezes the alternative taste solution or another fit test method must be used.

The fit test is conducted following the sensitivity test with the wearer now having donned the mask. It is important that the wearer has a clean palate prior to donning the mask. The wearer should then conduct a pre-use wearer seal check.

The fit test solution, which is a more concentrated version of the sensitivity solution, is administered as a series of applications into the test hood, worn by the wearer. Based on the result of the sensitivity test (Table F1), the fit tester applies the correct corresponding number of applications of the fit test solution. It is important that the fit test solution used is of the same taste (bitter or sweet) as used for the sensitivity test.

Table F1: Administration of Fit Test Solution based on the Result of the Sensitivity Test

<table>
<thead>
<tr>
<th>Number of applications in Sensitivity test</th>
<th>Number of applications at start of Fit test</th>
<th>Number of subsequent top up applications every 30 seconds during Fit Test</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-10</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>11-20</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>21-30</td>
<td>30</td>
<td>15</td>
</tr>
</tbody>
</table>

The wearer carries out the specified exercises (Annex 2 Table 3) while the Fit Tester maintains the level of fit test solution throughout the test by administering top-up applications (Table F1) above.

If the wearer tastes the test solution during the fit test, then the fit is deemed inadequate and the fit test result is recorded as a FAIL.

In the event of a failed fit test a repeat test must incorporate the full fit test protocol and will ALWAYS require a repeated sensitivity test, after the wearer’s palate has cleared.
The nebulisers used to generate the aerosol for the screening test may clog during use and stop delivering the test substance. Therefore the fit tester should make periodic checks of the nebulisers during the test to ensure that it is not clogged. If clogging is found at the end of the test session, the test is invalid. Regular cleaning of the nebulisers should help to prevent clogging.

The fit tester should take steps to ensure that the correct solutions are used for the sensitivity test and fit test. Nebulisers should be filled with an adequate volume of solution following the manufacturer’s instructions and checked for function prior to, and during use. During administration of the solution both plugs on the nebuliser must be removed and the nebuliser must be held upright to ensure adequate aerosol generation. Because this method relies on the wearer tasting the solution, it is very important that the fit tester instructs and reminds the wearer to breathe through their mouth and keep their mouth open during both the sensitivity test and the fit test itself.

Conducting the fit test – all methods

Observe the wearer throughout the fit test to ensure that the correct test exercises are conducted. Also watch for facial and head movements that may cause face seal leakage. If the wearer sneezes or coughs during the fit test this can affect the fit test result and you may have to repeat the fit test.

You should also ensure the safety of the wearer – this is especially important if the wearer is walking on a treadmill or stepping during the fit test.

When conducting a qualitative fit test walking on a treadmill or stepping is not required. The fit test exercises should be explained and demonstrated (where required) to the wearer and they should be asked to confirm that they are happy to carry them out. If a permanent injury or medical condition prevents them from carrying out a certain exercise the exercise regime may be modified to accommodate their needs. A record should be kept and noted on the fit test report of any modification to the exercises.
Guidance for Fit Testers

Inform the wearer of the fit test result; ie a pass or fail.

Following a PASS result, it is good practice to conduct a “reveal” before removal of the mask. At the end of the fit test, the fit tester should ask the wearer to reach inside the test hood and place a finger between their face and the mask seal, and then to breathe in, through their mouth. If the test has been conducted correctly, the wearer should experience a strong taste of the test solution. The ‘reveal’ will give the fit tester and the wearer confidence in the fit test result.

If the wearer does not experience a strong taste at this point this could indicate a problem with the application of the test method and the validity of the result should be questioned.

Following a FAIL result, the fit tester should check the fit of the mask on the wearer’s face before removing it, inspect the mask and filter for any faults not found at the initial inspection and check the fit test equipment before attempting to retest.

Incorrect donning of the mask is one of the most commonly encountered reasons for fit test failures. It is essential that wearers are adequately trained in how to correctly put on the mask and conduct a wearer seal check, before a fit test is carried out.

If a poor fit is likely to be caused by inadequate training, the wearer’s employer should be informed.

As part of the post fit test debriefing, the wearer should be reminded that the fit test result is only valid for the specific make, model and size of mask which they wore during the fit test. This is also an appropriate time to discuss circumstances which may call for repeat face fit testing.

The fit tester should also remind the wearer that facial hair will reduce the effectiveness of the face seal and that the wearer should be clean shaven in the area of the face seal every time they wear the mask.
**Fit test report**

A record of the fit test shall be produced. The fit test report should clearly identify the following (where applicable):

a. the name of person fit tested;
b. the make, model, material and size of the facepiece;
c. the type of filters fitted to the facepiece during the fit test;
d. the presence or absence of in-facepiece spectacles;
e. the make and model of any PPE and/or RPE accessory worn during the fit test;
f. whether the facepiece used was the subject’s issued facepiece, a company pool facepiece or a test facepiece;
g. the test exercises performed during the fit test;
h. the fit test method employed; ie ambient particle counting device, CNP or qualitative taste test agents;
i. for quantitative tests, the measured fit factor for each individual test exercise and the overall fit factor;
j. the pass level used in the test;
k. the result of the fit test in terms of a pass or fail;
l. the date of the test; and
m. the details of the person who performed the test, name of firm, address etc.

The fit test report should also record, where appropriate:

n. the condition of the wearer’s own facepiece;
o. whether the wearer required assistance donning and carrying out a wearer seal check before the fit test;
p. how many repeat tests were needed to obtain a pass and the reasons why; and
q. the serial number or other means of identifying the equipment employed in the fit test.

**Copies of fit test reports should be provided to the employer and a copy retained by the fit tester. Good practice is that fit test reports should include the recommended date of the next test.**

Where fit test data is required by the customer in electronic format only, the data should still include the content as listed above. Fit test reports may contain some personal information which will be subject to data protection regulation.
**Fit test exercises**

For QLFT and quantitative ambient particle counting methods, the fit test protocol should include a minimum of seven exercises; each test exercise should be performed for at least one minute.

For the qualitative method, the start of the seven, one minute exercises should commence immediately after the initial amount of solution has been administered into the hood. The timings should run continuously throughout the test and hence the total test time should be seven minutes. Top up applications should be administered every thirty seconds (see Table F1). The test protocol should comprise the seven test exercises in Table 3, below.

**Table 3** Fit test exercises for qualitative methods and quantitative ambient particle counting methods

<table>
<thead>
<tr>
<th>Exercise</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>(i) Normal breathing</td>
<td>The wearer should breathe normally with no head movements or talking.</td>
</tr>
<tr>
<td>(ii) Deep breathing</td>
<td>The wearer should breathe slowly and deeply, taking care not to hyperventilate.</td>
</tr>
<tr>
<td>(iii) Turning head side to side</td>
<td>The wearer should slowly turn their head from side to side between the extreme positions on each side (approximately 15–20 times per minute). The head shall be held at each extreme momentarily, so the wearer can inhale at each side.</td>
</tr>
<tr>
<td>(iv) Moving head up and down</td>
<td>The wearer should slowly move their head up and down (approximately 15–20 times per minute). The wearer should be instructed to inhale in the up position (ie when looking toward the ceiling).</td>
</tr>
<tr>
<td>(v) Talking</td>
<td>The wearer should talk slowly and loudly enough to be heard clearly by the fit tester. The wearer should read from a standard reading passage or count down from 100.</td>
</tr>
<tr>
<td>(vi) Bending over</td>
<td>From a normal standing position, the wearer should bend at the waist as if to touch their toes and then return to an upright position. Repeat approximately 10–15 times throughout the duration of the exercise.</td>
</tr>
<tr>
<td>(vii) Normal breathing</td>
<td>Same as exercise (i).</td>
</tr>
</tbody>
</table>

During QLFT the fit test exercises should be performed with the wearer standing.

The use of the “Rainbow Passage” below is the preferred standard reading passage to be used in the talking exercise.

‘When the sunlight strikes raindrops in the air, they act like a prism and form a rainbow. The rainbow is a division of white light into many beautiful colours. These take the shape of a long round arch, with its path high above, and its two ends apparently beyond the horizon. There is, according to legend, a boiling pot of gold at one end. People look, but no one ever finds it. When a man looks for something beyond his reach, his friends say he is looking for the pot of gold at the end of the rainbow’
REFERENCES

11. The effect of wearer stubble on the protection given by Filtering Facepieces Class 3 FFP 3 and Half Masks: Frost Harding et al 2015

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