

The University of Kansas

Kansas Fire & Rescue Training Institute

April 25, 2005

Kansas Fire Chiefs
Kansas Fire Service Instructors
Kansas Fire Service Members

Dear Kansas Fire Service Members,

Effective January 1, 2002, the Kansas Fire & Rescue Training Institute reinforced our requirement for participants of training and certification activities involving SCBA to be clean shaven (no facial hair in the area of the face piece seal). At that same time, we implemented a policy requiring these same participants to have been fit tested into their SCBA face piece as required by OSHA regulations.


Since that time, we have continued to encounter fire fighters with facial hair and not having been fit tested. This letter is a reminder that this policy is still in place and will be enforced at certification exams and training courses where SCBA use is being taught or required.

Effective immediately, the Kansas Fire & Rescue Training Institute will require the SCBA Fit Testing Verification form to be completed and signed by the Fire Chief or Lead Instructor of the course. No one will be allowed to participate in the certification exam or class in which SCBA are taught/used unless their fit testing is documented on the attached form. In addition to the verification form, anyone with facial hair in the area of the face piece seal will not be allowed to participate in certification exams or classes (in which SCBA are being taught or used).

If you need assistance in getting your fire fighters fit tested, please contact the Kansas Fire & Rescue Training Institute. Fit testing is available through our program at no cost to Kansas fire departments. The local fire department is responsible for identifying someone to conduct the medical screening and for the costs associated with the medical screening.

We ask for your cooperation in helping ensure that fire fighters are properly shaven and fit tested prior to the date of the exam or training session. Exam coordinators and course instructors have been instructed not to allow participation unless the facial hair and fit testing policies have been met and documented. Please have the attached form ready for the instructor or exam coordinator on the first day of the exam or class. Thank you for your cooperation as we strive to provide safe training and certification testing.

Sincerely,



Glenn Pribbenow
Director

The University of Kansas

Kansas Fire & Rescue Training Institute

Policy Statement SCBA Face Piece Fit Testing Requirements

Policy:

Effective January 1, 2000 all candidates testing for any of the categories and levels of certification listed below must provide the Kansas Fire & Rescue Training Institute documentation verifying successful SCBA face piece fit testing with their application or at the time of registering for an exam. This requirement applies to all levels in which Self-Contained Breathing Apparatus are taught and required by the standard. Specifically, this policy applies to the following certification levels:

Fire Fighter I	Fire Fighter II
Hazardous Materials Operational	Airport Fire Fighter
Hazardous Materials Technician	

All fit testing must meet the requirements as defined by the Kansas Department Labor (including medical evaluation as stated in the regulation). Documentation must be in the form of a certificate from a qualified person/organization or from the local fire chief and must include the date fit testing was performed and that the individual was medically evaluated as required by the KDL.

Further, the same documentation of fit testing will be required of all participants of training classes that require the use of SCBA in IDLH atmospheres. Specifically, this includes the FST Live Fire Burn Lab, LP Gas training and any other courses that require SCBA use in potentially hazardous atmospheres.

Justification:

In 1998, the Federal OSHA respiratory standard became a reality. Within this document, fire departments are required to fit test SCBA face pieces to individual users. Compliance was required by October, 1998. The Kansas Department of Labor (formerly the Kansas Department of Human Resources) has adopted this regulation for enforcement in Kansas.

The Kansas Fire & Rescue Training Institute is required to test all skills required by the NFPA standards. These skills include extinguishing interior fires. The use of the FST Burn Trailer is part of the possibility for testing at any certification test for Fire Fighter I and/or II. Other certification categories and levels require the use of SCBA in potentially hazardous atmospheres. Through these activities, the Kansas Fire & Rescue Training Institute will be placing fire fighters into potentially hazardous atmospheres, thus fit tested prior to participation will be required in order to comply with the fit testing requirement. In order to keep all testing for certification categories and levels requiring the use of SCBA, fair and consistent, the Kansas Fire & Rescue Training Institute will require documentation of fit testing prior to participating in any of the referenced certification exams.

Revised May 2005

Kansas Fire & Rescue Training Institute

SCBA Fit Test Verification Form



Effective January 1, 2000, The Kansas Fire & Rescue Training Institute requires that all participants of Institute sponsored training and national certification exams involving the actual or potential use of SCBA in live fire evolutions be fit tested in accordance with OSHA & Kansas Department of Labor Regulations. This form is intended for use in documenting and verifying that individuals have been fit tested in accordance with those regulations. This form is required for any courses or exams as described above. The Fire Chief or designated representative must sign this form verifying fit testing prior to any fire fighters' participation. Please present this form to the course or exam coordinator prior to beginning the scheduled event.

I verify that the persons listed on this form have received medical screening and face piece fit testing as required by OSHA 29CFR1910.134 and applicable Kansas Department of Labor standards.

Name of Fire Department/Organization: _____

Fire Chief (or authorized representative) Signature: _____

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