

**State of California**

Department of Industrial Relations  
Division of Occupational Safety and Health  
American Canyon District Office  
3419 Broadway Street Ste H8  
American Canyon, CA 94503  
Phone: (707) 649-3700 Fax: (707) 649-3712

**Inspection #:** 1474648  
**Inspection Dates:** 05/06/2020 - 11/05/2020  
**Issuance Date:** 11/05/2020  
**CSHO ID:** S0358  
**Optional Report #:** 043-20



**Citation and Notification of Penalty**

**Company Name:** Kaiser Foundation Hospitals  
**Establishment DBA:** Kaiser Santa Rosa  
and its successors  
**Inspection Site:** 401 Bicentennial Way  
Santa Rosa, CA 95403

Citation 1 Item 1 Type of Violation: **General**

**T8 CCR Section 5199(e)(1)(A) Engineering and Work Practice Controls, and Personal Protective Equipment.**

**(1) General. Employers shall use feasible engineering and work practice controls to minimize employee exposures to ATPs. Where engineering and work practice controls do not provide sufficient protection (e.g., when an employee enters an All room or area) the employer shall provide, and ensure that employees use, personal protective equipment, and shall provide respiratory protection in accordance with subsection (g) to control exposures to AirIPs.**

**(A) Work practices shall be implemented to prevent or minimize employee exposures to airborne, droplet, and contact transmission of aerosol transmissible pathogens (ATP), in accordance with Appendix A, and where not addressed by Appendix A, in accordance with the Guideline for Isolation Precautions. Droplet and contact precautions shall be in accordance with Guideline for Isolation Precautions. Airborne precautions shall be in accordance with Guidelines for Preventing the Transmission of Mycobacterium tuberculosis in Health-Care Settings.**

Prior to and during the course of the inspection, the employer failed to implement work practices to prevent or minimize employee exposure to airborne, droplet, and contact transmission of aerosol transmissible pathogens (ATP) by not implementing a screening procedure for employees and/or patients entering their facility to assess for signs and symptoms of SARs-CoV-2 (the virus causing COVID-19).

**Date By Which Violation Must be Abated:** **Corrected During Inspection**  
**Proposed Penalty:** **\$1350.00**

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Citation 2 Item 1 Type of Violation: **Serious**

**T8 CCR Section 5199(h)(6)(C) (h) Medical Services.****(6) Exposure Incidents.**

**(C) Each employer who becomes aware that his or her employees may have been exposed to an RATD case or suspected case, or to an exposure incident involving an ATP-L shall do all of the following:**

**1. Within a timeframe that is reasonable for the specific disease, as described in subsection (h)(6)(B), but in no case later than 72 hours following, as applicable, the employer's report to the local health officer or the receipt of notification from another employer or the local health officer, conduct an analysis of the exposure scenario to determine which employees had significant exposures. This analysis shall be conducted by an individual knowledgeable in the mechanisms of exposure to ATPs or ATPs-L, and shall record the names and any other employee identifier used in the workplace of persons who were included in the analysis. The analysis shall also record the basis for any determination that an employee need not be included in post-exposure follow-up because the employee did not have a significant exposure or because a PLHCP determined that the employee is immune to the infection in accordance with applicable public health guidelines. The exposure analysis shall be made available to the local health officer upon request. The name of the person making the determination, and the identity of any PLHCP or local health officer consulted in making the determination shall be recorded.**

Prior to and during the course of the inspection, the employer failed to investigate exposure incidents in the Emergency Department and the Medical Surgical Telemetry Unit 4West, to notify employees who had significant exposures to COVID-19 cases and suspected cases, and to provide post-exposure medical services to those employees.

Instance 1: The employer failed to conduct an exposure analysis, including the determination of which employees had a significant exposure. {§5199 (h)(6)(C)1.}

Instance 2: The employer failed to notify employees with significant exposures in a reasonable timeframe, in any case no longer than 96 hours after becoming aware of the potential exposure, of the date, time and nature of the exposure. {§5199 (h)(6)(C)2.}

Instance 3: The employer failed to provide post-exposure medical evaluation to all employees who had a significant exposure. {§5199 (h)(6)(C)3.}

<b>Date By Which Violation Must be Abated:</b>	<b>November 20, 2020</b>
<b>Proposed Penalty:</b>	<b>\$18000.00</b>

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Citation 3 Item 1 Type of Violation: **Serious**

**T8 CCR Section 5199(g). Aerosol Transmissible Diseases.**

**(g) Respiratory Protection.**

**(1) Respirators provided for compliance with this section shall be approved by NIOSH for the purpose for which they are used.**

**(2) Each employer who has any employee whose occupational exposure is based on entering any of the work settings or performing any of the tasks described in subsection (g)(4) shall establish, implement and maintain an effective written respiratory protection program that meets the requirements of Section 5144 of these orders, except as provided in subsections (g)(5) and (g)(6). . . .**

**(3) Respirator selection.**

**(A) Where respirator use is required for protection against potentially infectious aerosols and is not required to meet the requirements of subsections (g)(3)(B) or (g)(3)(C), the employer shall provide a respirator that is at least as effective as an N95 filtering facepiece respirator, unless the employer's evaluation of respiratory hazards determines that a more protective respirator is necessary, in which case the more protective respirator shall be provided.**

**(B) Effective September 1, 2010, the employer shall provide a powered air purifying respirator (PAPR) with a High Efficiency Particulate Air (HEPA) filter(s), or a respirator providing equivalent or greater protection, to employees who perform high hazard procedures on AirID cases or suspected cases and to employees who perform high hazard procedures on cadavers potentially infected with ATPs, unless the employer determines that this use would interfere with the successful performance of the required task or tasks. This determination shall be documented in accordance with the ATD Plan and shall be reviewed by the employer and employees at least annually in accordance with subsection (d)(3). . . .**

**(C) Respirators used in laboratory operations to protect against infectious aerosols shall be selected**

in accordance with the risk assessment and biosafety plan, in accordance with subsection (f).

**(D) Where respirators are necessary to protect the user from other hazards, including the uncontrolled release of microbiological spores, or exposure to chemical or radiologic agents, respirator selection shall also be made in accordance with Sections 5144, Respiratory Protection, and 5192, Hazardous Waste and Emergency Response Operations, of these orders, as applicable.**

**(4) The employer shall provide, and ensure that employees use, a respirator selected in accordance with subsection (g)(3) and Section 5144 when the employee:**

**(A) Enters an All room or area in use for All;**

**(B) Is present during the performance of procedures or services for an AirID case or suspected case;**

**(C) Repairs, replaces, or maintains air systems or equipment that may contain or generate aerosolized pathogens;**

**(D) Is working in an area occupied by an AirID case or suspected case, during decontamination procedures after the person has left the area and as required by subsection (e)(5)(D)9;**

**(E) Is working in a residence where an AirID case or suspected case is known to be present;**

**(F) Is present during the performance of aerosol generating procedures on cadavers that are suspected of, or confirmed as, being infected with aerosol transmissible pathogens;**

**(G) Is performing a task for which the Biosafety Plan or Exposure Control Plan requires the use of respirators; or**

**(H) Transports an AirID case or suspected case within the facility or in an enclosed vehicle (e.g., van, car, ambulance or helicopter) when the patient is not masked.**

Prior to and during the course of the inspection, the employer failed to provide, and to ensure that employees used, a respirator selected in accordance with subsection (g)(3) and Section 5144 when employees were present during the performance of procedures or services, and/or working in an area with a suspected or known case of a person infected with SARs-CoV-2, the novel pathogen which causes COVID-19.

Instance 1: Employees in the Emergency Department and the Medical Surgical Telemetry Unit 4West were not provided with NIOSH approved respirators at least as effective as an N95 filtering facepiece respirator when they were in the area where cases and suspected cases of COVID-19 were located, and during the performance of procedures or services for COVID-19 patients. {§5199(g)(4)(B & D)}

Instance 2: Respirators selected in accordance with subsection (g)(3) and section 5144, were not made accessible for employees in the Emergency Department and the Medical Surgical Telemetry Unit 4West to use when required. {§5199(g)(4)(B & D)}

Instance 3: The employer failed to provide and ensure the use of NIOSH approved respirators by requiring employees in the Emergency department and the Medical Surgical Telemetry Unit 4West to use powered air purifying respirators (PAPRs) with defective face shields that were being held together by duct tape. {§5199(g)(1)}

**Date By Which Violation Must be Abated:**  
**Proposed Penalty:**

**November 17, 2020**  
**\$18000.00**

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Citation 4 Item 1 Type of Violation: **Serious**

**T8 CCR section 5199(i) Aerosol Transmissible Diseases.****(i) Training.**

**(1) Employers shall ensure that all employees with occupational exposure participate in a training program.**

**(2) Employers shall provide training as follows:**

**(A) At the time of initial assignment to tasks where occupational exposure may take place;**

**(B) At least annually thereafter, not to exceed 12 months from the previous training;**

**(C) For employees who have received training on aerosol transmissible diseases in the year preceding the effective date of the standard, only training with respect to the provisions of the standard that were not included previously need to be provided.**

**(D) When changes, such as introduction of new engineering or work practice controls, modification of tasks or procedures or institution of new tasks or procedures, affect the employee's occupational exposure or control measures. The additional training may be limited to addressing the new exposures or control measures.**

**(3) Training material appropriate in content and vocabulary to the educational level, literacy, and language of employees shall be used.**

**(4) The training program shall contain at a minimum the following elements:**

**(A) An accessible copy of the regulatory text of this standard and an explanation of its contents.**

**(B) A general explanation of ATDs including the signs and symptoms of ATDs that require further medical evaluation.**

**(C) An explanation of the modes of transmission of ATPs or ATPs-L and applicable source control procedures.**

**(D) An explanation of the employer's ATD Exposure Control Plan and/or Biosafety Plan, and the means by which the employee can obtain a copy of the written plan and how they can provide input as to its effectiveness.**

**(E) An explanation of the appropriate methods for recognizing tasks and other activities that may expose the employee to ATPs or ATPs-L.**

**(F) An explanation of the use and limitations of methods that will prevent or reduce exposure to ATPs or ATPs-L including appropriate engineering and work practice controls, decontamination and disinfection procedures, and personal and respiratory protective equipment.**

**(G) An explanation of the basis for selection of personal protective equipment, its uses and limitations, and the types, proper use, location, removal, handling, cleaning, decontamination and disposal of the items of personal protective equipment employees will use.**

**(K) An explanation of the procedure to follow if an exposure incident occurs, including the method of reporting the incident, the medical follow-up that will be made available, and post-exposure evaluation.**

**(L) Information on the employer's surge plan as it pertains to the duties that employees will perform.**

**(5) Every training program shall include an opportunity for interactive questions and answers with a person who is knowledgeable in the subject matter of the training as it relates to the workplace that the training addresses and who is also knowledgeable in the employer's ATD exposure control or biosafety plan. Training not given in person shall fulfill all the subject matter requirements of subsections (i)(4) and shall provide for interactive questions to be answered within 24 hours by a knowledgeable person as described above.**

Prior to and during the course of the inspection, the employer failed to provide the required training in accordance with this subsection to employees with occupational exposure to aerosol transmissible pathogens (ATP), specifically the novel pathogen SARs-CoV-2, the virus which causes COVID-19.

Instance 1: The employer failed to train employees of all the modes of transmission of the novel pathogen SARs-CoV-2, including transmission through the inhalation of aerosols, and the appropriate source controls for preventing COVID-19 as an airborne infectious disease. {§5199 (i)(4)(C)}

Instance 2: The employer failed to train employees of an effective method for recognizing the airborne hazards from specific tasks and other activities which generate exposure by inhalation of aerosols containing the novel pathogen SARs-CoV-2. {§5199 (i)(4)(E)}

Instance 3: The employer failed to train employees of the limitations of the employer's "droplet" precautions for preventing exposure to the novel pathogen SARs-CoV-2. Employees were not informed that medical (surgical) masks would not protect them against inhalation of infectious aerosols, and NIOSH certified respirators were necessary to protect against these exposures. {§5199



(i)(4)(F) &(G)}

**Date By Which Violation Must be Abated:**  
**Proposed Penalty:**

**November 20, 2020**  
**\$18000.00**

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Kathy Lynn Garner  
Compliance Officer / District Manager