

State of California
Division of Occupational Safety and Health
Cal/OSHA Santa Ana District (0950631:4031)
2000 East McFadden Avenue, Suite 122
Santa Ana, CA 92705
Phone: Fax: (714) 558-2035



Citation and Notification of Penalty

To:
DISNEYLAND RESORT

and its successors
1313 S HARBOR BLVD
ANAHEIM, CA 92803

Inspection Site:
1313 S HARBOR BLVD
ANAHEIM, CA 92803

Inspection Number: 315531277
Inspection Date(s): 10/10/2012 - 03/22/2013

Issuance Date: 03/22/2013
CSHO ID: Q1303
Optional Report #: 027-13
Reporting ID: 0950631

The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.

This Citation and Notification of Penalty (hereinafter Citation) is being issued in accordance with California Labor Code Section 6317 for violations that were found during the inspection/investigation. **This Citation or a copy must be prominently posted upon receipt by the employer at or near the location of each violation until the violative condition is corrected or for three working days, whichever is longer.** Violations of Title 8 of the California Code of Regulations or of the California Labor Code may result in some instances in prosecution for a misdemeanor.

YOU HAVE A RIGHT to contest this Citation and Notification of Penalty by filing an appeal with the Occupational Safety and Health Appeals Board. To initiate your appeal, you **must** contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of this Citation. If you miss the 15 working day deadline to appeal, the Citation and Notification of Penalty becomes a final order of the Appeals Board, not subject to review by any court or agency.

Informal Conference - You may request an informal conference with the Manager of the District Office which issued the Citation within 10 working days after receipt of the Citation. However, if the citation is appealed, you may request an informal conference at any time prior to the day of the hearing. Employers are encouraged to schedule a conference at the earliest possible time to assure an expeditious resolution of any issues. At the informal conference, you may discuss the existence of the alleged violation, classification of the violation, abatement date or proposed penalty.

Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an agreement which resolves this matter without litigation or contest.

APPEAL RIGHTS

The Occupational Safety and Health Appeals Board (Appeals Board) consists of three members appointed by the Governor. The Appeals Board is a separate entity from the Division of Occupational Safety and Health (Division) and employs experienced attorneys as administrative law judges to hear appeals fairly and impartially. To initiate an appeal from a Citation and Notification of Penalty, you must contact the Appeals Board, in writing or by telephone, within 15 working days from the date of receipt of a Citation. After you have initiated your appeal, you must then file a completed appeal form with the Appeals Board at the address listed below, for each contested citation. Failure to file a completed appeal form with the Appeals Board may result in dismissal of the appeal. Appeal forms are available from district offices of the Division, or from the Appeals Board:

Occupational Safety and Health Appeals Board
2520 Venture Oaks Way, Suite 300
Sacramento, CA 95833
Telephone: (916) 274-5751 or (877) 252-1987
Fax: (916) 274-5785

If the Citation you are appealing alleges more than one item, you must specify on the appeal form which items you are appealing. You must also attach to the appeal form a legible copy of the Citation you are appealing. In addition, please send a copy of Page 1 of this Citation and Notification of Penalty, the cover sheet.

Among the specific grounds for an appeal are the following: the safety order was not violated, the classification of the alleged violation (e.g., serious, repeat, willful) is incorrect, the abatement requirements are unreasonable or the proposed penalty is unreasonable.

Important: You must notify the Appeals Board, not the Division, of your intent to appeal within 15 working days from the date of receipt of the Citation. Otherwise, the Citation and Notification of Penalty becomes a final order of the Appeals Board not subject to review by any court or agency. An informal conference with the Division does not constitute an appeal and does not stay the 15 working day appeal period. If you have any questions concerning your appeal rights, call the Appeals Board, (916) 274-5751 or (877) 252-1987

PENALTY PAYMENT OPTIONS

Penalties are due within 15 working days of receipt of this Citation and Notification of Penalty unless contested. If you are appealing any item of the citation, remittance is still due on all items that are not appealed. Enclosed for your use is a Penalty Remittance Form for payment.

If you are paying electronically, please have the Penalty Remittance Form on hand when you are ready to make your payment. The company name, index code, reporting ID, and Citation number(s) will be required in order to ensure that the payment is accurately posted to your account. Please go to www.dir.ca.gov/dos to access the secure payment processing site.

If you are paying by check, return one copy of the Citation, along with the Notice of Proposed Penalties Sheet and the Penalty Remittance Form and mail to:

Department of Industrial Relations

Cashier, Accounting Office

P. O. Box 420603

San Francisco, CA 94142-0603

CAL/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions, or endorsements do not exist.

NOTIFICATION OF CORRECTIVE ACTION

For violations which you do not contest, you should notify the Division of Occupational Safety and Health promptly by letter that you have taken appropriate corrective action within the time frame set forth on this Citation and Notification of Penalty. Please inform the District Office listed on the Citation by submitting the CAL/OSHA 160 and/or 161 with the abatement steps you have taken and the date the violation was abated, together with adequate supporting documentation, e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results, etc. The adjusted penalty for serious and general violations is reduced by 50% on the presumption that the employer will correct the violations by the abatement date. **If the CAL/OSHA 161 is not received in the District Office within 10 days following the abatement date, the abatement credit is revoked, causing the penalty to double.**

Note: Return the CAL/OSHA 160/161 to the District Office listed on the Citation and as shown below:

Division of Occupational Safety and Health
Cal/OSHA Santa Ana District
2000 East McFadden Avenue, Suite 122
Santa Ana, CA 92705
Phone: (714) 558-4451 Fax: (714) 558-2035

EMPLOYEE RIGHTS

Employer Discrimination Unlawful - The law prohibits discrimination by an employer against an employee for filing a complaint or for exercising any rights under Labor Code Section 6310 or 6311. An employee who believes that he/she has been discriminated against may file a complaint no later than six (6) months after the discrimination occurred with the Division of Labor Standards Enforcement.

Employee Appeals - An employee or authorized employee's representative may, within 15 working days of the issuance of a citation, special order, or order to take special action, appeal to the Occupational Safety and Health Appeals Board the reasonableness of the period of time fixed by the Division of Occupational Safety and Health (Division) for abatement. An employee appeal may be filed with the Appeals Board or with the Division. No particular format is necessary to initiate the appeal, but the notice of appeal must be in writing.

If an Employee Appeal is filed with the Division, the Division shall note on the face of the document the date of receipt, include any envelope or other proof of the date of mailing, and promptly transmit the document to the Appeals Board. The Division shall, no later than 10 working days from receipt of the Employee Appeal, file with the Appeals Board and serve on each party a clear and concise statement of the reasons why the abatement period prescribed by it is reasonable.

Employee Appeal Forms are available from the Appeals Board, or from a District Office of the Division.

Employees Participation in Informal Conference. Affected employees or their representatives may notify the District Manager that they wish to attend the informal conference. If the employer objects, a separate informal conference will be held.

DISABILITY ACCOMMODATION

Disability accommodation is available upon request. Any person with a disability requiring an accommodation, auxiliary aid or service, or a modification of policies or procedures to ensure effective communication and access to the programs of the Division of Occupational Safety and Health, should contact the Disability Accommodation Coordinator at the local district office or the Statewide Disability Accommodation Coordinator at 1-866-326-1616 (toll free). The Statewide Coordinator can also be reached through the California Relay Service, by dialing 711 or 1-800-735-2929 (TTY) or 1-800-855-3000 (TTY-Spanish).

Accommodations can include modifications of policies or procedures or provision of auxiliary aids or services. Accommodations include, but are not limited to, an Assistive Listening System (ALS), a Computer-Aided Transcription System or Communication Access Realtime Translation (CART), a sign-language interpreter, documents in Braille, large print or on computer disk, and audio cassette recording. Accommodation requests should be made as soon as possible. Requests for an ALS or CART should be made no later than five (5) days before the hearing or conference.

State of California

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Issuance Date: 03/22/2013
CSHO ID: Q1303
Optional Inspection Nbr: 027-13



Citation and Notification of Penalty

Company Name: DISNEYLAND RESORT
Inspection Site: 1313 S HARBOR BLVD, ANAHEIM, CA 92803

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

3203. Injury and Illness Prevention Program.

(a) Effective July 1, 1991, every employer shall establish, implement and maintain an effective Injury and Illness Prevention Program (Program). The Program shall be in writing and, shall, at a minimum:

(6) Include methods and/or procedures for correcting unsafe or unhealthy conditions, work practices and work procedures in a timely manner based on the severity of the hazard:

(A) When observed or discovered; and,

(B) When an imminent hazard exists which cannot be immediately abated without endangering employee(s) and/or property, remove all exposed personnel from the area except those necessary to correct the existing condition. Employees necessary to correct the hazardous condition shall be provided the necessary safeguards.

On or before October 3, 2012 the employer failed to implement and/or failed to ensure implementation of the required elements of an Injury and Illness Prevention Program including but not limited to:

1. The employer failed to establish and implement effective methods for correcting unsafe conditions on the Space Mountain attraction including but not limited to failure to protect employees from injury caused by moving attraction vehicles.

Date By Which Violation Must be Abated:

04/24/2013

Proposed Penalty:

\$ 7650.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

State of California

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Citation and Notification of Penalty

Company Name: DISNEYLAND RESORT
Inspection Site: 1313 S HARBOR BLVD, ANAHEIM, CA 92803

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

3314. The Control of Hazardous Energy for the Cleaning, Repairing, Servicing, Setting-Up, and Adjusting Operations of Prime Movers, Machinery and Equipment, Including Lockout/Tagout.

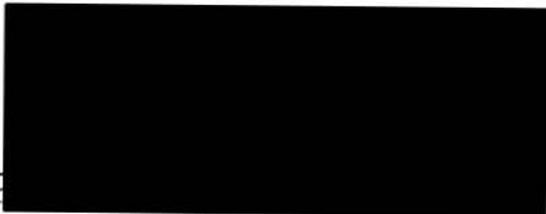
(c) Cleaning, Servicing and Adjusting Operations.

(1) If the machinery or equipment must be capable of movement during this period in order to perform the specific task, the employer shall minimize the hazard by providing and requiring the use of extension tools (eg., extended swabs, brushes, scrapers) or other methods or means to protect employees from injury due to such movement. Employees shall be made familiar with the safe use and maintenance of such tools, methods or means, by thorough training.

On or before 10/3/2012, the employer failed to create effective means or methods to protect employees from injury from vehicles traveling on the rail at the Space Mountain attraction, whose movement was necessary during the "Burn In" servicing procedure. As a result on 10/3/2012 an employee was seriously injured when he was struck by a moving attraction vehicle.

Date By Which Violation Must be Abated: 04/09/2013
Proposed Penalty: \$ 22500.00

Richard Fazlollah
District Manager



See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

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Phone: (714) 558-4451 Fax: (714) 558-2035

NOTICE OF PROPOSED PENALTIES

Company Name: DISNEYLAND RESORT
Inspection Site: 1313 S HARBOR BLVD, ANAHEIM, CA 92803
Mailing Address: 1313 S HARBOR BLVD, ANAHEIM, CA 92803
Issuance Date: 03/22/2013
Reporting ID: 0950631
Index Code: 4031

Summary of Penalties for Inspection Number 315531277

Citation 1, Serious	= \$	7650.00
Citation 2, Serious	= \$	22500.00
TOTAL PROPOSED PENALTIES	= \$	30150.00

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If you are paying electronically: Please have this form on-hand when you are ready to make your payment. The company name, index code, reporting ID and Citation number(s) will be required to ensure that the payment is accurately posted to your account. Please go to www.dir.ca.gov/dosh to access the secure payment processing site.

DIVISION OF OCCUPATIONAL SAFETY AND HEALTH - CAL/OSHA
CASHIER, ACCOUNTING OFFICE
P. O. BOX 420603
SAN FRANCISCO, CA 94142-0603
(415) 703-4291 or (415) 703-4295 or Fax (415) 703-3037

CAL/OSHA does not agree to any restrictions, conditions or endorsements put on any check or money order for less than the full amount due, and will cash the check or money order as if these restrictions, conditions or endorsements do not exist.

DEPARTMENT OF INDUSTRIAL RELATIONS
 DIVISION OF OCCUPATIONAL SAFETY AND HEALTH - CAL/OSHA
 Cashier, Accounting Office
 P.O. Box 420603
 San Francisco, CA 94142-0603
 Phone (415) 703-4291 or (415) 703-4295 Fax (415) 703-3037

PENALTY REMITTANCE FORM

CIVIL PENALTY INFORMATION	INSPECTION NUMBER	<u>315531277</u>	REPORTING ID	<u>0950631</u>	INDEX CODE	<u>4031</u>
	ESTABLISHMENT NAME	<u>DISNEYLAND RESORT</u>				
	CONTACT PERSON	_____				
	PHONE NO.	_____	FAX NO.	_____		
	SITE ADDRESS	<u>1313 S HARBOR BLVD. ANAHEIM</u>				
	MAILING ADDRESS	<u>1313 S HARBOR BLVD. ANAHEIM, CA. 92803</u>				

CITATION INFORMATION (Penalties are due within 15 working days of receipt of this notification unless contested. If you are appealing any item of this citation, remittance is still due on all items that are not appealed.)

Payment is for the following Citation Items: (i.g. Citation 1, Items 1-5; Citation 3)

TYPE OF PAYMENT ENCLOSED

CHECK OR MONEY ORDER INFORMATION

CHECK ENCLOSED IN THE AMOUNT OF \$ _____

MONEY ORDER ENCLOSED IN THE AMOUNT OF \$ _____

(Please make check or money order payable to CAL/OSHA and mail to the Cashier, Accounting Office, at the above address. Reference the Inspection Number on the "memo" portion of your check or money order.)

Go to www.dir.ca.gov/dosh to access the on-line third party secure payment processing site or complete this section and fax to (415) 703-3037

CREDIT CARD INFORMATION: CONVENIENCE FEE APPLIES

CREDIT CARD NO. _____ EXPIRATION DATE _____

CREDIT TYPE _____ SECURITY CODE (last 3 digits on back of card) _____ (4 digits on front of Amex card)

NAME OF CARDHOLDER _____ SIGNATURE _____

EMAIL ADDRESS _____

CARDHOLDER PHONE NO. _____ FAX NO. _____

AMOUNT OF PAYMENT \$ _____

----- FOR OFFICE USE ONLY -----

AUTHORIZATION NO. _____ DATE PROCESSED _____

PROCESSED BY _____

Please call (415) 703-4291 or (415) 703-4295 or complete the information above and fax to (415) 703-3037
 ELECTRONIC FUNDS TRANSFER EFT OPTION-NO CONVENIENCE FEE APPLIES: GO TO www.dir.ca.gov/dosh

Cal/OSHA-2-PR-1576/10



Investigation Summary

Thu Oct 11, 2012 11:01am

Reporting ID	Investigation Summary Number	OSHA-36 Number	OSHA-36 Establishment Name
0950631	202554895	102815925	DISNEYLAND RESORT
Event Date	10/03/12	Event Time	09:45 pm
Type of Event	STRUCK BY AMUSEMENT RIDE VEHICLE		

Inspection Number/ Establishment Name	315531277 DISNEYLAND RESORT
Injured/Deceased Name	CHRISTOPHER MONDAY
Sex:	M. Male
Age:	68
Injury:	B. Hospitalized
Nature:	12 Fracture
Part of Body:	19 Multiple
Source of Injury:	43 Other
Event Type:	01 Struck by
Environmental Factor:	18 Other
Human Factor:	01 Misjudgment of hazardous situation
Task:	A Regularly Assigned
Substance Code:	
Occupational Code:	637 - MACHINISTS

Abstract:

The Division was notified on 10/3/12 that an employee had been injured earlier that same night. Employer is a large amusement resort. The injured is a full-time, union maintenance machinist. On the night of the accident the injured employee was one of two maintenance machinists performing check out maintenance on an amusement attraction vehicle. The injured employee was observed standing in a danger zone, and although a warning was shouted, the injured was struck by the attraction vehicle which was traveling at approximately 30 mph. The injured was hospitalized with multiple fractures and internal injuries. The reason the injured was standing in the danger zone was not determined at this time.

CSHO Signature:		Date:	10/11/12
DM Signature:		Date:	10/22/12
RM Signature:		Date:	

NARRATIVE SUMMARY

Establishment Name	DISNEYLAND RESORT	Inspection Number	315531277
Management Contacted	Ken Colonna	Title	Director, Safety and Health

Information on Injured Covered by Workers' Compensation Yes No

Name, Address and Phone Number	Occupation
#1 Christopher Monday, [REDACTED]	machinist

Witness Name(s) and Title *Check box preceding name if confidentiality is given.

*	Names and Title(s)	Address	Phone No.	Signed Statement?		
				Y	N	X
	#2 Bob Neuzil, outside machinist	use company	use company	Y	N	X
	#3 Sam Toscano, attractions host	use company		Y	N	X
				Y	N	

Summary: The Division was notified on 10/3/12 by employer and local fire dept that an employee had suffered a serious injury earlier that night while working at 1313 S Harbor Blvd., Anaheim CA. CSHO T, R Johns was assigned the inspection on 10/8/12 and an opening conference was conducted at employer's place of employment on 10/10/12.

Employer is a large amusement park and resort. Employee #1 is a union journeyman machinist with over 7 years experience with the employer.

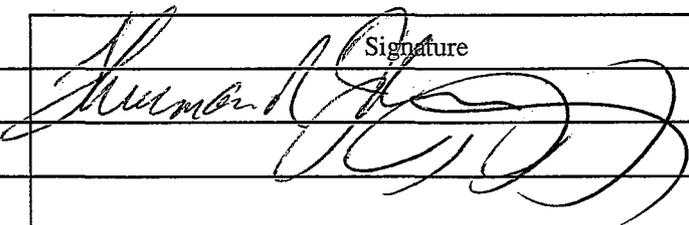
On the evening of the accident, Employees #1 and #2 were working at the Space Mountain attraction performing a "Burn-In" procedure. This is a servicing task in which both employees walk the entire attraction rail to ensure that there are no anomalies occurring with a vehicle that is being brought back after a substantial rehabilitation rework. The procedure calls for the vehicle to be placed in continuous operation for six hours. The two employees begin at the top of the attraction and walk down a fall protected walkway, listening and looking at specific areas, to ensure there are no problems. The vehicle stops at the guest loading area, and is immediately dispatched by another employee, #3, if nothing requires the vehicle to be held, such as a red light on the monitored control board or radio call from employee #1 or #2.

Employee #1 and #2 had been performing their task for about one hour and had made their way to the lower section of the attraction. At that point, a red line delineates a danger zone where no one is to enter during the operation of a vehicle. Employee #2 went to a panel to ensure that the pneumatics that would show fractures in the rail of the track were in operation. When #2 turned around, he observed employee #1 standing in the

danger zone about 10 yards away, and saw the vehicle approaching at a speed of approximately 35 miles per hour. Employee #2 shouted a warning at employee #1, who began to turn, but was struck by the vehicle and knocked to the ground about 10 feet away. Employee #2 called on one of the attraction inter-phones to have emergency personnel called. A Disneyland Nurse and other security members arrived as well as an Anaheim Fire Dept EMT crew. Employee #1 was transported to UCI Medical Center where he was hospitalized for three weeks for fractured ribs, arm and lacerated liver and spleen.

CAUSE: The direct cause of employee #1's injuries was his being struck by the vehicle as it moved on the track. The job task required the vehicle to be running, it ran continuously except for the few seconds of stoppage time at the guest load area, and the noise of the running vehicle could be heard throughout the inner attraction. Employee #1 stated he had written the procedure in use for the Burn-In procedure, and that he was a trainer for new machinists who went to work at this attraction. Employer and employees stated that Cal/OSHA Amusement Ride inspectors had been at this attraction for over seven years, had reviewed all procedures in use, and had never brought up any issues with the procedure. He had performed the task of servicing during a Burn-In multiple times before the incident. He also stated he had no idea why he had stepped inside the danger zone. Employee #2 stated he was not aware of any reason employee #1 had stepped into the danger zone and stood next to the track.

CITATIONS: Division management issued citations to the employer in the amount of \$30,150. These citations were issued as follows: (1) Serious violation of T8CCR 3203(a)(6), alleging employer failed to implement its IIPP by not establishing and implementing a correction to an unsafe condition at the attraction, and (2) SERIOUS Accident-Related violation of T8CCR 3314(c)(1) alleging employer failed to create effective means and methods for protecting employees from a moving vehicle during a servicing procedure, the Burn-In process.

		Signature	Date
Prepared by:	CSE, IH		8/22/13
Reviewed by:	DM/SR. IH		3/22/13
	Regional Manager		