

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 3/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA:
and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

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

California Code of Regulations, Title 8, 3203(a). 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:

- (1) Identify the person or persons with authority and responsibility for implementing the Program.
- (2) Include a system for ensuring that employees comply with safe and healthy work practices. Substantial compliance with this provision includes recognition of employees who follow safe and healthful work practices, training and retraining programs, disciplinary actions, or any other such means that ensures employee compliance with safe and healthful work practices.
- (3) Include a system for communicating with employees in a form readily understandable by all affected employees on matters relating to occupational safety and health, including provisions designed to encourage employees to inform the employer of hazards at the worksite without fear of reprisal. Substantial compliance with this provision includes meetings, training programs, posting, written communications, a system of anonymous notification by employees about hazards, labor/management safety and health committees, or any other means that ensures communication with employees.
- (4) Include procedures for identifying and evaluating work place hazards including scheduled periodic inspections to identify unsafe conditions and work practices. Inspections shall be made to identify and evaluate hazards:
- (5) Include a procedure to investigate occupational injury or occupational illness.
- (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:
- (7) Provide training and instruction:

Prior to and during the course of the investigation, including but not limited to, on May 29, 2020, the employer failed to establish, implement and maintain an effective Injury and Illness Prevention Program. In addition to failing to establish a program, the employer failed to have a system and procedures in place to communicate in a manner understandable to all employees on the new occupational hazard of COVID-19; to identify and evaluate the workplace hazard of COVID-19; to investigate occupational cases of COVID-19; to correct conditions, practices, or procedures made unhealthy by COVID-19; or provide training or instruction to employees on the new occupational hazard of COVID-19.

Date By Which Violation Must be Abated:

April 01, 2021

Proposed Penalty:

\$25000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 3/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA: and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

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

California Code of Regulations, Title 8. 5199(d). Aerosol Transmissible Diseases.

(d) Aerosol Transmissible Diseases Exposure Control Plan.

(1) The employer shall establish, implement, and maintain an effective, written ATD Exposure Control Plan (Plan) which is specific to the work place or operation(s), and which contains all of the elements in subsection (d)(2).

(2) The Plan shall contain all of the following elements:

(A) The name(s) or title(s) of the person(s) responsible for administering the Plan. This person shall be knowledgeable in infection control principles and practices as they apply to the facility, service or operation.

(B) A list of all job classifications in which employees have occupational exposure.

(C) A list of all high hazard procedures performed in the facility, service or operation, and the job classifications and operations in which employees are exposed to those procedures.

(D) A list of all assignments or tasks requiring personal or respiratory protection.

(E) The methods of implementation of subsections (e), (g), (h), (i) and (j) as they apply to that facility, service or work operation. Specific control measures shall be listed for each operation or work area in which occupational exposure occurs. These measures shall include applicable engineering and work practice controls, cleaning and decontamination procedures, and personal protective equipment and respiratory protection. In establishments where the Plan pertains to laboratory operations, it also shall contain the methods of implementation for subsection (f), unless those operations are included in a Biosafety Plan.

(F) A description of the source control measures to be implemented in the facility, service or operation, and the method of informing people entering the work setting of the source control measures.

(G) The procedures the employer will use to identify, temporarily isolate, and refer or transfer AirID cases or suspected cases to All rooms, areas or facilities. These procedures shall include the methods the employer will use to limit employee exposure to these persons during periods when they are not in airborne infection isolation rooms or areas. These procedures shall also include the methods the

employer will use to document medical decisions not to transfer patients in need of All in accordance with subsection (e)(5)(B).

(H) The procedures the employer will use to provide medical services, including recommended vaccinations and follow-up, as required in subsection (h). This shall include the procedures the employer will use to document the lack of availability of a recommended vaccine.

(I) The procedures for employees and supervisors to follow in the event of an exposure incident, including how the employer will determine which employees had a significant exposure, in accordance with subsections (h)(6) through (h)(9).

(J) The procedures the employer will use to evaluate each exposure incident, to determine the cause, and to revise existing procedures to prevent future incidents.

(K) The procedures the employer will use to communicate with its employees and other employers regarding the suspected or confirmed infectious disease status of persons to whom employees are exposed in the course of their duties, in accordance with subsection (h).

(L) The procedures the employer will use to communicate with other employers regarding exposure incidents, including procedures for providing or receiving notification to and from health care providers about the disease status of referred or transferred patients, in accordance with subsection (h).

(M) The procedures the employer will use to ensure that there is an adequate supply of personal protective equipment and other equipment necessary to minimize employee exposure to ATPs, in normal operations and in foreseeable emergencies.

(N) The procedures the employer will use to provide initial and annual training in accordance with subsection (i) to employees in job categories identified in subsection (d)(2)(B).

(O) The procedures the employer will use for recordkeeping, in accordance with subsection (j).

(P) An effective procedure for obtaining the active involvement of employees in reviewing and updating the exposure control plan with respect to the procedures performed in their respective work areas or departments in accordance with subsection (d)(3).

(Q) Surge procedures. Employers of employees who are designated to provide services in surge conditions, and employers of employees who are designated to provide services to persons who have been contaminated as the result of a release of a biological agent as described in subsection (a)(1)(B), shall include procedures for these activities in the plan. The plan shall include work practices, decontamination facilities, and appropriate personal protective equipment and respiratory protection for such events. The procedures shall include how respiratory and personal protective equipment will be stockpiled, accessed or procured, and how the facility or operation will interact with the local and regional emergency plan.

(3) The ATD Plan shall be reviewed at least annually by the program administrator, and by employees regarding the effectiveness of the program in their respective work areas. Deficiencies found shall be corrected. The review(s) shall be documented in writing, in accordance with subsection (j)(3)(A).

(4) The Plan shall be made available to employees, employee representatives, the Chief and NIOSH for examination and copying, in accordance with subsection (j)(4).

Prior to and during the course of the investigation, including but not limited to, on May 29, 2020, the employer failed to establish, implement, and maintain an effective written ATD Exposure Control Plan (Plan) specific to Kindred Hospital and its operations, and which addresses among other pathogens, the novel pathogen SARS-CoV-2, the virus that causes COVID-19, and contains the following:

(A) The name and title of the person administering the Plan (5199, subd. (d)(2)(A));

(B) A list of all job classifications in which employees have occupational exposure (5199, subd. (d)(2)(B));

(C) A list of all high hazard procedures performed in the facility, service or operation, and the job classifications and operations in which employees are exposed to those procedures (5199, subd. (d)(2)(C)); and

(D) A list of all assignments or tasks requiring personal or respiratory protection (5199, subd. (d)(2)(D)).

Date By Which Violation Must be Abated:

April 01, 2021

Proposed Penalty:

\$25000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 3/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA: and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

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

California Code of Regulations Title 8, 5199(e)(1). Aerosol Transmissible Diseases.
(e) 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.

Prior to and during the course of the investigation, including but not limited to, on May 29, 2020, the employer failed to minimize employee exposures to ATPs, like SARS CoV-2, the virus that causes COVID-19, by using feasible engineering and work practice controls, which should have included, among others, testing employees and patients for COVID-19 during the months of April and May 2020, to allow for earlier contact tracing, employee self-isolation, quarantine, and medical care.

Date By Which Violation Must be Abated: April 01, 2021
Proposed Penalty: \$25000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 3/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA:
and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

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

California Code of Regulations, Title 8, 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 Aird 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 investigation, including but not limited to, on May 29, 2020, the employer failed to provide, and ensure that an employee used, a respirator at least as effective as an N95 filtering facepiece when the employees worked at the long-term acute area and other areas in proximity to a case or suspected case of COVID-19.

Date By Which Violation Must be Abated:

April 01, 2021

Proposed Penalty:

\$25000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 3/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA:
and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

Citation 5 Item 1 Type of Violation: **Serious**

California Code of Regulations, Title 8. 5199(h)(6)(C). Aerosol Transmissible Diseases.

(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.
2. Within a timeframe that is reasonable for the specific disease, as described in subsection (h)(6)(B), but in no case later than 96 hours of becoming aware of the potential exposure, notify employees who had significant exposures of the date, time, and nature of the exposure.
3. As soon as feasible, provide post-exposure medical evaluation to all employees who had a significant exposure. The evaluation shall be conducted by a PLHCP knowledgeable about the specific disease, including appropriate vaccination, prophylaxis and treatment. For M. tuberculosis,

and for other pathogens where recommended by applicable public health guidelines, this shall include testing of the isolate from the source individual or material for drug susceptibility, unless the PLHCP determines that it is not feasible.

4. Obtain from the PLHCP a recommendation regarding precautionary removal in accordance with subsection (h)(8), and a written opinion in accordance with subsection (h)(9).

5. Determine, to the extent that the information is available in the employer's records, whether employees of any other employers may have been exposed to the case or material. The employer shall notify these other employers within a time frame that is reasonable for the specific disease, as described in subsection (h)(6)(B), but in no case later than 72 hours of becoming aware of the exposure incident of the nature, date, and time of the exposure, and shall provide the contact information for the diagnosing PLHCP. The notifying employer shall not provide the identity of the source patient to other employers.

Prior to and during the course of the inspection, including but not limited to, during the period April through May 2020, upon becoming aware that employees may have been exposed to cases or suspected cases of COVID-19, the employer failed to conduct analyses of the exposure scenarios to determine which employee had significant exposures; notify employees who had significant exposures; or provide those employees with post-exposure medical services.

Date By Which Violation Must be Abated:
Proposed Penalty:

April 01, 2021
\$25000.00

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Santa Ana District Office
2 MacArthur Place, Suite 720
Santa Ana, CA 92707
Phone: (714) 558-4451 Fax: (714) 558-2035

Inspection #: 1477006
Inspection Dates: 06/01/2020 – 03/22/2021
Issuance Date: 03/22/2021
CSHO ID: P8008
Optional Report #:



Citation and Notification of Penalty

Company Name: Kindred Hospital
Establishment DBA:
and its successors
Inspection Site: 875 N. Brea Blvd.
Brea, CA 92821

Citation 6 Item 1 Type of Violation: **Serious**

California Code of Regulations, Title 8. 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.

(H) A description of the employer's TB surveillance procedures, including the information that persons who are immune-compromised may have a false negative test for LTBI.

(J) Information on the vaccines made available by the employer, including information on their efficacy, safety, method of administration, the benefits of being vaccinated, and that the vaccine and vaccination will be offered free of charge.

(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. As applicable, this training shall cover the plan for surge receiving and treatment of patients, patient isolation procedures, surge procedures for handling of specimens, including specimens from persons who may have been contaminated as the result of a release of a biological agent, how to access supplies needed for the response including personal protective equipment and respirators, decontamination facilities and procedures, and how to coordinate with emergency response personnel from other agencies.

(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, including but not limited to, on May 29, 2020, 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 that causes COVID-19, to include an explanation of the modes of transmission and applicable source control procedures, the appropriate methods for recognizing tasks and other activities where employees may be exposed; and the uses and limitations of methods that will prevent or reduce exposure, including appropriate engineering and work practice controls, decontamination and disinfection procedures, and personal and respiratory protective equipment.

Date By Which Violation Must be Abated:

April 01, 2021

Proposed Penalty:

\$25000.00

Ujjitha Perera
Compliance Officer / District Manager