

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 #: 1479470
Inspection Dates: 06/18/2020 - 02/04/2021
Issuance Date: 02/04/2021
CSHO ID: J9223
Optional Report #: 032-20



Citation and Notification of Penalty

Company Name: Prime Healthcare Anaheim, LLC
Establishment DBA: West Anaheim Medical Center
and its successors
Inspection Site: 3033 W. Orange Avenue
Anaheim, CA 92804

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

California Code of Regulations, Title 8, Section 5199(j)(3)(g). Aerosol Transmissible Diseases.

(j) Recordkeeping.

(3) Records of implementation of ATD Plan and/or Biosafety Plan.

(G) Records of the respiratory protection program shall be established and maintained in accordance with Section 5144, Respiratory Protection, of these orders. Employers who provide fit-test screening, in accordance with the exception to subsection (g)(6)(B)3 shall retain the screening record for two years.

Prior to and during the course of the inspection, the employer failed to ensure that records of the respiratory protection program were established and maintained in accordance with Section 5144, Respiratory Protection, of these orders. Specifically, the records of fit-test screenings did not contain the following information required by 18CCR 5144(m)(2):

- a. Type of fit test performed; and**
- b. Specific make, model, style, and size of respirator tested.**

Date By Which Violation Must be Abated:	March 10, 2021
Proposed Penalty:	\$375.00

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

California Code of Regulations, Title 8, Section 5193(c)(1). Bloodborne Pathogens.

(c) Exposure Response, Prevention and Control.

(1) Exposure Control Plan.

(A) Each employer having an employee(s) with occupational exposure as defined by subsection (b) of this section shall establish, implement and maintain an effective Exposure Control Plan which is designed to eliminate or minimize employee exposure and which is also consistent with Section 3203.

(B) The Exposure Control Plan shall be in writing and shall contain at least the following elements:

2. The schedule and method of implementation for each of the applicable subsections: (d) Methods of Compliance, (e) HIV, HBV and HCV Research Laboratories and Production Facilities, (f) Hepatitis B Vaccination and Post-exposure Evaluation and Follow-up, (g) Communication of Hazards to Employees, and (h) Recordkeeping, of this standard;

3. The procedure for the evaluation of circumstances surrounding exposure incidents as required by subsection (f)(3)(A).

4. An effective procedure for gathering the information required by the Sharps Injury Log.

5. An effective procedure for periodic determination of the frequency of use of the types and brands of sharps involved in the exposure incidents documented on the Sharps Injury Log;

NOTE: Frequency of use may be approximated by any reasonable and effective method.

6. An effective procedure for identifying currently available engineering controls, and selecting such controls, where appropriate, for the procedures performed by employees in their respective work areas or departments;

7. An effective procedure for documenting patient safety determinations made pursuant to Exception 2. of subsection (d)(3)(A); and

8. An effective procedure for obtaining the active involvement of employees in reviewing and updating the exposure control plan with respect to the procedures performed by employees in their respective work areas or departments.

(D) The Exposure Control Plan shall be reviewed and updated at least annually and whenever necessary as follows:

1. To reflect new or modified tasks and procedures which affect occupational exposure;
- 2.a. To reflect changes in technology that eliminate or reduce exposure to bloodborne pathogens; and
- b. To document consideration and implementation of appropriate commercially available needleless systems and needle devices and sharps with engineered sharps injury protection;
3. To include new or revised employee positions with occupational exposure;
4. To review and evaluate the exposure incidents which occurred since the previous update; and
5. To review and respond to information indicating that the Exposure Control Plan is deficient in any area.

(E) Employees responsible for direct patient care. In addition to complying with subsections (c)(1)(B)6. and (c)(1)(B)8., the employer shall solicit input from non-managerial employees responsible for direct patient care who are potentially exposed to injuries from contaminated sharps in the identification, evaluation, and selection of effective engineering and work practice controls, and shall document the solicitation in the Exposure Control Plan.

Prior to and during the course of the inspection, the employer failed to establish, implement and maintain an effective Exposure Control Plan in the following instances:

Instance 1

The employer failed to include the elements set forth in t8CCR 5193(c)(1)(B)2. through t8CCR 5193(c)(1)(B)8. in its written Exposure Control Plan.

Instance 2

The employer failed to review and update its written Exposure Control Plan at least annually as required by t8CCR 5193(c)(1)(D).

Instance 3

The employer failed to document the input solicited from non-managerial employees in their Exposure Control Plan as required by t8CCR 5193(c)(1)(E).

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\$700.00

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

California Code of Regulations, Title 8, Section 5193(c)(2). Bloodborne Pathogens.

(c) Exposure Response, Prevention and Control.
 (2) Sharps Injury Log.

The employer shall establish and maintain a Sharps Injury Log, which is a record of each exposure incident involving a sharp. The information recorded shall include the following information, if known or reasonably available:

- (A) Date and time of the exposure incident;
 (B) Type and brand of sharp involved in the exposure incident;
 (C) A description of the exposure incident which shall include:
1. Job classification of the exposed employee;
 2. Department or work area where the exposure incident occurred;
 3. The procedure that the exposed employee was performing at the time of the incident;
 4. How the incident occurred;
 5. The body part involved in the exposure incident;
 6. If the sharp had engineered sharps injury protection, whether the protective mechanism was activated, and whether the injury occurred before the protective mechanism was activated, during activation of the mechanism or after activation of the mechanism, if applicable;
 7. If the sharp had no engineered sharps injury protection, the injured employee's opinion as to whether and how such a mechanism could have prevented the injury; and
 8. The employee's opinion about whether any engineering, administrative or work practice control could have prevented the injury.

Prior to and during the course of the inspection, the employer failed to establish and maintain a Sharps Injury Log that included the information required by t8CCR 5193(c)(2).

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

California Code of Regulations, Title 8, Section 5193(g)(2). Bloodborne Pathogens.

(g) Communication of Hazards to Employees.

(2) Information and Training.

(B) Training shall be provided as follows:

- 1. At the time of initial assignment to tasks where occupational exposure may take place;
- 2. At least annually thereafter.

(D) Annual training for all employees shall be provided within one year of their previous training.

Prior to and during the course of the inspection, the employer failed to ensure that Bloodborne Pathogens training was provided to all employees with occupational exposure (including, but not limited to registered nurses, respiratory therapists, licensed vocational nurses, vascular technicians, and sonographers) annually as required by t8CCR 5199(g)(2)(B) and t8CCR5199(g)(2)(D).

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**Citation and Notification of Penalty**

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

California Code of Regulations, Title 8, Section 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:

(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.

(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).

(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).

Prior to and during the course of the inspection, the employer failed to establish, implement, and maintain an effective written Aerosol Transmissible Diseases Exposure Control Plan (ATD Plan) in the following instances:

Instance 1

The employer's ATD Plan did not contain the methods of implementation required by subsections (e), (g), (h), (i) and (j) as they apply to that facility, service or work operation, with specific control measures for each operation or work area as required by t8CCR 5199(d)(2)(E).

Instance 2

The employer's ATD Plan did not contain the procedures used to provide medical services, including vaccine availability as required by t8CCR 5199(d)(2)(H).

Instance 3

The employer's ATD Plan did not contain procedures for employees and supervisors in the event of exposure as required by t8CCR 5199(d)(2)(I).

Instance 4

The employer's ATD Plan did not contain procedures to evaluate each exposure incident as required by t8CCR 5199(d)(2)(J).

Instance 5

The employer's ATD Plan did not contain procedures to communicate suspected or confirmed infectious disease status as required by t8CCR 5199(d)(2)(K).

Instance 6

The employer's ATD Plan did not contain procedures the employer will use to communicate with other employees regarding exposure incidents, including providing or receiving notification to and from health care providers about the disease status of referred or transferred patients as required by t8CCR 5199(d)(2)(L).

Instance 7

The employer's ATD Plan did not contain procedures to ensure an adequate supply of personal protective equipment (PPE) and equipment necessary to minimize employee exposure to ATPs as required by t8CCR 5199(d)(2)(M).

Instance 8

The employer's ATD Plan did not contain procedures to provide initial and annual training as required by t8CCR 5199(d)(2)(N).

Instance 9

The employer's ATD Plan did not contain procedures for recordkeeping as required by t8CCR 5199(d)(2)(O).

Instance 10

The employer's ATD Plan did not contain procedures for obtaining active involvement of employees in reviewing and updating the exposure control plan as required by t8CCR 5199(d)(2)(P).

Instance 11

The employer failed to ensure that the ATD Plan was reviewed at least annually by: (a) the program administrator; and (b) employees regarding the effectiveness of the program in their respective work areas. The employer further failed to document the annual reviews in accordance with subsection (j)(3)(A) [Reference: t8CCR 5199(d)(3)].

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

California Code of Regulations, Title 8, Section 5199(h)(6)(C)1. 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.

Prior to and during the course of inspection, the employer failed to conduct the analysis required under 8CCR 5199(h)(6)(C)1 for employees in the Telemetry Unit after the employer had become aware that such employees may have been exposed to a confirmed or suspect case of COVID-19 to determine which employees had significant exposures.

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Citation 1 Item 7 Type of Violation: **General**

California Code of Regulations, Title 8, 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;

Prior to and during the course of the inspection, the employer failed to ensure that Aerosol Transmissible Diseases training was provided to all employees with occupational exposure (including, but not limited to registered nurses, respiratory therapists, licensed vocational nurses, vascular technicians, and sonographers) annually as required by t8CCR 5199(i)(2)(B).

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Proposed Penalty:	\$560.00

Ujitha Perera
Compliance Officer / District Manager