## **State of California**

Department of Industrial Relations
Division of Occupational Safety and Health
Fremont District Office
39141 Civic Center Drive, Suite 310

Fremont, CA 94538

Phone: (510) 794-2521 Fax: (510) 794-3889

**Inspection #:** 1497313

**Inspection Dates:** 10/14/2020 - 05/14/2021

 Issuance Date:
 05/14/2021

 CSHO ID:
 U1591

 Optional Report #:
 011-21



## Citation and Notification of Penalty

Company Name: Santa Clara Valley Medical Center

**Establishment DBA:** 

and its successors

**Inspection Site:** 751 S. Bascom Ave.

San Jose, CA 95128

<u>Citation 1 Item 1</u> 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 followina:
- 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)( $\delta$ )(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.
- REF. California Code of Regulations, Title 8, §5199(h)(8). Aerosol Transmissible Diseases.
- (8) Precautionary removal recommendation from the physician or other licensed health care professional.
- (A) Each employer who provides a post-exposure evaluation in accordance with this Section, or an evaluation of an employee's TB conversion in accordance with subsection (h)(3) shall request from the PLHCP an opinion regarding whether precautionary removal from the employee's regular assignment is necessary to prevent spread of the disease agent by the employee and what type of alternate work assignment may be provided. The employer shall request that the PLHCP convey to the employer any recommendation for precautionary removal immediately via phone or fax and that the PLHCP document the recommendation in the written opinion as required in subsection (h)(9).
- (B) Where the PLHCP recommends precautionary removal, or where the local health officer recommends precautionary removal, the employer shall maintain until the employee is determined to be noninfectious, the employee's earnings, seniority, and all other employee rights and benefits, including the employee's right to his or her former job status, as if the employee had not been removed from his or her job or otherwise medically limited.

Prior to and during the course of the inspection, including, but not limited to October 14, 2020, the employer failed to effectively investigate exposure incidents where employees who were not protected by respiratory protection had close contact with COVID-19 cases. The employer did not place employees on precautionary removal after discovering they were exposed to a COVID-19 case.

	May 26, 2021 \$10125.00
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	Kelly Tatum Compliance Officer / District Manager