

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 #: 1489271
Inspection Dates: 08/18/2020 - 06/10/2021
Issuance Date: 06/10/2021
CSHO ID: R4096
Optional Report #: 011-21

**Citation and Notification of Penalty**

Company Name: California Department of Corrections and Rehabilitation-California Medical Facility

and its successors

Inspection Site: 1600 California Dr.
 Vacaville, CA 95696

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

Title 8 CCR Section 3203(a)(7). 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:

(7) Provide training and instruction:

(A) When the program is first established;

(B) To all new employees;

(C) To all employees given new job assignments for which training has not previously been received;

(D) Whenever new substances, processes, procedures or equipment are introduced to the workplace and represent a new hazard;

(E) Whenever the employer is made aware of a new or previously unrecognized hazard; and,

(F) For supervisors to familiarize themselves with the safety and health hazards to which employees under their immediate direction and control may be exposed.

Prior to and during the course of the inspection, including but not limited to, on August 18, 2020, the employer failed to provide training and instruction on the systems and procedures of its Injury and Illness Prevention Program to all employees.

Date By Which Violation Must be Abated:

July 27, 2021

Proposed Penalty:

\$635.00

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Citation and Notification of Penalty

Company Name: California Department of Corrections and Rehabilitation-California Medical Facility

and its successors

Inspection Site: 1600 California Dr.
Vacaville, CA 95696

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

Title 8 CCR Section 5199 (g)(5). Aerosol Transmissible Diseases.

(g) Respiratory Protection.

(5) Medical evaluation: The employer shall provide a medical evaluation, in accordance with Section 5144(e) of these orders, to determine the employee's ability to use a respirator before the employee is fit tested or required to use the respirator. For employees who use respirators solely for compliance with subsections (g)(3)(A) and (g)(3)(B), the alternate questionnaire in Appendix B may be used.

Prior to and during the course of the inspection, including but not limited to, on August 18, 2020, the employer failed to ensure employees with occupational exposure were provided medical evaluations to determine the employee's ability to use a respirator before the employee was fit tested and required to use a respirator.

Date By Which Violation Must be Abated: July 27, 2021
Proposed Penalty: \$850.00

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**Citation and Notification of Penalty**

Company Name: California Department of Corrections and Rehabilitation-California Medical Facility

and its successors

Inspection Site: 1600 California Dr.
Vacaville, CA 95696

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

Title 8 CCR Section 5199(e). 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.
- (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.
- (B)** Each employer shall implement written source control procedures. For fixed health care and correctional facilities, and in field operations to the extent that it is reasonably practicable, these procedures shall incorporate the recommendations contained in the Respiratory Hygiene/Cough Etiquette in Health Care Settings. The procedures shall include methods to inform individuals entering the facility, being transported by employees, or otherwise in close contact with employees, of the source control practices implemented by the employer.
- (5)** AirID cases or suspected cases shall be identified, and except in field operations and in settings where home health care or home-based hospice care is being provided, these individuals shall be:
- (C)** High-hazard procedures shall be conducted in All rooms or areas, such as a ventilated booth or tent. Persons not performing the procedures shall be excluded from the area, unless they use the respiratory and personal protective equipment required for employees performing these procedures.

Prior to and during the course of the inspection, including but not limited to, on August 18, 2020, the employer failed to implement work practice controls and/or provide and ensure use of personal protective equipment, to prevent or minimize employee exposures to airborne, droplet, and contact transmission of aerosol transmissible pathogens such as SARS CoV 2, the virus that causes COVID 19, in the following instances:

Instance 1: The employer failed to implement its own work practices during the month of October, 2020 when dental unit employees were allowed to perform aerosol generating procedures on asymptomatic inmates not tested negative for COVID-19 within the previous seven calendar days. [REF: 5199 (e)(1)]

Instance 2: The employer failed to implement effective written procedures for maintaining physical distancing for correctional and inmate fire fighters during emergency responses, response debriefings and while working in common areas. [REF. 5199(e)(1)]

Instance 3: The employer failed to maintain compliance with source control procedures in order to protect employees in that:

- a. Employees were observed without face coverings while talking to each other in Y dorm on October 1, 2020, and while working in the Associate Warden, Central Services Unit office on September 23th, 2020. [REF: 5199 (e)(1)(B)]
- b. Firefighters were allowed to work within 6 feet of each other without face coverings during debriefings and while sharing common areas in the fire station.[REF: 5199 (e)(1)(B)]

Instance 4: The employer permitted employees in the dental unit to perform aerosol generating procedures on unknown COVID inmates without restricting access to the operatory. [REF:5199(e)(5)(C)]

Date By Which Violation Must be Abated:	Corrected During Inspection
Proposed Penalty:	\$9560.00

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**Citation and Notification of Penalty**

Company Name: California Department of Corrections and Rehabilitation-California Medical Facility

and its successors

Inspection Site: 1600 California Dr.
Vacaville, CA 95696

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

Title 8 CCR Section 5199(g)(4). Aerosol Transmissible Diseases.

(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. (g) Respiratory Protection.**

Reference: 5199(g)(3). Aerosol Transmissible Diseases.

(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).

EXCEPTION 1 to subsection (g)(3)(B): Where a high hazard procedure is performed by placing the patient in a booth, hood or other ventilated enclosure that effectively contains and removes the aerosols resulting from the procedure, and the employee remains outside of the enclosure, the employee may use a respirator meeting the requirements of subsection (g)(3)(A).

EXCEPTION 2 to subsection (g)(3)(B): Paramedics and other emergency medical personnel in field operations may use a P100, R100 or N100 respirator in lieu of a PAPR, providing that the respirator is used in accordance with its NIOSH approval. If an employer selects N100 respirators for use under this subsection, the employer's respiratory protection program and employee training must address how an environment will be assessed for the presence of oil aerosols and how alternate respiratory protection will be made available to employees who must use respirators under conditions for which N materials are not suitable.

(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.

Prior to and during the course of the inspection including, but not limited to August 18, 2020, the employer failed to provide and ensure employees with occupational exposure to pathogens such as SARS CoV-2, the virus that causes COVID 19, use a respirator selected in accordance with subsection (g)(3) and section 5144, in the following instances:

Instance 1: The employer failed to provide powered air purifying respirators (PAPR) with a High Efficiency Particulate Air (HEPA) filter(s) to dental unit employees performing high hazard procedures during March, 2021 on potentially infected inmates when the employees used the PAPRs without the HEPA filters installed.

Instance 2: The employer failed to make PAPRs available and ensure their use in October, 2020, during high hazard procedures in the dental unit on inmates potentially infected and not tested as negative for COVID-19 in the previous 7 calendar days.

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

**Corrected During Inspection
\$7650.00**

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Inspection Site: 1600 California Dr.
Vacaville, CA 95696

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

Title 8 CCR Section 5199(g)(6)(B). Aerosol Transmissible Diseases.

(6) Fit testing.

(B) The employer shall ensure that each employee who is assigned to use a filtering facepiece or other tight-fitting respirator passes a fit test:

- 1. At the time of initial fitting;**
- 2. When a different size, make, model or style of respirator is used; and**
- 3. At least annually thereafter.**

Prior to and during the course of the inspection, including but not limited to, on August 18, 2020, the employer failed to fit test all staff assigned to use a filtering facepiece respirator to control occupational exposure risk to suspect and confirmed COVID 19 cases.

Date By Which Violation Must be Abated:	June 24, 2021
Proposed Penalty:	\$19125.00

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

Title 8 CCR Section 5199(g)(7). Aerosol Transmissible Diseases.

(7) The employer shall ensure that each respirator user is provided with initial and annual training in accordance with Section 5144, Respiratory Protection of these orders.

Reference: 5144. Respiratory Protection.

(k) Training and information. This subsection requires the employer to provide effective training to employees who are required to use respirators. The training must be comprehensive, understandable, and recur annually, and more often if necessary.

(1) The employer shall ensure that each employee can demonstrate knowledge of at least the following:

(A) Why the respirator is necessary and how improper fit, usage, or maintenance can compromise the protective effect of the respirator;

(B) What the limitations and capabilities of the respirator are;

(C) How to use the respirator effectively in emergency situations, including situations in which the respirator malfunctions;

(D) How to inspect, put on and remove, use, and check the seals of the respirator;

(E) What the procedures are for maintenance and storage of the respirator;

(F) How to recognize medical signs and symptoms that may limit or prevent the effective use of respirators; and

(G) The general requirements of this section.

Prior to and during the course of the inspection, including but not limited to, on August 18, 2020, the employer failed to ensure that all employees required to wear respirators were provided initial and annual training on the elements required in Section 5144(k)(1).

Date By Which Violation Must be Abated:
Proposed Penalty:

June 24, 2021
\$19125.00

State of California

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

Title 8 CCR 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 the inspection, including but not limited to, on August 18, 2020, the employer failed to conduct an analysis of the exposure scenarios when 11 staff tested positive for COVID-19 in September and October, 2020, to determine which employees had significant exposures when 5 staff experienced symptoms while at work or the next day and 4 staff were at work when they received their positive COVID test results.

Date By Which Violation Must be Abated:
Proposed Penalty:

Corrected During Inspection
\$9560.00

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

Title 8 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.
 - (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.
- EXCEPTION:** Research and production laboratories do not need to include training on surveillance for LTBI if *M. tuberculosis* containing materials are not reasonably anticipated to be present in the laboratory.
- (I) Training meeting the requirements of Section 5144(k) of these orders for employees whose assignment includes the use of a respirator.
 - (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.

Prior to and during the course of the inspection, including but not limited to, on August 18, 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 which causes COVID-19.

Date By Which Violation Must be Abated:

June 24, 2021

Proposed Penalty:

\$19125.00

Steve Stevenson Kathy Garner
Compliance Officer / District Manager