

## 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 #:** 1489879  
**Inspection Dates:** 08/26/2020 - 06/10/2021  
**Issuance Date:** 06/10/2021  
**CSHO ID:** O1907  
**Optional Report #:** 008-21



## Citation and Notification of Penalty

**Company Name:** State of California Department of State Hospitals  
**Establishment DBA:** Napa State Hospital  
and its successors  
**Inspection Site:** 2100 Napa Vallejo Hwy  
Napa, CA 94558

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

### **Title 8 CCR Section 5199(i)(4). Aerosol Transmissible Diseases.**

#### **(i) Training.**

#### **(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.**
- (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 investigation, the employer failed to provide the required training in accordance with this subsection to the employees in the Central Nursing Services Unit A9 with occupational exposure to aerosol transmissible pathogens (ATP), specifically the novel pathogen SARs-CoV-2 the virus, which causes COVID-19.

<b>Date By Which Violation Must be Abated:</b>	<b>Corrected During Inspection</b>
<b>Proposed Penalty:</b>	<b>\$850.00</b>

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Napa, CA 94558

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

### **Title 8 CCR Section 5199(d)(1). 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.

Prior to and during the course of the investigation including, but not limited to, on August 26, 2020, the employer failed to establish, implement and maintain an effective written ATD Exposure Control Plan (Plan) specific to Napa State Hospital and its operations, and which addresses among other pathogens, the novel pathogen SARS-CoV-2, the virus that causes COVID-19, and included all of the following elements as required by this subsection:

1. The Plan failed to identify the person(s) responsible for administering the Plan. [REF:5199(d)(2)(A)]
2. The following elements were missing or incomplete from the Plan document(s):  
[REF:5199(d)(2)(B),(C),(D),(F),(G),(H),(I),(J),(K),(L),(M),(N),(O),(P),(Q)]

- a. The Plan lacked a list of all job classifications in which employees have occupational exposure. [REF:5199(d)(2)(B)]
- b. The Plan lacked a list of high hazard procedures performed in the facility, service or operation, and the job classifications and operations in which employees are exposed to those procedures. [REF:5199(d)(2)(C)]
- c. The Plan lacked a list of all assignments or tasks requiring personal or respiratory protection. [REF:5199(d)(2)(D)]
- d. The Plan was incomplete in that it did not identify and describe specific control measures for each operation and work area in which occupation exposure occurs, and did not include applicable engineering and work practice controls. [REF:5199(d)(2)(E)]
- e. The Plan was incomplete in that it did not include the method of informing people entering the work setting of the source control measures. [REF:5199(d)(2)(F)]
- f. The Plan was incomplete in that it did not include procedures to identify, temporarily isolate, and refer or transfer AirID cases or suspected cases to All rooms, areas or facilities, and did not include methods to document medical decisions not to transfer patients in need of All in accordance with subsection (e)(5)(B). [REF:5199(d)(2)(G)]
- g. The Plan was incomplete in that provisions for medical services and exposure in that it fails to identify which employees with occupational exposure to whom vaccines must be made available, and lacks a provision to provide vaccines to employees within 10 working days of their initial assignment to a position with occupational exposure. [REF:5199(d)(2)(H)]
- h. The Plan was incomplete in that it does not specify how exposure investigations will be conducted as required by 5199(h)(6). [REF:5199(d)(2)(I)]
- i. The Plan did not include procedures to evaluate each exposure incident, to determine the cause, and to revise existing procedures to prevent future incidents. [REF:5199(d)(2)(J)]
- j. The Plan did not include procedures 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. [REF:5199(d)(2)(K)]
- k. The Plan did not include procedures 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. [REF:5199(d)(2)(L)]
- l. The Plan did not include procedures 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. [REF:5199(d)(2)(M)]
- m. The Plan was incomplete in procedures the employer will use to provide initial and annual training in accordance with subsection (i) such that: [REF:5199(d)(2)(N)]
  - i. The Plan did not include procedures when changes, of introduction of new engineering or work practices controls, modification of tasks or procedures or institution of new tasks or procedures, affect the employee's occupational exposure or control measures; and[5199(i)(2)(D)]
  - ii. The Plan did not include procedures to ensure training material uses appropriate content and vocabulary to the educational level, literacy, and language of employees, (i.e. house keepers and other positions). [5199(i)(3)]
- n. The Plan was incomplete in that it fails to address specifically how recordkeeping requirements of 5199(j), including access to records, will be implemented. [REF:5199(d)(2)(O)]
  - o. The Plan did not include procedures for obtaining the active involvement of employees in

reviewing and updating the exposure control plan with respect to the procedures in their respective work areas or departments in accordance with subsection (d)(3).[REF:5199(d)(2)(P)]

- p. The Plan did not include surge procedures, including work practices, engineering controls, temporary isolation facilities, decontamination facilities, stockpiling of respiratory equipment and PPE, and how the facility will interact with the local and regional emergency plan.  
[REF:5199(d)(2)(Q)]

<b>Date By Which Violation Must be Abated:</b>	<b>Corrected During Inspection</b>
<b>Proposed Penalty:</b>	<b>\$7650.00</b>

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

### **Title 8 CCR Section 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, the employer failed to investigate the exposure incident of a COVID-19 case that occurred on or about August 8, 2020 in the Unit A9, including ensuring compliance of the requirements in subsection (h)(6)(C) in the following instances:

1. The employer failed to conduct an exposure analysis, including the determination of which employees had a significant exposure, and records of the exposure incident in accordance with section 3204, which included the following: [ 5199(h)(6)(C)1]
  - i. The date of the exposure incident; [5199(j)(3)(B)1]
  - ii. The names, and any other employee identifiers used in the workplace, of employees who were included in the exposure evaluation; [5199(j)(3)(B)2]
  - iii. The disease or pathogen to which employees may have been exposed; [5199(j)(3)(B)3]
  - iv. The name and job title of the person performing the evaluation; [5199(j)(3)(B)4]
  - v. The identity of any local health officer and/or PLHCP consulted; [5199(j)(3)(B)5]
  - vi. The date of the evaluation; [5199(j)(3)(B)6]
2. The employer failed to notify employees who had significant exposures within a timeframe that was reasonable for the specific disease, but in no case later than 96 hours of becoming aware of the potential exposure. [ 5199(h)(6)(C)2]
3. The employer failed to provide post-exposure medical evaluation to all employees who had a significant exposure. [5199(h)(6)(C)3]

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

**Corrected During Inspection**  
**\$7650.00**

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Omar Diaz                      Kathy Garner  
Compliance Officer / District Manager