

State of California

Department of Industrial Relations
Division of Occupational Safety and Health
Long Beach District Office
1500 Hughes Way, Suite C201
Long Beach, CA 90810
Phone: (424) 450-2630 Fax: (424) 450-2675

Inspection #: 1509844
Inspection Dates: 01/13/2021 - 01/13/2021
Issuance Date: 06/15/2021
CSHO ID: G2677
Optional Report #:



Citation and Notification of Penalty

Company Name: KINDRED HOSPITAL SOUTH BAY
Establishment DBA:

and its successors

Inspection Site: 1246 W 155TH ST
Gardena, CA 90247

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

California Code of Regulations, Title 8, 342. Reporting Work-Connected Fatalities and Serious Injuries.

(a) Every employer shall report immediately to the Division of Occupational Safety and Health any serious injury or illness, or death, of an employee occurring in a place of employment or in connection with any employment. The report shall be made by the telephone or through a specified online mechanism established by the Division for this purpose. Until the division has made such a mechanism available, the report may be made by telephone or email.

Immediately means as soon as practically possible but not longer than 8 hours after the employer knows or with diligent inquiry would have known of the death or serious injury or illness. If the employer can demonstrate that exigent circumstances exist, the time frame for the report may be made no longer than 24 hours after the incident.

Serious injury or illness is defined in section 330(h), Title 8, California Administrative Code.

Employer failed to immediately report to the Division of Occupational Safety and Health the serious illness suffered by an employee who was hospitalized with COVID-19 on or about December 15, 2020.

Date By Which Violation Must be Abated: July 19, 2021
Proposed Penalty: \$5000.00

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Citation 2 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:

(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.

(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, including, but not limited to, on June 5, 2020 the employer failed to provide the required training in accordance with this subsection to employees with occupational exposure to aerosol transmissible pathogens (ATP).

Instance 1:

The employer failed to train employees on the modes of transmission of ATPs and applicable source control procedures. [5199(i)(4)(C)]

Instance 2:

The employer failed to train employees on the employer's ATD Exposure Control Plan and/or Biosafety Plan, and the means by which an employee can obtain a copy of the written plan and how they can provide input as to its effectiveness. [5199(i)(4)(D)]

Instance 3:

The employer failed to train employees on the employer's surge plan as it pertains to the duties that employees will perform. [5199(i)(4)(L)]

Date By Which Violation Must be Abated:

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Proposed Penalty:

\$25,000.00

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

California Code of Regulations, Title 8, §5199. 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 investigation, including, but not limited to December 15, 2020, upon becoming aware that employees may have been exposed to cases (Wound Care Registered Nurse) or suspected cases of COVID-19, the employer failed to conduct analysis 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:	July 19, 2021
Proposed Penalty:	\$25,000.00

Hien Le
Compliance Officer / District Manager