

STATE OF WASHINGTON

DEPARTMENT OF LABOR AND INDUSTRIES

Division of Occupational Safety and Health PO Box 44600 • Olympia, Washington 98504-4600

February 19, 2021OSHA #: 1494692GEO SECURE SERVICES LLCInspection: 317960904GEO CORRECTIONS & DENTENTIONRegion: 3-Health4955 Technology WayInspector ID: R1500Boca Raton, FL 33431Reference: 203407476

Dear Employer:

Enclosed are the results of the safety and health inspection of your workplace. This packet contains:

- Citation Invoice The total assessed penalty is \$16,500.00
- Citation and Notice of Assessment Washington Administrative Code (WAC) Violations.
- **Employer Certification of Abatement instruction and form** Correct all violations and return written verification or additional penalties may result.
- Employer Appeal Rights You have 15 working days to appeal this citation.

You must immediately post this Citation and Notice of Assessment at or near where the violation(s) occurred, where employees can easily find and read it, or where employees normally receive posted information. All postings must remain until you have corrected all violations, or for three working days, whichever is longer. "Working day" means a calendar day, except Saturdays, Sundays and all legal state holidays.

Because this inspection is public information, the result will be posted online 30 days after the above date by the Department of Labor & Industries. You may view it at <u>https://secure.lni.wa.gov/verify</u>.

Please visit <u>https://www.lni.wa.gov/agency/public-disclosure/</u> if you would like to request a copy of the inspection file. Your choices are:

- Safety & Health Citation Only
- Safety & Health Brief Inspector Summary Report (short description the inspector writes to summarize the reason for the inspection only not complete file)
- Safety & Health Detailed Inspection Summary Report (detailed summary of inspection including penalty calculation only not complete file)
- Safety & Health Citation and Complete Inspection File (The complete legal file which contains the detailed information regarding the inspector's findings, the citation, and calculation of any penalty. This will be especially helpful if you are contemplating filing an appeal.)

If you have questions, call the compliance supervisor, Edward Guy, at (253) 596-3912.

Respectfully,

L&I Assistant Director Division of Occupational Safety & Health

Enclosure(s)



Invoice

Inspection: 317960904

UBI:	603274879
Legal Name:	GEO SECURE SERVICES LLC
DBA Name:	GEO CORRECTIONS & DENTENTION
Inspection	1623 East J Street,
Site:	New Detention Ctr #214, Tacoma, WA,
	98421

Opening Conference: Closing Conference: December 22, 2020 Inspector ID: R1500

Issued: February 19, 2021 September 25, 2020

Summary of Assessed Penalties Due

The Citation and Notice of Assessment includes a full description of each violation.

Violation	Violation		Correction Due	Penalty
Item	Туре	WAC	Date	Amount
1-1	Serious	WAC 296-842-17005(1)	3/24/2021	\$3,300.00
1-2	Serious	WAC 296-842-22015	3/24/2021	\$3,300.00
1-3	Serious	WAC 296-842-17005(2)	3/24/2021	\$3,300.00
1-4	Serious	WAC 296-800-11005	Corrected	\$6,600.00
2-1	General	WAC 296-842-16005(5)	3/24/2021	\$0.00
2-2	General	WAC 296-842-12005(2)	3/24/2021	\$0.00
Total Penalty Due				\$16,500.00

PAYMENT INFORMATION

Payment is due 15 working days from receipt of this citation.

Make check payable to the Department of Labor and Industries.

Write Inspection number 317960904 on the check and mail to:

Attn: DOSH Cashier **Department of Labor and Industries** PO Box 44835 Olympia, WA 98504-4835 Or deliver to: **Any L&I office**



Division of Occupational Safety and Health

Post This Document Citation and Notice of Assessment Citación por Infracción y Multa Civil Inspection: 317960904

UBI: 603274879 Legal Name: GEO SECURE SERVICES LLC DBA Name: GEO CORRECTIONS & DENTENTION Inspection 1623 East J Street, New Detention Ctr #214 Site: Tacoma, WA 98421 Issued: February 19, 2021 Opening Conference: September 25, 2020 Closing Conference: December 22, 2020 Inspector ID: R1500

Violation 1 Item 1

Violation Type: Serious

WAC 296-842-17005(1)

Employer did not replace expired cartridges in full-face respirators. Cartridges expired Nov. 2017 and are present in both CERT and non-CERT respirators. Cited for respirator use with expired P100 filter cartridges.

The following additional correction documentation is required for this violation: Ensure to provide new and unexpired P100 cartridges to all full-face respirators by the date to correct on this citation. Please send a photo of new cartridges, or receipt of purchase, along with your employer certification of abatement form via one of the following methods:

(1) Email (PDF format) reza235@lni.wa.gov

(2) Fax253-596-3903Include cover sheet with the date/time and attention to: Zakary Reimann, Industrial Hygiene Compliance

(3) Mail
Zakary Reimann
Division of Occupational Safety and Health
Industrial Hygiene Compliance, Region 3
950 Broadway Suite 200
Tacoma, WA 98402-4453

Note: Please ensure to attach the employer certification form you received in the mail to each abatement.

Correct by: 3/24/2021 Assessed penalty: \$3,300.00



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Citation and Notice of Assessment Citación por Infracción y Multa Civil Inspection: 317960904

Violation 1 Item 2

Violation Type: Serious

WAC 296-842-22015

Employer did not ensure that respirator cleaning met all requirements in the WAC. Employees do not disassemble respirator components prior to washing. Cited for not following established cleaning procedures.

The following additional correction documentation is required for this violation: Ensure to update respirator cleaning proocedures and provide effective training on how to clean and inspect respirators. Correction must be completed by the date to correct on this citation. Please send an updated cleaning procedure and completed training record for all affected employees along with your employer certification of abatement form via one of the following methods:

(1) Email (PDF format) reza235@lni.wa.gov

(2) Fax 253-596-3903 Include cover sheet with the date/time and attention to: Zakary Reimann, Industrial Hygiene Compliance

(3) Mail
Zakary Reimann
Division of Occupational Safety and Health
Industrial Hygiene Compliance, Region 3
950 Broadway Suite 200
Tacoma, WA 98402-4453

Note: Please ensure to attach the employer certification form you received in the mail to each abatement.

Correct by: 3/24/2021 Assessed penalty: \$3,300.00



Citation and Notice of Assessment Citación por Infracción y Multa Civil Inspection: 317960904

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Violation 1 Item 3

Violation Type: Serious

WAC 296-842-17005(2)

Employer did not ensure that shared respirators are cleaned before each use. Employees typically clean respirators only after each use. Cited for shared respirators not being cleaned before each use.

The following additional correction documentation is required for this violation: Ensure shared respirators are cleaned before each use by the date to correct on this citation. Please provide proof of correction, which may include: respirator cleaning training records, postage signage on shared respirator inventory, or updated Respiratory Protection Program that reflects requirements in the standard. Please provide that proof along with your employer certification of abatement form via one of the following methods:

(1) Email (PDF format) reza235@lni.wa.gov

(2) Fax 253-596-3903 Include cover sheet with the date/time and attention to: Zakary Reimann, Industrial Hygiene Compliance

(3) Mail
Zakary Reimann
Division of Occupational Safety and Health
Industrial Hygiene Compliance, Region 3
950 Broadway Suite 200
Tacoma, WA 98402-4453

Note: Please ensure to attach the employer certification form you received in the mail to each abatement.

Correct by: 3/24/2021 Assessed penalty: \$3,300.00



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Violation 1 Item 4

Violation Type: Serious

WAC 296-800-11005

The employer did not provide a workplace free from recognized hazards that are causing, or are likely to cause, serious injury or death, as required by this standard. The employer did not ensure their employees wore facial coverings or masks. Cited for not requiring masks at all times and for all employees.

This violation was corrected during the inspection. Assessed penalty: \$6,600.00

Washington State Department of Labor & Industries Division of Occupational Safety and Health

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Violation 2 Item 1

Violation Type: General

WAC 296-842-16005(5)

Employer did not provide adequate respirator training to employees. Employees that used respirators did not know how to clean respirators, nor how to inspect the respirator before and after use. Cited for not providing adequate and effective respirator training to employees.

The following additional correction documentation is required for this violation: Ensure to provide refresher training on how to inspect and clean respirators by the date to correct on this citation. Please provide updated training records along with your employer certification of abatement form via one of the following methods:

(1) Email (PDF format) reza235@lni.wa.gov

(2) Fax253-596-3903Include cover sheet with the date/time and attention to: Zakary Reimann, Industrial Hygiene Compliance

(3) Mail
Zakary Reimann
Division of Occupational Safety and Health
Industrial Hygiene Compliance, Region 3
950 Broadway Suite 200
Tacoma, WA 98402-4453

Note: Please ensure to attach the employer certification form you received in the mail to each abatement.

Correct by: 3/24/2021 Assessed penalty: \$0.00

Washington State Department of Labor & Industries Division of Occupational Safety and Health

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Violation 2 Item 2

Violation Type: General

WAC 296-842-12005(2)

The employer's written respiratory program (RPP) for voluntary use does not include all hazards for tasks that employees are required to perform while using a respirator. Employees are expected to use full-face respirator for tasks and hazards outside of what the RPP identifies. Cited for not updating the RPP to reflect current and proper use of respirators under expected, though non-routine, work conditions.

The following additional correction documentation is required for this violation: Ensure to provide updated Respiratory Protection Program by the date to correct on this citation and please send a copy of it along with your employer certification of abatement form via one of the following methods:

(1) Email (PDF format) reza235@lni.wa.gov

(2) Fax 253-596-3903 Include cover sheet with the date/time and attention to: Zakary Reimann, Industrial Hygiene Compliance

(3) Mail
Zakary Reimann
Division of Occupational Safety and Health
Industrial Hygiene Compliance, Region 3
950 Broadway Suite 200
Tacoma, WA 98402-4453

Note: Please ensure to attach the employer certification form you received in the mail to each abatement.

Correct by: 3/24/2021 Assessed penalty: \$0.00



Employer Certification of Abatement Instructions Inspection: 317960904

What you must do now:

- Check the correction due date(s) shown on the enclosed Employer Certification of Abatement Form. You must fully correct the hazards by these dates.
- Describe on the form how you corrected each hazard, rather than what you *intend to do* in the future. Examples:

All staff have received the required training. **Right**: Wrong:

All staff will receive the required training next week.

Use attachments if you need more space. Submit additional documentation of hazard correction if requested in the citation packet.

- Fill in the date you corrected the hazard and sign. •
- Post a copy of the completed form for at least three working days, or until you have corrected all violations, whichever is longer. It must be posted near the hazard location or in a place that is readily accessible by affected employees and their representatives.
- Send your completed form to the address provided. •

Note: If we do not receive written confirmation you have corrected the hazards, we will take follow-up action, which may include additional penalties. If you provide us with false information, you may face criminal penalties.

If you are unable to fix the hazard(s) by the correction due date(s):

We must receive your written request for an extension **before** the correction due date(s) listed for the hazard(s). Correction due dates are shown on the enclosed Citation and Notice of Assessment and on your Employer Certification of Abatement Form(s).

Extensions are not automatically granted. To be considered for an extension, you must provide the following:

- Inspection number, employer name, telephone number, and site address. •
- Violation and Item number for each requested extension.
- Correction due date on the citation and additional time needed. •
- Steps taken to fix the hazard by the correction due date. •
- Why you cannot correct the hazard by the correction due date. ٠
- How you will protect your employees until you fix the hazard.

For more information, contact:	Edward Guy, Compliance Supervisor
Or call: (253) 596-3912	Department of Labor and Industries
	950 Broadway
	Tacoma, WA 98402

You must post all documentation associated with your request for extension with your citation packet. All postings must remain until you have corrected all violations, or unless you have appealed and received and posted your hearing notice.



Employer Certification of Abatement Form Inspection: 317960904

UBI: 603274879 Legal Name: GEO SECURE SERVICES LLC

Issued: February 19, 2021 DBA Name: GEO CORRECTIONS & DENTENTION

Site Address: 1623 East J Street, New Detention Ctr #214, Tacoma, WA, 98421

You must complete this form and return it to: ZAKARY REIMANN, Department of Labor & Industries 950 Broadway Suite 200, TACOMA, WA 98402 Or Fax to:

Violation(s) are fully described in the Citation and Notice of Assessment section.

Violation, Item & Group#	Type of Violation	WAC# Violated Correction Due Date				
1-1	Serious	WAC 296-842-17005(1)	3/24/2021			
Violation Summary:	Violation Summary: Respirator Cartridges Expired					
How you corrected the hazard →						

Date you corrected the hazard →

1-2	Serious	WAC 296-842-22015	3/24/2021		
Violation Summa	ry: Respirator	cleaning procedures			
How you correcte	d the hazard 🗲				
Date you corrected the hazard →					
1-3	Serious	WAC 296-842-17005(2)	3/24/2021		

1-3	Serious	WAC 296-842-17005(2) 3/24/2021			
Violation Summa	Violation Summary: Respirator cleaning				
How you correcte	ed the hazard 🗲				
Date you corrected the hazard →					
2-1	General	WAC 296-842-16005(5) 3/24/2021			

I certify that the hazards described in this Employer Certification of Abatement Form have been corrected as described above. Affected employees and their representatives have been informed of the correction activities. I am aware that knowingly providing false information may result in criminal penalties (RCW 49.17.190(2)).

Signature		Name	
Title	Date	Phone No.	
	DOSH US	EONLY	



Employer Certification of Abatement Form Inspection: 317960904

UBI: 603274879 **Legal Name:** GEO SECURE SERVICES LLC

Issued: February 19, 2021 DBA Name: GEO CORRECTIONS & DENTENTION

Site Address: 1623 East J Street, New Detention Ctr #214, Tacoma, WA, 98421

You must complete this form and return it to: ZAKARY REIMANN, Department of Labor & Industries 950 Broadway Suite 200, TACOMA, WA 98402 Or Fax to:

Violation Summary:	Respirator tra	ining		
How you corrected th	e hazard 🗲			
Date yo	ou corrected	the hazard 🗲		
-	I	1		
2-2	General	WAC 296-842-1	2005(2)	3/24/2021
Violation Summary:	Respiratory P	Protection Program		
How you corrected th	e hazard 🗲			
Date yo	ou corrected	the hazard 🗲		

I certify that the hazards described in this Employer Certification of Abatement Form have been corrected as described above. Affected employees and their representatives have been informed of the correction activities. I am aware that knowingly providing false information may result in criminal penalties (RCW 49.17.190(2)).

Signature		Name	
Title	Date	Phone No.	
	DOSH USI	EONLY	



Post This Document

Appeal Rights Inspection: 317960904

For Employers

If you are cited for a violation of Occupational Safety and/or Health rules, you have the right to appeal the citation. You have 15 working days from the date you receive this citation to appeal. (RCW 49.17.140(1)) "Working day" means a calendar day, except Saturdays, Sundays and all legal state holidays. Your appeal must be in writing. It may be mailed, faxed, personally delivered or electronically filed. If you electronically file, the Department will send an automated acknowledgement that the appeal was received. If you do not receive acknowledgement, please ensure you have addressed it to the correct email. You can also contact the Appeals Program at the number listed below.

For violations classified as serious, willful, repeat serious, or failure to abate serious, an employer must correct the violations by the date listed on the Citation and Notice / Employer's Certification of Abatement form unless a stay of abatement date is requested in the appeal as described on this page. A stay of abatement date means the employer's requirement to abate or correct the hazard is put on hold until the appeal is resolved. All general and repeat general violations under appeal automatically have stay of abatement dates until a final order on those violations has been issued. If you only need an extension of an abatement date, please see the above section entitled, **"If you are unable to fix the hazard(s) by the correction due date(s)".**

Your appeal must include:

- Name, address, telephone number, and fax number if available of the employer who is appealing, and for the employer's representative, if any, such as an attorney or interpreter.
- Inspection Number (You will find this nine-digit number in the top right corner of this page.)
- Statement explaining:

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- 1. What you think is wrong with the citation and any related facts.
- 2. How you think the citation should be changed.
- 3. What relief you are seeking and why.

If you are requesting a stay of abatement date for serious, willful, repeat serious or failure to abate serious, you must also include:

- Each violation and item number for which a stay of abatement date is requested; and
- The reason for the stay of abatement date request.

Note: Employees and/or employee representatives may elect to participate in appeal hearings.

Posting requirement:

You must post your appeal documents (along with this citation packet) until the appeal is resolved. You must also post all other documents related to this appeal.

For Employees or Their Representatives

If your employer is cited, you may only appeal the correction due date(s).

Your appeal must include:

- Your name, address, telephone number, and fax number if available and the same information for anyone who is representing you, if any.
- Inspection number.
- Statement explaining why the correction due date should be changed.

Send all appeals to:

Assistant Director for DOSH Attn: Appeals Program PO Box 44604 Olympia, WA 98504-4604 Fax to: (360) 902-5581 or deliver to: Any L&I office Electronically to: DOSHAppeals@Lni.wa.gov

For more information call the Appeals Program: (360) 902-5486.

GEO SECURE SERVICES LLC GEO CORRECTIONS & DENTENTION 4955 Technology Way Boca Raton, FL 33431

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