

Violation Worksheet

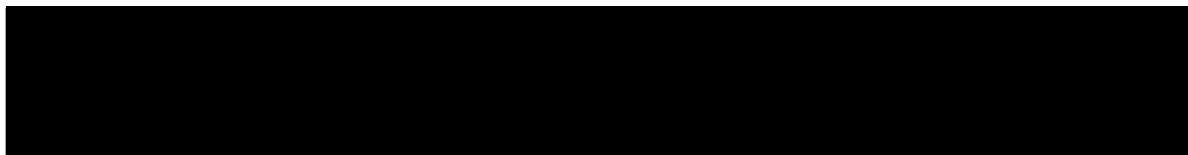
Print Date : 09/21/2015

Inspection Number	1090667
Opt. Insp. Number	

Establishment Name	IL Dept. of Veterans Affairs - IL Veterans Home-Quincy				
DBA Name					
Type Of Violation	Serious	Citation Number	1	Item/Group	2 /
Number Exposed	569	No. Instances	1	REC	
Special Enforcement?		Employer's Relationship to Hazard	All		
Standard	820 ILCS 219/20(a)				
Substance Codes		Photo/Video Number			

Alleged Violation Description 820 ILCS 219/20(a): Every public employer must provide reasonable protection to the lives, health, and safety of its employees and must furnish to each of its employees employment and a workplace which are free from recognized hazards that cause or are likely to cause death or serious physical harm to its employees.

A complaint investigation conducted on 09/08/15, revealed employees were not properly notified of a confirmed Legionnaires outbreak consequently leading to exposure and illnesses of two employees. The employer failed to immediately notify employees of the outbreak nor instructed them as to proper precautions to avoid or eliminate exposure.



Recommended Abatement Action

Penalty

Severity			
Severity Justification			
Probability			
Probability Justification			
Gravity		Gravity based Penalty	0.00
Multiplier			
Calculated Penalty	0.00	Proposed Penalty	0.00
Proposed Penalty Justification:			

Abatement Details

MultiStep Abatement

Type/Other Type	Days to abate	User entered Abatement Due Date	Completed(status)	Verify Date
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Employee Exposure

Exposure Instance	No. Exposed	Employer	Name and Address Telephone Numbers	Duration	Frequency	Proximity
2	569	IL Dept. of Veterans Affairs - IL Veterans Home-Quincy	[REDACTED]	3.00 month	7.5 Hrs/Day	3
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20. **Instance Description:** A. Hazard B. Equipment C. Location D. Injury/Illness E. Measurements

a) **Hazards-Operation/Condition-Accident:** Employees were not properly notified of a confirmed outbreak of Legionnaires disease.

b) **Equipment:** None

c) **Location:** Illinois Veterans Home Quincy. Employee illness reported in [REDACTED] and [REDACTED]

d) **Injury/Illness (and Justifications for Severity and Probability):** An unprotected exposure to legionnaires may result in a bacterial infection of the lungs, legionella pneumonia up to and including death. (H) The probability of an injury occurring as a result of the violative condition is assessed as greater due to the two reported cases.

e) **Measurements:** Report of resident illness on 07/29/15 and an employee illness reported on 08/15/15. Mass email notifying employees occurred on 08/22/15 and 08/25/15.

23. **Employer Knowledge:** During the opening conference with Adjutant Dawn Whitcomb, the IDOL IH obtained copies of email notifications to employees dated 08/22/15 and 08/25/15 which were well after the confirmed outbreak and second reported illness.

24. **Comments** 

25. **Other Employer Information:**