

**U.S. Department of Labor** Occupational Safety and Health Administration  
43 Kline Village,  
Harrisburg, PA 17104  
Phone: 717-782-3902 Fax: 717-782-3746



06/24/2016

AndVenture, Inc., dba Epic Health Services/Links2Care  
97 Theater Lane  
York, PA 17402

Dear Employer,

Enclosed you will find citations for violations of the Occupational Safety and Health Act of 1970 (the Act) which may have accompanying proposed penalties. Also enclosed is a booklet entitled, "Employer Rights and Responsibilities Following an OSHA Inspection", (OSHA 3000) revised 2015, which explains your rights and responsibilities under the Act. If you have any questions about the enclosed citations and penalties, I would welcome further discussions in person or by telephone.

You will note on page 6 of the booklet that, for violations which you do not contest, you must (1) notify this office promptly by letter that you have taken appropriate corrective action within the time set forth on the citation; and (2) pay any penalties assessed. Please inform me of the abatement steps you have taken and of their dates together with adequate supporting documentation; e.g., drawings or photographs of corrected conditions, purchase/work orders related to abatement actions, air sampling results. This information will allow us to close the case.

As indicated on page 6 of the booklet, you may request an informal conference with me during the 15-working-day notice of contest period. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation or the penalty.

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of the citation. The running of this contest period is not interrupted by an informal conference.

If you decide to request an informal conference, please complete the attached notice at the bottom of this letter and post it next to the Citations as soon as the time, date and the place of the informal conference have been determined. Be sure to bring to the conference with you any and all supporting documentation of existing conditions as well as of any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this citation. You are encouraged to review the information concerning your establishment at [www.osha.gov](http://www.osha.gov). If you have any dispute with the accuracy of the information displayed, please contact this office.

Sincerely,



**Kevin Kilp**  
Area Director

Enclosures

**U.S. Department of Labor**  
Occupational Safety and Health Administration  
43 Kline Village  
Harrisburg, PA 17104  
Phone: 717-782-3902 Fax: 717-782-3746



## Citation and Notification of Penalty

**To:**  
AndVenture, Inc., dba Epic Health  
Services/Links2Care  
97 Theater Lane  
York, PA 17402

**Inspection Number:** 1122491  
**Inspection Date(s):** 02/01/2016 - 06/23/2016  
**Issuance Date:** 06/24/2016

**Inspection Site:**  
97 Theater Lane  
York, PA 17402

*The violation(s) described in this Citation and Notification of Penalty is (are) alleged to have occurred on or about the day(s) the inspection was made unless otherwise indicated within the description given below.*

This Citation and Notification of Penalty (this Citation) describes violations of the Occupational Safety and Health Act of 1970. The penalty(ies) listed herein is (are) based on these violations. You must abate the violations referred to in this Citation by the dates listed and pay the penalties proposed, unless within 15 working days (excluding weekends and Federal holidays) from your receipt of this Citation and Notification of Penalty you either call to schedule an informal conference (see paragraph below) or you mail a notice of contest to the U.S. Department of Labor Area Office at the address shown above. Please refer to the enclosed booklet (OSHA 3000) which outlines your rights and responsibilities and which should be read in conjunction with this form. Issuance of this Citation does not constitute a finding that a violation of the Act has occurred unless there is a failure to contest as provided for in the Act or, if contested, unless this Citation is affirmed by the Review Commission or a court.

**Posting** - The law requires that a copy of this Citation and Notification of Penalty be posted immediately in a prominent place at or near the location of the violation(s) cited herein, or, if it is not practicable because of the nature of the employer's operations, where it will be readily observable by all affected employees. This Citation must remain posted until the violation(s) cited herein has (have) been abated, or for 3 working days (excluding weekends and Federal holidays), whichever is longer.

**Informal Conference** - An informal conference is not required. However, if you wish to have such a conference you may request one with the Area Director during the 15 working day contest period. During such an informal conference you may present any evidence or views which you believe would support an adjustment to the citation(s) and/or penalty(ies).

If you are considering a request for an informal conference to discuss any issues related to this Citation and Notification of Penalty, you must take care to schedule it early enough to allow time to contest after the informal conference, should you decide to do so. Please keep in mind that a written letter of intent to contest must be submitted to the Area Director within 15 working days of your receipt of this Citation. The running of this contest period is not interrupted by an informal conference.

If you decide to request an informal conference, please complete, remove and post the Notice to Employees next to this Citation and Notification of Penalty as soon as the time, date, and place of the informal conference have been determined. Be sure to bring to the conference any and all supporting documentation of existing conditions as well as any abatement steps taken thus far. If conditions warrant, we can enter into an informal settlement agreement which amicably resolves this matter without litigation or contest.

**Right to Contest** – You have the right to contest this Citation and Notification of Penalty. You may contest all citation items or only individual items. You may also contest proposed penalties and/or abatement dates without contesting the underlying violations. Unless you inform the Area Director in writing that you intend to contest the citation(s) and/or proposed penalty(ies) within 15 working days after receipt, the citation(s) and the proposed penalty(ies) will become a final order of the Occupational Safety and Health Review Commission and may not be reviewed by any court or agency.

**Penalty Payment** – Penalties are due within 15 working days of receipt of this notification unless contested. (See the enclosed booklet and the additional information provided related to the Debt Collection Act of 1982.) Make your check or money order payable to “DOL-OSHA”. Please indicate the Inspection Number on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type “OSHA” and click Go. From the results, click on OSHA Penalty Payment Form. The direct link is:

<https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>.

You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will process the payments as if these restrictions or conditions do not exist.

**Notification of Corrective Action** – For each violation which you do not contest, you must provide *abatement certification* to the Area Director of the OSHA office issuing the citation and identified above. This abatement certification is to be provided by letter within 10 calendar days after each abatement date. Abatement certification includes the date and method of abatement. If the citation indicates that the violation was corrected during the inspection, no abatement certification is required for that item. The abatement certification letter must be posted at the location where the violation appeared and the corrective action took place or employees must otherwise be effectively informed about abatement activities. A sample abatement certification letter is enclosed with this Citation. In addition, where the citation indicates that *abatement documentation* is necessary, evidence of the purchase or repair of equipment, photographs or video, receipts, training records, etc., verifying that abatement has occurred is required to be provided to the Area Director.

**Employer Discrimination Unlawful** – The law prohibits discrimination by an employer against an

employee for filing a complaint or for exercising any rights under this Act. An employee who believes that he/she has been discriminated against may file a complaint no later than 30 days after the discrimination occurred with the U.S. Department of Labor Area Office at the address shown above.

**Employer Rights and Responsibilities** – The enclosed booklet (OSHA 3000) outlines additional employer rights and responsibilities and should be read in conjunction with this notification.

**Notice to Employees** – The law gives an employee or his/her representative the opportunity to object to any abatement date set for a violation if he/she believes the date to be unreasonable. The contest must be mailed to the U.S. Department of Labor Area Office at the address shown above and postmarked within 15 working days (excluding weekends and Federal holidays) of the receipt by the employer of this Citation and Notification of Penalty.

**Inspection Activity Data** – You should be aware that OSHA publishes information on its inspection and citation activity on the Internet under the provisions of the Electronic Freedom of Information Act. The information related to these alleged violations will be posted when our system indicates that you have received this citation. You are encouraged to review the information concerning your establishment at [www.osha.gov](http://www.osha.gov). If you have any dispute with the accuracy of the information displayed, please contact this office.



## NOTICE TO EMPLOYEES OF INFORMAL CONFERENCE

An informal conference has been scheduled with OSHA to discuss the citation(s) issued on 06/24/2016. The conference will be held by telephone or at the OSHA office located at 43 Kline Village, Harrisburg, PA 17104 on \_\_\_\_\_ at \_\_\_\_\_.

Employees and/or representatives of employees have a right to attend an informal conference.

**CERTIFICATION OF CORRECTIVE ACTION WORKSHEET**

**Inspection Number: 1122491**

Company Name: AndVenture, Inc., dba Epic Health Services/Links2Care  
Inspection Site: 97 Theater Lane, York, PA 17402  
Issuance Date: 06/24/2016

List the specific method of correction for each item on this citation in this package that does not read "Corrected During Inspection" and return to: **U.S. Department of Labor – Occupational Safety and Health Administration, 43 Kline Village, Harrisburg, PA 17104**

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

Citation Number \_\_\_\_\_ and Item Number \_\_\_\_\_ was corrected on \_\_\_\_\_  
By (Method of Abatement): \_\_\_\_\_

I certify that the information contained in this document is accurate and that the affected employees and their representatives have been informed of the abatement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Title

**NOTE: 29 USC 666(g)** whoever knowingly makes any false statements, representation or certification in any application, record, plan or other documents filed or required to be maintained pursuant to the Act shall, upon conviction, be punished by a fine of not more than \$10,000 or by imprisonment of not more than 6 months or both.

**POSTING:** A copy of completed Corrective Action Worksheet should be posted for employee review



### Citation and Notification of Penalty

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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#### Citation 1 Item 1 Type of Violation: **Willful**

OSH ACT of 1970 Section (5)(a)(1): The employer did not furnish employment and a place of employment which was free from recognized hazards that were causing or likely to cause death or serious physical harm to employees in that employees are exposed to the hazard of workplace violence:

- a) On or about December 26, 2015, employees were exposed to the hazard of workplace violence in that they were sent into hostile home environments that resulted in verbal and serious physical assaults while providing nursing care services to clients.
- b) On or about March 8, 2016, employees were exposed to the hazard of workplace violence in that they were sent into hostile home environments that resulted in verbal intimidation and threats of serious physical assaults while providing nursing care services to clients.

Abatement certification and documentation required within 10 days after abatement date. The certification shall include a statement that abatement is complete, the date and method of abatement, and state that employees and their representatives were informed of this abatement. Abatement documentation shall include documents demonstrating that abatement is complete, such as evidence of the purchase or repair of equipment, photographic or video evidence of abatement or other written records.

Among other methods, feasible and acceptable means to abate the hazard of workplace violence include:

1. Develop a written, comprehensive workplace violence prevention program which should include:
  - a. A policy statement regarding potential violence in the workplace and assignment of oversight and prevention responsibilities. The policy must clearly define workplace violence hazards employees may encounter including, but not limited to, sexual and physical violence. Ensure the policy is conveyed to employees, clients, and household members.
  - b. Workplace violence hazard assessment and security procedures that are used for each new client. Such procedures should identify the risks employees may face and how the employer will address the

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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specific hazards identified.

c. Development of workplace violence controls, including implementation of engineering and administrative controls and methods used to prevent potential workplace violence incidents.

i. Policies and procedures covering visits by home health-care providers to address the conduct of home visits, the presence of others in the home during visits, and the worker's right to refuse to provide services in a clearly hazardous situation without fear of retaliation.

ii. Develop and implement a written policy of non-tolerance for workplace violence. Managers and supervisors must share the policy with employees, clients, family members, and visitors and must verbally advise them that violence is not permitted or tolerated.

iii. Determine the behavioral history/ background checks of new and existing clients to learn about any past violent or assaultive behaviors. Establish a system such as chart tags or log books to identify clients with assaultive behavior problems. Be cognitive of patient confidentiality and worker safety issues. Update clients behavioral histories as needed. Review workplace violence incidents from the previous shift during change-in shift meetings.

iv. Maintain records of family members violent behavior experienced by employees and establish a system, such as chart tags or log books to ensure employees are provided this information.

v. Provide personal protective equipment (PPE) such as panic buttons and Kevlar sleeves to employees exposed to clients who have a tendency to bite.

vi. Encourage employees to promptly report incidents and train them on ways to reduce or eliminate risk.

d. A recordkeeping system designed to report any violent incidents. The reports must be in writing and maintained for review after each incident and at least annually to analyze incident trends.

i. Require and ensure that employees report all assaults or threats to a supervisor or manager, regardless of severity. Investigate all violent incidents and threats. Implement appropriate recommendations resulting from incident investigations.

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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e. Development of a workplace violence training program for all employees so they are aware of the potential hazards and means to protect themselves and coworkers through established policies and procedures. The training shall include the employer's workplace violence prevention program and what procedures and practices to follow in the workplace, to include a client's home or alternate location.

i. Include in the program elements, how to identify and defuse a situation prior to it becoming an escalated incident.

ii. Ensure training is provided to employees prior to beginning work, and also when significant changes are made to policies and procedures. Annual refresher training should be provided to all staff.

f. Annual review of the workplace violence prevention program and updated as necessary. Such review and updates shall set forth any mitigating steps taken in response to any workplace violence incidents.

g. Development of procedures and responsibilities to be taken in the event of a violent incident in the workplace. Advise employees of company procedures for requesting police assistance or filing charges when assaulted and help them do so, if necessary. Provide prompt medical and psychological evaluations and treatment after the incident.

h. Ensure employees utilize a buddy system while providing service to clients in a household with client or family member with a history of violence.

i. Develop and implement a formal weapons policy that includes procedures for employees to follow, as well as employee training on such procedures.

j. Establish a relationship with local police authorities.

See AVD above.

**U.S. Department of Labor**  
Occupational Safety and Health Administration

**Inspection Number:** 1122491  
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**Issuance Date:** 06/24/2016



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

<b>Date By Which Violation Must be Abated:</b>	<b>07/29/2016</b>
<b>Proposed Penalty:</b>	<b>\$70000.00</b>

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

U.S. Department of Labor  
Occupational Safety and Health Administration

Inspection Number: 1122491  
Inspection Date(s): 02/01/2016 - 06/23/2016  
Issuance Date: 06/24/2016



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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**Citation 2 Item 1** Type of Violation: **Other-than-Serious**

29 CFR 1904.29(b)(2): The employer did not complete an OSHA 301 Incident Report form, or an equivalent form, for each recordable injury or illness entered on the OSHA 300 Log:

a) 97 Theater Lane, York PA - On or about February 1, 2016, the employer failed to complete an OSHA 301 or equivalent form for a recordable injury which occurred on December 26, 2015.

Abatement certification required within 10 days after abatement date. The certification shall include a statement that abatement is complete, date and method of abatement, and states employees and their representatives were informed of this abatement.

Date By Which Violation Must be Abated:  
Proposed Penalty:

07/29/2016  
\$7000.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

**U.S. Department of Labor**  
Occupational Safety and Health Administration

**Inspection Number:** 1122491  
**Inspection Date(s):** 02/01/2016 - 06/23/2016  
**Issuance Date:** 06/24/2016



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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**Citation 2 Item 2 Type of Violation: **Other-than-Serious****

29 CFR 1904.4(a): The employer did not record on the OSHA Form 300 or equivalent each work-related fatality, injury, or illness case that resulted in the general recording criteria:

a) 97 Theater Lane, York PA - On or about February 1, 2016, the employer failed to enter a recordable injury on the OSHA 300 log for an injury which occurred on December 26, 2015.

Abatement certification and documentation required within 10 days after abatement date. The certification shall include a statement that abatement is complete, the date and method of abatement, and state that employees and their representatives were informed of this abatement. Abatement documentation shall include documents demonstrating that abatement is complete, such as evidence of the purchase or repair of equipment, photographic or video evidence of abatement or other written records.

**ABATEMENT DOCUMENTATION REQUIRED FOR THIS ITEM**

<b>Date By Which Violation Must be Abated:</b>	<b>08/11/2016</b>
<b>Proposed Penalty:</b>	<b>\$7000.00</b>

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

**U.S. Department of Labor**  
Occupational Safety and Health Administration

**Inspection Number:** 1122491  
**Inspection Date(s):** 02/01/2016 - 06/23/2016  
**Issuance Date:** 06/24/2016



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

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**Citation 2 Item 3** Type of Violation: **Other-than-Serious**

29 CFR 1904.32(a)(1): A review of the OSHA Log of Recordable Work-Related Injuries and Illnesses (OSHA Form 300 or equivalent) was not completed to ensure the Log was accurate and complete, and/or deficiencies were not identified and corrected at the end of each calendar year.

a) 97 Theater Lane, York PA - On or about February 1, 2016, the employer failed to review the 2015 OSHA 300 log for completeness and accuracy and/or correct deficiencies. An "other recordable cases" entry was not made for an injury occurring on December 26, 2015.

Abatement certification required within 10 days after abatement date. The certification shall include a statement that abatement is complete, date and method of abatement, and states employees and their representatives were informed of this abatement.

Date By Which Violation Must be Abated:  
Proposed Penalty:

07/21/2016  
\$7000.00

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

**U.S. Department of Labor**  
Occupational Safety and Health Administration

**Inspection Number:** 1122491  
**Inspection Date(s):** 02/01/2016 - 06/23/2016  
**Issuance Date:** 06/24/2016



**Citation and Notification of Penalty**

**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402

**Citation 2 Item 4 Type of Violation: **Other-than-Serious****

29 CFR 1904.40(a): The employer did not provide an authorized government representative copies of requested records kept under Part 1904 within four (4) business hours:

a) 97 Theater Lane, York PA - On or about February 1, 2016, the employer failed to provide copies of the OSHA Form 301 or their equivalents, which were requested for calendar year 2015.

Abatement certification required within 10 days after abatement date. The certification shall include a statement that abatement is complete, date and method of abatement, and states employees and their representatives were informed of this abatement.

Date By Which Violation Must be Abated:  
Proposed Penalty:

Corrected During Inspection  
\$7000.00

  
\_\_\_\_\_  
**Kevin Kilp**  
Area Director

See pages 1 through 4 of this Citation and Notification of Penalty for information on employer and employee rights and responsibilities.

**U.S. Department of Labor**  
Occupational Safety and Health Administration  
43 Kline Village  
Harrisburg, PA 17104  
Phone: 717-782-3902 Fax: 717-782-3746



## INVOICE / DEBT COLLECTION NOTICE

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**Company Name:** AndVenture, Inc., dba Epic Health Services/Links2Care  
**Inspection Site:** 97 Theater Lane, York, PA 17402  
**Issuance Date:** 06/24/2016

<b>Summary of Penalties for Inspection Number</b>	<b>1122491</b>
<b>Citation 1, Willful</b>	<b>\$70000.00</b>
<b>Citation 2, Other-than-Serious</b>	<b>\$28000.00</b>
<b>TOTAL PROPOSED PENALTIES</b>	<b>\$98000.00</b>

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To avoid additional charges, please remit payment promptly to this Area Office for the total amount of the uncontested penalties summarized above. Make your check or money order payable to: "DOL-OSHA". Please indicate OSHA's Inspection Number (indicated above) on the remittance. You can also make your payment electronically on [www.pay.gov](http://www.pay.gov). On the left side of the pay.gov homepage, you will see an option to Search Public Forms. Type "OSHA" and click Go. From the results, click on **OSHA Penalty Payment Form**. The direct link is <https://www.pay.gov/paygov/forms/formInstance.html?agencyFormId=53090334>. You will be required to enter your inspection number when making the payment. Payments can be made by credit card or Automated Clearing House (ACH) using your banking information. Payments of \$25,000 or more require a Transaction ID, and also must be paid using ACH. If you require a Transaction ID, please contact the OSHA Debt Collection Team at (202) 693-2170.

OSHA does not agree to any restrictions or conditions or endorsements put on any check, money order, or electronic payment for less than the full amount due, and will cash the check or money order as if these restrictions or conditions do not exist.

If a personal check is issued, it will be converted into an electronic fund transfer (EFT). This means that our bank will copy your check and use the account information on it to electronically debit your account for the amount of the check. The debit from your account will then usually occur within 24 hours and will be shown on your regular account statement. You will not receive your original check back. The bank will destroy your original check, but will keep a copy of it. If the EFT cannot be completed because of insufficient funds or closed

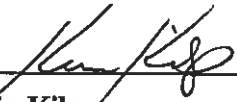
account, the bank will attempt to make the transfer up to 2 times.

Pursuant to the Debt Collection Act of 1982 (Public Law 97-365) and regulations of the U.S. Department of Labor (29 CFR Part 20), the Occupational Safety and Health Administration is required to assess interest, delinquent charges, and administrative costs for the collection of delinquent penalty debts for violations of the Occupational Safety and Health Act.

**Interest:** Interest charges will be assessed at an annual rate determined by the Secretary of the Treasury on all penalty debt amounts not paid within one month (30 calendar days) of the date on which the debt amount becomes due and payable (penalty due date). The current interest rate is one percent (1%). Interest will accrue from the date on which the penalty amounts (as proposed or adjusted) become a final order of the Occupational Safety and Health Review Commission (that is, 15 working days from your receipt of the Citation and Notification of Penalty), unless you file a notice of contest. Interest charges will be waived if the full amount owed is paid within 30 calendar days of the final order.

**Delinquent Charges:** A debt is considered delinquent if it has not been paid within one month (30 calendar days) of the penalty due date or if a satisfactory payment arrangement has not been made. If the debt remains delinquent for more than 90 calendar days, a delinquent charge of six percent (6%) per annum will be assessed accruing from the date that the debt became delinquent.

**Administrative Costs:** Agencies of the Department of Labor are required to assess additional charges for the recovery of delinquent debts. These additional charges are administrative costs incurred by the Agency in its attempt to collect an unpaid debt. Administrative costs will be assessed for demand letters sent in an attempt to collect the unpaid debt.

  
\_\_\_\_\_  
**Kevin Kilp**  
Area Director

6-24-2016  
Date

**U.S. Department of Labor**

**Occupational Safety and Health Administration  
Harrisburg Area Office  
43 Kline Village  
Harrisburg, PA 17104-1529  
(717)782-3902 (voice)  
(717)782-3746 (fax)  
oshaHarrisburg@dol.gov**



June 24, 2016

Judy Souders  
Epic Health Services  
97 Theater Lane  
York, PA 17402

Dear Ms. Souders:

During the recent inspection of your worksite located at 97 Theater Lane, York, Pennsylvania on February 1, 2016, the compliance officer learned of the following conditions which require your attention. Although no citations will be issued for the items at this time, it is recommended that the following corrective actions be taken in an effort to provide a safer workplace for your employees:

**OSHA Form 300 Log:**

1. Ensure any employee's name listed under column B as a "privacy concern case" meets the requirements of 29 CFR 1904.29(b)(6) and (7).
2. Ensure each entry is completed in the detail as required by 29 CFR 1904.29(b)(1). For example, column E should give a more specific location than "at work". The location could read "Client's house, York"; column F should describe the injury or illness, parts of body affected, and object/substance that directly injured or made person ill. For example, "strained, lower back, strained" would not meet the requirements of the standard. Instead the entry could read, "strain to the lower back while using Hoyer lift and putting sheet over client". Or "multiple injuries, multiple parts, struck by worker" could read "bites to left finger, hair pulled, assaulted by client".

**OSHA Form 301:**

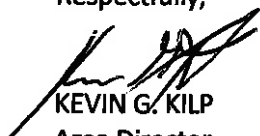
3. Ensure each item number on the form is completed.
4. Ensure entries are readable and understandable. Numerous OSHA 301's were submitted for review during the inspection and item number 15 was cut-off mid-sentence. For example, one entry read "The EE reports abrasion bite mark contusi"; another entry read "This RN noted that".
5. Ensure the "Completed by" section is completed.

**OSHA Form 300A:**

6. Ensure the OSHA 300A annual summary is properly certified by a company executive.

Thank you for your interest in safety and health matters. If you have any questions regarding this matter, please do not hesitate to contact this office.

Respectfully,

  
KEVIN G. KILP  
Area Director

KGK/ed