Monterey County Health Department Environmental Health Bureau Emergency Response Incident Report Proposition 65 Notification

Log# 20-012 CO0021634 / FA0814720

Incident Date: 2/9/2020					Incident Time: 8:15 pm				
Incident Type:	/pe:								
Time Notified: 8:45	pm				Time Completed: 11:15 PM				
Location: 309 Riano	da St				City: Salinas				
Hazardous Material: Human blood				Quantity: Drops					
Physical Properties:	: Liquic	4			Phy	sical / F	lealth	Hazards	s: Biohazard
Land Use: Commercial Direct/Construction Found: N/A				ucted Connecti	ons Entered Storm Drain Syste Waters: No			rain System/Receiving	
Environment Affect	Affected: Factory floor and machinery Weather / Temperature: Clear /50°F								
Type of Container:	N/A								
First Responder / A	gency	on Scene	e: <mark>Sal</mark> i	nas Fire					
Incident Command	dent Commander / Agency : Captain Josh Monteleo Telephone: (831)235-8294								
Other Responding	ner Responding Personnel / Agencies / Telephone #s								
None									
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			/ A		T			10.21/4	
Source Investigation Conducted? N/A					Source Identified? N/A				
Responsible Party Information:	Jos 309	Jose Solis Jose's Mexican Foods 309 Rianda St., Salinas CA 93901 (831)754-3615							
Vehicle Information: N/A			Cal-	Cal-OES Control #:		-		NRC #:	
Other Notifications:									
RWQCB	9 (2004)		MRWPCA		☐ DFG			□NOAA	
☐ Cal-EMA	☐ FED EPA ☐ DHS		☐ DHS		Health Officer		Officer		

MCHO#20-01a

Co-21634

Narrative:

On February 9, 2020 at 8:45 p.m., County Communications Dispatch Center contacted the Environmental Health Bureau regarding a traumatic amputation and accompanying blood loss which contaminated machinery and the factory floor of Jose's Mexican Foods located at 309 Rianda St in Salinas. I spoke to Salinas Fire Captain Josh Monteleo who described the incident to me and indicated that his truck would be leaving the scene. I arrived on scene at 9:05 p.m. and met with factory owner Jose Solis who showed me the biohazard contamination. According to Mr. Solis the injury did not result in a complete amputation and the resulting blood loss was minimal. There were a few drops of blood on a production table next to the machine and on the floor. I instructed Mr. Solis to spray bleach sanitizing solution on the blood, let it stand for 20 minutes, wipe it up and repeat the process on the cleaned surface. I instructed him to then follow his normal nightly sanitization procedures and to contact me once cleanup was complete.

I cleared the scene at 9:30 p.m..

Mr. Solis contacted me at 10:30 p.m. and I arrived back on scene at 10:50 p.m. He showed me the areas that needed cleaning and the 90% bleach solution used to sanitize. All blood droplets had been cleaned and the entire factory floor and all machinery had been cleaned. I authorized reopening. I let Mr. Solis know Health Department follow up may be necessary.

I cleared the scene at 11:00 p.m.

Action taken:

Incident Status:							
☐ Mitigated No Further Action	⊠ Health Department Follow-up Warranted						
Referred to other Agency or Department for fo	ollow-up:						
 Contact information: 							

Form Completed By:

Rich Patterson, REHS II

<u>2/10/2020</u> Date

FOR LOCAL AGENCY USE ONLY

I HEREBY CERTIFY THAT I AM A DESIGNATED GOVERNMENT EMPLOYEE AND THAT I HAVE REPORTED THIS INFORMATION TO LOCAL OFFICIALS PURSUANT TO SECTION 25 180.7 OF THE HEALTH AND SAFETY CODE.

R. Encarnacion, Asst. Dir. for:

2/10/2020

John Ramirez, MPA, REHS

Date

Director of Environmental Health

ACTIVITY LOG										
Date	Activity	Specialist	Start	Stop	Total					
2/9/2020	Emergency Response	Rich Patterson	8:45 pm	9:40 pm	1:05					
2/9/2020	Emergency Response	Rich Patterson	10:30pm	11:10 pm	0:40					
2/10/2020	Report Writing	Rich Patterson	8:00 am	9:00 am	1:00					
Invoice Sent to Responsible Party for Total Hours TOTAL										