



STATE OF WASHINGTON
DEPARTMENT OF LABOR AND INDUSTRIES

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

December 11, 2024

SAFEWAY INC/SAFEWAY INC.
1121 124th Ave Ne
Seattle Division
Bellevue, WA 98005

Inspection: 317981007
UBI: 600643518
Region: 02 – Health
Inspector ID: K4443
Reference: 209488062

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

- **Citation Invoice** – the total assessed penalty is \$11,700.00.
- **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 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 seven 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 by the Department of Labor & Industries. You may view it at <https://secure.lni.wa.gov/verify>.

Please visit <https://www.lni.wa.gov/agency/public-disclosure/> 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 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.)

December 11, 2024
SAFEWAY INC/SAFEWAY INC.
Page Two

If you have questions, call the compliance supervisor, Stephanie Arnold, at (360) 647-7319.

Respectfully,

L&I Assistant Director
Division of Occupational Safety & Health
Enclosure(s)

Copy: Teamsters, Local 117



Invoice

Inspection: 317981007

| | |
|--|--|
| UBI: 600643518 Legal Name: SAFEWAY INC DBA Name: SAFEWAY INC. Inspection Site: 3520 Pacific Ave S, Auburn, WA 98001 | Issued: December 11, 2024 Opening Conference: July 02, 2024 Closing Conference: December 05, 2024 Inspector ID: K4443 |
|--|--|

Summary of Assessed Penalties Due

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

| Violation Item | Violation Type | WAC | Abatement Due Date | Penalty Amount |
|---------------------------------|----------------|----------------------|--------------------|----------------|
| 1-1 | Serious | WAC 296-35-200(1) | 01/28/2025 | \$5,400.00 |
| 1-2 | Serious | WAC 296-35-300(1)(c) | 01/28/2025 | \$6,300.00 |
| <u>Total Penalty Due</u> | | | | \$11,700.00 |

PAYMENT INFORMATION

Payment is due 15 *working days from receipt of this citation (unless appealed).

Pay L&I the amount due on this invoice by scanning the QR code listed below, or by visiting www.lni.wa.gov/agency/pay-a-balance-due/

You may also mail a check made payable to the Department of Labor and Industries.
Write Inspection number 317981007 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 | |
|---|--|

*Working day” means a calendar day, except Saturdays, Sundays, and all legal state holidays.



Post This Document

Citation and Notice of Assessment Citación por Infracción y Multa Civil Inspection: 317981007

UBI: 600643518
Legal Name: SAFEWAY INC
DBA Name: SAFEWAY INC.
Inspection Site: 3520 Pacific Ave S, Auburn, WA 98001

Issued: December 11, 2024
Opening Conference: July 02, 2024
Closing Conference: December 05, 2024
Inspector ID: K4443

Violation 1 Item 1 WAC 296-35-200(1)

Violation Type: Serious

The employer did not ensure that the time period considered in a quota includes time for employees to use the bathroom.

One hundred-fifty (150) employees perform order selecting duties in the produce and perishables department while being held to an order time production standard.

Employees are not given time to use the bathroom outside of their scheduled breaks. Regularly holding in urine and feces may result in distracted behavior, urinary tract infections (UTIs), pain, kidney damage, and other long-term injuries and illnesses.

Exposure to hazards of this nature could result in injuries or reversible illness resulting in hospitalization, or disability of a limited nature.

The following additional correction documentation is required for this violation:

Per WAC 296-35-200(1), the time period considered in a quota, including designated as productive time or time on task must include time to use the bathroom. Please provide documentation that shows time to use the bathroom is included in the order selecting time calculations.

Please describe how you've abated this hazard on your Employer Certification of Abatement forms and send all documentation to:

Email: olix235@lni.wa.gov

-or-

Mail: Kassie Olin

Department of Labor and Industries

2111 N Northgate Way Suite 300

Seattle, WA 98133



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

Post This Document

Citation and Notice of Assessment
Citación por Infracción y Multa Civil
Inspection: 317981007

Correct By: 01/28/2025

Assessed penalty: \$5,400.00

Citation and Notice of Assessment
Citación por Infracción y Multa Civil
Inspection: 317981007

Violation 1 Item 2

Violation Type: Serious

WAC 296-35-300(1)(c)

The employer did not provide a workplace free from recognized serious hazards in the produce and perishables department as a result of the production quotas imposed on employees.

Eighty-nine (89) order selectors within the produce and perishables department are exposed to a high frequency of manual handling tasks of loading products onto pallets, resulting in a rapid pace of heavy lifting. Order selectors are required to perform tasks involving ergonomic risk factors including repetitive motions, lifting, awkward postures, bending, long reaches, and combination thereof, which have caused, or are likely to cause musculoskeletal disorders (MSDs). Failure to perform to set quota standards may result in disciplinary actions, including termination.

Exposure to repetitive, heavy, and awkward lifting may result in serious injury and/or permanent disabilities.

The following work activities are a brief summary of the hazards identified in the Department's Ergonomic Evaluation of the work site (Please review the complete report for more detail):

- Loading product onto center ride pallet jacks: This Ergonomic Assessment was done with the Revised NIOSH Lifting Equation and was used for the basis of the violation.

Exposure to hazards of this nature can lead to serious injuries involving permanent disability, death, or chronic irreversible illness.

The following additional correction documentation is required for this violation:

Submit a plan detailing abatement methods which must include reducing the production standard quotas and pace of work or removing disciplinary actions for failure to meet production standards. Additional abatement methods may include but are not limited to, engineering and administrative controls, that would reduce the Composite Lifting Index from the Revised NIOSH Lifting Equation to 1.65, or below, for order selection in the Produce and Perishables Department. Ensure both Produce and Perishable Order Picking meets a hazard threshold that is protective of at least 75% of the female population.



Post This Document

Citation and Notice of Assessment Citación por Infracción y Multa Civil Inspection: 317981007

Feasible engineering and administrative controls include, but are not limited to, the following:

Engineering controls:

- Mechanical lift devices. Mechanical lift devices eliminate the majority of the physical effort required to manipulate an item.
- Lowering/limiting the weight of individual packages.

Administrative controls:

- Determine a pace of work, when combined with other administrative and engineering controls, that results in a CLI that's protective of at least 75% of the female population.
- Implement training/process controls to limit to distance of picking and placing items.

Please describe how you've abated this hazard on your Employer Certification of Abatement forms and send all documentation to:

Email: olix235@lni.wa.gov

-or-

Mail: Kassie Olin

Department of Labor and Industries

2111 N Northgate Way Suite 300

Seattle, WA 98133

Correct By: 01/28/2025

Assessed penalty: \$6,300.00

Employer Certification of Abatement Instructions Inspection: 317981007

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:

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

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 seven 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.
- How you will protect your employees until you fix the hazard.

For more information, contact:
Or call: (360) 647-7319

Stephanie Arnold, Compliance Supervisor
Department of Labor and Industries
1720 Ellis Street Suite 200
BELLINGHAM, WA 98225

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: 317981007

| | |
|--|---|
| UBI: 600643518 Legal Name: SAFEWAY INC Inspection Site: 3520 Pacific Ave S, Auburn, WA 98001 | Issued: December 11, 2024 DBA Name: SAFEWAY INC. |
|--|---|

You must complete this form and return it to:

Kassie Olin
 Department of Labor & Industries
 2111 N Northgate Way
 Suite 300
 SEATTLE, WA 98133

Or Fax to: (425) 290-1399
 Or Email to: OLIX235@LNI.WA.GOV

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 296-35-200(1) | 01/28/2025 |
| Insufficient time for bathroom use | | | |
| How you corrected the hazard → | | | |
| | | | |
| Date you corrected the hazard → | | | |

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

| Violation, Item & Group# | Type of Violation | WAC# Violated | Correction Due Date |
|--|-------------------|----------------------|---------------------|
| 1-2 | Serious | WAC 296-35-300(1)(c) | 01/28/2025 |
| Quota substantially contributes to occupational safety and health hazard | | | |
| How you corrected the hazard → | | | |
| | | | |
| Date you 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 | Printed Name | |
| Title | Date | Phone No. |
| DOSH USE ONLY | | |

DOSH Reviewer's Signature

Date

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 abatement due date(s)"**.

Your appeal must include:

- Business name, address, telephone number, and contact information 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:
 1. What you believe is wrong with the citation and any related facts.
 2. What you believe should be changed, and why.
 3. What relief you are seeking and why.
 4. Signature and Date.

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 abatement due date(s).

Your appeal must include:

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

| Send all Appeals to: | Scan the QR Code below to: | |
|--|---|---|
| <p>Assistant Director for DOSH Services Attn: DOSH Appeals PO Box 44604 Olympia, WA 98504-4604 Electronically to: DOSHAppeals@Lni.wa.gov Fax to: (360) 902-5581 or deliver to: Any L&I office</p> | <p>Complete the WISHA Citation & Notice Appeal Form, OR visit</p> <p>www.Lni.wa.gov/safety-health/safety-rules/safety-citation-appeals</p> |   |

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Bellevue, WA 98005