

SECTION 01 00 00  
GENERAL REQUIREMENTS  
TABLE OF CONTENTS

1.1 GENERAL INTENTION .....	1
1.2 STATEMENT OF BID ITEM(S) .....	2
1.3 SPECIFICATIONS AND DRAWINGS FOR CONTRACTOR .....	2
1.4 CONSTRUCTION SECURITY REQUIREMENTS.....	2
1.5 FIRE SAFETY.....	4
1.6 OPERATIONS AND STORAGE AREAS.....	7
1.7 ALTERATIONS.....	<del>1312</del>
1.8 INFECTION PREVENTION MEASURES.....	<del>1413</del>
1.9 DISPOSAL AND RETENTION.....	<del>1716</del>
1.10 PROTECTION OF EXISTING VEGETATION, STRUCTURES, EQUIPMENT, UTILITIES, AND IMPROVEMENTS.....	<del>1717</del>
1.11 RESTORATION:.....	<del>1817</del>
1.12 PHYSICAL DATA: N/A .....	<del>1918</del>
1.13 PROFESSIONAL SURVEYING SERVICES: N/A .....	<del>1918</del>
1.14 LAYOUT OF WORK: N/A.....	<del>1918</del>
1.15 AS-BUILT DRAWINGS.....	<del>1918</del>
1.16 USE OF ROADWAYS.....	<del>1918</del>
1.17 RESIDENT ENGINEER'S FIELD OFFICE: N/A.....	<del>1919</del>
1.18 TEMPORARY USE OF MECHANICAL AND ELECTRICAL EQUIPMENT .....	<del>1919</del>
1.19 TEMPORARY USE OF EXISTING ELEVATORS.....	<del>2120</del>
1.20 TEMPORARY USE OF NEW ELEVATORS: N/A.....	<del>2221</del>
1.21 TEMPORARY TOILETS.....	<del>2221</del>

Manhattan VAMC  
Bldg. 1 Ward Renovations - 8N/17N/17W  
Manhattan Veteran's Affairs Medical Center  
New York, New York

1.22 AVAILABILITY AND USE OF UTILITY SERVICES.....	<u>2221</u>
1.23 NEW TELEPHONE EQUIPMENT: N/A.....	<u>2423</u>
1.24 TESTS: N/A.....	<u>2423</u>
1.25 INSTRUCTIONS: N/A.....	<u>2423</u>
1.26 GOVERNMENT-FURNISHED PROPERTY: N/A.....	<u>2423</u>
1.27 RELOCATED ITEMS: N/A.....	<u>2423</u>
1.28 STORAGE SPACE FOR DEPARTMENT OF VETERANS AFFAIRS EQUIPMENT: N/A .....	<u>2423</u>
1.29 CONSTRUCTION SIGN: N/A.....	<u>2423</u>
1.30 SAFETY SIGN: N/A.....	<u>2423</u>
1.31 PHOTOGRAPHIC DOCUMENTATION.....	<u>2423</u>
1.32 FINAL ELEVATION DIGITAL IMAGES: N/A.....	<u>2423</u>
1.33 HISTORIC PRESERVATION: N/A.....	<u>2423</u>
1.34 VA TRIRIGA CPMS.....	23
1.35 HEALTH AND SAFETY.....	24

SECTION 01 00 00  
GENERAL REQUIREMENTS

1.1 GENERAL INTENTION

- A. Contractor shall furnish all plant, labor and materials to renovate the 8<sup>th</sup> and 17th floors of Building 1 at the Manhattan VAMC including associated demolition and asbestos removal on adjacent floors as required by the contract drawings and specifications.
- B. Visits to the site by Bidders may be made only by appointment with the Medical Center Engineering Officer.
- C. Offices of Cannon Design, as Architect-Engineers, will render certain technical services during construction. Such services shall be considered as advisory to the Government and shall not be construed as expressing or implying a contractual act of the Government without affirmations by Contracting Officer or his duly authorized representative.
- D. Before placement and installation of work subject to tests by testing laboratory retained by the Contractor, the Contractor shall notify the Resident Engineer in sufficient time to enable VA representatives to be present at the site in time for proper taking and testing of specimens and field inspection. Such prior notice shall be not less than three work days unless otherwise designated by the Resident Engineer.
- E. All employees of general contractor and subcontractors shall comply with VA security management program and obtain permission of the VA police, be identified by project and employer, and restricted from unauthorized access.
- F. Prior to commencing work, general contractor shall provide proof that a OSHA designated "competent person" (CP) (29 CFR 1926.20(b)(2)) will maintain a presence at the work site whenever the general or subcontractors are present.
- G. Training:
  - 1. All employees of general contractor or subcontractors shall have the 30-hour OSHA Construction Safety course and other relevant competency training, as determined by RE/COR acting as the Construction Safety Officer with input from the facility Construction Safety Committee.

2. Submit training records of all such employees for approval before the start of work.

H. Compliance with VHA Directive 2011-36, Safety and Health during Construction, dated 9/22/2011 in its entirety is required. The directive will be made available to the Contractor upon request.

#### **1.2 STATEMENT OF BID ITEM(S)**

A. BASE BID:

NEW WORK: Work includes renovation of the 8<sup>th</sup> and 17th floors of Building 1 to facilitate Inpatient Services in accordance with VA Standards and all applicable state and federal regulations.

#### **1.3 SPECIFICATIONS AND DRAWINGS FOR CONTRACTOR**

A. AFTER AWARD OF CONTRACT, electronic copies of specifications and drawings will be furnished in .pdf format.

#### **1.4 CONSTRUCTION SECURITY REQUIREMENTS**

A. Security Plan:

1. The security plan defines both physical and administrative security procedures that will remain effective for the entire duration of the project.
2. The General Contractor is responsible for assuring that all sub-contractors working on the project and their employees also comply with these regulations.

B. Security Procedures:

1. General Contractor's employees shall not enter the project site without appropriate badge. They may also be subject to inspection of their personal effects when entering or leaving the project site.
2. For working outside the "regular hours" as defined in the contract, The General Contractor shall give 3 days' notice to the Contracting Officer so that arrangements can be provided for the employees. This notice is separate from any notices required for utility shutdown described later in this section.
3. No photography of VA premises is allowed without written permission of the Contracting Officer.
4. VA reserves the right to close down or shut down the project site and order General Contractor's employees off the premises in the event of a national emergency. The General Contractor may return to the site only with the written approval of the Contracting Officer.

5. The Contractor shall provide a 24 hour fire watch of the construction area until fire alarm system has been accepted.
- C. Guards: N/A
- D. Key Control:
  1. The General Contractor shall provide duplicate keys and lock combinations to the Resident Engineer for the purpose of security inspections of every area of project including tool boxes and parked machines and take any emergency action.
- E. Document Control:
  1. Before starting any work, the General Contractor/Sub Contractors shall submit an electronic security memorandum describing the approach to following goals and maintaining confidentiality of "sensitive information".
  2. The General Contractor is responsible for safekeeping of all drawings, project manual and other project information. This information shall be shared only with those with a specific need to accomplish the project.
  4. Certain documents, sketches, videos or photographs and drawings may be marked "Law Enforcement Sensitive" or "Sensitive Unclassified". Secure such information in separate containers and limit the access to only those who will need it for the project. Return the information to the Contracting Officer upon request.
  5. These security documents shall not be removed or transmitted from the project site without the written approval of Contracting Officer.
  6. All paper waste or electronic media such as CD's and diskettes shall be shredded and destroyed in a manner acceptable to the VA.
  7. Notify Contracting Officer and Site Security Officer immediately when there is a loss or compromise of "sensitive information".
  8. All electronic information shall be stored in specified location following VA standards and procedures using an Engineering Document Management Software (EDMS).
    - a. Security, access and maintenance of all project drawings, both scanned and electronic shall be performed and tracked through the EDMS system.

- b. "Sensitive information" including drawings and other documents may be attached to e-mail provided all VA encryption procedures are followed.

F. Motor Vehicle Restrictions

- 1. Vehicle authorization request shall be required for any vehicle entering the site and such request shall be submitted 24 hours before the date and time of access. Access shall be restricted to picking up and dropping off materials and supplies.
- 2. Parking is NOT available on site for the General Contractor, his employees or his subs.

**1.5 FIRE SAFETY**

- A. Applicable Publications: Publications listed below form part of this Article to extent referenced. Publications are referenced in text by basic designations only.

- 1. American Society for Testing and Materials (ASTM):
  - E84-2009.....Surface Burning Characteristics of Building Materials
- 2. National Fire Protection Association (NFPA):
  - 10-2010.....Standard for Portable Fire Extinguishers
  - 30-2008.....Flammable and Combustible Liquids Code
  - 51B-2009.....Standard for Fire Prevention During Welding, Cutting and Other Hot Work
  - 70-2011.....National Electrical Code
  - 241-2009.....Standard for Safeguarding Construction, Alteration, and Demolition Operations
- 3. Occupational Safety and Health Administration (OSHA):
  - 29 CFR 1926.....Safety and Health Regulations for Construction

- B. Fire Safety Plan: Establish and maintain a fire protection program in accordance with 29 CFR 1926. Prior to start of work, prepare a plan detailing project-specific fire safety measures, including periodic status reports, and submit to Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES. Prior to any worker for the contractor or subcontractors beginning work, they shall undergo a safety briefing provided by the general contractor's competent person per OSHA requirements. This briefing shall include information on the

construction limits, VAMC safety guidelines, means of egress, break areas, work hours, locations of restrooms, use of VAMC equipment, etc. Documentation shall be provided to the Resident Engineer that individuals have undergone contractor's safety briefing. Contractor shall install and maintain temporary lighting and exit signs.

- C. Site and Building Access: Maintain free and unobstructed access to facility emergency services and for fire, police and other emergency response forces in accordance with NFPA 241. The Contractor shall provide a 24 hour fire watch of the construction area until fire alarm system has been accepted.
- D. Separate temporary facilities, such as trailers, storage sheds, and dumpsters, from existing buildings and new construction by distances in accordance with NFPA 241. For small facilities with less than 6 m (20 feet) exposing overall length, separate by 3m (10 feet).
- E. Temporary Construction Partitions:
  - 1. Install and maintain temporary construction partitions to provide smoke-tight separations between construction areas adjoining areas. Construct partitions of gypsum board or treated plywood (flame spread rating of 25 or less in accordance with ASTM E84) on both sides of fire retardant treated wood or metal steel studs. Extend the partitions through suspended ceilings to floor slab deck or roof. Seal joints and penetrations. At door openings, install Class C, ¾ hour fire/smoke rated doors with self-closing devices.
  - 2. Install fire-rated temporary construction partitions as shown on drawings to maintain integrity of existing exit stair enclosures, exit passageways, fire-rated enclosures of hazardous areas, horizontal exits, smoke barriers, vertical shafts and openings enclosures.
  - 3. Close openings in smoke barriers and fire-rated construction to maintain fire ratings. Seal penetrations with listed through-penetration firestop materials in accordance with Section 07 84 00, FIRESTOPPING.
- F. Temporary Heating and Electrical: Install, use and maintain installations in accordance with 29 CFR 1926, NFPA 241 and NFPA 70.

- G. Means of Egress: Do not block exiting for occupied buildings, including paths from exits to roads. Minimize disruptions and coordinate with Resident Engineer.
- H. Egress Routes for Construction Workers: Maintain free and unobstructed egress. Inspect daily. Report findings and corrective actions weekly to Resident Engineer. Contractor shall install and maintain temporary lighting and exit signs.
- I. Fire Extinguishers: Provide and maintain extinguishers in construction areas and temporary storage areas in accordance with 29 CFR 1926, NFPA 241 and NFPA 10.
- J. Flammable and Combustible Liquids: Store, dispense and use liquids in accordance with 29 CFR 1926, NFPA 241 and NFPA 30.
- K. Standpipes: Install and extend standpipes up with each floor in accordance with 29 CFR 1926 and NFPA 241. Do not charge wet standpipes subject to freezing until weather protected.
- L. Sprinklers: Install, test and activate new automatic sprinklers prior to removing existing sprinklers.
- M. Existing Fire Protection: Do not impair automatic sprinklers, smoke and heat detection, and fire alarm systems, except for portions immediately under construction, and temporarily for connections. Provide fire watch for impairments more than 4 hours in a 24-hour period. Request interruptions in accordance with Article, OPERATIONS AND STORAGE AREAS, and coordinate with Resident Engineer. All existing or temporary fire protection systems (fire alarms, sprinklers) located in construction areas shall be tested as coordinated with the medical center. Parameters for the testing and results of any tests performed shall be recorded by the medical center and copies provided to the Resident Engineer.
- N. Smoke Detectors: Prevent accidental operation. Remove temporary covers at end of work operations each day. Coordinate with Resident Engineer.
- O. Hot Work: Comply with NYHHCS Policy No. 138-11 for Hot Works Operation and Permit requirements. Coordinate with Resident Engineer.
- P. Fire Hazard Prevention and Safety Inspections: Inspect entire construction areas weekly. Coordinate with, and report findings and corrective actions weekly to Resident Engineer.

- Q. Smoking: Smoking is prohibited in and adjacent to construction areas inside existing buildings and additions under construction. In separate and detached buildings under construction, smoking is prohibited except in designated smoking rest areas.
- R. Dispose of waste and debris in accordance with NFPA 241. Remove from buildings daily.
- S. Perform other construction, alteration and demolition operations in accordance with 29 CFR 1926.
- T. General Requirement Paragraphs 1.5, FIRE SAFETY, and 1.8, INFECTION PREVENTION MEASURES, are intended to be complimentary with General Requirement Paragraph 1.35, HEALTH AND SAFETY. Should there be a discrepancy between any of these paragraphs then the most stringent requirement shall apply.

#### **1.6 OPERATIONS AND STORAGE AREAS**

- A. The Contractor shall confine all operations (including storage of materials) on Government premises to areas authorized or approved by the Contracting Officer. The Contractor shall hold and save the Government, its officers and agents, free and harmless from liability of any nature occasioned by the Contractor's performance.
- B. Temporary buildings (e.g., storage sheds, shops, offices) and utilities may be erected by the Contractor only with the approval of the Contracting Officer and shall be built with labor and materials furnished by the Contractor without expense to the Government. The temporary buildings and utilities shall remain the property of the Contractor and shall be removed by the Contractor at its expense upon completion of the work. With the written consent of the Contracting Officer, the buildings and utilities may be abandoned and need not be removed.
- C. The Contractor shall, under regulations prescribed by the Contracting Officer, use only established roadways, or use temporary roadways constructed by the Contractor when and as authorized by the Contracting Officer. When materials are transported in prosecuting the work, vehicles shall not be loaded beyond the loading capacity recommended by the manufacturer of the vehicle or prescribed by any Federal, State, or local law or regulation. When it is necessary to cross curbs or sidewalks, the Contractor shall protect them from damage. The

Contractor shall repair or pay for the repair of any damaged curbs, sidewalks, or roads.

- D. Working space and space available for storing materials shall be as determined by the Resident Engineer.
- E. Workmen are subject to rules of Medical Center applicable to their conduct.
- F. Execute work so as to interfere as little as possible with normal functioning of Medical Center as a whole, including operations of utility services, fire protection systems and any existing equipment, and with work being done by others. Use of equipment and tools that transmit vibrations and noises through the building structure, are not permitted in buildings that are occupied, during construction, jointly by patients or medical personnel, and Contractor's personnel, except as permitted by Resident Engineer where required by limited working space.
  - 1. Do not store materials and equipment in other than assigned areas.
  - 2. Schedule delivery of materials and equipment to immediate construction working areas within buildings in use by Department of Veterans Affairs in quantities sufficient for not more than two work days. Provide unobstructed access to Medical Center areas required to remain in operation.
- G. Utilities Services: Where necessary to cut existing pipes, electrical wires, conduits, cables, etc., of utility services, or of fire protection systems or communications systems (except telephone), they shall be cut and capped at suitable places where shown; or, in absence of such indication, where directed by Resident Engineer. All such actions shall be coordinated with the Utility Company involved:
  - 1. Whenever it is required that a connection fee be paid to a public utility provider for new permanent service to the construction project, for such items as water, sewer, electricity, gas or steam, payment of such fee shall be the responsibility of the Government and not the Contractor.
- H. Phasing: To insure such executions, Contractor shall furnish the Resident Engineer with a schedule of approximate dates on which the Contractor intends to accomplish work in each specific area of site, building or portion thereof. In addition, Contractor shall notify the Resident Engineer two weeks in advance of the proposed date of starting

work in each specific area of site, building or portion thereof.  
Arrange such dates to insure accomplishment of this work in successive phases mutually agreeable to Resident Engineer and Contractor.

Floor areas indicated on Drawings of Building 1 will be vacated by Government in accordance with above below phasing beginning within immediately seven days after date of receipt of Notice to Proceed and turned over to the contractor.

All work on 8N shall begin within 10 calendar days of the notice to proceed and shall be completed within 115 calendar days including all required asbestos removal.

The performance of work required for the 17th floor of the hospital requires continuous coordination between the contractor, RE Staff and hospital personnel. Areas of the 16th, 17th and 18th floors will remain occupied and fully functional during the execution of this contract. Contractual work on 17W shall begin within 10 calendar days of the notice to proceed and shall be completed, inspected and accepted by the VA within 60 calendar days including all required asbestos removal.

The scheduling of 17W asbestos abatement work shall be coordinated with the VA as follows. Stage I will be performed 24-hours around the clock until completed including breakdown. Work will begin approximately at 5pm on a Friday and be completed by 6am Monday including breakdown. Stage II abatement work will be isolated from the occupied portion of 17W. Following the Stage I abatement of the occupied areas within 17W, all construction activities to occur are to be performed no earlier than 6pm and must be completed and cleaned prior to 6am the next morning. Above ceiling areas will remain exposed until the work within this occupied corridor has been completed and approved by the Resident Engineer.

During the time that the Stage I abatement begins to the completed installation of the new scheduled ceiling the Contractor shall provide a 24 hour fire watch of the occupied corridor.

Contractual work on 17N shall begin 7 calendar days after the substantial completion of 17W and shall be completed including all

required asbestos removal within 240 calendar days after the notice to proceed.

~~The asbestos abatement required above the ceilings on the 16th floor shall be scheduled and completed in one weekend.~~

~~In all other areas requiring asbestos removal, rough-in work and ceiling re-installation shall begin in accordance with phasing plans and shall be completed, ready for occupancy within 45 days of NTP. Subsequent areas as indicated in phasing plans shall follow and shall be completed within 45 days, unless otherwise directed by Resident Engineer.~~

~~Floors indicated on Drawings of Building 1 will be vacated by Government in accordance with above phasing beginning immediately after date of receipt of Notice to Proceed and turned over to the contractor. The performance of work required for the 17<sup>th</sup> floor of the hospital requires continuous coordination between the contractor, RE Staff and hospital personnel. Areas of the 16<sup>th</sup>, 17<sup>th</sup> and 18<sup>th</sup> floors will remain occupied and fully functional during the execution of this contract. Contractual work on 17W shall begin within 10 calendar days of the notice to proceed and shall be completed, inspected and accepted by the VA prior to turnover of 17N to the contractor. This will also include the performance of all items of omission and correction (punch list). The contractor's approved CPM schedule shall reflect these activities and shall also include a seven (7) calendar day move at which time the VA will vacate 17N followed by an immediate turnover of this area to the contractor. The total duration for the 17W shall be 60 calendar days including all required asbestos removal.~~

~~All work on 8N shall begin within 10 calendar days of the notice to proceed and shall be completed within 115 calendar days including all required asbestos removal.~~

~~Work on 17N shall begin immediately after the completion, acceptance and 7 calendar day VA move indicated previously and shall be completed including all required asbestos removal within 240 calendar days after the notice to proceed.~~

Contractor's schedule shall comply with spec section 01 32 16.15.

- I. Construction Signs: Post construction signs at the entrances to the construction site as directed by the Resident Engineer.
- J. When a floor is turned over to Contractor, Contractor shall accept entire responsibility therefore.
  - 1. Contractor shall maintain a minimum temperature of 4 degrees C (40 degrees F) at all times, except as otherwise specified.
  - 2. In connection with fire alarm equipment, Contractor shall make arrangements for pre-inspection of site with Fire Department or Company (Department of Veterans Affairs or municipal) whichever will be required to respond to an alarm from Contractor's employee or watchman.
- K. Utilities Services: Maintain existing utility services for Medical Center at all times. Provide temporary facilities, labor, materials, equipment, connections, and utilities to assure uninterrupted services. Where necessary to cut existing water, steam, gases, sewer or air pipes, or conduits, wires, cables, etc. of utility services or of fire protection systems and communications systems (including telephone), they shall be cut and capped at suitable places where shown; or, in absence of such indication, where directed by Resident Engineer.
  - 1. No utility service such as water, gas, steam, sewers or electricity, or fire protection systems and communications systems may be interrupted without prior approval of Resident Engineer. Electrical work shall be accomplished with all affected circuits or equipment de-energized. When an electrical outage cannot be accomplished, work on any energized circuits or equipment shall not commence without the Resident Engineer's prior knowledge and written approval. Refer to specification Sections 26 05 11, REQUIREMENTS FOR ELECTRICAL INSTALLATIONS, 27 05 11 REQUIREMENTS FOR COMMUNICATIONS INSTALLATIONS and 28 05 11, REQUIREMENTS FOR ELECTRONIC SAFETY AND SECURITY INSTALLATIONS for additional requirements.
  - 2. Contractor shall submit a request to interrupt any such services to Resident Engineer, in writing, 48 hours in advance of proposed interruption. Request shall state reason, date, exact time of, and approximate duration of such interruption.
  - 3. Contractor will be advised (in writing) of approval of request, or of which other date and/or time such interruption will cause least

- inconvenience to operations of Medical Center. Interruption time approved by Medical Center may occur at other than Contractor's normal working hours.
4. Major interruptions of any system must be requested, in writing, at least 15 calendar days prior to the desired time and shall be performed as directed by the Resident Engineer.
  5. In case of a contract construction emergency, service will be interrupted on approval of Resident Engineer. Such approval will be confirmed in writing as soon as practical.
  6. Whenever it is required that a connection fee be paid to a public utility provider for new permanent service to the construction project, for such items as water, sewer, electricity, gas or steam, payment of such fee shall be the responsibility of the Government and not the Contractor.
- L. Abandoned Lines: All service lines such as wires, cables, conduits, ducts, pipes and the like, and their hangers or supports, which are to be abandoned but are not required to be entirely removed, shall be sealed, capped or plugged. The lines shall not be capped in finished areas, but shall be removed and sealed, capped or plugged in ceilings, within furred spaces, in unfinished areas, or within walls or partitions; so that they are completely behind the finished surfaces.
- M. To minimize interference of construction activities with flow of Medical Center traffic, comply with the following:
1. Keep roads, walks and entrances to grounds, to parking and to occupied areas of buildings clear of construction materials, debris and standing construction equipment and vehicles.
  2. Method and scheduling of required cutting, altering and removal of existing roads, walks and entrances must be approved by the Resident Engineer.
- N. Coordinate the work for this contract with other construction operations as directed by Resident Engineer. The Contractor will be required to attend weekly project coordination meetings with the other on site contractors. Other ongoing or forthcoming construction contracts include but are not limited to:
1. Proposed Perimeter Flood Wall Project.
  2. Proposed Shops, Chapel, Morgue....

3. Proposed Clinic Renovations.
4. Proposed Patient Room Renovations.
5. Proposed Electrical Equipment Relocations.
6. Proposed Warehouse Renovations.
7. Proposed MRI Relocation.
8. On-going Roofing Replacement.
9. Parking Lifts and Asser Levy Access Parking.
10. Admitting Area/Emergency Room Modernization Project.

#### **1.7 ALTERATIONS**

- A. Survey: Before any work is started, the Contractor shall make a thorough survey with the Resident Engineer and a representative of VAMC, of areas of buildings in which alterations occur and areas which are anticipated routes of access, and furnish a report, signed by all three, to the Contracting Officer. This report shall list by rooms and spaces:
  1. N/A
  2. Existence and conditions of items such as plumbing fixtures and accessories, electrical fixtures, equipment, venetian blinds, shades, etc., required by drawings to be either reused or relocated, or both.
  3. Shall note any discrepancies between drawings and existing conditions at site.
  4. Shall designate areas for working space, materials storage and routes of access to areas within buildings where alterations occur and which have been agreed upon by Contractor and Resident Engineer.
- B. Any items required by drawings to be either reused or relocated or both, found during this survey to be nonexistent, or in opinion of Resident Engineer to be in such condition that their use is impossible or impractical, shall be furnished and/or replaced by Contractor with new items in accordance with specifications which will be furnished by Government. Provided the contract work is changed by reason of this subparagraph B, the contract will be modified accordingly, under provisions of clause entitled "DIFFERING SITE CONDITIONS" (FAR 52.236-2) and "CHANGES" (FAR 52.243-4 and VAAR 852.236-88).
- C. Re-Survey: Thirty days before expected partial or final inspection date, the Contractor and Resident Engineer together shall make a

thorough re-survey of the areas of buildings involved. They shall furnish a report on conditions then existing, of resilient flooring, doors, windows, walls and other surfaces as compared with conditions of same as noted in first condition survey report:

1. Re-survey report shall also list any damage caused by Contractor to such flooring and other surfaces, despite protection measures; and, will form basis for determining extent of repair work required of Contractor to restore damage caused by Contractor's workmen in executing work of this contract.

D. Protection: Provide the following protective measures:

1. Wherever existing roof surfaces are disturbed they shall be protected against water infiltration. In case of leaks, they shall be repaired immediately upon discovery.
2. Temporary protection against damage for portions of existing structures and grounds where work is to be done, materials handled and equipment moved and/or relocated.
3. Protection of interior of existing structures at all times, from damage, dust and weather inclemency. Wherever work is performed, floor surfaces that are to remain in place shall be adequately protected prior to starting work, and this protection shall be maintained intact until all work in the area is completed.

#### **1.8 INFECTION PREVENTION MEASURES**

- A. Refer to NYHHS policy for construction and Infection Control Risk Assessment (ICRA), available upon request. Implement the requirements of VAMC's ICRA team. ICRA Group may monitor dust in the vicinity of the construction work and require the Contractor to take corrective action immediately if the safe levels are exceeded.
- B. Establish and maintain a dust control program as part of the contractor's infection preventive measures in accordance with the guidelines provided by ICRA Group. Prior to start of work, prepare a plan detailing project-specific dust protection measures, including periodic status reports, and submit to Resident Engineer and Facility ICRA team for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES.

1. All personnel involved in the construction or renovation activity shall be educated and trained in infection prevention measures established by the medical center.
- C. Medical center Infection Control personnel shall monitor for airborne disease (e.g. aspergillosis) as appropriate during construction. A baseline of conditions may be established by the medical center prior to the start of work and periodically during the construction stage to determine impact of construction activities on indoor air quality.
- D. In general, following preventive measures shall be adopted during construction to keep down dust and prevent mold.
  1. Dampen debris to keep down dust and provide temporary construction partitions in existing structures where directed by Resident Engineer. Blank off ducts and diffusers to prevent circulation of dust into occupied areas during construction.
  2. Do not perform dust producing tasks within occupied areas without the approval of the Resident Engineer. For construction in any areas that will remain jointly occupied by the medical Center and Contractor's workers, the Contractor shall:
    - a. Provide dust proof fire-rated temporary drywall construction barriers to completely separate construction from the operational areas of the hospital in order to contain dirt debris and dust. Barriers shall be sealed and made presentable on hospital occupied side. Install a self-closing rated door in a metal frame, commensurate with the partition, to allow worker access. Maintain negative air at all times. A fire retardant polystyrene, 6-mil thick or greater plastic barrier meeting local fire codes may be used where dust control is the only hazard, and an agreement is reached with the Resident Engineer and Medical Center.
    - b. HEPA filtration is required where the exhaust dust may reenter the breathing zone. Contractor shall verify that construction exhaust to exterior is not reintroduced to the medical center through intake vents, or building openings. Install HEPA (High Efficiency Particulate Accumulator) filter vacuum system rated at 95% capture of 0.3 microns including pollen, mold spores and dust particles. Insure continuous negative air pressures occurring

within the work area. HEPA filters should have ASHRAE 85 or other prefilter to extend the useful life of the HEPA. Provide both primary and secondary filtrations units. Exhaust hoses shall be heavy duty, flexible steel reinforced and exhausted so that dust is not reintroduced to the medical center.

- c. Adhesive Walk-off/Carpet Walk-off Mats, minimum 600mm x 900mm (24" x 36"), shall be used at all interior transitions from the construction area to occupied medical center area. These mats shall be changed as often as required to maintain clean work areas directly outside construction area at all times.
- d. Vacuum and wet mop all transition areas from construction to the occupied medical center at the end of each workday. Vacuum shall utilize HEPA filtration. Maintain surrounding area frequently. Remove debris as they are created. Transport these outside the construction area in containers with tightly fitting lids.
- e. The contractor shall not haul debris through occupied patient-care areas without prior approval of the Resident Engineer and the Medical Center. When, approved, debris shall be hauled in enclosed dust proof containers or wrapped in plastic and sealed with duct tape. No sharp objects should be allowed to cut through the plastic. Wipe down the exterior of the containers with a damp rag to remove dust. All equipment, tools, material, etc. transported through occupied areas shall be made free from dust and moisture by vacuuming and wipe down.
- f. Using a HEPA vacuum, clean inside the barrier and vacuum ceiling tile prior to replacement. Any ceiling access panels opened for investigation beyond sealed areas shall be sealed immediately when unattended.
- g. There shall be no standing water during construction. This includes water in equipment drip pans and open containers within the construction areas. All accidental spills must be cleaned up and dried within 12 hours. Remove and dispose of porous materials that remain damp for more than 72 hours.
- h. At completion, remove construction barriers and ceiling protection carefully, outside of normal work hours. Vacuum and clean all surfaces free of dust after the removal.

E. Final Cleanup:

1. Upon completion of project, or as work progresses, remove all construction debris from above ceiling, vertical shafts and utility chases that have been part of the construction.
2. Perform HEPA vacuum cleaning of all surfaces in the construction area. This includes walls, ceilings, cabinets, furniture (built-in or free standing), partitions, flooring, etc.

F. General Requirement Paragraphs 1.5, FIRE SAFETY, and 1.8, INFECTION PREVENTION MEASURES, are intended to be complimentary with General Requirement Paragraph 1.35, HEALTH AND SAFETY. Should there be a discrepancy between any of these paragraphs then the most stringent requirement shall apply.

**1.9 DISPOSAL AND RETENTION**

A. Materials and equipment accruing from work removed and from demolition of buildings or structures, or parts thereof, shall be disposed of as follows:

1. Reserved items which are to remain property of the Government are noted on drawings or in specifications as items to be stored. Items that remain property of the Government shall be removed or dislodged from present locations in such a manner as to prevent damage which would be detrimental to re-installation and reuse. Store such items where directed by Resident Engineer.
2. Items not reserved shall become property of the Contractor and be removed by Contractor from Medical Center.
3. Items of portable equipment and furnishings located in rooms and spaces in which work is to be done under this contract shall remain the property of the Government. When rooms and spaces are vacated by the Department of Veterans Affairs during the alteration period, such items which are NOT required by drawings and specifications to be either relocated or reused will be removed by the Government in advance of work to avoid interfering with Contractor's operation.

**1.10 PROTECTION OF EXISTING VEGETATION, STRUCTURES, EQUIPMENT, UTILITIES, AND IMPROVEMENTS**

A. The Contractor shall preserve and protect all structures, equipment, and vegetation (such as trees, shrubs, and grass) on or adjacent to the work site, which are not to be removed and which do not unreasonably

interfere with the work required under this contract. The Contractor shall only remove trees when specifically authorized to do so, and shall avoid damaging vegetation that will remain in place. If any limbs or branches of trees are broken during contract performance, or by the careless operation of equipment, or by workmen, the Contractor shall trim those limbs or branches with a clean cut and paint the cut with a tree-pruning compound as directed by the Contracting Officer.

- B. The Contractor shall protect from damage all existing improvements and utilities at or near the work site and on adjacent property of a third party, the locations of which are made known to or should be known by the Contractor. The Contractor shall repair any damage to those facilities, including those that are the property of a third party, resulting from failure to comply with the requirements of this contract or failure to exercise reasonable care in performing the work. If the Contractor fails or refuses to repair the damage promptly, the Contracting Officer may have the necessary work performed and charge the cost to the Contractor.

#### **1.11 RESTORATION**

- A. Remove, cut, alter, replace, patch and repair existing work as necessary to install new work. Except as otherwise shown or specified, do not cut, alter or remove any structural work, and do not disturb any ducts, plumbing, steam, gas, or electric work without approval of the Resident Engineer. Existing work to be altered or extended and that is found to be defective in any way, shall be reported to the Resident Engineer before it is disturbed. Materials and workmanship used in restoring work, shall conform in type and quality to that of original existing construction, except as otherwise shown or specified.
- B. Upon completion of contract, deliver work complete and undamaged. Existing work (walls, ceilings, partitions, floors, mechanical and electrical work, lawns, paving, roads, walks, etc.) disturbed or removed as a result of performing required new work, shall be patched, repaired, reinstalled, or replaced with new work, and refinished and left in as good condition as existed before commencing work.
- C. At Contractor's own expense, Contractor shall immediately restore to service and repair any damage caused by Contractor's workmen to existing piping and conduits, wires, cables, etc., of utility services

or of fire protection systems and communications systems (including telephone) which are indicated on drawings and which are not scheduled for discontinuance or abandonment.

- D. Expense of repairs to such utilities and systems not shown on drawings or locations of which are unknown will be covered by adjustment to contract time and price in accordance with clause entitled "CHANGES" (FAR 52.243-4 and VAAR 852.236-88) and "DIFFERING SITE CONDITIONS" (FAR 52.236-2).

**1.12 PHYSICAL DATA: N/A**

**1.13 PROFESSIONAL SURVEYING SERVICES: N/A**

**1.14 LAYOUT OF WORK: N/A**

**1.15 AS-BUILT DRAWINGS**

- A. The contractor shall maintain two full size sets of as-built drawings which will be kept current during construction of the project, to include all contract changes, modifications and clarifications.
- B. All variations shall be shown in the same general detail as used in the contract drawings. To insure compliance, as-built drawings shall be made available for the Resident Engineer's review, as often as requested.
- C. Contractor shall deliver two approved completed sets of full size as-built drawings to the Resident Engineer within 15 calendar days after each completed phase and after the acceptance of the project by the Resident Engineer. An electronic copy of all documents shall be provided in AutoCAD format.
- D. Paragraphs A, B, & C shall also apply to all shop drawings.

**1.16 USE OF ROADWAYS**

- A. For hauling, use only established public roads and roads on Medical Center property and, when authorized by the Resident Engineer. When necessary to cross curbing, sidewalks, or similar construction, they must be protected by well-constructed bridges.

**1.17 RESIDENT ENGINEER'S FIELD OFFICE: N/A**

**1.18 TEMPORARY USE OF MECHANICAL AND ELECTRICAL EQUIPMENT**

- A. Use of new installed mechanical and electrical equipment to provide heat, ventilation, plumbing, light and power will be permitted subject to compliance with the following provisions:

1. Permission to use each unit or system must be given by Resident Engineer. If the equipment is not installed and maintained in accordance with the following provisions, the Resident Engineer will withdraw permission for use of the equipment.
  2. Electrical installations used by the equipment shall be completed in accordance with the drawings and specifications to prevent damage to the equipment and the electrical systems, i.e. transformers, relays, circuit breakers, fuses, conductors, motor controllers and their overload elements shall be properly sized, coordinated and adjusted. Voltage supplied to each item of equipment shall be verified to be correct and it shall be determined that motors are not overloaded. The electrical equipment shall be thoroughly cleaned before using it and again immediately before final inspection including vacuum cleaning and wiping clean interior and exterior surfaces.
  3. Units shall be properly lubricated, balanced, and aligned. Vibrations must be eliminated.
  4. Automatic temperature control systems for preheat coils shall function properly and all safety controls shall function to prevent coil freeze-up damage.
  5. The air filtering system utilized shall be that which is designed for the system when complete, and all filter elements shall be replaced at completion of construction and prior to testing and balancing of system.
  6. All components of heat production and distribution system, metering equipment, condensate returns, and other auxiliary facilities used in temporary services shall be cleaned prior to use; maintained to prevent corrosion internally and externally during use; and cleaned, maintained and inspected prior to acceptance by the Government. Boilers, pumps, feedwater heaters and auxiliary equipment must be operated as a complete system and be fully maintained by operating personnel. Boiler water must be given complete and continuous chemical treatment.
- B. Prior to final inspection, the equipment or parts used which show wear and tear beyond normal, shall be replaced with identical replacements, at no additional cost to the Government.

C. This paragraph shall not reduce the requirements of the mechanical and electrical specifications sections.

**1.19 TEMPORARY USE OF EXISTING ELEVATORS**

A. Use of existing Elevator 11 for handling building materials and Contractor's personnel daily between the hours of 5:00am and 6:30am, and from 4:30pm to 11:00pm, and for special non-recurring time intervals when permission is granted by the Resident Engineer.

Elevator use will be permitted subject to following provisions:

1. Contractor makes all arrangements with the Resident Engineer for use of elevators. The Resident Engineer will ascertain that elevators are in proper condition. Personnel for operating elevators will not be provided by the Department of Veterans Affairs.
2. Contractor covers and provides maximum protection of following elevator components:
  - a. Entrance jams, heads soffits and threshold plates.
  - b. Entrance columns, canopy, return panels and inside surfaces of car enclosure walls.
  - c. Finish flooring.
3. Government will accept hoisting ropes of elevator and rope of each speed governor if they are worn under normal operation. However, if these ropes are damaged by action of foreign matter such as sand, lime, grit, stones, etc., during temporary use, they shall be removed and replaced by new hoisting ropes.
4. If brake lining of elevators are excessively worn or damaged during temporary use, they shall be removed and replaced by new brake lining.
5. All parts of main controller, starter, relay panel, selector, etc., worn or damaged during temporary use shall be removed and replaced with new parts, if recommended by elevator inspector after elevator is released by Contractor.
6. Place elevator in condition equal, less normal wear, to that existing at time it was placed in service of Contractor as approved by Contracting Officer.
7. In the event of an emergency, the Medical Center may take over use of the elevator for a temporary period.

8. In addition to utilizing one of the existing interior elevator cars subject to the conditions noted above, the contractor shall provide an exterior type hoist for the purpose of transporting material, equipment and personnel at the location indicated on the contract drawings which is immediately adjacent the north exterior elevation of Building No. 1. The Contractor must ensure proper egress is maintained for ground floor entrance doors, emergency generator, and 25th Street gate at all times and will be solely responsible for the operation of the hoist. The space in the designated exterior hoist areas is limited in size and the Contractor is highly encouraged to visit the site to determine if the space is of adequate size to accommodate the hoist. The area may require modification to existing concrete walks, curbs, steps, railings, etc. in order to effectively utilize the hoist. All costs associated with the installation of the exterior hoist, as well as any necessary site work modifications including the installation of power from the nearest available electrical room, shall be borne by the Contractor and included in his bid. Hoist mechanisms, structure and supports shall have the capability of expanding to the height of the 17<sup>th</sup> floor.

**1.20 TEMPORARY USE OF NEW ELEVATORS: N/A**

**1.21 TEMPORARY TOILETS**

A. Contractor may have for use of Contractor's workmen, such toilet accommodations as may be assigned to Contractor by Medical Center. Contractor shall keep such places clean and be responsible for any damage done thereto by Contractor's workmen. Failure to maintain satisfactory condition in toilets will deprive Contractor of the privilege to use such toilets.

**1.22 AVAILABILITY AND USE OF UTILITY SERVICES**

A. The Government shall make all reasonably required amounts of utilities available to the Contractor from existing outlets and supplies, as specified in the contract. The amount to be paid by the Contractor for chargeable electrical services shall be the prevailing rates charged to the Government. The Contractor shall carefully conserve any utilities furnished without charge.

B. The Contractor, at Contractor's expense and in a workmanlike manner satisfactory to the Contracting Officer, shall install and maintain all

necessary temporary connections and distribution lines, and all meters required to measure the amount of electricity used for the purpose of determining charges. Before final acceptance of the work by the Government, the Contractor shall remove all the temporary connections, distribution lines, meters, and associated paraphernalia.

- C. Contractor shall install meters at Contractor's expense and furnish the Medical Center.
- D. Heat: Furnish temporary heat necessary to prevent injury to work and materials through dampness and cold. Use of open salamanders or any temporary heating devices which may be fire hazards or may smoke and damage finished work, will not be permitted.
- E. Electricity (for Construction and Testing): Furnish all temporary electric services.
  - 1. Obtain electricity by connecting to the Medical Center electrical distribution system. The Contractor shall meter and pay for electricity required for electric cranes and hoisting devices, electrical welding devices and any electrical heating devices providing temporary heat. Electricity for all other uses is available at no cost to the Contractor.
- F. Water (for Construction and Testing): Furnish temporary water service.
  - 1. Obtain water by connecting to the Medical Center water distribution system. Provide reduced pressure backflow preventer at each connection. Water is available at no cost to the Contractor.
  - 2. Maintain connections, pipe, fittings and fixtures and conserve water-use so none is wasted. Failure to stop leakage or other wastes will be cause for revocation (at Resident Engineer's discretion) of use of water from Medical Center's system.
- G. Steam: Furnish steam system for testing required in various sections of specifications.
  - 1. Obtain steam for testing by connecting to the Medical Center distribution system. Steam is available at no cost to the Contractor.
  - 2. Maintain connections, pipe, fittings and fixtures and conserve steam-use so none is wasted. Failure to stop leakage or other waste will be cause for revocation (at Resident Engineer's discretion), of use of steam from the Medical Center's system.

1.23 NEW TELEPHONE EQUIPMENT: N/A

1.24 TESTS: N/A

1.25 INSTRUCTIONS: N/A

1.26 GOVERNMENT-FURNISHED PROPERTY: N/A

1.27 RELOCATED ITEMS: N/A

1.28 STORAGE SPACE FOR DEPARTMENT OF VETERANS AFFAIRS EQUIPMENT: N/A

1.29 CONSTRUCTION SIGN: N/A

1.30 SAFETY SIGN: N/A

1.31 PHOTOGRAPHIC DOCUMENTATION

The contractor shall provide photographic documentation of construction progress and critical subsurface utilities using the VA-approved photographic documentation service.

1.32 FINAL ELEVATION DIGITAL IMAGES: N/A

1.33 HISTORIC PRESERVATION: N/A

1.34 VA TRIRIGA CPMS

VA contractors, selected by award to perform work, are required to get access to the VA TRIRIGA CPMS. The TRIRIGA CPMS is the management and collaborative environment that the VA uses for all Major, Minor and Non-Recurring Maintenance (NRM) projects within the Office of Construction & Facilities Management (CFM), Veterans Health Administration (VHA), National Cemetery Administration (NCA), and the Veterans Benefits Administration (VBA).

The contractor is solely responsible for acquiring access to the VA TRIRIGA CPMS.

To gain access to the VA TRIRIGA CPMS the contractor is encouraged to follow the licensing process outline as specified below:

A. Requirement: TRIRIGA is the management and collaborative environment that VA uses for all construction projects. VA requires its contractors to procure TRIRIGA access as part of the cost of performance for a VA construction related contract.

B. Access Request and Payment can be made through the following URL <https://valicensing.oncfi.com/> Inquiries or to request additional services, contact the following:

Craig Alsheimer, Federal Account Manager  
Computerized Facility Integrations, LLC  
18000 West Nine Mile Road

Suite 700

Southfield, MI 48075

Email: calsheimer@gocfi.com

Phone: 248-557-4234 Extension 6010; 410-292-7006

C. Process:

1. Once the contractor has been notified by VA of the award and a unique contract number, the contractor can enter a request for access to TRIRIGA at URL <https://valicensing.oncfi.com/>
2. CFI will process the request for access and payment. CFI will create the USER ID and a password. Security provisions required to align the contractor to the Contract Number will be entered and an email will be generated and submitted to the requestor.
3. CFI will also provide standard terms and conditions related to the transaction and use agreement.

**1.35 HEALTH AND SAFETY**

A. Applicable Publications: Latest publications listed below form part of this Article to extent referenced. Publications are referenced in text by basic designations only.

1. American Society of Safety Engineers (ASSE):
  - A10.1 Pre-Project & Pre-Task Safety and Health Planning
  - A10.34 Protection of the Public on or Adjacent to Construction Sites
  - A10.38 Basic Elements of an Employer's Program to Provide a Safe and Healthful Work Environment American National Standard Construction and Demolition Operations
2. American Society for Testing and Materials (ASTM):
  - E84 Surface Burning Characteristics of Building Materials
3. The Facilities Guidelines Institute (FGI):
  - FGI Guidelines Guidelines for Design and Construction of Healthcare Facilities
4. National Fire Protection Association (NFPA):
  - 10 Standard for Portable Fire Extinguishers
  - 30 Flammable and Combustible Liquids Code
  - 51B Standard for Fire Prevention During Welding, Cutting and Other Hot Work
  - 70 National Electrical Code

- 70E Standard for Electrical Safety in the Workplace
- 241 Standard for Safeguarding Construction, Alteration, and Demolition Operations
- 5. The Joint Commission (TJC)  
TJC Manual Comprehensive Accreditation and Certification Manual
- 6. U. S. Nuclear Regulatory Commission  
10 CFR 20 Standards for Protection Against Radiation
- 7. U. S. Occupational Safety and Health Administration (OSHA):
  - 29 CFR 1904 Reporting and Recording Injuries & Illnesses
  - 29 CFR 1910 Safety and Health Regulations for General Industry
  - 29 CFR 1926 Safety and Health Regulations for Construction Industry
  - CPL 2-0.124 Multi-Employer Citation Policy

B. Definitions:

- 1. OSHA "Competent Person" (CP): One who is capable of identifying existing and predictable hazards in the surroundings and working conditions which are unsanitary, hazardous or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them (see 29 CFR 1926.32(f)).
- 2. "Qualified" means one who, by possession of a recognized degree, certificate, or professional standing, or who by extensive knowledge, training and experience, has successfully demonstrated his ability to solve or resolve problems relating to the subject matter, the work, or the project.
- 3. High Visibility Accident: Any mishap which may generate publicity or high visibility.
- 4. Medical Treatment: Treatment administered by a physician or by registered professional personnel under the standing orders of a physician. Medical treatment does not include first aid treatment even though provided by a physician or registered personnel.
- 5. Recordable Injuries or Illnesses: Any work-related injury or illness that results in:
  - a. Death, regardless of the time between the injury and death, or the length of the illness;

- b. Days away from work (any time lost after day of injury/illness onset);
  - c. Restricted work;
  - d. Transfer to another job;
  - e. Medical treatment beyond first aid;
  - f. Loss of consciousness; or
  - g. A significant injury or illness diagnosed by a physician or other licensed health care professional, even if it did not result in (a) through (f) above.
- C. Regulatory Requirements: In addition to the detailed requirements included in the provisions of this contract, comply with 29 CFR 1926, comply with 29 CFR 1910 as incorporated by reference within 29 CFR 1926, comply with ASSE A10.34, and all applicable federal, state, and local laws, ordinances, criteria, rules and regulations. Submit matters of interpretation of standards to the VA Office of Construction and Facilities Management (OCFM) and the VHA Office of Occupational Safety and Health (10NA8) for resolution before starting work. Where the requirements of this specification, applicable laws, criteria, ordinances, regulations, and referenced documents vary, the most stringent requirements govern except with specific approval and acceptance by the Resident Engineer.
- D. Accident Prevention Plan (APP): The APP (aka Construction Safety & Health Plan) shall interface with the Contractor's overall safety and health program. Include any portions of the Contractor's overall safety and health program referenced in the APP in the applicable APP element and ensure it is site-specific. The Government considers the Prime Contractor to be the "controlling authority" for all worksite safety and health of each subcontractor(s). Contractors are responsible for informing their subcontractors of the safety provisions under the terms of the contract and the penalties for noncompliance, coordinating the work to prevent one craft from interfering with or creating hazardous working conditions for other crafts, and inspecting subcontractor operations to ensure that accident prevention responsibilities are being carried out.
- 1. The APP shall be prepared as follows:

- a. Written in English by a qualified person who is employed by the Prime Contractor articulating the specific work and hazards pertaining to the contract (model language can be found in ASSE A10.33). Specifically articulating the safety requirements found within these VA contract safety specifications.
- b. Address both the Prime Contractors and the subcontractors work operations.
- c. State measures to be taken to control hazards associated with materials, services, or equipment provided by suppliers.
- d. Address all the elements/sub-elements and in order as follows:
- e. SIGNATURE SHEET. Title, signature, and phone number of the following:
  - (1) Plan preparer (Qualified Person such as corporate safety staff person or contracted Certified Safety Professional with construction safety experience);
  - (2) Plan approver (company/corporate officers authorized to obligate the company);
  - (3) Plan concurrence (e.g., Chief of Operations, Corporate Chief of Safety, Corporate Industrial Hygienist, project manager or superintendent, project safety professional). Provide concurrence of other applicable corporate and project personnel (Contractor).
- f. Background Information: List the following:
  - (1) Contractor;
  - (2) Contract number;
  - (3) Project name;
  - (4) Brief project description, description of work to be performed, and location; phases of work anticipated (these will require an AHA).
- g. Statement of Safety and Health Policy: Provide a copy of current corporate/company Safety and Health Policy Statement, detailing commitment to providing a safe and healthful workplace for all employees. The Contractor's

written safety program goals, objectives, and accident experience goals for this contract should be provided.

- h. Responsibilities and Lines of Authorities: Provide the following:
  - (1) A statement of the employer's ultimate responsibility for the implementation of his SOH program;
  - (2) Identification and accountability of personnel responsible for safety at both corporate and project level. Contracts specifically requiring safety or industrial hygiene personnel shall include a copy of their resumes.
  - (3) The names of Competent and/or Qualified Person(s) and proof of competency/qualification to meet specific OSHA Competent/Qualified Person(s) requirements must be attached.;
  - (4) Requirements that no work shall be performed unless a designated competent person is present on the job site;
  - (5) Requirements for pre-task Activity Hazard Analysis (AHAs);
  - (6) Lines of authority;
  - (7) Policies and procedures regarding noncompliance with safety requirements (to include disciplinary actions for violation of safety requirements) should be identified;
- i. Subcontractors and Suppliers: If applicable, provide procedures for coordinating SOH activities with other employers on the job site:
  - (1) Identification of subcontractors and suppliers (if known);
  - (2) Safety responsibilities of subcontractors and suppliers.
- j. Training:
  - (1) Requirements for site-specific SOH orientation training at the time of initial hire or assignment to the project for every employee.

- (2) Requirements for mandatory training and certifications that are applicable to this project (e.g., explosive actuated tools, crane operator, rigger, crane signal person, fall protection, electrical lockout/NFPA 70E, machine/equipment lockout, confined space, etc...) and any requirements for periodic retraining/recertification.
  - (3) Procedures for periodic safety and health training for supervisors and employees.
  - (4) Requirements for OSHA 10-hour training for all workers on site and the OSHA 30-hour training for Trade Competent Persons (CPs)
- k. Safety and Health Inspections:
  - (1) Specific assignment of responsibilities for a minimum daily job site safety and health inspection during periods of work activity: Who will conduct (e.g., "Site Safety and Health CP"), proof of inspector's training/qualifications, when inspections will be conducted, procedures for documentation, deficiency tracking system, and follow-up procedures.
  - (2) Any external inspections/certifications that may be required (e.g., contracted CSP or CSHT)
- l. Accident Investigation & Reporting: The Contractor shall conduct mishap investigations of all OSHA Recordable Incidents. The App shall include accident/incident investigation procedure & identify person(s) responsible to provide the following to the RE Office:
  - (1) Exposure data (man-hours worked);
  - (2) Accident investigations, reports, and logs.
- m. Plans (Programs, Procedures) Required: Based on a risk assessment of contracted activities and on mandatory OSHA compliance programs, the Contractor shall address all applicable occupational risks in site-specific compliance and accident prevention plans. These Plans shall include but are not be limited to procedures for addressing the risks associates with the following:

- (1) Emergency response;
  - (2) Contingency for severe weather;
  - (3) Fire Prevention;
  - (4) Medical Support;
  - (5) Posting of emergency telephone numbers;
  - (6) Prevention of alcohol and drug abuse;
  - (7) Site sanitation (housekeeping, drinking water, toilets);
  - (8) Night operations and lighting;
  - (9) Hazard communication program;
  - (10) Welding/Cutting "Hot" work;
  - (11) Electrical Safe Work Practices (Electrical LOTO/NFPA 70E);
  - (12) General Electrical Safety
  - (13) Hazardous energy control (Machine LOTO);
  - (14) Site-Specific Fall Protection & Prevention;
  - (15) Excavation/trenching;
  - (16) Asbestos abatement;
  - (17) Lead abatement;
  - (18) Crane Critical lift;
  - (19) Respiratory protection;
  - (20) Health hazard control program;
  - (21) Radiation Safety Program;
  - (22) Abrasive blasting;
  - (23) Heat/Cold Stress Monitoring;
  - (24) Crystalline Silica Monitoring (Assessment);
  - (25) Demolition plan (to include engineering survey);
  - (26) Formwork and shoring erection and removal;
  - (27) PreCast Concrete.
- 2. Submit the APP to the Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES 10 calendar days after the date of the contract award. Work cannot proceed without an accepted APP.
  - 3. Once accepted by the Resident Engineer, the APP and attachments will be enforced as part of the contract. Disregarding the

provisions of this contract or the accepted APP will be cause for stopping of work, at the discretion of the Contracting Officer, until the matter has been rectified.

4. Once work begins, changes to the accepted APP shall be made with the knowledge and concurrence of the Resident Engineer. Should any severe hazard exposure, i.e. imminent danger, become evident, stop work in the area, secure the area, and develop a plan to remove the exposure and control the hazard. Notify the Contracting Officer within 24 hours of discovery. Eliminate/remove the hazard. In the interim, take all necessary action to restore and maintain safe working conditions in order to safeguard onsite personnel, visitors, the public (as defined by ASSE/SAFE A10.34) and the environment.

E. Activity Hazard Analyses (AHAs): AHAs are also known as Job Hazard Analyses, Job Safety Analyses, and Activity Safety Analyses. Before beginning each work activity involving a type of work presenting hazards not experienced in previous project operations or where a new work crew or sub-contractor is to perform the work, the Contractor(s) performing that work activity shall prepare an AHA (Example electronic AHA forms can be found on the US Army Corps of Engineers web site)

1. AHAs shall define the activities being performed and identify the work sequences, the specific anticipated hazards, site conditions, equipment, materials, and the control measures to be implemented to eliminate or reduce each hazard to an acceptable level of risk.
2. Work shall not begin until the AHA for the work activity has been accepted by the Resident Engineer and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings.
  - a. The names of the Competent/Qualified Person(s) required for a particular activity (for example, excavations, scaffolding, fall protection, other activities as specified by OSHA and/or other State and Local agencies) shall be identified and included in the AHA. Certification of their competency/qualification shall be submitted to the

Government Designated Authority (GDA) for acceptance prior to the start of that work activity.

- b. The AHA shall be reviewed and modified as necessary to address changing site conditions, operations, or change of competent/qualified person(s).
  - 1) If more than one Competent/Qualified Person is used on the AHA activity, a list of names shall be submitted as an attachment to the AHA. Those listed must be Competent/Qualified for the type of work involved in the AHA and familiar with current site safety issues.
  - 2) If a new Competent/Qualified Person (not on the original list) is added, the list shall be updated (an administrative action not requiring an updated AHA). The new person shall acknowledge in writing that he or she has reviewed the AHA and is familiar with current site safety issues.
- c. Submit AHAs to the Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES for review prior to the start of each phase. Subsequent AHAs as shall be formatted as amendments to the APP. The analysis should be used during daily inspections to ensure the implementation and effectiveness of the activity's safety and health controls.
- d. The AHA list will be reviewed periodically (at least monthly) at the Contractor supervisory safety meeting and updated as necessary when procedures, scheduling, or hazards change.
- e. Develop the activity hazard analyses using the project schedule as the basis for the activities performed. All activities listed on the project schedule will require an AHA. The AHAs will be developed by the contractor, supplier, or subcontractor and provided to the prime contractor for review and approval and then submitted to the Resident Engineer.

F. Preconstruction Conference: Contractor representatives who have a responsibility or significant role in implementation of the accident prevention program, as required by 29 CFR 1926.20(b)(1), on the project shall attend the preconstruction conference to gain a mutual understanding of its implementation. This includes the project superintendent, subcontractor superintendents, and any other assigned safety and health professionals.

1. Discuss the details of the submitted APP to include incorporated plans, programs, procedures and a listing of anticipated AHAs that will be developed and implemented during the performance of the contract. This list of proposed AHAs will be reviewed at the conference and an agreement will be reached between the Contractor and the Contracting Officer's representative as to which phases will require an analysis. In addition, establish a schedule for the preparation, submittal, review, and acceptance of AHAs to preclude project delays.
2. Deficiencies in the submitted APP will be brought to the attention of the Contractor within 5 days of submittal, and the Contractor shall revise the plan to correct deficiencies and re-submit it for acceptance. Do not begin work until there is an accepted APP.

G. Site "Safety and Health Officers" (SSHO) and "COMPETENT PERSONS" (CPs):

1. The Prime Contractor shall designate a minimum of one SSHO at each project site that will be identified as the "Site Safety and Health Officer" (SSHO) to administer the Contractor's safety program and government-accepted Accident Prevention Plan. Each subcontractor shall designate a minimum of one "Competent Person" (CP) in compliance with 29 CFR 1926.20 (b)(2) that will be identified as a "Trade CP" to administer their individual safety programs.
2. Further, all specialized "Competent Persons" (additional "Trade Safety and Health CPs" as necessary) for the work crews will be supplied by the respective contractor as required by 29 CFR 1926 (i.e. Asbestos, Electrical, Cranes, & Derricks, Demolition, Fall Protection, Fire Safety/Life Safety, Ladder, Rigging, Scaffolds, and Trenches/Excavations).

3. These "Competent Persons" can have collateral duties as the subcontractor's superintendent and/or work crew lead persons as well as fill more than one specialized CP role (i.e. Asbestos, Electrical, Cranes, & Derricks, Demolition, Fall Protection, Fire Safety/Life Safety, Ladder, Rigging, Scaffolds, and Trenches/Excavations).
  4. The "Site Safety and Health Officer" or an equally-qualified Designated Representative/alternate will maintain a presence on the site during construction operations in accordance with FAR Clause 52.236-6: Superintendence by the Contractor. "Trade Safety and Health CPs" will maintain presence during their construction activities in accordance with above mentioned clause. A listing of the designated Site Safety and Health CP and Trade Safety and Health CPs shall be submitted prior to the start of work as part of the APP with the training documentation and/or AHA as listed in Section 1.8 below.
  5. The repeated presence of uncontrolled hazards during a contractor's work operations will result in the designated CP as being deemed incompetent and result in the required removal of the employee in accordance with FAR Clause 52.236-5: Material and Workmanship, Paragraph (c).
- H. Training: The designated Prime Contractor "Site Safety and Health Officer" must meet the requirements of all applicable OSHA standards and be capable (through training, experience, and qualifications) of ensuring that the requirements of 29 CFR 1926.16 and other appropriate Federal, State and local requirements are met for the project. As a minimum the SSHO must have completed the OSHA 30-hour Construction Safety class and have five (5) years of construction industry safety experience or three (3) years if he/she possesses a Certified Safety Professional (CSP) or certified Construction Safety and Health Technician (CSHT) certification or have a safety and health degree from an accredited university or college.
1. All designated "Trade Safety and Health CPs" shall have completed the OSHA 30-hour Construction Safety course within the past 3 years.

2. In addition to the OSHA 30 Hour Construction Safety Course, all "Trade Safety and Health CPs" with high hazard work operations such as operations involving asbestos, electrical, cranes, demolition, work at heights/fall protection, fire safety/life safety, ladder, rigging, scaffolds, and trenches/excavations shall have a specialized formal course in the hazard recognition & control associated with those high hazard work operations. Documented "repeat" deficiencies in the execution of safety requirements will require retaking the requisite formal course.
  3. All other construction workers shall have the OSHA 10-hour Construction Safety Outreach course and any necessary safety training to be able to identify hazards within their work environment.
  4. Submit training records associated with the above training requirements to the Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES prior to the date of the preconstruction conference for acceptance.
  5. Prior to any worker for the contractor or subcontractors beginning work, they shall undergo a safety briefing provided by the "Site Safety and Health Officer" or his/her designated representative. As a minimum, this briefing shall include information on the site-specific hazards, construction limits, VAMC safety guidelines, means of egress, break areas, work hours, locations of restrooms, use of VAMC equipment, emergency procedures, accident reporting etc... Documentation shall be provided to the Resident Engineer that individuals have undergone contractor's safety briefing.
  6. Ongoing safety training will be accomplished in the form of weekly documented safety meeting.
- I. Inspections: The "Site Safety and Health Officer" shall conduct frequent and regular safety inspections (daily) of the site and each of the subcontractors "Trade Safety and Health CPs" shall conduct frequent and regular safety inspections (daily) of the their work operations as required by 29 CFR 1926.20(b)(2). Each week, the "Site Safety and Health Officer" shall conduct a formal documented inspection of the

entire construction areas with the subcontractors' "Trade Safety and Health CPs" present in their work areas. Coordinate with, and report findings and corrective actions weekly to Resident Engineer.

1. A Certified Safety Professional (CSP) with specialized knowledge in construction safety or a certified Construction Safety and Health Technician (CSHT) shall randomly conduct a monthly site safety inspection. The CSP or CSHT can be a corporate safety professional or independently contracted. The CSP or CSHT will provide their certificate number on the required report for verification as necessary.

- a. Results of the inspection will be documented with tracking of the identified hazards to abatement.
- b. The Resident Engineer will be notified immediately prior to start of the inspection and invited to accompany the inspection.
- c. Identified hazard and controls will be discussed to come to a mutual understanding to ensure abatement and prevent future reoccurrence.
- d. A report of the inspection findings with status of abatement will be provided to the Resident Engineer within one week of the onsite inspection.

J. Accidents, OSHA 300 Logs, and Man-Hours: Notify the Resident Engineer as soon as practical, but no more than four hours after any accident meeting the definition of OSHA Recordable Injuries or Illnesses or High Visibility Accidents, property damage equal to or greater than \$5,000, or any weight handling equipment accident. Within notification include contractor name; contract title; type of contract; name of activity, installation or location where accident occurred; date and time of accident; names of personnel injured; extent of property damage, if any; extent of injury, if known, and brief description of accident (to include type of construction equipment used, PPE used, etc.). Preserve the conditions and evidence on the accident site until the Resident Engineer can determine whether a government investigation will be conducted.

1. Conduct an accident investigation for recordable injuries and illnesses, for Medical Treatment defined in paragraph

DEFINITIONS, and property damage accidents resulting in at least \$20,000 in damages, to establish the root cause(s) of the accident. Complete the VA Form 2162, and provide the report to the Resident Engineer within 5 calendar days of the accident. The Resident Engineer will provide copies of any required or special forms.

2. A summation of all man-hours worked by the contractor and associated sub-contractors for each month will be reported to the Resident Engineer on a monthly basis.
3. A summation of all OSHA recordable accidents experienced on site by the contractor and associated sub-contractors for each month will be provided to the Resident Engineer on a monthly basis. The contractor and associated sub-contractors' OSHA 300 logs will be made available to the Resident Engineer as requested.

K. Personal Protective Equipment (PPE): PPE is governed in all areas by the nature of the work the employee is performing.

1. Mandatory PPE includes:
  - a. Hard Hats - unless written authorization is given by the Resident in circumstances of work operations that have limited potential for falling object hazards such as during finishing work or minor remodeling. However even with authorization to relax the requirement of hard hats, if a worker becomes exposed to an overhead falling object hazard, then hard hats would be required in accordance with the OSHA regulations.
  - b. Safety glasses - unless written authorization is given by the Resident Engineer safety glasses meeting the ANSI Z.87.1 standard must be worn by each person on site.
  - c. Appropriate Safety Shoes - based on the hazards present, safety shoes meeting the requirements of ASTM F2413-11 shall be worn by each person on site unless written authorization is given by the Resident Engineer. Hearing protection - Use personal hearing protection at all times in designated noise hazardous areas or when performing noise hazardous tasks.

L. Infection Control: Infection Control is critical in all medical center facilities. Interior construction activities causing disturbance of existing dust, or creating new dust, must be conducted within ventilation-controlled areas that minimize the flow of airborne particles into patient areas. Exterior construction activities causing disturbance of soil or creates dust in some other manner must be controlled.

1. An AHA associated with infection control will be performed by VA personnel in accordance with FGI Guidelines (i.e. Infection Control Risk Assessment (ICRA)). The ICRA procedure found on the American Society for Healthcare Engineering (ASHE) website will be utilized. Risk classifications of Class II or lower will require approval by the Resident Engineer before beginning any construction work. Risk classifications of Class III or higher will require a permit before beginning any construction work. Infection Control permits will be issued by the Resident Engineer and Infection Control Manager. The Infection Control Permits will be posted outside the appropriate construction area. More than one permit may be issued for a construction project if the work is located in separate areas requiring separate classes. The primary project scope area for this project is: Class 3, however, work outside the primary project scope area may vary. The required infection control precautions with each class are as follows:

a. Class I requirements:

1) During Construction Work:

- i. Notify the Resident Engineer.
- ii. Execute work by methods to minimize raising dust from construction operations.
- iii. Ceiling tiles: Immediately replace a ceiling tiles displaced for visual inspection.

2) Upon Completion:

- i. Clean work area upon completion of task
- ii. Notify the Resident Engineer.

b. Class II requirements:

1) During Construction Work:

- i. Notify the Resident Engineer.
  - ii. Provide active means to prevent airborne dust from dispersing into atmosphere.
  - iii. Water mist work surfaces to control dust while cutting.
  - iv. Seal unused doors with duct tape.
  - v. Block off and seal air vents.
  - vi. Remove or isolate HVAC system in areas where work is being performed.
- 2) Upon Completion:
  - i. Wipe work surfaces with cleaner/disinfectant.
  - ii. Contain construction waste before transport in tightly covered containers.
  - iii. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area.
  - iv. Upon completion, restore HVAC system where work was performed
  - v. Notify the Resident Engineer.
- c. Class III requirements:
  - 1) During Construction Work:
    - i. Obtain permit from the Resident Engineer and Infection Control Manager.
    - ii. Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system.
    - iii. Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. Install construction barriers and ceiling protection carefully, outside of normal work hours.
    - iv. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units and

- monitored with an alarm device, which must be maintained and monitored by the contractor.
- v. Contain construction waste before transport in tightly covered containers.
- vi. Cover transport receptacles or carts. Tape covering unless solid lid.
- 2) Upon Completion:
  - i. Do not remove barriers from work area until completed project is inspected by the Resident Engineer and Infection Control Manager and thoroughly cleaned.
  - ii. Remove construction barriers and ceiling protection carefully to minimize spreading of dirt and debris associated with construction, outside of normal work hours.
  - iii. Vacuum work area with HEPA filtered vacuums.
  - iv. Wet mop area with cleaner/disinfectant.
  - v. Upon completion, restore HVAC system where work was performed.
  - vi. Return permit to the Resident Engineer.
- d. Class IV requirements:
  - 1) During Construction Work:
    - i. Obtain permit from the Resident Engineer and Infection Control Manager.
    - ii. Isolate HVAC system in area where work is being done to prevent contamination of duct system.
    - iii. Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. Install construction barriers and ceiling protection carefully, outside of normal work hours.
    - iv. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units.

- v. Seal holes, pipes, conduits, and punctures.
  - vi. Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave work site.
  - vii. All personnel entering work site are required to wear shoe covers. Shoe covers must be changed each time the worker exits the work area.
- 2) Upon Completion:
- i. Do not remove barriers from work area until completed project is inspected by the Resident Engineer and Infection Control Manager and thoroughly cleaned.
  - ii. Remove construction barriers and ceiling protection carefully to minimize spreading of dirt and debris associated with construction, outside of normal work hours.
  - iii. Contain construction waste before transport in tightly covered containers.
  - iv. Cover transport receptacles or carts. Tape covering unless solid lid.
  - v. Vacuum work area with HEPA filtered vacuums.
  - vi. Wet mop area with cleaner/disinfectant.
  - vii. Upon completion, restore HVAC system where work was performed.
  - viii. Return permit to the Resident Engineer.
2. Barriers shall be erected as required based upon classification (Class III & IV requires barriers) and shall be constructed as follows:
- a. Class III and IV - closed door with masking tape applied over the frame and door is acceptable for projects that can be contained in a single room.
  - b. Construction, demolition or reconstruction not capable of containment within a single room must have the following

barriers erected and made presentable on hospital occupied side:

- 1) Class III & IV - Airtight plastic barrier that extends from the floor to ceiling. Seams must be sealed with duct tape to prevent dust and debris from escaping
- 2) Class III & IV - Drywall barrier erected with joints covered or sealed to prevent dust and debris from escaping.
- 3) Class III & IV - Seal all penetrations in existing barrier airtight
- 4) Class III & IV - Barriers at penetration of ceiling envelopes, chases and ceiling spaces to stop movement air and debris
- 5) Class IV only - Anteroom or double entrance openings that allow workers to remove protective clothing or vacuum off existing clothing
- 6) Class III & IV - At elevators shafts or stairways within the field of construction, overlapping flap minimum of two feet wide of polyethylene enclosures for personnel access.

3. Products and Materials:

- a. Sheet Plastic: Fire retardant polystyrene, 6-mil thickness meeting local fire codes
- b. Barrier Doors: Self-Closing Two-hour fire-rated solid core wood in steel frame, painted
- c. Dust proof two-hour fire-rated drywall
- d. High Efficiency Particulate Air-Equipped filtration machine rated at 95% capture of 0.3 microns including pollen, mold spores and dust particles. HEPA filters should have ASHRAE 85 or other prefilter to extend the useful life of the HEPA. Provide both primary and secondary filtrations units. Maintenance of equipment and replacement of the HEPA filters and other filters will be in accordance with manufacturer's instructions.
- e. Exhaust Hoses: Heavy duty, flexible steel reinforced; Ventilation Blower Hose

- f. Adhesive Walk-off Mats: Provide minimum size mats of 24 inches x 36 inches
  - g. Disinfectant: Hospital-approved disinfectant or equivalent product
  - h. Portable Ceiling Access Module
- 4. Before any construction on site begins, all contractor personnel involved in the construction or renovation activity shall be educated and trained in infection prevention measures established by the medical center.
- 5. A dust control program will be establish and maintained as part of the contractor's infection preventive measures in accordance with the FGI Guidelines for Design and Construction of Healthcare Facilities. Prior to start of work, prepare a plan detailing project-specific dust protection measures with associated product data, including periodic status reports, and submit to Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES.
- 6. Medical center Infection Control personnel will monitor for airborne disease (e.g. aspergillosis) during construction. A baseline of conditions will be established by the medical center prior to the start of work and periodically during the construction stage to determine impact of construction activities on indoor air quality with safe thresholds established.
- 7. In general, the following preventive measures shall be adopted during construction to keep down dust and prevent mold.
  - a. Contractor shall verify that construction exhaust to exterior is not reintroduced to the medical center through intake vents, or building openings. HEPA filtration is required where the exhaust dust may reenter the medical center.
  - b. Exhaust hoses shall be exhausted so that dust is not reintroduced to the medical center.
  - c. Adhesive Walk-off/Carpet Walk-off Mats shall be used at all interior transitions from the construction area to occupied medical center area. These mats shall be changed as often

- as required to maintain clean work areas directly outside construction area at all times.
- d. Vacuum and wet mop all transition areas from construction to the occupied medical center at the end of each workday. Vacuum shall utilize HEPA filtration. Maintain surrounding area frequently. Remove debris as it is created. Transport these outside the construction area in containers with tightly fitting lids.
  - e. The contractor shall not haul debris through patient-care areas without prior approval of the Resident Engineer and the Medical Center. When, approved, debris shall be hauled in enclosed dust proof containers or wrapped in plastic and sealed with duct tape. No sharp objects should be allowed to cut through the plastic. Wipe down the exterior of the containers with a damp rag to remove dust. All equipment, tools, material, etc. transported through occupied areas shall be made free from dust and moisture by vacuuming and wipe down.
  - f. There shall be no standing water during construction. This includes water in equipment drip pans and open containers within the construction areas. All accidental spills must be cleaned up and dried within 12 hours. Remove and dispose of porous materials that remain damp for more than 72 hours.
  - g. At completion, remove construction barriers and ceiling protection carefully, outside of normal work hours. Vacuum and clean all surfaces free of dust after the removal.
8. Final Cleanup:
- a. Upon completion of project, or as work progresses, remove all construction debris from above ceiling, vertical shafts and utility chases that have been part of the construction.
  - b. Perform HEPA vacuum cleaning of all surfaces in the construction area. This includes walls, ceilings, cabinets, furniture (built-in or free standing), partitions, flooring, etc.

- c. All new air ducts shall be cleaned prior to final inspection.
- 9. Exterior Construction:
  - a. Contractor shall verify that dust will not be introduced into the medical center through intake vents, or building openings. HEPA filtration on intake vents is required where dust may be introduced.
  - b. Dust created from disturbance of soil such as from vehicle movement will be wetted with use of a water truck as necessary
  - c. All cutting, drilling, grinding, sanding, or disturbance of materials shall be accomplished with tools equipped with either local exhaust ventilation (i.e. vacuum systems) or wet suppression controls.
- M. Tuberculosis Screening: N/A
- N. Fire Safety:
  - 1. Fire Safety Plan: Establish and maintain a site-specific fire protection program in accordance with 29 CFR 1926. Prior to start of work, prepare a plan detailing project-specific fire safety measures, including periodic status reports, and submit to Resident Engineer for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES. This plan may be an element of the Accident Prevention Plan
  - 2. Site and Building Access: Maintain free and unobstructed access to facility emergency services and for fire, police and other emergency response forces in accordance with NFPA 241.
  - 3. Separate temporary facilities, such as trailers, storage sheds, and dumpsters, from existing buildings and new construction by distances in accordance with NFPA 241. For small facilities with less than 6 m (20 feet) exposing overall length, separate by 3m (10 feet).
  - 4. Temporary Construction Partitions:
    - a. Install and maintain temporary construction partitions to provide smoke-tight separations between construction areas and the areas that are described in phasing requirements and

- adjoining areas. Construct partitions of gypsum board or treated plywood (flame spread rating of 25 or less in accordance with ASTM E84) on both sides of fire retardant treated wood or metal steel studs. Extend the partitions through suspended ceilings to floor slab deck or roof. Seal joints and penetrations. At door openings, install Class C, 3/4 hour fire/smoke rated doors with self-closing devices.
- b. Install two-hour fire-rated temporary construction partitions as shown on drawings to maintain integrity of existing exit stair enclosures, exit passageways, fire-rated enclosures of hazardous areas, horizontal exits, smoke barriers, vertical shafts and openings enclosures.
  - c. Close openings in smoke barriers and fire-rated construction to maintain fire ratings. Seal penetrations with listed through-penetration firestop materials in accordance with Section 07 84 00, FIRESTOPPING.
- 5. Temporary Heating and Electrical: Install, use and maintain installations in accordance with 29 CFR 1926, NFPA 241 and NFPA 70.
  - 6. Means of Egress: Do not block exiting for occupied buildings, including paths from exits to roads. Minimize disruptions and coordinate with the Resident Engineer.
  - 7. Egress Routes for Construction Workers: Maintain free and unobstructed egress. Inspect daily. Report findings and corrective actions weekly to the Resident Engineer.
  - 8. Fire Extinguishers: Provide and maintain extinguishers in construction areas and temporary storage areas in accordance with 29 CFR 1926, NFPA 241 and NFPA 10.
  - 9. Flammable and Combustible Liquids: Store, dispense and use liquids in accordance with 29 CFR 1926, NFPA 241 and NFPA 30.
  - 10. Existing Fire Protection: Do not impair automatic sprinklers, smoke and heat detection, and fire alarm systems, except for portions immediately under construction, and temporarily for connections. Provide fire watch for impairments more than 4 hours in a 24-hour period. Request interruptions in accordance with Article, OPERATIONS AND STORAGE AREAS, and coordinate with Resident Engineer. All existing or temporary fire protection systems (fire

alarms, sprinklers) located in construction areas shall be tested as coordinated with the medical center. Parameters for the testing and results of any tests performed shall be recorded by the medical center and copies provided to the Resident Engineer.

11. Smoke Detectors: Prevent accidental operation. Remove temporary covers at end of work operations each day. Coordinate with Resident Engineer.
12. Hot Work: Perform and safeguard hot work operations in accordance with NFPA 241 and NFPA 51B. Coordinate with Resident Engineer. Obtain permits from Resident Engineer at least 72 hours in advance. Designate contractor's responsible project-site fire prevention program manager to permit hot work.
13. Fire Hazard Prevention and Safety Inspections: Inspect entire construction areas weekly. Coordinate with, and report findings and corrective actions weekly to Resident Engineer.
14. Smoking: Smoking is prohibited in and adjacent to construction areas inside existing buildings and additions under construction. In separate and detached buildings under construction, smoking is prohibited except in designated smoking rest areas.
15. Dispose of waste and debris in accordance with NFPA 241. Remove from buildings daily.
16. If required, submit documentation to the Resident Engineer that personnel have been trained in the fire safety aspects of working in areas with impaired structural or compartmentalization features.

O. Electrical:

1. All electrical work shall comply with NFPA 70 (NEC), NFPA 70B, NFPA 70E, OSHA Part 1910 subpart J - General Environmental Controls, and OSHA Part 1910 subpart S - Electrical, in addition to other references required by contract.
2. All qualified persons performing electrical work under this contract shall be licensed journeyman or master electricians in the state where the project is located. All apprentice electricians performing under this contract shall be deemed unqualified persons unless they are working under the immediate supervision of a licensed electrician or master electrician.

3. All electrical work will be accomplished de-energized and in the Electrically Safe Work Condition (i.e. anything beyond simple testing and troubleshooting with a multimeter). Any Contractor, subcontractor or temporary worker who fails to fully comply with this requirement is subject to immediate termination in accordance with FAR clause 52.236-5(c). Only in rare circumstance where achieving an electrically safe work condition prior to beginning work would increase or cause additional hazards, or is infeasible due to equipment design or operational limitations is energized work permitted. The Resident Engineer with approval of the Medical Center Director will make the determination if the circumstances would meet the exception outlined above. An AHA specific to energized work activities will be developed, reviewed, and accepted prior to the start of that work.
  - a. Development of a Hazardous Electrical Energy Control Procedure is required prior to de-energization. A single Simple Lockout/Tagout Procedure for multiple work operations can only be used for work involving qualified person(s) de-energizing one set of conductors or circuit part source. Task specific Complex Lockout/Tagout Procedures are required at all other times.
  - b. Verification of the absence of voltage after de-energization and lockout/tagout is considered "energized electrical work" (live work) under NFPA 70 70E, and shall only be performed by qualified persons wearing appropriate shock protective (voltage rated) gloves and arc rate personal protective clothing and equipment, using Underwriters Laboratories (UL) tested and appropriately rated contact electrical testing instruments or equipment appropriate for the environment in which they will be used.
  - c. Personal Protective Equipment (PPE) and electrical testing instruments will be readily available for inspection by the The Resident Engineer.
4. Before beginning any electrical work, an AHA will be conducted to include Shock Hazard and Arc Flash Hazard analyses (NFPA Tables can be used only as a last alternative and it is strongly

suggested a full Shock and Arc Flash Hazard Analyses be conducted). Work shall not begin until the AHA for the work activity has been accepted by the Resident Engineer and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings.

5. Ground-fault circuit interrupters. All 120-volt, single-phase 15- and 20-ampere receptacle outlets on construction sites, which are not a part of the permanent wiring of the building or structure and which are in use by employees, shall have approved ground-fault circuit interrupters for personnel protection. "Assured Equipment Grounding Conductor Program" only is not allowed.

P. Fall Protection:

1. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) for ALL WORK, unless specified differently or the OSHA 29 CFR 1926 requirements are more stringent, to include steel erection activities, systems-engineered activities (prefabricated) metal buildings, residential (wood) construction and scaffolding work.
  - a. The use of a Safety Monitoring System (SMS) as a fall protection method is prohibited.
  - b. The use of Controlled Access Zone (CAZ) as a fall protection method is prohibited.
  - c. A Warning Line System (WLS) may ONLY be used on floors or flat or low-sloped roofs (between 0 - 18.4 degrees or 4:12 slope) and shall be erected around all sides of the work area (See 29 CFR 1926.502(f) for construction of WLS requirements). Working within the WLS does not require FP. No worker shall be allowed in the area between the roof or floor edge and the WLS without FP. FP is required when working outside the WLS.
  - d. Fall protection while using a ladder will be governed by the OSHA requirements.

Q. Scaffolds And Other Work Platforms:

1. All scaffolds and other work platforms construction activities shall comply with 29 CFR 1926 Subpart L and in accordance with the specifications included within this section.
2. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) as stated in Section 1.15.
3. The following hierarchy and prohibitions shall be followed in selecting appropriate work platforms.
  - a. Scaffolds, platforms, or temporary floors shall be provided for all work except that can be performed safely from the ground or similar footing.
  - b. Ladders less than 20 feet may be used as work platforms only when use of small hand tools or handling of light material is involved.
  - c. Ladder jacks, lean-to, and prop-scaffolds are prohibited.
  - d. Emergency descent devices shall not be used as working platforms.
4. Contractors shall use a scaffold tagging system in which all scaffolds are tagged by the Competent Person. Tags shall be color-coded: green indicates the scaffold has been inspected and is safe to use; red indicates the scaffold is unsafe to use. Tags shall be readily visible, made of materials that will withstand the environment in which they are used, be legible and shall include:
  - a. The Competent Person's name and signature;
  - b. Dates of initial and last inspections.
5. Mast Climbing work platforms: When access ladders, including masts designed as ladders, exceed 20 ft (6 m) in height, positive fall protection shall be used.

R. Excavation and Trenches:

1. All excavation and trenching work shall comply with 29 CFR 1926 Subpart P and in accordance with the specifications included within this section.
2. All excavations and trenches 5 feet in depth or greater shall require a written trenching and excavation permit (NOTE - some States and other local jurisdictions require separate state/jurisdiction-issued excavation permits). The permit shall

be completed and provided to the Resident Engineer prior to commencing work for the day. At the end of the day, the permit shall be closed out and provided to the Resident Engineer. The permit shall be maintained onsite and include the following:

- a. Determination of soil classification
  - b. Indication that utilities have been located and identified. If utilities could not be located after all reasonable attempt, then excavating operations will proceed cautiously.
  - c. Indication of selected excavation protective system.
  - d. Indication that the spoil pile will be stored at least 2 feet from the edge of the excavation and safe access provided within 25 feet of the workers.
  - e. Indication of assessment for a potential toxic, explosive, or oxygen deficient atmosphere.
3. If not using an engineered protective system such as a trench box, shielding, shoring, or other Professional Engineer designed system and using a sloping or benching system, soil classification cannot be Solid Rock or Type A. All soil will be classified as Type B or Type C and sloped or benched in accordance with Appendix B of 29 CFR 1926.

S. Cranes:

1. All crane work shall comply with 29 CFR 1926 Subpart CC and in accordance with the specifications included within this section.
2. Prior to operating a crane, the operator must be licensed, qualified or certified to operate the crane. Thus, all the provisions contained with Subpart CC are effective and there is no "Phase In" date of November 10, 2014.
3. Crane operators shall not carry loads
  - a. over the general public or VAMC personnel
  - b. over any occupied building unless
    - 1) the top two floors are vacated
    - 2) or overhead protection with a design live load of 300 psf is provided

T. Control Of Hazardous Energy (Lockout/Tagout):

1. All maintenance and servicing of equipment or machinery shall comply with 29 CFR 1910.147 except for specifically referenced operations in 29 CFR 1926 such as concrete & masonry equipment [1926.702(j)], heavy machinery & equipment [1926.600(a)(3)(i)], and process safety management of highly hazardous chemicals (1926.64). Control of hazardous electrical energy during the installation, maintenance, or servicing of electrical equipment shall comply with Section 1.15 to include NFPA 70E and other VA specific requirements discussed in the section.

U. Confined Space Entry:

1. All maintenance and servicing of equipment or machinery shall comply with 29 CFR 1910.146 except for specifically referenced operations in 29 CFR 1926 such as excavations/trenches [1926.651(g)].
2. A site-specific Confined Space Entry Plan (including permitting process) shall be developed and submitted to the Resident Engineer and coordinated with the Facility Safety.

V. General Requirement Paragraphs 1.5, FIRE SAFETY, and 1.8, INFECTION PREVENTION MEASURES, are intended to be complimentary with General Requirement Paragraph 1.35, HEALTH AND SAFETY. Should there be a discrepancy between any of these paragraphs then the most stringent requirement shall apply.

- - - E N D - - -