

SAFETY & HEALTH DURING CONSTRUCTION ACTIVITIES

1. PURPOSE. To establish policy and procedure for safety and health during construction activities.
2. POLICY. Construction projects will be planned, coordinated and regularly inspected to ensure compliance with applicable fire, infection control, environmental, security, safety and occupational health regulations and policies.
3. DEFINITIONS.
 - a. 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 the hazard.
 - b. Construction. Alteration or repair, including painting and decorating of a large scale or high-complexity.
 - c. Construction Lead Person. The contractor's foreperson or superintendent/designee or the VHA foreperson or engineering supervisor/designee. This person acts as the CP responsible for monitoring the construction site for hazards and implementing corrective actions.
 - d. Construction Safety Officer (CSO). Identifies worksite risk and coordinates risk reduction activities through the Contracting Officer (CO) and/or Facility Safety Officer, collects deficiency information, and disseminates summaries of action and results. This individual satisfies VA contract requirements to have a Safety Officer to monitor and enforce safety on the jobsite.
 - e. High-Severity Serious-Construction (HSCS) Accidents. HSCS accidents include illnesses or permanently disabling injuries and fatalities. This includes amputations, crushing with loss of use of body part, third to fifth degree burns or scalds, loss of sight, and respiratory illnesses. HSCS accidents include near misses that could result in fatalities or permanently disabling injuries or illnesses.
 - f. Interim Life Safety Measures (ILSM). A series of eleven administrative actions to temporarily mitigate National Fire Protection Association 101 Life Safety Code deficiencies or construction activities.
 - g. Maintenance. Work on a structure, fixture, foundation or other building systems to ensure a safe and functional condition by applied trades.
4. PROCEDURE.
 - a. In order to protect patients, staff, visitors and contractors from safety and health hazards associated with construction activities, this policy requires strategies be established to control the hazards inherent in conducting construction or maintenance operations in areas occupied by all customers. These strategies include the assignment of appropriate responsibility at all levels

4. PROCEDURE. (Continued)

of the organization, establishing and maintaining the necessary expertise to manage an effective construction health and safety program, applying technical guidance and best practices to assist in managing the program and providing a construction safety multi-disciplinary committee to oversee and enforce the application of this policy.

b. Construction activities shall include delegated minor or non-recurring maintenance projects performed by contractors, as well as station-level projects performed by contractors or Facilities Management personnel. Construction shall also include non-delegated projects including majors, and NF/SGVHS shall coordinate those construction impacts with the project's Resident Engineer through the Project Section Supervisor. Construction activities also apply to enhanced-use and lease projects related to structures for which the NF/SGVHS maintains management responsibility or authority and involve patient care or NF/SGVHS employee's workspace.

c. The intention of this construction safety program is to reduce the potential for injury and illness to VA patients, employees, and visitors that might result from unsafe construction activities; to increase the level of construction safety expertise of VA employees; to decrease the potential for serious Occupational Safety and Health Administration (OSHA) violations; to provide guidelines for addressing safety-related construction issues; and to reduce the potential for property and liability exposures due to construction-related activities.

5. RESPONSIBILITY.

a. *Chief, Facilities Management Service:*

(1) Ensures construction activities performed by contractors and Facilities Management employees comply with this policy.

(2) Reviews and approves minutes of the Construction Safety Committee. A copy of minutes is sent to the Chairperson of the EOC Committee.

(3) Completes the VHA or OSHA 30-hour Construction Safety Training initially, and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years.

b. *Projects Section Supervisor:*

(1) Ensures Contracting Officer Representatives, CORs, have the necessary training, experience and authority to carry out their responsibilities with respect to safety and health during construction activities as the project Competent Person (CP).

Note: The designated competent person shall be defined by OSHA Title 29 Code of Federal regulations.

(2) Works through COs, CORs, safety staff, maintenance staff, contractors and the Construction Safety Committee to plan, coordinate and monitor the construction safety program for all projects at the facility under their area of responsibility.

(3) Participates in inspections of construction sites to ensure compliance with safety elements of the construction contract and performance of the program.

(4) Supports the CSOs, Safety Officer, Industrial Hygienist, Infection Control Practitioner, Contracting Officer, CORs and Facilities Management staff in implementation of the construction safety program.

5. RESPONSIBILITIES. (Continued)

(5) Works with contracting staff to insure competent staff are assigned as CORs to oversee work.

(6) Completes the VHA or OSHA 30-hour Construction Safety Training initially, and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years.

c. *Operations and Maintenance Section Supervisor:*

(1) Serves as the Competent Person (CP) and Construction Safety Officer (CSO) for all related in-house construction activities.

(2) Conducts and documents periodic inspections of in-house construction sites to ensure compliance with safety elements of the construction contract and performance of the program.

(3) Ensures in-house work force has necessary training and competency for tasks being performed.

(4) Ensures review and approval of all in-house construction projects by Construction Safety Committee prior to start of project. Post approved construction permit immediately outside jobsite. Routine maintenance and minor repair projects not affecting patient care areas do require permit. In the event of emergency repairs a construction permit is not required but notification of Safety Officer, Industrial Hygienist and Infection Control Officer is required.

(5) Completes the VHA or OSHA 30-hour Construction Safety Training initially, and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years.

d. *Biomedical Engineering Section Supervisor:*

Ensures all construction accomplished in support of major equipment installations (as a part of the equipment purchase) are in compliance with this policy and these procedures.

e. *Information Resources Management (IRM) Service Supervisor:*

Ensures all construction accomplished in support of major network installations are in compliance with this policy and these procedures.

f. *Contracting Officer (CO):*

(1) Ensures safety elements of this policy are included in each construction contract.

(2) Requests past safety records of prospective contractors for evaluation by Safety Office.

(3) Supports the CP, CSO, Facility Safety Officer, Resident Engineer, and appropriate staff in implementing the construction safety program.

(4) Ensures that all solicitations and contracts include the Federal Acquisition Regulation (FAR) clause found in FAR 52.236-13, Accident Prevention, and Veterans Affairs Acquisition Regulation (VAAR) clause found in VAAR 836.236-87

(5) Designates in writing the COR/CSO, for VHA contracts.

(6) Ensures all solicitations and contracts require OSHA 30-hour Construction Safety Training for foreman and CPs for both prime and sub-contractors and OSHA 10-hour Construction Safety Training for all other site workers. Also ensure all projects require certification verifying completion of other applicable required OSHA/EPA training.

5. RESPONSIBILITIES. (Continued)

(7) Ensures that all solicitations and contracts specify that contractors must not have more than three serious, or one repeat, on one willful OSHA violation(s) in the past 3 years or any significant environmental penalties. Additionally, ensures that all solicitations and contracts specify that contractors have an Experience Modification Rate (EMR) of equal to less than 1.0.

(8) Ensure that if contracted construction worker(s) have been determined to be at risk for transmission Mycobacterium Tuberculosis (TB) based upon the TB preconstruction risk assessment, conducted by the Infection Control Officer, the contractor provides written certification that all contract employees assigned to the work site have had a pre-placement tuberculin screening within 90 days prior to assignment to the worksite and have been found to have negative screening reactions. This can be the CDC two-step skin test or a Food and Drug Administration (FDA)-approved blood test. Contract employees manifesting positive screening reactions to the tuberculin must be examined according to current CDC guidelines prior to working on VHA property. Subsequently, if the employee is found without evidence of active (infectious) pulmonary TB, a statement documenting examination by a physician must be on file with the employer (construction contractor), noting that the employee with a positive tuberculin screening test is without evidence of active (infectious) pulmonary TB. If the employee is found with evidence of active (infectious) pulmonary TB, the employee would require treatment with a subsequent medical clearance statement before being allowed to return to work on VHA property.

(9) Require contractors to perform and document daily (workday) inspections and corrective action taken of all worksites. Copies of documentation are required to be provided to and maintained by CORs. Checklist in Appendix A provides minimum inspection requirements.

g. *Contracting Officer's Representative (COR):*

(1) Is trained and designated as the CP/CSO for assigned projects for the purposes of this policy.

(2) Identifies and reports all deficiencies on assigned projects to the Construction Safety Committee during each committee meeting whether corrected or not.

(3) Ensures posting of approved construction permit immediately outside jobsite.

(4) Completes the VHA or OSHA 30-hour Construction Safety Training initially, and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years.

h. *Construction Safety Officer (CSO):*

(1) CSO responsibilities include project submittal reviews of all construction projects and:

(a) Identifies work site risks.

(b) Collects deficiency information.

(c) Disseminates actions and results.

(2) Provides oversight of contract construction safety, and is knowledgeable in the general inspection of typical work sites during construction and renovation performed by contract staff, and in the review of contractor safety program submittals.

NOTE: CSO(s) do not take the place of the contractor's CP or act on their behalf.

5. RESPONSIBILITIES. (Continued)

(3) Determines if the contractor is meeting VA standards and contractual requirements for safety and OSHA compliance (Acting as the Safety Officer in accordance VAAR 836.236-87). When these standards and contract requirements are not being met, the CSO coordinates with the VHA CO to take immediate action to prevent injury, regulatory noncompliance, or property damage.

(4) Requires the contractor CP to implement and maintain an effective safety program that identifies and controls hazards that may cause injury or illness to VA patients, staff, visitors, and contractor employees; this includes:

(a) Ensuring specific safety requirements for construction operations are implemented during facility projects.

(b) Participation in the VHA facility Multi-disciplinary Team established for the construction safety committee.

(c) As the Multi-disciplinary Team member most familiar with the technical aspects of his/her designated project, inspects his/her projects that are active, on a daily basis to identify deficiencies, including those that affect patient safety and infection control. Coordinates weekly construction site inspections with the Multi-disciplinary Team members assigned to provide technical assistance on safety and environmental requirements. Documents inspections and acts to correct deficiencies and coordinates with CO when contractual concerns are involved.

i. Facility Safety Officer:

- (1) Chairs the Construction Safety Committee and ensures completion of pre-construction risk assessment (Appendix B)
- (2) Coordinates with the COR / O & M Supervisor of each construction project (in-house and contract) to conduct an Interim Life Safety Assessment and implement identified Interim Life Safety Measures (ILSM).
- (3) Completes the VHA or OSHA 30-hour Construction Safety Training initially, and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years.
- (4) Provides clarification on regulatory safety requirements for CSOs.
- (5) Serves as a member of the Contracting Officer's Technical Evaluation Board.
- (6) Documents findings of weekly construction site inspections and forwards copy to CSO and CO for corrective action.
- (7) Provide construction permit to COTR of project. (Appendix C)

j. Infection Control:

- (1) Advises and/or provides recommendations on exposure mitigation and the prevention of facility associated infections in patients, staff, and visitors.
- (2) Coordinates with the COR / O & M Supervisor of each construction project (in-house and contract) to conduct an Infection Control Risk Assessment (ICRA) during the preconstruction stage of the work in accordance with the NFSGVHA EOC manual. ICRAs must be

5. RESPONSIBILITIES. (Continued)

documented in writing and focus on eliminating, or minimizing, the risk of infection during construction and renovation activities.

(3) Monitors infection control during construction activities as indicated in ICRA for that project.

(4) Conducts a preconstruction risk assessment for the transmission of *Mycobacterium Tuberculosis* (TB) to the contracted construction workers using the NF/SGVHS annual TB risk assessment information and construction site location, patient population, hospital layout, and the Center for Disease Control (CDC) defined risk as outlined in the "*CDC Guidelines for Preventing the Transmission of Mycobacterium Tuberculosis in Health-Care Setting, 2005*"

k. Green Environmental Management System (GEMS) Coordinator:

(1) Provides guidance on EPA regulations and environmental issues that directly and immediately relate to environmental safety during the design stage of all construction projects.

(2) Monitors contractor compliance with contract specifications on EPA regulations, as those regulations directly and immediately relate to the construction project, including environmental compliance, pollution prevention, waste management, and permitting.

l. Police Service:

(1) Addresses security issues and develops control strategies related to construction activities.

(2) Conducts periodic surveillance of site security measures.

(3) Ensures all contractors entering VA property comply with the Medical Center's Security Management Plan as applicable. At a minimum, contractors must notify and obtain permission from VA Police, be identified by project and employer, and be restricted from unauthorized access.

m. Industrial Hygienist:

(1) Reviews work plans approves hazardous materials brought on the worksite.

(2) Monitors construction and maintenance of worksite containments which are built to ensure they are properly constructed and maintained under negative pressure where required.

n. Construction Safety Committee:

(1) A multi-disciplinary team consisting of Facilities Management Service (Chief Engineers, Project Managers, CORs, Operations & Maintenance Supervisor, Safety, Industrial Hygiene, GEMS Coordinator, Environmental Management), Contracting, Infection Control, Employee Occupational Health, IRM, VA Police, Local Union Representatives, Patient Safety, and others as needed by the committee. Construction projects shall be assessed by the committee according to OSHA & VA Construction Safety Guidelines and this policy to determine the appropriate level of committee involvement.

The committee will be responsible for:

(1) Overseeing and enforcing the implementation of this policy.

(2) Determining the scope and depth of safety, infection control, environmental and security procedures appropriate for all construction work.

5. RESPONSIBILITIES. (Continued)

(3) Evaluating the effectiveness of the construction safety program in an annual report to the Hospital's Environment of Care Committee.

(4) All members will complete at a minimum the VHA or OSHA 10-hour Construction Safety Training initially and subsequently complete at least 10 hrs of Construction Safety Training at least every 2 years if specific training requirements for an individual member is not otherwise noted in this policy.

6. REFERENCE: VHA Directive 2011-036

7. RESCISSION: None.

8. EXPIRATION DATE. September 5, 2015

9. FOLLOW-UP RESPONSIBILITY: Safety & Occupational Health Specialist

Thomas Wisnieski, MPA, FACHE
Director

Date: _____ Inspector: _____ Project No.: _____

Description	Yes	No	Comments
Contractor acknowledge asbestos in writing			
Adequate barriers in place			
Smoke proof			
Dust proof			
Signage in place			
Applicable codes complied with			
Occupational Safety & Health Administration (OSHA) compliance			
Interim Life Safety in place			
Staff trained regarding Interim Life Safety			
Temporary fire protection in place/fire watch			
Contractors aware of egress routes			
Increase in fire drills, other training			
All exits clear			
Free access to Emergency Services			
Alternate access for public and emergency use			
Additional fire fighting staff & equipment available			
Smoking is strictly prohibited			
Construction site clean and orderly			
Hazard surveillance occurring? How often?			
Staff informed if adjacent areas affected			
Construction site restricted			
Local authorities aware of Interim Life Safety			
Effective site storage of materials, other			
Fire zones maintained, staff aware of changes			
Contractor confirms egress routes for staff clear			
Hot work permits are being issued.			
Penetrations through firewalls are properly sealed			

EXPIRATION DATE. September 5, 2015

Preconstruction Risk Assessment and Exposure Control Checklist

Preconstruction Risk Assessment and Exposure Control Checklist

Project Name: _____ Date: _____

	Hazard	Concern? (Y/N)	Control Measure	Remarks
1	Asbestos			
2	Dust			
3	Moisture/Water Leaks			
4	Vapors/Fumes			
5	Noise			
6	Vibration			
7	Air Pressure Relationships			
8	Traffic Flow			
9	Open Outside Walls			
10	Impact to Levels Above and Below			
11	Proximity of Air Intakes			
12	Pest Control Within Construction Area			
13	Proximity of Immune Suppressed Patients			
14	Mycobacterium Tuberculosis (TB)			
15	Fire			
16	Lead/Lead Based Paint			

Project Manager: _____

Chief Engineering Section: _____

Infection Control: _____

Industrial Hygienist: _____

Contractor: _____

Service/Section/Program Chief: _____

Control Measures

1) Asbestos

- a. Contractor has hired an EPA accredited, Florida/Georgia asbestos contractor for abatement control and cleanup of asbestos-containing materials that will be impacted by construction.
- b. VA has hired an independent Industrial Hygiene consultant to inspect and take clearance air samples. The results will be given to the VA Industrial Hygienist to make the determination to clear area for re-occupancy..
- c. Published asbestos protocol to be followed for work above ceilings.

2) Dust

- a. Sealed gypsum board barrier will be constructed to isolate the construction area from the public.
- b. Trash carts will be covered when transported through the building.
- c. Provide negative air machine exhausted to outside. If not possible develop other dust control measures to area approved by the committee.
- d. Provide mini containments under negative air in public areas.
- e. Provide walk off mats at entrances to work area.
- f. Perimeter barrier will be constructed in the interstitial space to isolate the construction area with other areas in the interstitial.

3) Moisture Water Leaks

- a. Contain any water from core drilling activities.
- b. Dike any floor penetrations to minimize risk of leaks from construction zone.

4) Vapors/Fumes

- a. Use of products with low Volatile Organic Compounds (VOCs). MSDSs to be provided to the VA IH for approval.
- b. Provide negative air in construction zone exhausted to outside, away from intakes.
- c. Seal work area airtight barrier.
- d. Cut all metal outside the building.
- e. Seal any floor penetrations to minimize risk of fumes through construction zone.
- f. Shut down air handler to minimize infiltration of fumes from outside.
- g. No spray painting inside the facility, unless approval is given by the VA IH.

5) Noise

- a. Schedule demolition work after normal work hours.
- b. Cut all metal outside the building.

6) Vibration

- a. Schedule demolition work after normal work hours.
- b. Coordinate with occupants in surrounding areas to explain the work occurring.

7) Air Pressure Relationships

- a. Provide negative air during asbestos abatement.
- b. Provide negative air during construction.
- c. Seal off supply and exhaust Heating, Ventilation, and Air Conditioning (HVAC) registers.
- d. Provide anteroom under negative pressure at entrance to project zone.

8) Traffic Control

- a. Access construction area via exterior door.
- b. Schedule delivery of large quantities of material and demolition haul out after hours.

9) Open Outside Walls

- a. Construct temporary outside wall to limit the infiltration of wind, air, and temperature differences into the project site.

10) Impact to Levels Above and Below

- a. Coordinate with occupants in surrounding areas to explain the work occurring.
- b. Follow asbestos protocol when doing under floor work.

11) Proximity of Air Intakes

- a. Shut down air handlers to reduce infiltration of fumes from exterior activities such as painting, gasoline powered engines, roofing operations, equipment, etc.
- b. Redirect intakes

12) Pest Control Within Construction Area

- a. Provide barriers to any open outside walls.
- b. Contact pest controller if any evidence of pests is found during the course of the work.

13) Proximity of Immune Suppressed Patients

- a. Relocate patients away from construction zone for entire project.
- b. Relocate patients away from construction zone during demolition operations.

14) Mycobacterium Tuberculosis (TB)

- a. Contract employees have pre-placement tuberculin screening within 90 days prior to start of project
- b. Active cases restricted from jobsite until medical clearance statement provided

15) Fire Safety

- a. Flammables stored in approved storage area outside medical facility
- b. Fire extinguisher with current inspections maintained at construction site
- c. Sprinkler heads protected from accidental damage
- d. Heat detectors installed in place of smoke detectors if potential for dust generation
- e. Above ceiling permit required

16) Lead/Lead Based Paint (LBP)

- a. Contractor has hired a lead abatement contractor for control and cleanup.
- b. VA to hire independent Industrial Hygienist to inspect and clear area for re-occupancy based on monitoring and/or professional judgment.
- c. Published LBP protocol to be followed for work through ceilings.

- d. Published LBP protocol to be followed for work above ceilings.
- e. Perimeter barrier will be constructed in the interstitial space to isolate the construction area with other areas in the interstitial.
- f. Project area will be encased with spray-applied hard surface encasement material.
- g. Provide mini containments under negative air in public areas.
- h. Sealed gypsum board barrier will be constructed to isolate the construction area from the public.



Department of Veterans Affairs

NFSG VA Healthcare System

Construction Permit

PROJECT TITLE		
PROJECT LOCATION		
TYPE OF WORK		
GENERAL CONTRACTOR		PHONE:
Estimated Start Date:	Estimated Completion Date:	Hours of Work:

Contact Information

Position/Title	Name	Phone	Direct Connect#	Email address
COTR / O&M Supervisor				
Contractor Site Supervisor				
Infection Control Rep				
Safety Officer				
Industrial Hygienist				

Assessments Completed & Control Measures Addressed	Completed (Yes / No)	Comments
Preconstruction Assessment Form		
Infection Control Risk Assessment		
Interim Life Safety Assessment		

Date _____

Signature (Chairperson, Construction Safety Committee) _____