

JOB SAFETY CHECK SHEET

Company: _____ Division: _____ Date: _____

Time: _____

Job Name/Location: _____ Job Number: _____

Crew Size: _____

Type of Work: _____

Weather: _____ Temperature: _____

Inspected By: _____

Title: _____

Inspected By: _____

Title: _____

	No.	Grade 1 to 5 (5 is Best)	N/A	COMMENTS – Note Improvements Needed:
A. Personal Protective Equipment:				
1. Hard hats in use by all personnel.	A1	1 2 3 4 5		
2. Eye protection in use by all personnel.	A2	1 2 3 4 5		
3. Hearing protection (engineering controls, double protection for high noise areas, rotation of employees).	A3	1 2 3 4 5		
4. Proper footgear and protective clothing.	A4	1 2 3 4 5		
5. Fall protection in use.	A5	1 2 3 4 5		
6. Respirators/face masks in good condition and used as required (medical evaluation and fit test).	A6	1 2 3 4 5		
B. Tools and Equipment:				
1. Tools and equipment in good condition.	B1	1 2 3 4 5		
2. All equipment properly guarded.	B2	1 2 3 4 5		
3. Electrical equipment connected properly, grounded and in good condition; GFCI; automatic magnetic cut-off for woodworking tools.	B3	1 2 3 4 5		

- | | | | | | | |
|---|-----------|----------|----------|----------|----------|----------|
| 4. Air/sandblast hoses in good condition and properly wired. | B4 | 1 | 2 | 3 | 4 | 5 |
| 5. Compressors equipped with automatic shut-off. | B5 | 1 | 2 | 3 | 4 | 5 |
| 6. Ladders in good condition; tied back; extended 3 ft. beyond landing. | B6 | 1 | 2 | 3 | 4 | 5 |

C. Scaffolding: ☐ Suspended ☐ Tubular ☐ Other (***Rope Falls Not Permitted***)

- | | | | | | | |
|--|-----------|----------|----------|----------|----------|----------|
| 1. Scaffold in good repair; guardrails; toe boards and wire mesh in place. | C1 | 1 | 2 | 3 | 4 | 5 |
| 2. Counterweights marked with weight and in proper ratio. | C2 | 1 | 2 | 3 | 4 | 5 |
| 3. Scaffold tied back and tied in. | C3 | 1 | 2 | 3 | 4 | 5 |
| 4. Passageways under scaffold blocked. | C4 | 1 | 2 | 3 | 4 | 5 |

D. Hazardous Chemicals/Air Contaminants:

- | | | | | | | |
|--|-----------|----------|----------|----------|----------|----------|
| 1. Hazard Communication Right-To-Know poster / written program on job. | D1 | 1 | 2 | 3 | 4 | 5 |
| 2. List of hazardous materials on job. | D2 | 1 | 2 | 3 | 4 | 5 |
| 3. Material Safety Data Sheets. | D3 | 1 | 2 | 3 | 4 | 5 |
| 4. Employees are familiar with program. | D4 | 1 | 2 | 3 | 4 | 5 |
| 5. Proper containers in use with correct labels. | D5 | 1 | 2 | 3 | 4 | 5 |

E. General:

- | | | | | | | |
|--|-----------|----------|----------|----------|----------|----------|
| 1. Safe access to work area. | E1 | 1 | 2 | 3 | 4 | 5 |
| 2. Good housekeeping and material storage. | E2 | 1 | 2 | 3 | 4 | 5 |
| 3. Barricades/debris protection/warning signs in place. | E3 | 1 | 2 | 3 | 4 | 5 |
| 4. Floor and wall openings properly protected. | E4 | 1 | 2 | 3 | 4 | 5 |
| 5. Shoring properly installed; engineer's stamped drawings on job. | E5 | 1 | 2 | 3 | 4 | 5 |
| 6. Eye wash available. | E6 | 1 | 2 | 3 | 4 | 5 |
| 7. Fire extinguisher: Good condition; current | E7 | 1 | 2 | 3 | 4 | 5 |

inspection tag; within 50 ft.

8. First aid: Kit and certified employees. **E8** **1 2 3 4 5**

9. Trucks: Safe/good condition; D.O.T. regulation compliance. **E9** **1 2 3 4 5**

F. Paperwork and Other Postings:

1. OSHA poster/log. **F1** **1 2 3 4 5**

2. Emergency phone number card. **F2** **1 2 3 4 5**

3. Drug-Free Workplace Policy Summary and poster (if applicable). **F3** **1 2 3 4 5**

4. Job logs and Job Safety Check Sheets. **F4** **1 2 3 4 5**

5. Site-Specific Safety Plan (if applicable). **F5** **1 2 3 4 5**

<h2 style="margin: 0;">Pre-Construction Risk Assessment</h2> <h3 style="margin: 0;">Infection Control and Safety Construction Permit</h3>		
Location of Construction:	Project Start Date:	
Project Coordinator:	Estimated Duration:	
Contractor Performing Work:	Permit Expiration Date:	
Supervisor:	Telephone:	
Description of Project:		
Construction Activities:		
The following projects /activities do not require completion of the Pre-Construction Risk Assessment form:		
1. Paint and wallpaper in business offices and non-patient areas.		
2. Paint in patient room if closed for painting and less than 3 sq. ft. of wall needs patched. Filter for room unit changed after painting.		
3. Installation of soap dispenser/needle box/paper towel holder in patient room.		
4. Repair of window blind.		
5. Ceiling tile replacement for areas less than 50% of the total square footage of the room in Risk Group I areas.		
6. Ceiling tile replacement for area less than (5) 2 X 2 tiles in a patient area if patient is out of the immediate area and clean up can be accomplished before patient returns.		
7. Minimum repair of nurse call system/TV/Bed/Telephone.		
8. Check or replace electric outlet.		
9. Replace light bulb.		
10. Unstop sink/commode with no water on floor.		
11. Unstop commode when water on floor requires maintenance to have Housekeeping clean area immediately.		
12. Repair medical gas outlet. (Front Body)		
13. Air balance readings.		
14. Check air-conditioning.		
UTILITY SHUTDOWNS		
Yes	No	
		Will temporary shutdown of any utilities or systems be required?
		<i>(All shutdowns must be scheduled not less than 10 days in advance through FES. Confirmation is required by all departments: FES, Safety, Fire Chief, and others if identified.)</i>
		• Fire alarm – <i>(If out for more than 4 hours, Interim Life Safety Measures must be implemented.)</i>
		• Sprinkler – <i>(If out for more than 4 hours, Interim Life Safety Measures must be implemented.)</i>
		• Electrical
		• Domestic water
		• Oxygen
		• Sewage
		• HVAC
		• Other (Specify)
		Is this an emergency shutdown for repairs?

SAFETY / ENVIRONMENTAL		
Yes	No	
		Are Emergency Procedures in place and posted on each job for accidental events that could greatly impact Patient Care or Life Safety to the facility? Included in these procedures are such things as:
		<ul style="list-style-type: none"> Emergency telephone numbers of emergency responders and key departments.
		<ul style="list-style-type: none"> A plan that indicates the locations of main valves, switches and controls for the area in case of an emergency.
		<ul style="list-style-type: none"> A contingency plan for unexpected utility outages.
		Will any work require implementation of the Interim Life Safety Measures (ILSM) during this project per JCAHO requirements? Actions for which ILSM's must be implemented include but are not limited to:
		<ul style="list-style-type: none"> Any construction that impacts an egress path from an area, an EXIT or stairs
		<ul style="list-style-type: none"> Any construction that breaches fire or smoke-rated walls or enclosures
		<ul style="list-style-type: none"> Taking the main fire protection system out of service (sprinkler)
		<ul style="list-style-type: none"> Taking the main fire alarm system out of service
		<ul style="list-style-type: none"> Taking any "area" fire-detection or fire alarm system out of service for more than 4 hours within a 24-hour period
		Implementation of the ILSM requires a fire watch and the ILSM forms to be completed (forms are to be obtained from the Safety Office)
		Will the project affect <i>pedestrian or vehicular</i> traffic patterns in area? Attach a proposed plan showing how traffic flow will be maintained during each phase of construction. Include locations and types of temporary traffic, directional, information and egress signage as required. Include signage in Contract for construction projects.
		Prior to any construction activities, the following must be completed:
		<ul style="list-style-type: none"> Separation wall must be constructed. (Applies to any required separation – fire/safety, environmental or infection control)
		<ul style="list-style-type: none"> Fire protection systems must remain functional.
		<ul style="list-style-type: none"> Provide fire extinguishers in all work areas in accordance with OSHA and NFPA requirements.
		<ul style="list-style-type: none"> Maintain exit signs and lights in all work areas.
		<ul style="list-style-type: none"> Provide new exit signs and emergency egress lighting for all areas outside of the construction area where means of egress, exit path or signage have been modified or obscured by construction separations in accordance with Code requirements.
		<ul style="list-style-type: none"> Attach signs reading, "Construction Area – Do Not Enter", to the outsides of doors at all construction area entrances.
		<ul style="list-style-type: none"> Adhere to all Infection Control requirements indicated below.
		Maintain a clean and orderly work area.
		Will any of the following environmental hazards be present?
		<ul style="list-style-type: none"> Hazardous chemicals – Identify how fumes and odors will be controlled. MSDS Sheets are required.
		<ul style="list-style-type: none"> Asbestos / abatement – Notify Safety and FES prior to any work activities.
		<ul style="list-style-type: none"> Silica – If concrete block will be cut, review requirements with Safety and the COTR.
		Will there be hot work done on this project?
		<ul style="list-style-type: none"> If so, then a current Hot Work Permit must be posted on the job site and daily inspection logs maintained.
		<ul style="list-style-type: none"> All hot work must have a fire watch assigned to each area while the hot work is being performed and until 30 minutes after completion (or 2-hours after completion for torch-applied roofing).
		Will noise or vibration be generated that will impact a department adjacent to, above, or below the construction area?
		<ul style="list-style-type: none"> If so, Safety and FES must be notified and the work must be scheduled in coordination with the affected Departments.

		<ul style="list-style-type: none"> How will the noise / vibration be reduced to an acceptable level?
		Will a Confined Space Entry be required on this project? If so, the Medical Center's confined space entry program must be followed.
INFECTION CONTROL		
<p>The minimum required Infection Control (IC) prevention measures are listed for each of four classifications. An IC prevention measure classification must be assigned for each construction/work area. This assigned classification is based upon two factors: (1) Construction Activity Type and (2) the Risk Group of the surrounding occupancies. The Construction Activity Types are defined by the anticipated amounts of dust generated. The Risk Groups categorize departments/functions based on their risk for infection or contamination due to the airborne particles and micro-organisms. Contact the Safety Office and the Infection Control Coordinator if any activity is questionable under these guidelines.</p>		
Construction Activity Type <i>(complete the following itemized list)</i>		
Yes	No	
		Type A – Inspections and Non-Invasive Activities
		<ul style="list-style-type: none"> Removal of ceiling tiles for visual inspection (limited to < 10% of total area) Painting (limited sanding to <10% of area) Wall covering—Describe work to be done: Electrical trim work. Describe: Minor plumbing. Describe:
		Type B – Small scale, short duration activities that create minimal dust
		<ul style="list-style-type: none"> Installation of telephone and computer cabling Access to chase spaces through access doors/panels Sanding of walls for painting or wall covering (minor repairs only – not sanding for drywall finishing)
		Type C – Activities that generate moderate to high dust levels / Removal of fixed building components or assemblies
		<ul style="list-style-type: none"> Sanding of walls (>50% of surface area) – including drywall finishing Removal of <input type="checkbox"/> floor coverings <input type="checkbox"/> ceiling tiles <input type="checkbox"/> casework (>50% of surface area) Describe: Cutting of walls or ceiling. Describe:
		<i>(Note that concrete/concrete block cutting requires special attention due to Silica dust exposure.)</i>
		<ul style="list-style-type: none"> New wall construction Minor ductwork or electrical work above ceilings Major cabling activities Activity cannot be completed within a single work shift
		Type D – Major demolition and construction activities
		<ul style="list-style-type: none"> Consecutive work shifts Heavy demolition or removal of a complete ceiling system New construction

Permit Request By (please print)	Safety Office Approval	Infection Control Coordinator Approval
Date:	Date:	Date:

INTERIM LIFE SAFETY MEASURES (ILSM) EVALUATION SHEET
For Deficiencies or Conditions as a Result of Construction

Project No. _____

Date: _____

Project Title: _____

The following ILSM will be evaluated individually and initiated as needed to compensate for deficiencies or conditions as a result of construction. ILSM implementation will be documented on Attachment C.

1. Ensuring free and unobstructed exits. Buildings or areas under construction must maintain escape routes at all times for all occupants including construction workers. Affected personnel will be trained on any designated alternate exits. (Attachment B, Column A.) Exits in construction areas will be inspected daily.

Will any exits be obstructed or compromised?	Yes	No	N/A
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If **yes** then:

a. Did the COR coordinate and document that affected personnel received training on alternate routes and exits?	Yes	No	N/A
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b. Does the construction area(s) have designated and marked exit?	Yes	No	N/A
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c. Are construction areas inspected daily to ensure exits are clear?	Yes	No	N/A
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2. Ensuring free and unobstructed access to emergency services such as fire department, police etc. Every building and area will remain accessible and roadways will be maintained unobstructed within 20 feet of all buildings. (Attachment B, Column B.)

a. Were the construction plans reviewed to maintain access for emergency services?	Yes	No	N/A
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b. Were the construction areas inspected daily and results recorded?	Yes	No	N/A
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c. If necessary, were outside emergency services notified about the construction? (Attachment B, Column C.)	Yes	No	N/A
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d. Were VA Police notified?	Yes	No	N/A
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Ensuring that fire alarm, detection and suppression systems are in good working order. A temporary, equivalent system will be provided when any fire system is impaired. Temporary systems will be inspected and tested monthly and results recorded. (Attachment B, Column D.)

Note: The Life Safety Code, NFPA 101, requires that the municipal fire department be notified and a fire watch be provided whenever an approved fire alarm system is out of service for more than four (4) hours in a 24-hour period in an occupied building, or automatic sprinkler system is out of service for more than twelve (12) hours in a 24-hour period in an occupied building.

Will any fire systems be impaired?	Yes	No	N/A
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If yes then:

a. Are temporary systems inspected and tested monthly & results recorded?

Yes	No	N/A
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3. Ensuring that temporary construction partitions are smoke tight and built of noncombustible or limited combustible materials that will not contribute to the development or spread of fire. (Attachment B, Column E.)

a. Was the contractor briefed at pre-construction conference?	Yes	No	N/A
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b. Are areas inspected daily and deficiencies recorded?	Yes	No	N/A
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4. Providing additional fire-fighting equipment and training staff in its use. Evaluate the impact to emergency response teams and provide notification, if necessary. (Attachment B, Column F & G.)

Will additional fire-fighting equipment be needed?	Yes	No	N/A
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If yes then:

a. Was additional training conducted and documented?	Yes	No	N/A
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b. Were code teams notified?	Yes	No	N/A
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c. Was the fire department notified?	Yes	No	N/A
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d. Was the contractor briefed at the pre-construction conference of the need to provide adequate fire-fighting equipment and to train the construction workers?

Yes No N/A

5. Prohibiting smoking throughout the medical center buildings and in and near the construction areas. Smoking is only allowed in designated areas. The contractor will be briefed on the medical center's smoking policy at the pre-construction meeting. (Attachment B, Column H.)

Was the contractor briefed on the medical center's smoking policy?

Yes No N/A

6. Developing and enforcing storage, housekeeping, and debris removal practices that reduce the flammable and combustible fire load of the building to the lowest feasible level. (Attachment B, Column I)

a. Was the contractor briefed at the pre-construction conference of the storage and housekeeping requirements?

Yes No N/A

b. Are areas inspected daily and results recorded?

Yes No N/A

7. Conducting a minimum of two fire drills per shift per quarter. The COR will inform the Safety Manager of the need to conduct more fire drills. The Safety Manager will assume responsibility for completing the drills. (Attachment B, Column J)

a. Are fire drills being conducted as necessary?

Yes No N/A

b. Are any additional drills required?

Yes No N/A

8. Increasing hazard surveillance of buildings, grounds, and equipment with special attention to excavations, construction areas, construction storage, and field offices. (Attachment B, Column K.)

a. Are areas inspected daily and results recorded in a daily log?

Yes No N/A

- Means of egress are clear in construction areas.
- Access for the fire department and emergency services is clear.
- Note the status of fire detectors and sprinkler systems.
- Construction partitions are being maintained.

- Good housekeeping practices are being used in construction areas.
- Flammable and combustible fire loads are being kept to a minimum.
- Buildings, grounds, and equipment are being maintained in a safe manner.
- Smoking regulations are being enforced.

9. Training staff to compensate for impaired structural or compartmentalization features of fire safety. (Attachment B, Column L.)

a. Was all the required staff training completed?	Yes	No	N/A
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10. Conducting organization-wide safety education programs to promote awareness of any life safety building deficiencies, construction hazards, and ILSM. (Attachment B, Column M.)

a. Was all the necessary information provided?	Yes	No	N/A
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		A	B	C	D	E	F	G	H	I	J	K	L	M
	Deficiencies or Conditions as a Result of Construction	Ensuring Egress	Emergency forces access	Emergency forces notification	Ensuring operational life safety systems (Provide fire watch if necessary)	Temporary construction barriers	Additional fire fighting equipment	Conducting additional training of incident response team	Prohibiting Smoking	Controlling combustible loading	Conducting 2 fire drills per shift in all areas	Increased hazard surveillance	Compartmentation training of personnel	Conducting organizational training on life safety
1	Door locked against egress			X	X				X	X		X	X	
2	Lacking a code complying smoke barrier							X	X				X	
3	Fire exit stairs discharge improperly			X				X	X		X		X	X
4	Excessive travel distance to an approved exit								X	X		X	X	
5	Lack of two remote exits							X	X	X		X	X	
6	Nonconforming building construction type						X		X	X	X	X		X
7	Improperly protected vertical openings								X	X			X	
8	Large penetrations in fire/smoke barriers							X	X	X		X		
9	Corridor walls do not extend to the structure								X	X		X	X	
10	Hazardous areas not properly protected								X	X				
11	Blocking off an approved exit	X		X	X			X	X	X		X	X	
12	Rerouting of traffic to Emergency Room		X	X					X					
13	Major renovation of an occupied floor	X			X	X	X		X	X		X	X	
14	Replacing fire alarm system (out-of-service)			X	X			X	X	X		X		
15	Installing sprinkler system (out-of-service)			X	X		X		X	X		X		X
16	Significantly modifying smoke/fire barrier walls					X			X	X		X	X	
17	Adding an addition to an existing structure	X	X	X	X	X		X	X					X
18	Taking a fire alarm system out-of-service			X	X			X	X					
19	Taking a sprinkler system out-of-service			X	X			X	X					
20	Disconnecting alarm devices			X	X				X					

Based on the responses to the evaluation questions, provide a description of the Interim Life Safety Measures that will be implemented during the project to compensate for the deficiency or condition. Attach additional sheets if necessary.

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Project COR: _____ Date: _____

1. Safety Manager: _____ Date: _____

2. Chief Engineer: _____ Date: _____

Infection Prevention Risk Assessment Matrix of Precautions for Construction & Renovation

Step One:

Using the following table, identify the **Type of Construction Project Activity (Type A-D)**

TYPE A	<p>Inspection and Non-Invasive Activities. Includes, but is not limited to:</p> <ul style="list-style-type: none"> ▪ removal of ceiling tiles for visual inspection limited to 1 tile per 50 square feet ▪ painting (but not sanding) ▪ wallcovering, electrical trim work, minor plumbing, and activities which do not generate dust or require cutting of walls or access to ceilings other than for visual inspection.
TYPE B	<p>Small scale, short duration activities which create minimal dust Includes, but is not limited to:</p> <ul style="list-style-type: none"> ▪ installation of telephone and computer cabling ▪ opening of no more than 1 tile per 10 square feet ▪ access to chase spaces ▪ cutting of walls or ceiling where dust migration can be controlled. ▪ minor renovation of existing space ▪ wet sanding of walls ▪ floor covering removal (without sanding or grinding)
TYPE C	<p>Work that generates a moderate to high level of dust or requires demolition or removal of any fixed building components or assemblies Includes, but is not limited to:</p> <ul style="list-style-type: none"> ▪ dry sanding of walls for painting or wall covering ▪ removal of floor coverings (with sanding), ceiling tiles and casework ▪ cutting of walls, removal of drywall or building finishes where work is limited to one room or suite ▪ new wall construction ▪ minor duct work, plumbing work, or electrical work above ceilings (not including system demolition or installation) ▪ moderate renovation of existing space ▪ major cabling activities ▪ any activity which cannot be completed within a single work shift.
TYPE D	<p>Major demolition and construction projects Includes, but is not limited to:</p> <ul style="list-style-type: none"> ▪ activities which require the closure of a unit/wing or relocation of an entire area ▪ activities which require consecutive work shifts ▪ demolition, removal, or installation of a complete cabling, HVAC, plumbing, medical gas, or electrical system ▪ demolition of major fixed building components, assemblies, fit-out elements, or structural elements ▪ new construction located in close proximity (as determined by the ICRA team) of the hospital building ▪ outdoor construction of new structures located in close proximity to existing patient care facility ▪ excavation activities within close proximity of hospital building. ▪ new construction.

Step Two:

Using the following table, *identify the Patient Risk Groups* that will be affected.

If more than one risk group will be affected, select the higher risk group:

Low Risk	Medium Risk	High Risk	Highest Risk
<ul style="list-style-type: none"> Office areas Mechanical spaces 	<ul style="list-style-type: none"> Cardiology Echocardiography Endoscopy Nuclear Medicine Physical Therapy Radiology/MRI/CT/PET Respiratory Therapy Primary care spaces Community Based outpatient clinics 	<ul style="list-style-type: none"> Emergency Room Laboratories (specimen) Outpatient Surgery Pediatrics Pharmacy Post Anesthesia Care Unit Surgical Units Central Sterile supply storage Canteen/Kitchen 	<ul style="list-style-type: none"> Any area caring for immunocompromised patients Cardiac Cath Lab Sterile Processing Intensive Care Units Medical Units Negative pressure isolation rooms Oncology Operating rooms PACU Community Living Center

Step 2 _____

Step Three: Match the

Patient Risk Group (*Low, Medium, High, Highest*) with the planned ...

Construction Project Type (*A, B, C, D*) on the following matrix, to find the ...

Class of Precautions (*I, II, III or IV*) or level of infection control activities required.

Class I-IV or Color-Coded Precautions are delineated on the following page.

IC Matrix - Class of Precautions: Construction Project by Patient Risk

Patient Risk Group	Construction Project Type			
	TYPE A	TYPE B	TYPE C	TYPE D
LOW Risk Group	I	II	II	III/IV
MEDIUM Risk Group	I	II	III	IV
HIGH Risk Group	I	II	III/IV	IV
HIGHEST Risk Group	II	III/IV	III/IV	IV

Note: Infection Prevention approval will be required when the Construction Activity and Risk Level indicate that **Class III** or **Class IV** control procedures are necessary.

Step 3 _____

Description of Required Infection Prevention Precautions by Class
During Construction Project **Upon Completion of Project**

CLASS I	<ol style="list-style-type: none"> 1. Execute work to minimize the rise of dust from construction operation. 2. Immediately replace any ceiling tile displaced for inspection. 	<ol style="list-style-type: none"> 1. Clean work area upon completion of task.
CLASS II	<ol style="list-style-type: none"> 1. Provides active means to prevent air-borne dust from dispersing into atmosphere (surrounding environment.) 2. Water mist work surface to control dust while cutting 3. Seal unused doors with duct tape. 4. Block off and seal duct vents. 5. Wipe surfaces with disinfectant. 6. Contain construction waste before transport in tightly covered containers. 7. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 8. Place dust mat at entrance and exit of work area. 9. Remove or isolate HVAC system in area where work is being performed. 	<ol style="list-style-type: none"> 1. Wipe work surfaces with disinfectant. 2. Contain construction waste before transport in tightly covered containers. 3. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 4. Remove isolation of HVAC system in areas where work is being performed.
CLASS III	<ol style="list-style-type: none"> 1. Obtain infection control permit before construction begins. 2. Isolate HVAC system in area where work is being done to prevent contamination of the duct system. 3. <u>Complete all critical barriers or implement control cube method before construction begins.</u> 4. <u>Maintain negative air pressure within work site utilizing HEPA equipped air filtration units.</u> 5. Remove or isolate HVAC systems in area where work is being performed. 6. Do not remove barriers from work site until complete and project is thoroughly cleaned by EMS. 7. Vacuum work with HEPA filtered vacuum. 8. Wet mop with disinfectant. 9. Remove barrier material carefully to minimize spreading of dust and debris associated with construction. 10. Contain construction waste before transport in tightly covered containers. 11. Cover transport receptacles or cart and tape covering in place. 	<ol style="list-style-type: none"> 1. Do not remove barriers from work area until completed project is inspected by the owner's Safety Department and Infection Prevention Coordinator and thoroughly cleaned by (EMS) Environmental Management Services. 2. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 3. Vacuum work area with HEPA filtered vacuums. 4. Wet mop area with disinfectant. 5. Remove isolation of HVAC system in areas where work is being performed.
CLASS IV	<p>Same as Class III plus the following:</p> <ol style="list-style-type: none"> 1. Seal holes, pipes, conduits and penetrations appropriately. 2. Construct anteroom & require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving worksite or they can wear cloth or paper coveralls that are removed each time they leave the work site. 3. <u>Wear shoe covers when within entering work site.</u> 	<p>Same as above plus:</p> <ol style="list-style-type: none"> 1. Contain construction waste before transport in tightly covered containers. 2. Cover transport receptacles or carts. Tape covering unless solid lid 3. Vacuum work area with HEPA filtered vacuums. 4. Wet mop area with disinfectant.

Step 4. Identify the areas surrounding the project area, assessing potential impact

Unit Below	Unit Above	Lateral	Lateral	Behind	Front
Risk Group	Risk Group	Risk Group	Risk Group	Risk Group	Risk Group

Step 5. Identify specific site of activity e.g., patient rooms, medication room, etc.**Step 6. Identify issues related to: ventilation, plumbing, electrical in terms of the occurrence of probable outages.****Step 7. Identify containment measures, using prior assessment. What types of barriers? (E.g., solids wall barriers); Will HEPA filtration be required?**

(Note: Renovation/construction area shall be isolated from the occupied areas during construction and shall be negative with respect to surrounding areas)

Step 8. Consider potential risk of water damage. Is there a risk due to compromising structural integrity? (e.g., wall, ceiling, roof)**Step 9. Work hours: Can or will the work be done during non-patient care hours?****Step 10. Do plans allow for adequate number of isolation/negative airflow rooms?****Step 11. Do the plans allow for the required number & type of handwashing sinks?****Step 12. Does the infection control staff agree with the minimum number of sinks for this project?** (Verify against AIA Guidelines for types and area)**Step 13. Does the infection control staff agree with the plans relative to clean and soiled utility rooms?****Step 14. Plan to discuss the following containment issues with the project team.**
E.g., traffic flow, housekeeping, debris removal (how and when),

Appendix: Identify and communicate the responsibility for project monitoring that includes infection control concerns and risks. The ICRA may be modified throughout the project. Revisions must be communicated to the Project Manager

Infection Prevention Construction Permit

Construction Class: I, II, III, IV Project Name and Number: Location of Construction: Contractor Performing Work: FMSS Project Engineer:	Type: A, B, C, D Type A: Inspection and non-invasive activities, minimal dust levels Type B: Small scale, short duration moderate dust level Type C: Generates moderate to high levels of dust Type D: Major duration and construction activities requiring consecutive work shift	Risk Group: Low, Medium, High, Highest Permit #: Project start date: Estimate completion date: Telephone:
CLASS I	1. Work performed is limited to inspections and minor installations. 2. Execute work by methods to minimize raising dust from inspection operations. 3. Immediately replace ceiling tiles displaced for visual inspection. Only 3-5 tiles may be removed at one time 4. Permit does not need to be posted for this classification.	
CLASS II	1. Obtain and post infection control permit at work location before work begins. 2. Provide active means to prevent air borne dust from dispersing into atmosphere. 6 mil/fire resistant poly (plastic) barrier at entrance for short term work. Water mist work surfaces to control dust while cutting or use vacuum device. 3. Place dust mat at entrances and exits of work sites. Seal unused doors with tape. 4. Isolate HVAC and seal/cover air vents. 5. Contain construction waste before transport in tightly covered containers using assigned exit route. 6. Wipe surfaces with disinfectant. Wet mop and/or vacuum with HEPA filtered vacuum before leaving.	
CLASS III	1. Obtain and post infection control permit at work location before work begins. 2. Follow all requirements listed for Class II in addition to requirements listed below. 3. Isolate HVAC supply and return ductwork to prevent contamination of system. 4. Complete all critical dust barriers (hard wall) as well as the creation of an anti-room where required for inspection by ICRA Inspection Team (Safety Officer, IC Nurse, Project Engineer) before work begins. 5. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. Change filters 6. Vacuum work area with HEPA filtered vacuums. Wet mop with disinfectant. 7. Obtain ICRA Inspection Team approval before construction and prior to removal of any dust partitions 8. Contain construction waste before transport in tightly closed containers using the assigned exit route.	
CLASS IV	1. Obtain and post infection control permit at work location before work begins 2. Follow all requirements listed for Class II & III in addition to requirements listed below 3. Isolate HVAC supply and return ductwork to prevent contamination of system. 4. Complete all critical dust barriers (hard wall barrier) as well as the creation of an anti-room where required. All personnel entering and leaving work site must be vacuumed using a HEPA filtered vacuum cleaner or wear cloth or paper coveralls and shoe covers that are removed each time they leave the work site. 5. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units. Change filters regularly. Seal holes, pipes, conduits and punctures appropriately. 6. Wet mop with disinfectant. Vacuum work area with HEPA filtered vacuums. 7. Contain construction waste before transport in tightly closed containers using the assigned exit route.	
Additional Requirements:		
Infection Prevention Coordinator:		Date:
Safety Officer:		Date:
FMS Project Engineer:		Date:

INFECTION PREVENTION CONSTRUCTION CHECKLIST**Location:** _____ **Date:** _____**Project COTR:** _____**Safety Representative:** _____**Infection Prevention Coordinator:** _____**Contractor Performing Work:** _____

CONSTRUCTION ACTIVITY:	YES	NO
Type A: Inspection and non-invasive activities, minimal dust levels	<input type="checkbox"/>	<input type="checkbox"/>
Type B: Small scale, short duration moderate dust levels	<input type="checkbox"/>	<input type="checkbox"/>
Type C: Generates moderate to high levels of dust	<input type="checkbox"/>	<input type="checkbox"/>
Type D: Major duration and construction activities requiring consecutive work shift	<input type="checkbox"/>	<input type="checkbox"/>

INFECTION PREVENTION RISK GROUPS:**Low Risk:** _____**Medium Risk:** _____**High Risk:** _____**Highest Risk:** _____**Scope of work:** _____

Date: _____ Location: _____ Class of Precautions: _____

BARRIERS:**YES****NO**

Construction signs posted for the area

- Construction site- DO NOT ENTER
- Emergency contact information
- Infection Control Instructions

Door properly closed and sealed

Floor mats/dust tacks mats at entrance and changed

Floor area clean, no dust tracked

Barrier intact

Door sweep

Door closure device

Door/tools locked when no one in area

AIR HANDLING

All windows closed behind barrier

Negative air at barrier entrance

Negative air machine running

Hepa filter below 2 (above 2 filter change)

PROJECT AREA:

Debris removed in covered container daily

Debris removed via designated exit route

Trash in appropriate container

Routine clearing done on job site

If chute used, it is not adjacent to open windows or
HVAC air intakes

HVAC systems isolated, return ducts covered

TRAFFIC CONTROL:Restricted to construction workers and necessary
staff only

All doors and exits free of debris

ID badges worn and visible by construction workers

Comments:**Signatures:****Project COTR:** _____**Safety Representative:** _____**Infection Prevention:** _____

Construction Daily Rounds Log - Safety / ILSM / Infection Control									
Signature of Construction Superintendent									
Signature of Project Manager (COR)									
Signature of Person doing Rounds									
Project Title			Name of Contractor						
Station			Contract Number						
Area			Project Number						
Project COTR									
Check only if no problems are noted. If issues are found annotate on this form.									
Safety / ILSM / IC Issue			M	T	W	Th	F	Comments	
Subcontractors are trained in safety/environmental issues.									
Means of egress is clear in construction and adjacent areas.									
Construction exits designated during construction?									
Doors are closed to construction site and proper signage is in place									
Access for the fire department and emergency services is clear									
Fire suppression and/or fire alarm system are active, or are temporary systems/measures are in place									
Fire extinguishers are readily available in construction area									
Area is secured from public and at the end at end of day									
Are smoking regulations being followed									
Exterior balconies, corridors and stairways are clear of storage									
Flammables and combustibles kept to a minimum and in proper containers. SDS are maintained on site and all product are labeled									
Gas cylinders properly stored									
Lock out/tag out policy in place and being followed									
Building, grounds and equipment and maintained in a safe manner									
Hard hats are used per protocols									
Extension cords protected/disconnected at end of day.									
Exterior storm drain flushed and cleaned of debris.									
Floor Penetrations properly marked and protected									
Construction storage area maintained and secured									
Dust barriers are maintained, secured and tested. Barriers are monitored consistently for integrity and NPV airflow (Clean to Dirty)									
Negative air ventilation in work area is maintained utilizing HEPA equipped air filtration									
Pressure gages checked and show neg. air pressure in construction									
Compliance with traffic patterns for both construction workers and debris movement									
Windows and doors are properly closed and sealed to prevent circulation of dust, debris and inclement weather.									
Walk off mats are provided and changed when needed by the									
All adjacent areas are cleaned daily and more often as needed by contractor of EMS									
There are no signs of water leakage									
There are no signs of pest									
All construction debris is transported in tightly covered containers									
Emergency numbers are posted.									

INFECTION CONTROL CONSTRUCTION PROJECT COMPLIANCE

I. SCOPE/EFFECT: This Medical Center Policy affects all employees (including Allentown, Sayre, Tobyhanna, Williamsport, and Northampton County clinics), patients, and visitors to our medical center.

II. PURPOSE: This medical center establishes policy for maintaining a safe and healthy environment of care for patients, and a safe and healthy worksite for staff, volunteers, visitors, contractors, and the general public during construction, renovation, and maintenance related activities. The goal is to minimize the risk of acquisition of Healthcare Associated Infections (HAI) which may result when fungi or bacteria are dispersed into the air via dust or water aerosolization.

III. POLICY: It is the policy of this medical center that construction, renovation, and maintenance activities on VA owned property and VA-leased property be conducted in such a way to protect the health and safety of VA patients, employees, contracted staff and the public. It is the policy of this medical center to design projects that comply with VA Construction Standards, National Fire Protection Association Codes (NFPA), Guidelines for design and construction of hospitals and healthcare facilities, 2014 ed., published by the American Institute of Architects (AIA), and Guidelines for Environmental Infection Control in Healthcare Facilities. Compliance to codes and an Infection Control Risk Assessment shall be documented during design and construction phases.

A. A multidisciplinary team with representatives from the following program areas: Infection Prevention, Patient Safety, Safety, VA Police, Facilities Management Service, Projects Management, Green Environmental Management System (GEMS) and Contracting. These team members are responsible to integrate infection prevention and environmental control principles, outlined in this guide, throughout the planning, managing, active phase, through to the completion of each project. This process is identified as the Infection Control Risk Assessment (ICRA).

B. An Infection Control Risk Assessment (ICRA)(Attachment A) will be required for every renovation and new construction project. The ICRA will be performed by a multidisciplinary team with expertise in infection control, facility design, construction, ventilation and safety. The team will provide documentation of the risk assessment during initial planning and in subsequent construction phases. ICRA requirements are noted on the construction drawings and specification documents. For facility maintenance activities performed by FMS staff an ICRA will be completed in conjunction with Infection Prevention Coordinator.

1. The type of Construction Activity, ATTACHMENT A, areas will be assessed for environmental risks for airborne and waterborne disease and measures to contain dust and moisture by appropriate barriers and other means. Adjacent patient care areas, supply storage and areas on levels above and below the proposed project will also be assessed for effects when appropriate.

2. Based on the ICRA an Infection Control permit, ATTACHMENT B, will be issued for each project.

C. All construction workers, including subcontractors and Facility Management Service employees shall follow the Infection Control procedures as identified in the permit, ATTACHMENT B.

D. Infection Prevention Coordinator, Safety Officer, and the project Contracting Officer Technical Representative (COTR) will participate in meetings and area walk through inspections which will be conducted according to the risk assessment. Frequency of area walk through inspections will be conducted on the basis of risk category and will be assigned for each individual project. Refer to ATTACHMENT C.

E. Any employee responsible for purchasing equipment which will require installation is responsible for notifying Infection Prevention Coordinator who will assist with completion of Attachment A.

F. An Infection Prevention educational handout will be provided by project manager to the contract workers prior to the start of the project. ATTACHMENT D.

G. Education to FMS Maintenance Staff related to Infection Prevention Risk Assessment will be provided.

IV. PROCEDURE:

A. The multidisciplinary team will ensure compliance with this policy and all applicable codes.

B. Planning Phases:

1. Infection Prevention Coordinator will participate in preliminary design meetings and all planning phases for new construction project specific to the following major components:

- a. Number and placement of isolation rooms with anterooms as required
- b. Staff and patient traffic patterns
- c. Decisions regarding locations for patient care areas, storage and supply areas, etc.
- d. Water supply and plumbing to insure re-circulating lines
- e. Construction waste containment, transport and disposal
- f. Selection and installation of medical equipment as it relates to infection control
- g. Accommodation of personal protective equipment (accessibility, security, sanitation, etc.)

- h. Location of sinks and hand washing products dispensers and automatic devices for sinks, toilets
- i. Air handling systems engineered for optimal performance and easy maintenance and repair
- j. Air changes per hour and pressure differentials to accommodate special patient care areas
- k. Location of fixed sharps containers
- l. Types of surface finishes nonporous versus porous
- m. Appropriate location and type of ice machines
- n. Appropriate flooring (e.g., seamless floors in dialysis units)
- o. Sensible use of carpeting
- p. Properly engineered areas for linen services and solid waste management
- q. Convenient location of soiled utility rooms

2. Environmental Control:

- a. Negative air pressure must be maintained within the construction area
- b. Demolition debris is removed in tightly fitted covered carts - use specified traffic patterns
- c. Sticky or walk-off mats are placed immediately outside the construction zone and changed whenever necessary to control the spread of dust and dirt
- d. Exterior- If demolition chutes are used, they must be sealed when not in use; the chute and damper should be sprayed with water, as necessary to maintain dust control
- e. Control, collection and disposal must be provided for any drain liquid or sludge found when demolishing plumbing

3. Traffic Control:

- a. Use designated entry and exit procedures
- b. Keep all egress pathways free of debris
- c. No unauthorized personnel should be allowed to enter construction areas
- d. Use designated elevators only

4. Cleaning:

- a. Keep the construction area clean on a daily basis
- b. Dust and dirt must be kept to a minimum

5. Requirements for Construction Workers and FMS Maintenance Staff:

- a. Clothing must be free of loose soil and debris when exiting the construction area
- b. Use personal protective equipment (PPE) as indicated for the task at hand
- c. Hand washing is the best method of reducing the transmission of infection: Always wash your hands with soap and water after visiting the restroom, before eating, when leaving the construction site.
- d. Construction workers will receive an educational handout for general infection control practices (Attachment D) and a card with construction safety and infection control requirements to be worn with company identification.

6. Surveillance During Construction - the Infection Prevention Coordinator evaluates the protection of patients, visitors, and employees from injury and illness, as well as occupational and facility-associated infections through surveillance activities.

V. RESPONSIBILITY:

A. FMS Project Supervisor or designee will assure that all project COTRs, Infection Prevention Coordinator and the Safety officer are apprised of plans involving construction or renovation of clinical and administrative areas of the medical center.

B. FMS Project Supervisor or designee will notify the Infection Prevention Coordinator and Safety Officer by electronic email of planning meetings related to construction.

C. Maintenance Supervisor will notify the Infection Prevention Coordinator of maintenance activities.

D. Infection Prevention Coordinator will respond to requests and provide infection prevention and control related recommendations for project development and maintenance of areas during construction, renovation and maintenance projects.

E. The Safety Officer will respond to requests and provide safety and health related recommendations for project development and maintenance of areas during construction and renovation projects.

F. The multi-disciplinary team: Safety Officer, Infection Prevention Coordinator and Project Engineer, will complete the Infection Control Risk Assessment and the inspection check list and a copy will be maintained in the project document file and the Infection Prevention & Control office.

VI. CUSTOMER SATISFACTION: Customer satisfaction issues were considered in developing this policy.

VII. REFERENCES: APIC Infection Control Tool Kit Series: Construction and Renovation, available from the Association of Professional Infection Control Practitioners and Epidemiologists.
Guidelines for Design and Construction of Hospital and Health Care Facilities, Facility Guidelines Institute 2014
CDC's Guideline for Environmental Infection Control in Healthcare Facilities, 2003.
VHA Directive 2011-036 Safety and Health During Construction Activities.
Medical Center Policy 18S-15-346, Safety and Health During Construction Activities, October 19, 2015.

VIII. RESCISSION: Medical Center Policy 11IC-13-897, Infection Control Construction Project Compliance, dated December 27, 2013.

IX. DISTRIBUTION: Electronic access to all employees

X. ATTACHMENTS: A, B, C, D



Invalid signature

X

A handwritten signature in black ink that reads "Russell E. Lloyd".

Russell E. Lloyd
Medical Center Director
Signed by: Russell E Lloyd 118065