

ATTACHMENT A

Infection Control Risk Assessment WORK PERMIT

Infection Control Risk Assessment WORK PERMIT					
Permit #:		Prepared by:		Telephone:	
Project # and Location:			Project Start Date:		
Project Manager & Telephone:			Estimated Duration:		
Contractor Performing work:			Permit Expiration Date:		
Contractor Supervisor & Cell Phone:					
YES	RISK Level	YES	Construction Activity TYPE		
	Low Risk Area		TYPE A: Inspection, non-invasive activity		
	Medium Risk Area		TYPE B: Small scale, short duration, minimal levels of dust		
	High Risk Area		TYPE C: Activity generates moderate to high levels of dust.		
	Highest Risk Area		TYPE D: Major duration and construction activities.		

CONSTRUCTION ACTIVITY→	TYPE A	TYPE B	TYPE C	TYPE D
RISK GROUP ↓	ICRA Level↓:	ICRA Level↓:	ICRA Level↓:	ICRA Level↓:
<i>Low Risk</i>	I	II	II	III
Medium Risk	I	II	III	IV
High Risk	I	II	III	IV
Highest Risk	II	III or IV	III or IV	IV

Note: Infection Control approval and an ICRA Work Permit will be required for Level III or Level IV projects.

Complete the following for Level III and Level IV projects.

Identify the areas surrounding the project area and the risk level for those locations.
If more than one risk level is identified, select the higher risk level.

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

Specific site of activity (patient room, corridor, medication room, storage room, etc):

Possible HVAC, plumbing, and electrical issues and the probability of unplanned outages that will impact patient care:

Indicate potential risk of water incursion occurring outside the work zone:

HVAC: Describe local or system isolation of work site:

What shifts will the majority of the work be done?		
ICRA containment Barrier type:		
ICRA containment Door type:		
Ante-room (yes/no):		
Size of HEPA negative air machine and to where it will be exhausted:		
Will a continuous read negative air pressure monitor (chart recorder) be used?		
All Infection Control Interventions for the assigned classification levels will be implemented in addition to the previous interventions.		
LEVEL I	1. Execute work by methods to minimize raising dust from construction operations. 2. Immediately replace any ceiling tile displaced for visual inspection.	3. All policies & procedures for renovation/construction/maintenance will be followed. 4. Contractor is educated before the start of the project about the importance of adhering to Infection Control measures. 5. When complete immediately clean up any dirt or debris.
LEVEL II	1. Provide active means to prevent air-borne dust from dispersing into atmosphere, which may include the use of a Control Cube. 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with masking tape. 4. Block off and seal air vents. 5. Doors and windows within the work zone to remain closed at all times except during ingress/egress.	6. Place adhesive mat at entrance and exit of work area as necessary. 7. Cover transport receptacles or carts. 8. Contain construction waste before transport in tightly covered containers. 9. Use designated removal route/elevators for removal of debris. 10. Wet mop and/or vacuum with HEPA filtered vacuum at end of job or end of work shift. Area to be free of dust and or debris.
LEVEL III	1. Isolate HVAC system in area where work is being done to prevent contamination of duct system. Maintain until barrier is removed at completion of project. 2. Designate entry and exit traffic pattern, unauthorized personnel are not permitted to enter work zone, traffic control signs placed. 3. Complete all critical barriers or implement control cube method before construction begins. Will stay in place until IC or PM authorizes removal. 4. Maintain negative pressure within work site and utilize HEPA equipped negative air machines. Both will be maintained until project & terminal cleaning are completed and IC authorizes removal. 5. Air pressure to be monitored & documented at least daily. 6. Adhesive mats placed at all entrances & exists of work area.	7. The contractor will maintain the construction zone in a clean manner. <ul style="list-style-type: none"> • The area will be HEPA-vacuumed or damp mopped daily or more often as necessary to minimize dust. • Daily cleanup of debris, material and waste shall be completed. • Adhesive mats monitored & changed on a regular basis so that they remain effective. • Any dust or construction debris tracked outside of the work area will be promptly cleaned. 8. Terminal cleaning will be performed following protocol. 9. The terminal cleaning will be inspected by the Owner prior to the authorization for the barrier removal. 10. Air samples may be performed following IC/Safety protocol. 11. Barriers will be removed carefully to minimize spreading of construction dust and debris.
LEVEL IV	1. Seal all holes, pipes and conduits penetrations in work area. 2. Construct anteroom for staging of equipment & donning of coveralls. 3. Workers will wear coveralls in work area. Upon completion of major dust generating activities, coverall requirement is removed. 3. Coveralls are removed in work zone before entering anteroom. 4. Any residual dust left on workers shall be removed by vacuum. 5. Shoe covers will be worn by workers and removed in the ante room when exiting area.	6. All renovation, construction, maintenance & tool carts leaving area must be covered & the wheels wiped down with a disinfectant solution. 7. Environmental Management Service (EMS) or a contract cleaner will vacuum or damp mop the area outside the work zone and adjacent areas.
PRE-CONSTRUCTION RISK ASSESSMENT FOR THE TRANSMISSION OF TUBERCULOSIS (TB) TO THE CONTRACTED CONSTRUCTION WORKER ___ NOT REQUIRED: No potential risk of contact or shared air space with TB patient/clinical specimen ___ REQUIRED: Potential risk of contact or potential of shared air space with TB patients / clinical specimen		
ADDITIONAL COMMENTS OR REQUIREMENTS:		
		Date:
Issued to Project Manager:		Date:
Issued to Contractor (print name and signature)		Date: