

**Dorn VA Medical Center  
Construction/Renovation Risk Assessment Package**

**Instructions:** Project Managers or VA Supervisors will collaborate with Infection Control, Safety Office, and VA Police to complete the risk assessment package as part of managing the safe design and construction/renovation of the medical center environment. COTRs shall collaborate with Infection Control, the Safety Office, and the VA Police as necessary in the completion of these assessments. COTRs, Infection Control Coordinator, Safety Office staff, and VA Police will ensure all identified actions and control measures are implemented in their respective area of responsibility as long as the potential hazard exists. The initial assessment should be completed in the design phase. Reassess as conditions change and prior to the beginning of each project phase. The assessments are conducted by the responsible program official using the attached risk assessment forms, and should be completed as follows:

1. **NEPA Assessment:**
  - a. Using NEPA Interim Guidance for Projects PG 18-17 determine the level of Environmental Impact of the project.
2. **Vertical Environmental Impact Assessment:**
  - a. Show the construction area and the functions/services located in adjacent areas, including floors above and below.
3. **Horizontal Environmental Impact Assessment:**
  - a. Using a current drawing of the area, show the construction area and surrounding patient/staff areas as indicated on the example provided.
4. **Interim Life Safety Measures:**
  - a. Evaluate each listed "Requirement or Deficiency" as related to the project's impact on Life Safety components of the facility.
  - b. Provide a summary of required actions on the sheet provided.
5. **Hazard Assessment and Exposure Controls:**
  - a. Evaluate the potential for hazards during construction that may impact patients and staff. Indicate the required control measure for each hazard.
  - b. Provide a summary of the required control measures on the sheet provided.
6. **Ceiling Mounted Patient Lift**
  - a. During 50% and 100% Design Reviews, the COTR will verify that the patient lift design is in compliance with the requirements of VHA Directive 2005-019 Seismic Safety of VHA Buildings and VA Master Design Specification 3.05.041 Seismic Restraint Requirements for Non-Structural Components. The COTR will also ensure the requirements on the "Design Checklist for Ceiling Mounted Patient Lifts" are met.
  - b. Complete the "After Installation Checklist for Ceiling Mounted Patient Lifts" prior to permitting the equipment to be used for patient movement.
7. **Infection Control Risk Assessment:**
  - a. Determine and record the Location Group(s) that will be affected.
  - b. Determine and record the type of construction and magnitude of disruption.
  - c. Review the Infection Control Matrix using the Location and Type of Construction Groups (determined in steps a. and b.) and record the Class of Precautions associated

d. Complete the Infection Control Measures List and assign responsibility for each measure.

**8. Approvals:**

a. Upon completion of the risk assessment obtain approval signatures as applicable on the attached sheet. Ensure all signatures are complete prior to submitting to the Safety representative.

**9. Contract Documents:**

a. Include applicable risk assessment action items in the contract documents.

b. Provide the contractor's superintendant with copies of the completed risk assessment and action plans.

c. File all risk assessment documents in the project file.

**10. Daily Inspections:**

a. Ensure the contractor conducts and documents daily construction site inspections.

**11. Construction Site Inspection:**

a. Each discipline (Infection Control, Safety Office, VA Police) shall inspect the construction site as applicable. All inspections will be documented.

**12. Post Project Review:**

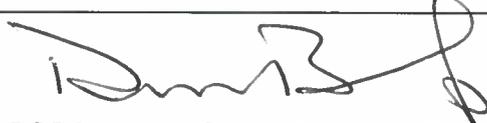
a. Upon completion of the project conduct a review of risk assessment process.

b. Present the results to the Construction Safety Committee.

**CONSTRUCTION RISK ASSESSMENTS AND HAZARD CONTROL APPROVALS**

<b>Project Title:</b> Correct Police and Security Space Deficiencies	<b>Project Number:</b> 544 303
<b>Estimated Start Date:</b> September 1, 2017	<b>Estimated Duration:</b> One year

Obtain the following approvals, in the order listed, as applicable:

<b>1. VA Supervisor responsible for area under construction</b>	<b>Date</b>
 <b>2. Infection Control Coordinator</b>	<b>Date</b> 5/25/17
 <b>3. VA Police Representative</b>	<b>Date</b> 5/24/17
 <b>4. Project Manager/COTR/Shop Supervisor</b>	<b>Date</b> 5/24/17
 <b>5. Maintenance Control Manager, Engineering Service</b>	<b>Date</b> 5/25/17
 <b>6. Projects Section Chief, Engineering Service</b>	<b>Date</b> 24 MAY 2017
 <b>7. Assistant Chief, Engineering Service</b>	<b>Date</b> 5-25-17
 <b>8. Chief, Engineering Service</b>	<b>Date</b> 5-25-17
 <b>9. Safety and Emergency Management Service Representative</b>	<b>Date</b> 5/25/17

**Dorn VA Medical Center  
Construction/Renovation Risk Assessment Package**

<b>Project Title:</b> Correct Police and Security Space Deficiencies		<b>Project Number:</b> 544 303
<b>Location:</b> North side of campus along Garners Ferry Road		
<b>Date:</b> May 24, 2017	<b>Project Phase:</b> <input type="checkbox"/> Design <input type="checkbox"/> Phase I (25-50%) <input checked="" type="checkbox"/> Final <input type="checkbox"/> Pre-Con <input type="checkbox"/> Other	
<b>Construction Start Date:</b> September 1, 2017	<b>Estimated Duration:</b> One year	<b>Completion Date:</b> September 1, 2018
<b>Scope of Work:</b>		
<p>The scope of the work includes minor demolition of a small portion of an existing asphalt parking lot. Grading and site work will be required to accommodate the project. Utility construction including, electrical, water, sewer, communications, and other as shown on the construction documents will be required to complete the project. The exterior construction is brick veneer over concrete masonry units and interior construction is gypsum wallboard over steel stud framing. The roof is standing seam hip roof. The typical finish in the office and tasking areas is acoustical ceiling. The ceiling in restrooms and secure areas is a hard gypsum ceiling.</p>		
<p><b>Note:</b> The risk assessment process should begin in the design phase. Identified risk controls shall be incorporated into the technical plans and specifications as applicable. The risk assessment should be reviewed during all major phases of the project and risk controls updated as necessary.</p>		
<p><input checked="" type="checkbox"/> <b>Prior to commencing work, the general contractor shall provide proof that an OSHA certified competent person (CP) [29 CFR 1926.32(f)] will maintain a presence at the worksite. An OSHA 30-hour training completion card is considered certification. Any other certification provided will be evaluated by the Project Manager and the Construction Safety Subcommittee in accordance with VA Directive 2011-036 to determine relevancy.</b></p>		
<b>COR Signature:</b> _____		

**NEPA Risk Assessment to be completed utilizing NEPA Interim Guidance for Projects PG 18-17**  
<http://www.cfm.va.gov/til/etc/NEPAGuidance.pdf>

<b>Project Title:</b> Correct Police and Security Space Deficiencies		<b>Project Number:</b> 544 303
<b>Location:</b> North side of campus along Garners Ferry Road		
<b>Date:</b> May 24, 2017	<b>Type of Project:</b> <input type="checkbox"/> Operation and Maintenance <input type="checkbox"/> Repairs/Renovation <input type="checkbox"/> <input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Lease <input type="checkbox"/> Other	
<b>Construction Start Date:</b> September 1, 2017	<b>Estimated Duration:</b> One year	<b>Completion Date:</b> <span style="float: right; font-size: small;">Engineer</span>

**Project Description:**  
 The scope of the work includes minor demolition of a small portion of an existing asphalt parking lot. Grading and site work will be required to accommodate the project. Utility construction including, electrical, water, sewer, communications, and other as shown on the construction documents will be required to complete the project. The exterior construction is brick veneer over concrete masonry units and interior construction is gypsum wallboard over steel stud framing. The roof is standing seam hip roof. The typical finish in the office and tasking areas is acoustical ceiling. The ceiling in restrooms and secure areas is a hard gypsum ceiling.

<b>Level of NEPA Analysis:</b>	<b>Other Environmental Permits/Analysis Needed:</b>
<input checked="" type="checkbox"/> <b>Categorical Exclusion</b>	<input type="checkbox"/>
<input type="checkbox"/> <b>Environmental Assessment (EA) Needed</b>	<input type="checkbox"/>
<input type="checkbox"/> <b>Environmental Impact Statement (EIS) Needed</b>	<input type="checkbox"/>

**Project Impacts**

Would the proposed activity involve or generate any of the following?

Source	Yes	No	Source	Yes	No	Source	Yes	No
Air Emissions including GHGs	<input type="checkbox"/>	<input type="checkbox"/>	Liquid Effluent	<input type="checkbox"/>	<input type="checkbox"/>	RCRA or CERCLA Sites	<input type="checkbox"/>	<input type="checkbox"/>
Asbestos	<input type="checkbox"/>	<input type="checkbox"/>	Petroleum Storage	<input type="checkbox"/>	<input type="checkbox"/>	Wetlands	<input type="checkbox"/>	<input type="checkbox"/>
Excess Noise	<input type="checkbox"/>	<input type="checkbox"/>	Solid Waste	<input type="checkbox"/>	<input type="checkbox"/>	Permit Modification	<input type="checkbox"/>	<input type="checkbox"/>
Utility Modification	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Hazardous Waste	<input type="checkbox"/>	<input type="checkbox"/>	Chemical Use/Storage	<input type="checkbox"/>	<input type="checkbox"/>
Soil Disturbance	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Biological Resources	<input type="checkbox"/>	<input type="checkbox"/>	Water/Well use	<input type="checkbox"/>	<input type="checkbox"/>
Water Treatment	<input type="checkbox"/>	<input type="checkbox"/>	Radioactive Waste	<input type="checkbox"/>	<input type="checkbox"/>	Other:	<input type="checkbox"/>	<input type="checkbox"/>
Water Flow Modification	<input type="checkbox"/>	<input type="checkbox"/>	Mixed Waste	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>

**Determination**

I find the proposed project qualifies as a **CATEGORICAL EXCLUSION** with no extraordinary circumstances. Specify which **CATEX**: New construction less than 75,000 gross square feet

I find that the proposed project **MAY** have a significant effect on the environment; therefore, an **ENVIRONMENTAL ASSESSMENT (EA)** will be prepared.

**ENVIRONMENTAL IMPACT STATEMENT (EIS)**

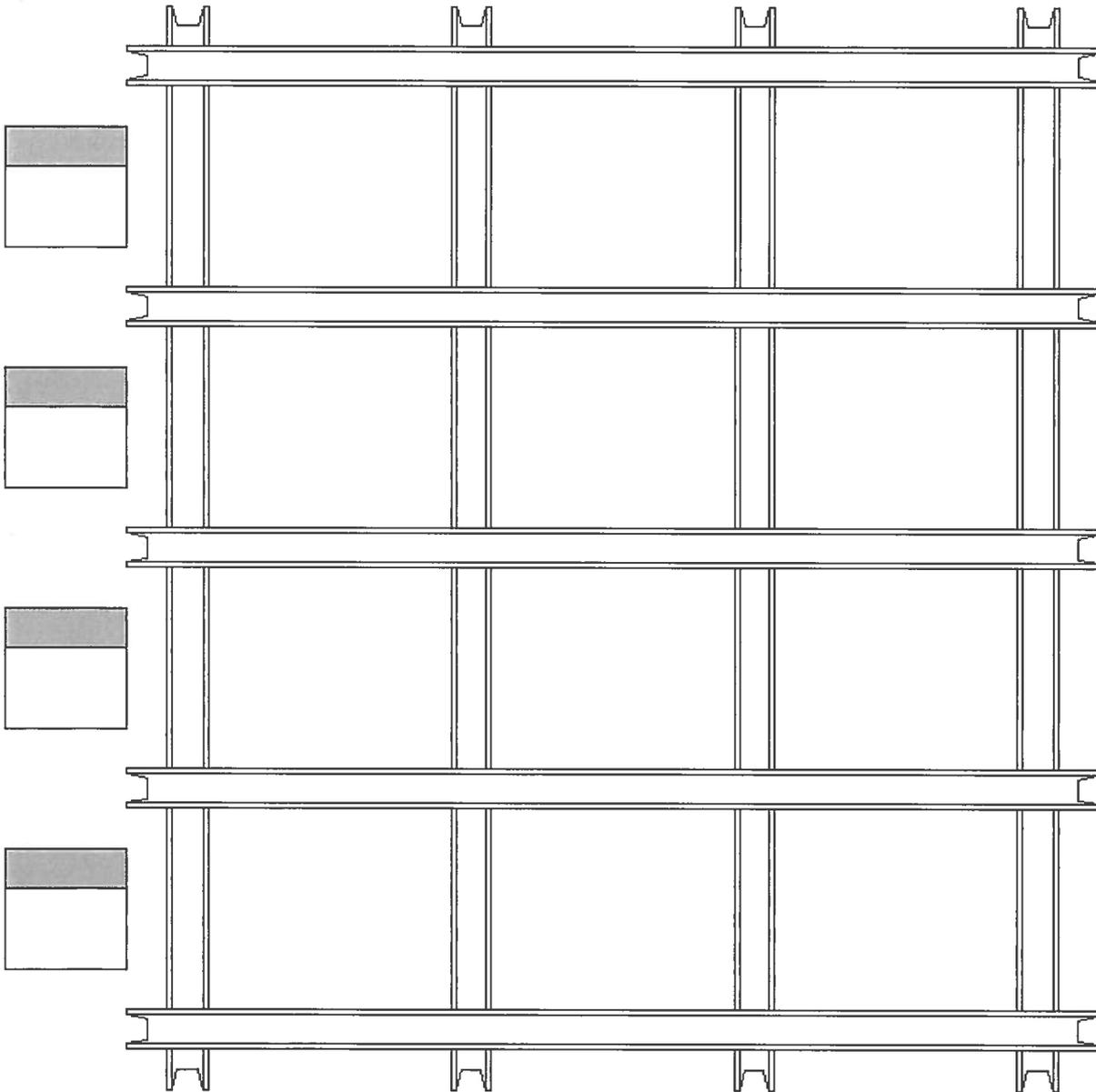
**Project Manager:** Robert B. Price Jr.

**GEMS Coordinator:** 

## Vertical Environmental Impact Building Assessment

Building: \_\_\_\_\_ Floor: \_\_\_\_\_ N/A: \_\_\_\_\_

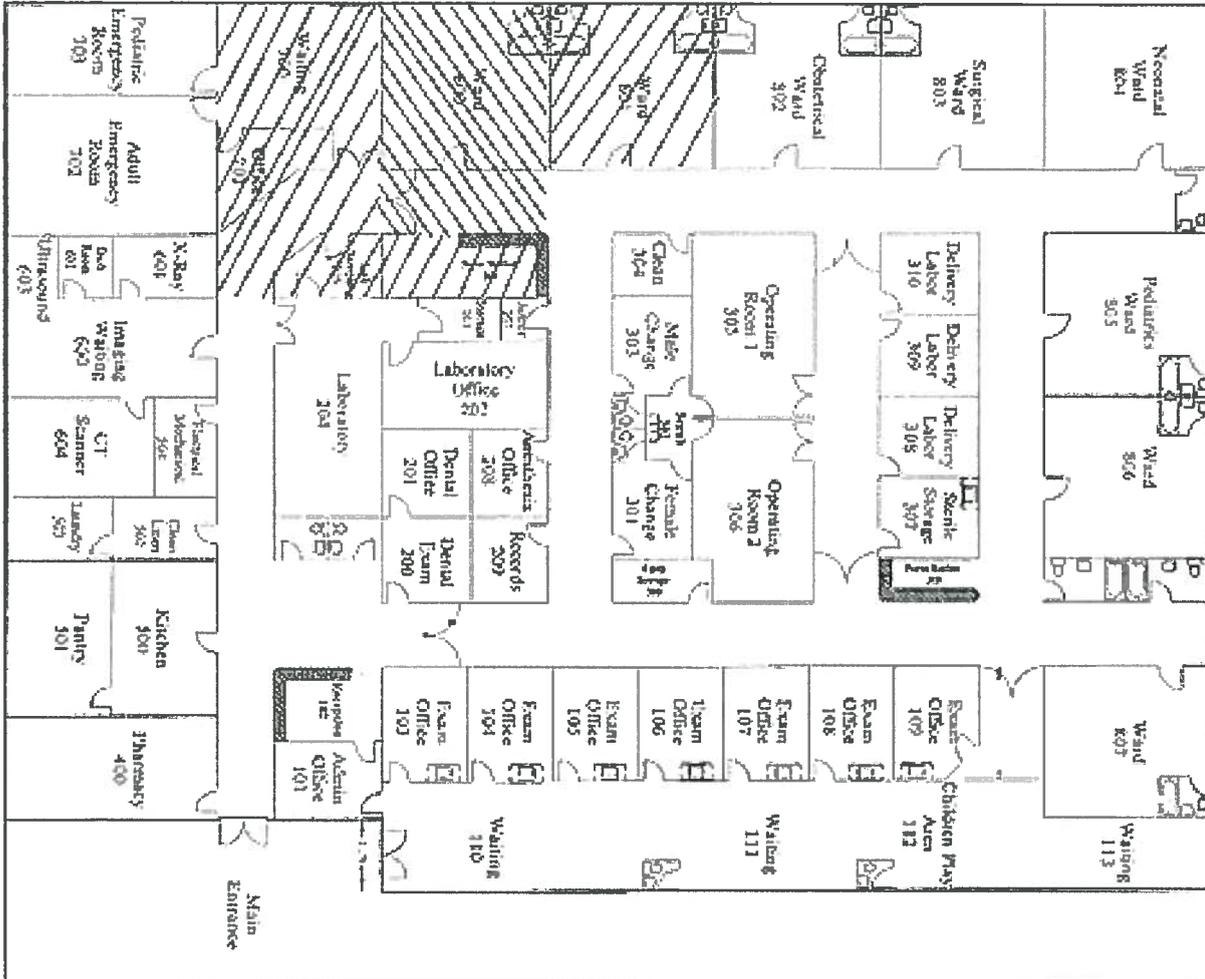
Phase I: \_\_\_\_\_ Phase II: \_\_\_\_\_ Phase III: \_\_\_\_\_ Phase IV: \_\_\_\_\_



## Horizontal Environmental Impact Building Assessment

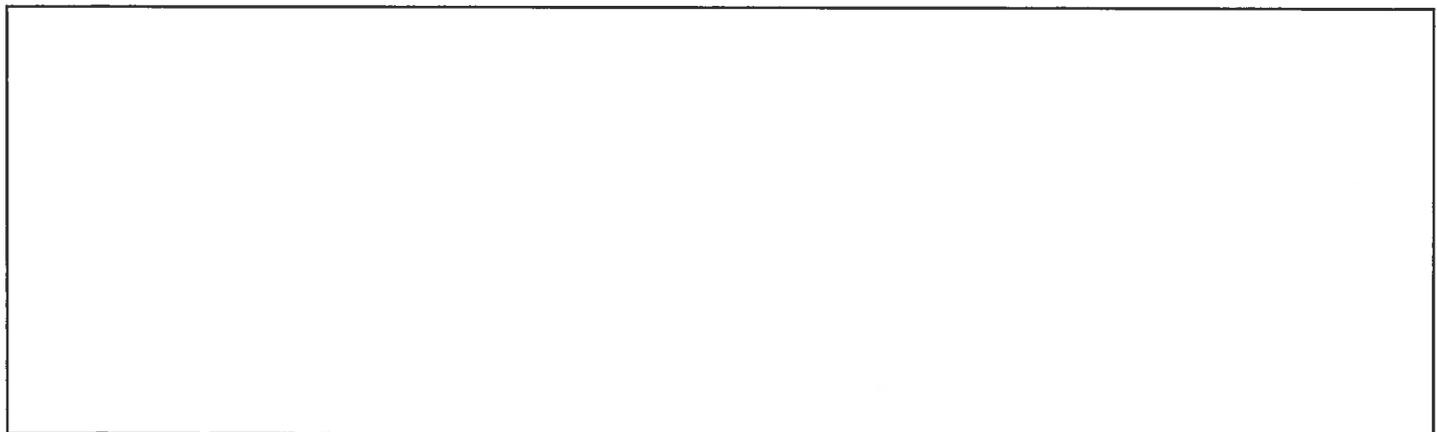
**This is a sample. Insert CAD of appropriate area.**

Phase I: \_\_\_\_\_ Phase II: \_\_\_\_\_ Phase III: \_\_\_\_\_ Phase IV: \_\_\_\_\_



Construction

Patient/Staff Impact



**CONTRACTOR CONSTRUCTION/RENOVATION AREA ILSM INSPECTION**

**Week Of:** \_\_\_\_\_

**Project Title/Number:** \_\_\_\_\_ **Location:** \_\_\_\_\_

1. Means of egress is clear in construction area:

MON     TUE     WED     THU     FRI     SAT     SUN

2. Accesses for fire department and emergency services are clear:

MON     TUE     WED     THU     FRI     SAT     SUN

3. Fire detection/Sprinkler systems operational:

MON     TUE     WED     THU     FRI     SAT     SUN

Note: If system is impaired ensure a temporary, but equivalent, system is provided. Temporary systems to be tested monthly. Describe temporary system(s) provided: \_\_\_\_\_

4. Construction partitions are being maintained as a 1 hour fire barrier, all penetrations firestopped at the end of each day:

MON     TUE     WED     THU     FRI     SAT     SUN

5. Good housekeeping practices are being used in construction area. Flammables and combustible fire load is being kept to a minimum:

MON     TUE     WED     THU     FRI     SAT     SUN

6. Buildings, grounds, and equipment are being maintained in a safe manner (pay special attention to excavations, construction areas, and construction storage):

MON     TUE     WED     THU     FRI     SAT     SUN

7. The "No Smoking Policy" is being enforced throughout the project area:

MON     TUE     WED     THU     FRI     SAT     SUN

8. Job site fire extinguishers and other additional fire fighting equipment (if necessary) in place and inspected:

MON     TUE     WED     THU     FRI     SAT     SUN

9. Deficiencies and appropriation corrective actions to be listed here:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10. Inspector's Initials:  MON     TUE     WED     THU     FRI     SAT     SUN

Form Completed By: \_\_\_\_\_

Completed form will be filed in the project file.

## Interim Life Safety Measure (ILSM) Evaluation for Construction/Renovation Projects

<b>Project Name:</b> Correct Police and Security Service Deficiencies	<b>Date:</b> May 24, 2017	<b>Project Manager (COTR):</b> Robert B. Price Jr. <b>Safety Staff Member:</b>
<p><b>Instructions:</b> Use this evaluation to identify and implement activities to protect occupants during construction and renovations and during periods when the building and/or construction area does not meet the applicable provisions of the Life Safety Code. This evaluation is to be updated throughout the project to identify code deficiencies that cannot be immediately corrected and the ensuing special measures to be taken to compensate for increased life safety risk. Check all conditions that apply and add any other identified deficiencies and additional special measures:</p>		

Evaluation Criteria:	Deficiency Description and Location:	ILSM required to compensate for increased life safety risk:	
Building/area egress routes blocked or altered. This applies to the construction area as well as surrounding areas. Egress routes for all personnel (including construction workers) must be maintained at all times.	List blocked egress route locations:	<ol style="list-style-type: none"> <li>1. Provide alternate means of egress. Personnel in the area shall be given additional training when alternative egress routes are designated. Signage shall be posted identifying the location of the alternate means of egress or exit to everyone affected.</li> <li>2. Exits in affected area(s) shall be inspected daily.</li> <li>3. Conduct one additional fire drill per shift per quarter in the affected area.</li> </ol>	<input type="checkbox"/> Required  <input checked="" type="checkbox"/> N/A
Obstructed or altered access to emergency services and for fire, police, and other emergency forces.	List access routes blocked: <b>East and West sides of Dorn Drive.</b>	<ol style="list-style-type: none"> <li>1. Provide and mark alternate access routes.</li> <li>2. Inspect routes daily.</li> </ol>	<input type="checkbox"/> Required  <input checked="" type="checkbox"/> N/A
Fire alarm, detection, and/or suppression systems out of service. Each outage will be assessed based on duration, location, building occupancy, existing fire barriers, and type of system out of service to determine necessary measures. Compliance with the applicable chapter of the LSC required.	List each system out of service:  List each temporary system required:	<ol style="list-style-type: none"> <li>1. Provide temporary, equivalent alarm and detection systems.</li> <li>2. Inspect and test temporary systems monthly. The completion date of the test shall be documented.</li> <li>3. Fire alarm, detection, and suppression system outages &gt; 4 hours in a 24-hour period require a fire watch and fire dept. notification. Fire watch shall be documented.</li> <li>4. Conduct one additional fire drill per shift per quarter in the affected area.</li> </ol>	<input type="checkbox"/> Required  <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> Required  <input checked="" type="checkbox"/> N/A  <input type="checkbox"/> Required  <input checked="" type="checkbox"/> N/A

Evaluation Criteria:	Deficiency Description and Location:	ILSM required to compensate for increased life safety risk:
<p>Temporary construction separation requirements (see attached "Construction Partition Evaluation Criteria")</p>	<p>List project separation requirements and locations:</p>	<p><input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A</p>
<p>Additional fire-fighting equipment: Minimum requirement for all projects = properly maintained fire extinguisher every 75 ft. Assess all construction work and require other equipment based on criteria contained in NFPA 241.</p>	<p>List all additional fire fighting equipment: 1. Fire Extinguisher(s)</p>	<p><input checked="" type="checkbox"/> Required</p>
<p>Hot Work: evaluate all stages of construction to determine the type of hot work to be conducted.</p>	<p>List hot work tasks/locations: Welding - New building Cutting - New building Grinding - New building Brazing - New building Soldering - New building</p>	<p><input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A</p> <p><input type="checkbox"/> Required <input type="checkbox"/> N/A</p> <p><input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> Required <input type="checkbox"/> N/A</p> <p><input checked="" type="checkbox"/> Required <input type="checkbox"/> N/A</p>

Evaluation Criteria:	Deficiency Description and Location:	ILSM required to compensate for increased life safety risk:
Smoking prohibited in all buildings and in and near construction areas.	Applicable to all projects.	<input checked="" type="checkbox"/> Required
Storage, housekeeping, and debris removal practices will be conducted to ensure the building's flammable and combustible fire load is reduced to the lowest feasible level.	Applicable to all projects.	<input checked="" type="checkbox"/> Required
Fire/smoke barrier penetrations. Determine if construction will require the penetration of existing fire and/or smoke barriers.	List locations of project fire/smoke barriers required to be maintained for the duration of the project: 1. Floor and ceiling barriers.	<input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A
Increased hazard surveillance is required when any Life Safety Code deficiency is identified during period of construction. Required for construction in occupied buildings.	List LSC deficiencies:	<input type="checkbox"/> Required <input checked="" type="checkbox"/> N/A
Construction occurring adjacent to occupied areas of the building.	List ILSMs implemented for this project: <b>Provide fire watches for hot work.</b> <b>No smoking on construction site.</b> <b>Maintain a tidy and clean site.</b> <b>Control dust by moistening earth.</b>	<input checked="" type="checkbox"/> Required <input type="checkbox"/> N/A

## ILSM Implementation List

Project Name:	Date:	Project Manager or VA Supervisor:
<b>Instructions:</b> List all "required" actions from the above ILSM evaluation.		
1.	Applicable to all projects:	Contractor to provide and maintain fire extinguishers and other fire-fighting equipment, on-site.
2.	Applicable to all projects:	Strict enforcement of no smoking policy.
3.	Applicable to all projects:	Storage, housekeeping, and debris removal practices will be conducted to ensure the building's flammable and combustible fire load is reduced to the lowest feasible level.
4.	Provide hot work permits for all welding, cutting, grinding, brazing, and soldering.	Provide fire watch as required and all equipment as specified in the hot work permit.
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		

## Hazard Assessment and Exposure Controls

<b>Project Name:</b> Correct Police and Security Service Deficiencies	<b>Date:</b> May 24, 2017
<b>Project Manager or VA Supervisor:</b> Robert B. Price Jr.	
<b>Instructions:</b> Identify potential hazards and required control measures. See attached list for sample control measures.	

Hazard:	Concern?		Control Measure(s):	Remarks:
Asbestos Containing Material (ACM)	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Asbestos containing materials affected by work shall be properly abated per VA and state regulations.	
Dust	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	The area of work is not a patient care area. The work will generate dust. Workers shall comply with OSHA standards for personal protection and that of the traveling public.	Also see Infection Control Risk Assessment
Moisture/Water Leaks	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		
Vapors/Fumes	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Workers shall comply with OSHA regulations concerning the risks of working around fumes and smoke.	

**Ceiling Mounted Patient Lifts**

If not applicable check here:

**Installation or Relocation Checklist for Ceiling Mounted Patient Lifts**

The commissioning for a patient ceiling lift system(s) shall include, but not be limited to, the following points as components of the commissioning procedures.

**NOTE: Ceiling mounted patient lifts are not to be installed in treatment units with actively suicidal patients.**

<b>Facility:</b>	<b>Work Order:</b>	<b>Manufacturer:</b>	
<b>Lift Location:</b>		<b>Model:</b>	
<b>VAMC Contact:</b>		<b>Serial Number:</b>	<b>EE Number:</b>
<b>VAMC Contact's Phone Number:</b>		<b>Mfgr Contact:</b>	
<b>Installer:</b>		<b>Mfgr Contact's Phone Number:</b>	
<b>Installer's Phone Number:</b>		<b>Date:</b>	

<b>Pre-Installation</b>		<b>COMPLETE</b>
1	Perform site survey of the pre-existing conditions and as-built drawings above and below finish ceiling at the installation location to confirm existing structural and ceiling conditions.	
2	Obtain structural and related engineering design drawings and calculations for the new lift installation. Design drawings shall be developed for specific lift installation under specific pre-existing conditions of the facility.	
3	If the facility is located in a seismic area, as identified in VA Handbook H-18-8 Seismic Design Requirements, verify that the ceiling mounted patient lift system installation is in compliance with the requirements of VA Directive 7512 Seismic Safety of VA Buildings and VA Master Design Specification 13.05.041 Seismic Restraint Requirements for Non-Structural Components.	
4	Verify that the lift is listed by the manufacturer to be installed and operated in the environment that the lift is operating under. (For example, water tight lifts shall be installed and operated in wet, damp or humid locations such as pools or bathrooms.)	
5	Verify NFPA 13 compliance for fire sprinkler system (including but not limited to fire sprinkler heads and piping).	
6	Verify NFPA 99 and NFPA 70 compliance for proper grounding and bonding.	
7	Verify NFPA 99 and NFPA 70 compliance for access to electrical and safety systems.	
8	Verify required access to mechanical, HVAC, and fire systems components within the lift installation area.	
9	Verify minimum clearances for operation are compliant with manufacturer recommendations. (Ensure room clearance and that the ceiling height is adequate for lift usage.)	
10	Perform pre-installation walkthrough to confirm full understanding and consensus of design drawing(s) and installation conditions.	

**NOTES:**

<b>Installation</b>		<b>COMPLETE</b>
1	Verify proper connections of the lift's structural system to the building's structure (including seismic bracing if applicable).	
2	Verify proper interface at the ceiling (hard deck or soft tile) and proper installation of all protective features around the support rods and rails/tracks.	

3	Verify structural component sizing and physical installation to ensure that the correct structural system is in place and properly installed to support the lift.		
4	Verify proper installation of electric motor per manufacturer's instructions to ensure operational rigidity of motor mounting.		
5	Verify proper electrical connections per design drawings and manufacturer's instructions.		
<b>NOTES:</b>			
<b>Post-Installation</b>			<b>COMPLETE</b>
1	Perform walkthrough to ensure compliance of the installation per the design drawing(s) and manufacturer's instructions.		
2	Perform operational test to verify lift functionality.		
<b>NOTES:</b>			
<b>Rails/Tracks and End Stops</b>			<b>PASS</b>
			<b>FAIL</b>
1	Verification that all fasteners and set screws are properly tightened on the trollies and rails/tracks.		
2	Ensure that the rail/track is free of gaps (unless required by design). If included in installation, verify rail turntable function, exchanger function, gate alignment, and safety block installation.		
3	Confirm track is clean and clear of all debris. (Use manufacturer's recommended cleaning materials to avoid damage to the motor case and other components.)		
4	Verification that all manufacturer specified end stops or docking gates are properly installed.		
<b>NOTES:</b>			
<b>Lift Unit and Straps</b>			<b>PASS</b>
			<b>FAIL</b>
1	Inspection of lift unit casing for cracks and alignment.		
2	Verification that the lift unit charges properly.		
3	Inspection and activation of hand control for full operation (e.g., up, down, left, right) and "return to charge" function if applicable.		
4	Confirm any and all lift unit indicator lights are functioning. (e.g., red service warning light, charging state light)		
5	Inspection and verification of all emergency functions of the lift unit.		

6	Full extension and inspection of lift strap for loose threads or frays.		
7	Inspection of spreader bar and clips for cracks and for loose or missing rings or cotter pins.		

NOTES:

Load Testing		PASS	FAIL
1	Verification of any "soft start" or "soft stop" features and that lifting speed does not exceed 2.5 inches per second with "zero" load.		
2	Verification of load testing and deflection testing at the manufacturer's specified maximum rated lift capacity.		
3	Verification of any "soft start" and "soft stop" features and that lifting speed does not exceed 1.5 inches per second under maximum rated lift capacity.		
4	Verification of function of emergency stop at maximum rated lift capacity.		
5	Verification of emergency lowering feature at maximum rated lift capacity.		

NOTES:

Manuals		COMPLETE
1	Confirm that the manufacturer's operating and maintenance manuals for this lift have been received.	

NOTES:

Training		COMPLETE
1	Verify that manufacturer or manufacturer's representative has provided training on the use of patient handling equipment to clinicians and other staff who move and handle patients.	
2	Verify that training and competency are documented prior to release for use with patients.	

NOTES:



## Hazard Control Measure List

<b>Project Name:</b> Correct Police and Security Service Deficiencies	<b>Date:</b> May 24, 2017	<b>Project Manager or VA Supervisor:</b> Robert B. Price Jr.
<b>Instructions:</b> List all identified hazard controls from the assessment above.		
1. Provide all necessary fire protection equipment for spark and flame producing work.		
2. Personal protective equipment to be used in accordance with OSHA regulations.		
3. Appropriate VA and State regulations regarding asbestos removal, control and clean up shall be followed.		
4. Abate all asbestos containing material (ACM) per VA and State regulations.		
5. Abate all lead based paint removal areas per VA and State regulations.		
6. Comply with OSHA standards for dust control.		
7. Comply with OSHA regulations concerning the risks working around fumes and smoke.		
8. Comply with OSHA regulations concerning hearing protection.		
9. Comply with OSHA regulations concerning vibrations.		
10. Provide traffic control during all stage construction and associated utility construction.		
11. Provide dust and fume control to the air intakes of buildings 100, 1, and 2.		
12. Coordinate any required utility outage with the COR.		
13. Contractor shall provide a seven foot fence with security fabric attached around all bounds of the project.		
14.		

## **SAMPLE Hazard Control Measures**

(If used, modify as necessary for the specific hazard)

### **Asbestos:**

- a. Appropriate VA and state asbestos removal, control, monitoring, and clean-up incorporated into the project specifications.
- b. VA to hire independent Industrial Hygienist to inspect and clear area for occupancy in accordance with VA standards.
- c. Project area will be encased with spray-applied hard surface encasement material.
- d. Provide mini containments under negative air in public areas.
- e. Sealed gypsum board barrier will be constructed to isolate the construction area from the public.
- f. Transite panels will be removed, which is considered Class B removal.

### **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.
- d. Provide mini containments under negative air in public areas.
- e. Provide negative air machine in space as air scrubber.
- f. Provide walk off mats at entrances to work area.
- g. Perimeter barrier will be constructed above the ceiling to isolate the construction area with other areas above the ceiling.

### **Moisture Water Leaks**

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

### **Vapors/Fumes:**

- a. Use of products with low Volatile Organic Compounds (VOCs).
- b. Provide negative air in construction zone exhausted to outside, away from HVAC intakes.
- c. Seal work area with airtight barrier.
- d. Use of combustion engine and propane powered equipment prohibited in buildings. Ensure use outdoors is away from HVAC intakes.
- e. Properly seal any floor penetrations in accordance with fire-stopping specifications to minimize risk of fumes from construction zone migrating to other areas of the building.
- f. Shut down or modify operation of air handler to minimize infiltration of fumes from outside.
- g. Use charcoal and/or HEPA filters on HVAC outside air intakes to protect interiors spaces from dust or fumes.

### **Noise:**

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

**Vibration:**

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

**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 anti room under negative pressure at entrance to project zone.

**Traffic Control:**

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

**Open Outside Walls:**

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

**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.
- c. Vacate areas when doing below floor work off of the catwalk.

**Proximity of Air Intakes:**

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

**Lead Based Paint or Elemental Lead:**

- a. Appropriate VA, federal and state requirements for removal, control, monitoring, and clean-up incorporated into the project specifications.

## INFECTION CONTROL RISK ASSESSMENT/IMPLEMENTATION

### **PROCEDURES:**

A. Determine Location Group based upon work location:

<b>LOCATION GROUP 1 LOWEST</b>	<b>LOCATION GROUP 2 MEDIUM</b>	<b>LOCATION GROUP 3 MEDIUM HIGH</b>	<b>LOCATION GROUP 4 HIGHEST</b>
1) Office areas 2) Engineering 3) Environmental services	1) At patient care units (example: Cardiac, Rehab., ultrasound) 2) Outpatient areas	1) Emergency Room 2) Radiology/MRI 3) Post-anesthesia Care unit 4) Intensive Care Units 5) Nuclear Medicine 6) Admission/Discharge area 7) PT - tank areas 8) Cafeteria 9) Echocardiography 10) Laboratories 11) Dialysis 12) Central sterile supply 13) Oncology 14) Cardiology	1) Operating Rooms; Sterile Processing 2) Intensive Care units 3) Cardiac Catheterization 4) Anesthesia areas 5) All endoscopy areas 6) Pharmacy

B. Determine Work Type:

**Work Type A:** Inspections and Non-Invasive Activities. Includes, but is not limited to, removal of ceiling tiles for visual inspection limited to 1 tile per 50 square feet, painting (but not sanding) wall covering, 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.

**Work Type B:** Small scale, short duration activities which create minimal dust. Includes, but is not limited to, installation of telephone and computer cabling, access to chase spaces, cutting of walls or ceiling where dust migration can be controlled.

**Work Type C:** Any work which 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, sanding of wall for painting or wall covering, removal of floor coverings, ceiling tiles and casework, new wall construction, minor ductwork or electrical work above ceilings, major cabling activities, and any activity which cannot be completed within a single work shift.

**Work Type D:** Major demolition and construction projects. Includes, but is not limited to, activities which require consecutive work shifts, require heavy demolition or removal of a complete ceiling system, and new construction.

C. Determine Interim Measure Class:

<b>CONSTRUCTION ACTIVITY→</b>	<b>TYPE "A"</b>	<b>TYPE "B"</b>	<b>TYPE "C"</b>	<b>TYPE "D"</b>
<b>RISK LEVEL ↓</b>				
<b>Group 1</b>	<b>I</b>	<b>II</b>	<b>II</b>	<b>III/IV</b>
<b>Group 2</b>	<b>I</b>	<b>II</b>	<b>III</b>	<b>IV</b>
<b>Group 3</b>	<b>I</b>	<b>III</b>	<b>III/IV</b>	<b>IV</b>
<b>Group 4</b>	<b>III</b>	<b>III/IV</b>	<b>III/IV</b>	<b>IV</b>

**Interim Measure Class I**

1. Execute work by methods to minimize raising dust from construction operations.
2. Immediately replace any ceiling tile displaced for visual inspection.
3. Cleanup and disposal as appropriate.

**Interim Measure Class II**

1. Provide active means to prevent air-borne dust from dispersing into atmosphere, including water mist work surfaces to control dust while cutting.
2. Seal unused doors with masking tape.
3. Block off and seal air vents.
4. Cleanup and disposal as appropriate.

**Interim Measure Class III**

1. Isolate HVAC system in area where work is being done to prevent contamination of duct system.
2. Complete all critical barriers before construction begins or implement control cube method.
3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration filter as required on a per project basis.
4. Contain construction waste and during transport in appropriate container.
5. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work areas.
6. Place dust mat at entrance and exit of work area.
7. Clean construction area before leaving work area daily.

**Interim Measure Class IV**

1. Isolate HVAC system in area where work is being done to prevent contamination of duct system.
2. Complete all critical barriers before construction begins per project basis.
3. Maintain negative air pressure within work site utilizing HEPA equipped air filtration units as required on a per project basis.
4. Seal holes, pipes, conduits, and punctures appropriately.
5. Construct anteroom and require all personnel to pass through this room so they can be vacuumed using an HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave the work site as required per project basis.
6. All personnel entering work site are required to wear appropriate protective clothing as required by the area.
7. Provide adhesive/carpet walk-off mats at entrance to work area within the anteroom. Replace used mats with new mats in accordance with manufacturer's recommendations and/or as needed.
8. Do not remove barriers from work area until completed project is inspected by the VAMC's Safety and Infection Control Departments, COTR, and thoroughly cleaned.
9. Provide appropriate clean up daily.

10. Wet mop area with disinfectant as required.

11. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction.

12. Contain construction waste before and during transport in appropriate covered containers.

- D. Document infection control measures to be implemented on attached form. List contractor, service line or individual responsible for implementation.
- E. Obtain appropriate approvals.
- F. Review and implement all required interim measures with the Contractor's Project Managers and personnel performing work.
- G. **Complete Infection Control Permit and ensure it is posted outside the work site entrance at all times.**

### INFECTION CONTROL MEASURES

<b>Location Group:</b> Group 1
<b>Work Type:</b> Type D
<b>Interim Measure Class:</b> Class III
<b>Infection Control actions to be implemented:</b>
1) Temporary infection and dust control barriers shall be placed while working in the basement of building 100.
2)
3)
4)
5)
6)
7)
8)
9)
10)

<b>Responsibility for implementation:</b>
1) Contractor.
2)
3)
4)
5)
6)
7)
8)
9)
10)

### WJB Dorn VAMC Infection Control Construction Permit

Location of Construction: North side of campus along Garners Ferry Road and the basement of Building 100. Project Start Date: September 1, 2017

Project Coordinator: Robert B. Price Jr. Estimated Duration: One year

Contractor Performing Work: Permit Expiration Date: when finished

Supervisor: Constr. Supervisor phone:

YES	NO	CONSTRUCTION ACTIVITY TYPES	YES	NO	PATIENT RISK GROUP
<input type="checkbox"/>	<input type="checkbox"/>	TYPE A: Inspection, non-invasive activity	<input checked="" type="checkbox"/>	<input type="checkbox"/>	GROUP 1: Least Risk
<input type="checkbox"/>	<input type="checkbox"/>	TYPE B: Small scale, short duration, moderate to high levels	<input type="checkbox"/>	<input type="checkbox"/>	GROUP 2: Medium Risk
<input type="checkbox"/>	<input type="checkbox"/>	TYPE C: Activity generates moderate to high levels of dust, requires greater 1 work shift for completion	<input type="checkbox"/>	<input type="checkbox"/>	GROUP 3: Medium/High Risk
<input checked="" type="checkbox"/>	<input type="checkbox"/>	TYPE D: Major duration and construction activities Requiring consecutive work shifts	<input type="checkbox"/>	<input type="checkbox"/>	GROUP 4: Highest Risk

**CLASS I**

1. Execute work by methods to minimize raising dust from construction operations. 2. Immediately replace any ceiling tile displaced for visual inspection.	3. Use control cube for ceiling access when >1 ceiling tile removed. 4. Clean work area immediately after task completion.
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**CLASS II**

1. Provide active means to prevent air-borne dust from dispersing into atmosphere 2. Water mist work surfaces to control dust while cutting. 3. Seal unused doors with duct tape. 4. Block off and seal all air vents. 5. Place dust mats at entrance and exits of work areas. 6. Wipe work surfaces with approved disinfectant.	7. Contain construction waste before transport in tightly covered containers. 8. Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area. 9. Remove or isolate HVAC system in areas where work is being performed.
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**CLASS III**

5/25/17  
Date  
Zuw  
Initial

1. Remove or Isolate HVAC system in area where work is being done to prevent contamination of the duct system. 2. Complete all critical barriers to seal area from non work area before construction begins. 3. Maintain negative air pressure within work site 24/7, utilizing HEPA equipped air filtration units; with filter changes as needed. 4. Do not remove barriers from work area until completed project is thoroughly cleaned with hospital-approved disinfectant by Housekeeping, and approved by Project Coordinator.	6. Vacuum work area with HEPA filtered vacuums. 7. Wet mop with disinfectant. 8. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 9. Contain construction waste before transport in tightly-covered containers. 10. Cover transport receptacles or carts. Tape covering. Wipe off cart and wheels with approved disinfectant before transporting debris.
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**Class IV**

Date  
Initial

1. Isolate HVAC system in area where work is being done to prevent contamination of duct system. 2. Complete all critical barriers or implement control cube method before construction begins. 3. Maintain negative air pressure within work site 24/7, utilizing HEPA equipped air filtration units; with filter changes as needed. 4. Seal holes, pipes, conduits, and punctures appropriately. 5. 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 the work site. 6. All personnel entering work site are required to wear shoe covers, changed each time exiting work area.	7. Do not remove barriers from work area until completed project is thoroughly cleaned with approved disinfectant by Housekeeping and approved by Project Coordinator. 8. Vacuum work area with HEPA filtered vacuums. 9. Wet mop with disinfectant. 10. Remove barrier materials carefully to minimize spreading of dirt and debris associated with construction. 11. Contain construction waste before transport in tightly covered containers. 12. Cover transport receptacles or carts. Tape covering. 13. Remove or isolate HVAC system in areas where work is being done.
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**Additional Requirements:** Adhesive walk-off mats required at entrance to and exit from work areas for Class III and Class IV projects.

YES  NO 2-step tuberculosis skin testing (TST) documentation is required for this project involving occupied rooms.

YES  NO N-95 respirator fit-testing documentation is required for projects involving occupied airborne isolation rooms.

TB risk assessment: Per CDC criteria Dorn VAMC is low risk and although not required (except as listed above), all construction workers are encouraged to have 2-step tuberculosis skin testing (TST).

Date Initials :	Exceptions/Additions to this permit Date Initials are noted by attached memoranda
Permit Request By:	Permit Authorized By: <i>Zuw, G. Amman</i>
Date:	Date: 5-25-17

**POST-CONSTRUCTION ASSESSMENT**

**PROJECT:** Correct Police and Security Service Deficiencies

**LOCATION:** North side of campus along Garners Ferry road

**PROJECT TYPE:** New Construction

**PROJECT START(NTP) DATE:**

**PROJECT COMPLETION DATE:**

Final Occupancy Review Checklist (engineering Share Point) has been completed and all required documentation submitted?

Yes    No    NA (N/A for in-house projects)

**Air quality:**

Review comments:

Additional action taken:

**Infection control:**

Review comments:

Additional action taken:

**Utility requirements:**

Review comments:

Additional action taken:

# POST-CONSTRUCTION ASSESSMENT

## **Noise and vibration:**

Review comments:

Additional action taken:

## **Physical security:**

Review comments:

Additional action taken:

## **Emergency procedures:**

Review comments:

Additional action taken:

## **General comments:**

# POST-CONSTRUCTION ASSESSMENT

**Submitted by:**

<b>1. Project Manager/COTR/Shop Supervisor</b>	<b>Date</b>
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Obtain the following approvals, in the order listed, as applicable:

<b>1. Maintenance Control Manager, Engineering Service</b>	<b>Date</b>
<b>2. Project Section Chief, Engineering Service</b>	<b>Date</b>
<b>3. Assistant Chief, Engineering Service</b>	<b>Date</b>
<b>4. Infection Control Coordinator</b>	<b>Date</b>
<b>5. VA Police Representative</b>	<b>Date</b>
<b>6. Safety and Emergency Management Service Representative</b>	<b>Date</b>
<b>7. Chief, Engineering Service</b>	<b>Date</b>