

**Interim Life Safety Measures  
Evaluation Sheet**

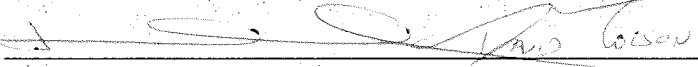
**Situation or Project:** Replace Main Kitchen Air Handling Unit 667-16-102

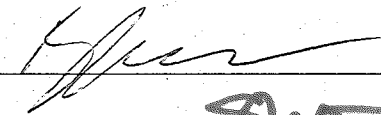
**Start Date:** \_\_\_\_\_

**Procedure:** Review the following categories and indicate whether each item is applicable to the project and what measures will be taken to compensate for the hazards.

<b>Hazard Associated with Project or Condition</b>	<b>Yes/No</b>	<b>Actions to be Taken</b>
<b>EXITS:</b> Does the project have the potential for affecting an exit or other means of egress?	Y	<b>Contractor will ensure exits or doors are not blocked by ladders being used.</b>
<b>EXITS:</b> Will the affected exit be used by other than contractor personnel?	N	
<b>EMERGENCY ACCESS:</b> Does the project have the potential for obstructing access to emergency departments or services?	N	
<b>EMERGENCY ACCESS:</b> Does the project have the potential for obstructing access of emergency response to the construction area?	N	
<b>FIRE PROTECTION:</b> Does the project have the potential of impairing existing fire alarm, detection or suppression systems?	Y	<b>If false ceiling grid is removed for renovations sprinklers will have to be repositioned to up-right position to be classified as operational.</b>
<b>FIRE PROTECTION:</b> Does the project have the potential of impairing the Smoke/Heat Detectors in any way?	N	
<b>FIRE PROTECTION:</b> Will detectors be taken out of service for more than 10 hours in a 24-hour period or will they be covered during a period of time requiring extra actions?	Y	<b>Smoke detectors will be covered during periods of construction. Contractors will be briefed on where fire pull stations are located. At the end of the work day contractors will remove covers from smoke detectors.</b>
<b>FIRE PROTECTION:</b> Does the project have the potential of impairing the fire suppression systems?	N	
<b>FIRE PROTECTION:</b> Will sprinkler head be required to be repositioned or new heads added?	Y	<b>If false ceiling grid is removed for renovations sprinklers will have to be repositioned to up-right position to be classified as operational.</b>
<b>FIRE PROTECTION:</b> Will the system be down for more than 4 Hours in a 24 hour period requiring extra actions?	N	
<b>FIRE PROTECTION:</b> Will temporary fire protection systems be required as part of this project?	N	
<b>TEMPORARY PARTITIONS:</b> Will construction involve the use of temporary partitions?	N	<b>Dust barriers will put up by contracting personal if more than two ceiling tiles are removed within a 50 foot area during the replacement of fan coils. This will be monitored by the COR</b>

Hazard Associated with Project or Condition	Yes/No	Actions to be Taken
		daily, Construction Safety Inspection Team weekly and tracked in the VISN Construction Database.
<b>FIRE FIGHTING EQUIPMENT:</b> Does the area affected by the construction require the placement of additional fire fighting equipment?	N	
<b>FIRE FIGHTING TRAINING:</b> Will additional fire fighting training be provided for construction workers or VA staff in the affected area?	N	
<b>SMOKING POLICY:</b> Will a variance to the existing smoking policy be permitted and who will authorize the variance?	N	Contractors will be briefed on the Hospital Smoking policy and where the smoking areas are located.
<b>COMBUSTIBLE LOAD LEVELS:</b> Will the project involve the storage of flammable and combustible materials that may require special consideration?	N	No storing of any flammable or combustible materials at any phase of this project.
<b>FIRE DRILLS:</b> Does the project warrant additional fire drills because of elimination of exits or other Life Safety Code deficiencies?	Y	Monthly fire drills will be required until construction is completed.
<b>HAZARD SURVEILLANCE:</b> Does the project require interim measures? If yes, how will the enforcement and documentation of compliance be carried out?	N	
<b>FIRE CONSTRUCTION FEATURES:</b> Does the project have the potential for affecting the structural features of fire protection such as fire/smoke barriers and/or doors?	N	
<b>FACILITY WIDE TRAINING:</b> Does the project present Life Safety Code deficiencies or construction hazards that would require facility-wide education or training?	N	
<b>OTHER ISSUES:</b> Listed by COTR, Project Engineer or Safety Office	None	

Signature of Evaluator: 

Signature of Project Engineer: 

Signature of Safety Officer:  STACY M. WALDEN

Date Signed: \_\_\_\_\_