

SECTION 01061
OSHA REQUIREMENTS - SAFETY AND HEALTH REGULATIONS
INFECTION CONTROL GUIDELINES
VAMC Salisbury North Carolina

PART 1 - OSHA REQUIREMENTS

1.1 GENERAL

- A. Contractors are required to comply with the Occupational Safety and Health Act of 1970. This will include the safety and health standard found in CFR 1910 and 1926. Copies of those standards can be acquired from the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20420
- B. Training:
 - 1. Beginning January 1, 2005, all employees of general contractor or subcontractors shall have the 10-hour OSHA certified Construction Safety course and /or other relevant competency training, as determined by VA CP with input from the ICRA team.
 - 2. Submit training records of all such employees for approval before the start of work.
- C. In addition, Contractor will be required to comply with other applicable Medical Center policies and safety regulations. These policies and regulations will be presented to the Contractor at the pre-construction meeting. Each of the Contractor's employees will be required to read the statement of policies and regulations and sign an acknowledgment that such policies and regulations are understood. Signed acknowledgment will be returned to the Project Superintendent.
- D. Contractors involved with the removal, alteration, or disturbance of asbestos type insulation or materials will be required to comply strictly with the regulations found in CFR 1910.1001 and the appropriate EPA regulations regarding disposal of asbestos. Assistance in identifying asbestos can be requested from the Medical Center's Industrial Hygienist and the Project Engineer.
- E. Contractors entering locations of asbestos contamination (i.e. pipe basements) shall be responsible for providing respiratory protection as required to their employees and ensuring respirators are worn in accordance with OSHA (CFR 1910.1001 (g)). Asbestos contaminated areas shall be defined on project drawings. The minimum equipment requirements will be a half-mask air-purifying respirator equipped with high efficiency filters and disposable Tyvek coveralls.
- F. Contractor, along with other submittals, and at least two weeks prior to bringing any materials on-site, must submit a complete list of chemicals the Contractor will use and MSDS for all hazardous materials as defined in OSHA 1910.1200 (d) Hazard Determination. Contracting Officer shall have final approval of all materials brought on site.
- G. The Medical Center Safety and Occupational Health Specialist will closely monitor all safety aspects of the project. Severe or constant violations may result in an immediate work stoppage or request for a Compliance Officer from the Occupational Safety and Health Administration.

- H. During all phases of demolition, construction and alterations, Contractors are required to understand and strictly follow NFPA 241 Standard for Safeguarding Construction, Alteration and Demolition Operations. The Medical Center's Safety and Occupational Health Specialist and Industrial Hygienist will closely monitor the work area for compliance. Appropriate action will be taken for non-compliance.

PART 2 - SPECIFIC VA MEDICAL CENTER FIRE & SAFETY POLICIES, PROCEDURES & REGULATIONS

2.1 INTRODUCTION

- A. The safety and fire protection of patients, employees, members of the public and government is one of continuous concern to this Medical Center.
- B. Contractors, their supervisors and employees are required to comply with Medical Center policies to ensure the occupational safety and health of all. Failure to comply may result in work stoppage.
- C. While working at this Medical Center, Contractors are responsible for the occupational safety and health of their employees. Contractors are required to comply with the applicable OSHA standards found in 29 CFR 1910 for general industry and 29 CFR 1926 for construction. Failure to comply with these standards may result in work stoppage and a request to the Area Director of OSHA for a Compliance Officer to inspect your work site.
- D. Contractors are to comply with the requirements found in the National Fire Protection Association (NFPA) #241, Building Construction and Demolition Operations and NFPA #51B, Fire Prevention in Use of Cutting and Welding Processes.
- E. Questions regarding occupational safety and health issues can be addressed to the Medical Center Safety and Occupational Health Specialist or the Medical Center Industrial Hygienist.
- F. Smoking is not permitted in any interior areas of the Medical Center, including all interior stairwells, tunnels, construction and/or service/maintenance sites. (Note: This includes interior posted patient smoking areas). Compliance with this policy by your direct and subcontracted labor force is required.

2.2 HAZARD COMMUNICATION

- A. Contractors shall comply with OSHA Standard 29 CFR 1926.59 Hazard Communication.
- B. Contractors shall submit to the VA Safety and Occupational Health Specialist, copies of Material Safety Data Sheets covering all hazardous materials to which the Contractor and VA employees are exposed.
- C. Contractors shall inform VA Safety and Occupational Health Specialist personnel of the hazards to which VA personnel and patients may be exposed.
- D. Contractors shall have a written Hazard Communication Program, which details how the Contractor will comply with 29 CFR 1926.59.

2.3 FIRES

All fires must be reported. In the event of a fire in your work area, use the nearest pull box station and also notify Medical Center staff in the immediate area. Emergency notification can also be accomplished by dialing ext. 3333.

This is the emergency phone only. Be sure to give the exact location from where you are calling. If a Contractor has experienced a fire and it was rapidly extinguished, you still must notify the Medical Center Safety Staff immediately (ext. 3333) such that an investigation of the fire can be accomplished. Delay in reporting a fire is unacceptable.

2.4 FIRE ALARMS, SMOKE DETECTION AND SPRINKLER SYSTEM

If the nature of your work requires the deactivation of the fire alarm, smoke detection or sprinkler system, you must notify the Resident Engineer and Medical Center Safety Staff. Notification must be made well in advance such that ample time can be allowed to deactivate the system and provide alternative measures for fire protection. Under no circumstance is a Contractor allowed to deactivate any of the fire protection systems in this Medical Center.

2.5 SMOKE DETECTORS

False alarms will not be tolerated. You are required to be familiar with the location of the smoke detectors in your work area. When performing cutting, burning or welding or any other operations that may cause smoke or dust, you must take steps to temporarily cover smoke detectors in order to prevent false alarms and maintain cleanliness of the smoke detectors. Failure to take the appropriate action will result in the Contracting Officer assessing actual costs for government response for each false alarm that is preventable. Prior to covering the smoke detectors, the Contractor will notify the VAMC Safety Staff, who will also be notified when the covers are removed at a minimum at the end of each work day.

2.6 HOT WORK PERMIT

- A. Hot work is defined as operations including, but not limited to, cutting, welding, thermal welding, brazing, soldering, grinding, thermal spraying, thawing pipes, or any similar situation. If such work is required, the Contractor must notify the Resident Engineer no less than one day in advance of such work. The VAMC Safety Staff will inspect the work area and issue a Hot Work Permit authorizing the performance of such work.
- B. All hot work will be performed in compliance with NFPA 241, Safeguarding Construction, Alteration, and Demolition Operations, and NFPA 51B, Fire Prevention in Use of Cutting and Welding Processes, and applicable OSHA standard. A hot work permit will only be issued to individuals familiar with these regulations.
- C. A hot work permit will only be issued when the following conditions are met:
 - 1. Combustible materials are located a minimum of 35 feet from the work site, or protected by flameproof covers or shielded with metal or fire-resistant guards or curtains.

2. Openings or cracks in walls, floors, or ducts within 35 feet of the site are covered to prevent the passage of sparks to adjacent areas.
 3. Where cutting or welding is done near walls, partitions, ceiling, or roof of combustible construction, fire resistant guards or shields are provided to prevent ignition.
 4. Cutting or welding on pipes or other metal in contact with combustible walls, ceilings or roofs is not undertaken if the work is close enough to cause ignition by conduction.
 5. Fully charged and operable fire extinguishers, appropriate for the type of possible fire, are available at the work area.
 6. When cutting or welding is done in close proximity to a sprinkler head, a wet rag is laid over the head during operation.
 7. Assure that nearby personnel are protected against heat, sparks, cut off, etc.
 8. Assure that a fire watch is at the site. Make a final check-up 30 minutes after completion of operations to detect and extinguish any smoldering fires.
- D. A fire watch shall be provided by the Contractor whenever cutting, welding, or performing other hot work. Fire watcher(s) shall:
1. Have fire-extinguishing equipment readily available and be trained in its use.
 2. Be familiar with facilities and procedures for sounding an alarm in the event of fire.
 3. Watch for fires in all exposed areas, sound the fire alarm immediately, and try to extinguish only within the capability of the portable extinguishing equipment available. In all cases if a fire is detected the alarm shall be activated even if the fire is extinguished.
 4. Maintain the watch for at least a half-hour after completion of operations to detect and extinguish smoldering fires.
- E. A Hot Work Permit will be issued only for the period necessary to perform such work. In the event the time necessary will exceed one day, a Hot Work Permit may be issued for the period needed; however, the VAMC Safety Staff will inspect the area daily. Hot work permit will apply only to the location identified on the permit. If additional areas involve hot work, then additional permits must be requested.
- F. Contractors will not be allowed to perform hot work processes without the appropriate permit.
- G. Any work involving the Medical Center's fire protection system will require notification of the VA Safety Staff and COR. Under no circumstances will the Contractor or employee attempt to alter or tamper with the existing fire protection system.
- H. Upon completion of all hot work, the VA Safety Staff will be notified to perform an inspection of the area. It is recommended that the inspection take place approximately 30 minutes after the hot work is completed to confirm that sparks or drops of hot metal are not present.

Only non-combustible materials will be used to construct temporary enclosures or barriers at this Medical Center. Plastic materials and fabrics used to construct dust barriers must conform to NFPA #701, Standard Methods of Fire Tests for Flame-Resistant Textiles and Films.

2.8 FLAMMABLE LIQUIDS

All flammable liquids will be kept in approved safety containers. Only the amount necessary for your immediate work will be allowed in the building. Flammable liquids must be removed from the building at the end of each day.

2.9 COMPRESSED GAS CYLINDERS

Compressed gas shall be secured in an upright position at all times. A suitable cylinder cart will be used to transport compressed gas cylinders. Only those compressed gas cylinders necessary for immediate work will be allowed in occupied buildings. All other will be stored outside of buildings in a designated area. Contractor will comply with applicable standards compressed gas cylinders found in 29 CFR 1910 and 1926 (OSHA).

2.10 INTERNAL COMBUSTION ENGINE-POWERED EQUIPMENT

Equipment powered by an internal combustion engine such as saws, compressors, generators and etc. will not be used in an occupied building. Special consideration may be given for unoccupied buildings only if the OSHA and NFPA requirements have been met.

2.11 POWDER ACTIVATED TOOLS

Powder activated tools will be kept in a secured manner at all times. When not in use, the tools will be locked up. When in use, the operator will have the tool under his immediate control.

2.12 TOOLS

- A. Under no circumstances is equipment, tools and other items of work to be left unattended for any reason. All tools, equipment and items of work must be under the immediate control of your employee.
- B. If for some reason a work area must be left unattended, then it will be required that tools and other equipment be placed in an appropriate box or container and locked. All toolboxes, containers or any other device used for the storage of tool and equipment will be provided with a latch and padlock. All tool boxes, containers or any other device used for the storage of tools and equipment, will be locked at all times except for putting in and removing tools.
- C. All doors to work areas will be closed and locked when room are left unattended. Failure to comply with this directive will be considered a violation of VA Regulations 1.218 (b), Failure to comply with signs of a directive and restrictive nature posted for safety purposes, subject to a \$50.00 fine. Subsequent similar violations may result in both imposition of such a fine as well as the Contracting Officer taking action

under the Contract's Accident Prevention Clause (FAR 52.236-13) to suspend all contract work until violations such may be satisfactorily resolved or under FAR 52.236-5 Material and Workmanship Clause to remove from the work site any personnel deemed by the Contracting Officer to be careless to the point of jeopardizing the welfare of Facility patients or staff.

- D. You must report to the VA Police Department, Ext. 3333, any tools or equipment that are missing.
- E. Tools and equipment found unattended will be confiscated and removed from the work area.

2.13 LADDERS

It is required that ladders not be left unattended in an upright position. Ladders must be attended at all times or taken down and chained securely to a stationary object.

2.14 SCAFFOLDS

All scaffolds will be attended at all times. When not in use, an effective barricade (fence) will be erected around the scaffold to prevent use by unauthorized personnel.

2.15 EXCAVATIONS

All excavations left unattended will be provided with a barricade suitable to prevent entry by unauthorized persons.

2.16 STORAGE

You must make prior arrangements with the COR for the storage of building materials. Storage will not be allowed to accumulate in the Medical Center buildings.

2.17 TRASH AND DEBRIS, CLEANING

You must remove all trash and debris from the work area and perform at least general cleaning on a daily basis. Trash and debris will not be allowed to accumulate inside or outside of the buildings. You are responsible for making arrangements for removal of trash from the Medical Center facility.

2.18 PROTECTION OF FLOORS

It may be necessary at times to take steps to protect floors from dirt, debris, paint, etc. A tarp or other protective covering may be used. However, you must maintain a certain amount of floor space for the safe passage of pedestrian traffic. Common sense must be used in this matter.

2.19 SIGNS

Signs must be placed at the entrance to work areas warning people of your work. Signs must be suitable for the condition of the work. Small pieces of paper with printing or writing are not acceptable. The VAMC Safety Officer can be consulted in this matter.

2.20 ACCIDENTS AND INJURIES

Contractors must report all accidents and injuries involving your employees. The Contractor may use the VAMC for emergency care only.

2.21 CONFINED SPACE ENTRY

- A. Contractor will be informed that the workplace contains permit required confined space and that permit space entry is allowed only through compliance with a permit space program meeting the requirements of 29 CFR 1910.146 and 1926.21 (b)(6).
- B. Contractor will be apprised of the elements including the hazards identified and the Medical Center's (last employer) experience with the space that makes the space in question a permit space.
- C. Contractor will be apprised of any precautions or procedures that the Medical Center has implemented for the protection of employees in or near permit space where Contractor personnel will be working.
- D. Medical Center and Contractor will coordinate entry operations when both Medical Center personnel and Contractor personnel will be working in or near permit spaces as required by 29 CFR 1910.146 (d)(ii) and 1926.21 (b)(6).
- E. Contractor will obtain any available information regarding permit space hazards and entry operation from the Medical Center.
- F. At the conclusion of the entry operations the Medical Center and Contractor will discuss any hazards confronted or created in permit spaces.
- G. The Contractor is responsible for complying with 29 CFR 1910.246 (d) through (g) and 1926.21 (b)(6). The Medical Center, upon request, will provide rescue and emergency services required by 29 CFR 1910.246 (k) and 1926.21 (b)(6).

2.22 CONTRACTOR PARKING

There will be no parking on the grass or Contractor vehicle parking at work sites. Contractors will deliver supplies, tools etc., drop them off at the work site, return their vehicles to the designated project parking area. The designated parking area is as noted on the project plans or in the specifications. Under no circumstances will the contractor park in designated patient parking areas.

2.23 SMOKE BARRIER PENETRATION PERMIT

Contractor shall obtain smoke barrier penetration permit from Medical Center Safety Office prior to penetration of any defined smoke barrier. Comply with Medical Center policies and requirements for this work.

2.24 CONTRACT HEALTH ASSESSMENT

Any contracted individual who will be working in patient care areas (or with persons who provide direct patient care), or working closely with other employees, or with patient care items, MUST provide documentation of the following:

- PPD Skin Test – results from the last three months will be accepted. If PPD is positive, the individual MUST provide documentation of the absence of active TB (Chest X-ray).

- Hepatitis B immunization, or declination – those contracted individuals who will have contact with blood, body fluids, or other potentially infectious materials MUST provide documentation of a Hepatitis B Vaccination series or declination.
- Documentation of Bloodborne Pathogen Training must be maintained.

It is the contractor's responsibility to provide documentation of all the above prior to starting work. Copies of the documentation are to be maintained with the project/contract files. The Contracting Officer and COR should be notified of any changes in individual status with appropriate documentation. In the event of an exposure, it is required that the contractor (employer) has a plan that must be followed to protect the individual contract worker. Records must be maintained as required by CFR 1910.1030.

2.25 ASBESTOS WORK AND OTHER HAZARDOUS MATERIAL ABATEMENT

Contractor shall follow all contract requirements for work with asbestos and other hazardous materials abatement. Contractor is responsible for submitting all waste manifests to show proper disposal of materials prior to completion of project.

W. G. (BILL) HEFNER VA MEDICAL CENTER
SALISBURY, NORTH CAROLINA

MEDICAL CENTER MEMORANDUM 659-138-25
2010

DECEMBER 30,

CHANGE 1

PROJECT DEVELOPMENT AND IMPLEMENTATION

1. PURPOSE: To establish medical center policy and procedure for the development of construction projects to ensure compliance with all applicable code and VA requirements and implementation that provides necessary aspects of the project scope in a cost effective manner.

2. POLICY:

a. It is the policy of the Salisbury VA Medical Center (SVAMC) to design projects that comply with VA Construction Standards, VA Barrier-Free Design Handbook, Life Safety Code, Uniform Plumbing Code, VA HVAC Design Criteria, Uniform Building Code, Local Building Codes, National Fire Protection Association (NFPA) Codes and medical center Infection Control Policy.

b. All designs for new construction will include accessibility to parking lots, including reserved parking. All SVAMC buildings will have at least one entrance/exit that is accessible to the handicapped. This includes, but is not limited to, handicap ramps, automatic doors or doors with appropriate hardware to render them accessible to the handicapped, Braille signage, tactile warning strips and handrails.

c. The SVAMC will also provide handicap accessibility to all public areas, amenities, and elevators.

3. RESPONSIBILITY:

a. Project Design (Development Phase):

(1) Requesting services will provide project scope input prior to and during the design phase, which will incorporate criteria and special requirements for equipment and procedures related to the design area. Upon completion of the design, the using service chief will sign the design drawing.

(2) Project design staff, including architect/engineering (A/E) firms, shall certify to the Chief, Facilities Management Service (FMS) that all applicable codes have been met by initialing the "Drawn By" and "Checked By" blocks on the project drawings. When a project is designed or developed for construction that impacts life safety or fire protection with greater than 50% of the work involving fire safety improvements or changes, the A/E for the design must have a Fire Protection Engineer or staff who is a qualified professional with knowledge of NFPA Fire Codes in accordance with VHA Directive 2005-007, Fire Code Reviews Of Delegated Construction Projects, dated February 15, 2005. A/E firms shall also apply their seals.

(3) The project design staff will review the H-08-13 "Checklist for Barrier Free Design" and other design criteria to assure projects are designed to eliminate all deficiencies. Special

attention shall be paid to new parking areas, building entrances, public amenities, and elevators. The project design staff and an Infection Control representative will perform an infection control assessment and complete associated checklists (see Attachment B) using the Infection Control Guidelines (see Attachment A).

(4) Chief, FMS shall be responsible for certifying that each project complies with the appropriate codes.

(5) Copies of the approved drawings and specifications are prepared for the CO, so that the construction phase may be accomplished.

b. Project Construction (Implementation Phase):

(1) After contract award the Contracting Officers Technical Representative (COTR) will participate in the pre-construction conference held with the CO, the contractor, Infection Control representative, Safety representative, Maintenance and Operations representative and a representative from the requesting service. In this meeting the COTR will provide the contractor with information regarding safety regulations, permit requirements for welding/open flame devices and confined space entry, policies on parking, identification badges, door keys, smoking, hazardous materials and waste management, fire safety and prevention and control of infection. Additionally the contractor will receive samples of a safety letter, cost breakdown, progress schedule graph, daily log, progress payment request form and payroll sheet, as well as a construction fire safety checklist and an infection control checklist (Attachment C).

(2) Prior to beginning construction activities, the COTR, along with an Infection Control representative, will complete an infection control risk assessment, and, where indicated by the assessment, an infection control construction and pre-occupancy checklist (Attachment A). These documents will be used throughout the construction phase to assure compliance with infection control requirements.

(3) Prior to beginning construction activities, the COTR and a Safety representative will complete a safety assessment, and, where indicated by the assessment, develop interim life safety measures to be used throughout the construction phase to assure compliance with the Life Safety Code. Interim Life Safety Measures are to be developed if at any time the effectiveness of the fire protection system is decreased.

(4) During the construction phase, the COTR will make regular site visits to assure compliance with the drawings and specifications and all safety and infection control regulations and requirements. He/she will report any deficiencies to the CO for corrective actions. Additionally, he/she will advise the CO about the need for any contractual changes as the construction progresses and provide cost estimates as appropriate.

(5) During the construction phase, the COTR will review and process progress payment requests and contract change proposals from the contractor. He/she will maintain a contract file that includes all documentation relating to the contract, daily logs, construction photographs, etc. At the conclusion of the contract he/she will participate in the final inspection and process the final payment, final inspection report and final settlement report, along with a capitalization report to Resource Management Service.

4. REFERENCE:

TJC Comprehensive Accreditation Manual for Hospitals

5. RESCISSION: Medical Center Memorandum 138-25, dated August 8, 2007.

6. FOLLOW-UP RESPONSIBILITY: Chief, Facilities Management.

7. AUTOMATIC RESCISSION DATE: December 30, 2013 (Change 1)

8. ANNUAL REVIEW:

First Year Review: _____
Responsible Official Date

Second Year Review: _____
Responsible Official Date

/s/

PAUL M. RUSSO, MHSA, FACHE, RD
Director


Attachments


Fire/ Smoke Barrier Penetration Permit WG (Bill) Hefner VA Medical Center


- I. **PURPOSE:** To provide guidance for maintenance and restoration of the integrity of all walls such: all smoke and fire barriers to include all pipe chases, floor slabs and corridor walls above and below the ceiling.
- II. **POLICY:** This SOP establishes the assurance that any time a penetration is made in any space {smoke barriers, fire barriers, pipe chases, OI&T closets, mechanical rooms {et-al}, floors and any walls above or below the ceiling} it shall be sealed to assure that smoke and fire will not spread to adjacent space. It is required by the NFPA Life Safety Code 101 that the integrity of all walls and floors are maintained to prevent the migration of smoke or fire. This includes all vertical {wall} and horizontal {floor} penetrations.
- III. **RESPONSIBILITIES:** - The responsibility of assuring that all walls and floors are free of penetrations lies collectively with Facilities Management Service (FMS), Office of Information and Technology (OI&T), Police Service. All will be responsible for assuring that when fire barriers and smoke barriers, floor and walls are breeched by work necessitating penetrations are to be sealed with approved fire caulk as listed in paragraph IV par "a" below.
 - a. *FMS, Police and OI&T:* – All walls and floors are to be considered as fire/smoke barrier partitions. If penetrations are made by *FMS, Police and OI&T* staff they must be sealed with approved fire caulking material to assure smoke and fire proof integrity at close of business. *FMS, Police and OI&T* will assure that this critical step is done. See Attach "A".
 - b. *Contractors* – All contractors who must perform work on fire/smoke barrier partitions et-al as indicated above are responsible to seal them with approved fire caulking material and assure smoke and fire integrity. See Attach "A".
 - c. *Contracting Officers Technical Representative (COTR)* – All FMS, OI&T, Police staffs who are COTR's on projects that necessitate the breeching of fire & smoke barriers shall have the duty of assuring that the vendors/contractors performing the work shall correctly seal all penetrations. The COTR responsible shall include this requirement in all projects at this Medical Center. See Attach "A".
- IV **PROCEDURES:** - Prior to making any penetrations, the individual performing the work will obtain the Barrier Penetration Permit from Safety. Any time construction requires penetration through a smoke or fire barrier, pipe chase any wall or floor in order to route conduit, communication cables, piping for various utilities through the barrier, this must be sealed with approved fire proofing material. Other materials such as fiber glass insulation, rock-wool insulation, drywall compound is not compliant. If the penetration is made in order to route conduit or piping through the barrier, a seal preventing the migration of smoke or fire must be made around the materials that pass through the fire and smoke barrier to include all floor penetrations and wall penetrations. This shall be done with a suitable fire stopping material.

**Fire/ Smoke Barrier Penetration Permit
WG (Bill) Hefner VA Medical Center**

- a. Only the following types of fire stopping material shall be acceptable:
 1. Hilti Brand:
 - i. FIRE STOP PUTTY STICK CP-618
 - ii. FIRE CAULK FS-ONE 259579
 - iii. FIRE PLUG CP-658T 378288
 - iv. FIRE STOP MORTAR CP-637
 - v. FIRE STOP BOARD CP-6755
 2. 3M BRAND
 - i. BLUE FIRE CAULK FD-150+
- b. Proof of material used must be verified prior to use. This will be filed with the permit. See Attach "A".
- c. Work Area Pre-Inspection:
 1. Check both sides of barrier for safety and to ensure no utilities or obstructions.
 2. Check for need to cover smoke heads, or disable devices in immediate area.
 3. Establish ILSM if work will be longer than close of business when permit is granted.
 4. Workable and appropriate fire extinguishers are in work area.
- d. Issuing Permit: {Refer to Attach A}
 1. One copy will be made for the requestor; the original kept by issuing office to be returned to Safety.
- e. Closing out Permit: {Refer to Attach A}
 1. All permitted work will be inspected for closeout by the issuing manager and the requestor at the end of each work day.
 2. All penetrations/breeches made fire or smoke barriers, walls and floors must be filled with fireproof material prior to requestor leaving for the day.
 3. Complete the appropriate sections of the permit on the original page.
 4. Copy/print original for the issuing manager and send original to FMS, Safety Manager.
 - a. This can be scanned in to be sent email, or sending a hard copy


Peter R Bader
Ch. FMS
Date 12-19-11

 Acting Chief
Steve Elliott
Ch. Police
Jason Harrington
Date 12/19/11


Deborah Gunn
Ch. O&T
Facility CIO
Date 12/19/2011

ATTACH: A

**Fire/ Smoke Barrier Penetration Permit
WG (Bill) Hefner VA Medical Center**

Standard Operating Procedure # 138-999

Date: _____	Building: _____	Location: _____
Nature of work to be done: _____		
Material to pass through: _____		
Comments: _____		

<u>PERMISSION GRANTED</u>	
VA Shop: _____	Contractor: _____
Name/Title: _____	Name/Title: _____
Time started: _____	
Permission granted by: _____ Representing: _____	

<u>CLOSE OUT</u>	
Penetration sealed with approved Fire Caulking: Y _____ N _____	
If not; must be sealed prior to closing out this permit and by end of day.	
Time Complete/Accepted: _____	
Closed out by: _____ Representing: _____	
Follow up Issues identified during inspection: _____	
THIS PERMIT SHALL BE KEPT ON FILE IN SAFETY B-21-B.	

- Photo copy for requestor.
- Original for Safety Manager, Fire Safety, COTR or designee

ATTACH: A

Penetration Permit WG (Bill) Hefner VA Medical Center
Standard Operating Procedure # 138-XX

This permit is required for any penetrations to smoke or fire barrier, pipe chase, any wall or floor throughout the W.G. (Bill) Hefner VA Medical Center.

Date: _____ Building, _____
Floor, _____ Room #, _____
Stairwell #, _____ Floor, _____
Service/function: _____
Employee _____ Contractor _____

REQUEST APPROVAL

Purpose of work to be done: _____

Describe material passing thru barrier:
i.e.: cable, conduit, pipe, duct

Type of barrier wall:

- ☐ Smoke barrier
☐ One-hour fire barrier
☐ Two-hour fire barrier
☐ Non-rated wall

New penetration or reopening of existing
penetration: _____

Employee _____
Contractor _____

Safety Manager or designee grants
permission to perform this work:

Name/Title _____
Date _____
Time started: _____

CLOSE OUT/INSPECTION

Penetration sealed with approved Fire
Caulking: Y _____ N _____
If not; must be sealed prior to closing
out this permit.

Safety Manager or designee: final
inspection completed by:

Name/Title _____
Date _____
Time ended: _____

Follow up Issues identified during
inspection:

THIS PERMIT SHALL BE KEPT ON FILE
IN SAFETY MANAGEMENT.

