

**SECTION 01 35 26  
SAFETY REQUIREMENTS**

**1.1 APPLICABLE PUBLICATIONS:**

A. Latest publications listed below form part of this Article to extent referenced. Publications are referenced in text by basic designations only.

B. American Society of Safety Engineers (ASSE):

A10.1-2011.....Pre-Project & Pre-Task Safety and Health  
Planning

A10.34-2012.....Protection of the Public on or Adjacent to  
Construction Sites

A10.38-2013.....Basic Elements of an Employer’s Program to  
Provide a Safe and Healthful Work Environment  
American National Standard Construction and  
Demolition Operations

C. American Society for Testing and Materials (ASTM):

E84-2013.....Surface Burning Characteristics of Building  
Materials

D. The Facilities Guidelines Institute (FGI):

FGI Guidelines-2010Guidelines for Design and Construction of  
Healthcare Facilities

E. National Fire Protection Association (NFPA):

10-2013.....Standard for Portable Fire Extinguishers

30-2012.....Flammable and Combustible Liquids Code

51B-2014.....Standard for Fire Prevention During Welding,  
Cutting and Other Hot Work

70-2014.....National Electrical Code

70B-2013.....Recommended Practice for Electrical Equipment  
Maintenance

70E-2015 .....Standard for Electrical Safety in the Workplace

99-2012.....Health Care Facilities Code

241-2013.....Standard for Safeguarding Construction,  
Alteration, and Demolition Operations

F. The Joint Commission (TJC)

TJC Manual .....Comprehensive Accreditation and Certification  
Manual

G. U.S. Occupational Safety and Health Administration (OSHA):

29 CFR 1904 .....Reporting and Recording Injuries & Illnesses

29 CFR 1910 .....Safety and Health Regulations for General  
Industry

29 CFR 1926 .....Safety and Health Regulations for Construction  
Industry

CPL 2-0.124.....Multi-Employer Citation Policy

H. VHA Directive 2005-007

**1.2 DEFINITIONS:**

A. Critical Lift. A lift with the hoisted load exceeding 75% of the crane's maximum capacity; lifts made out of the view of the operator (blind picks); lifts involving two or more cranes; personnel being hoisted; and special hazards such as lifts over occupied facilities, loads lifted close to power-lines, and lifts in high winds or where other adverse environmental conditions exist; and any lift which the crane operator believes is critical.

B. OSHA "Competent Person" (CP). One who is capable of identifying existing and predictable hazards in the surroundings and working conditions which are unsanitary, hazardous or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them (see 29 CFR 1926.32(f)).

C. "Qualified Person" means one who, by possession of a recognized degree, certificate, or professional standing, or who by extensive knowledge, training and experience, has successfully demonstrated his ability to solve or resolve problems relating to the subject matter, the work, or the project.

D. High Visibility Accident. Any mishap which may generate publicity or high visibility.

E. Accident/Incident Criticality Categories:

No impact - near miss incidents that should be investigated but are not required to be reported to the VA;

Minor incident/impact - incidents that require first aid or result in minor equipment damage (less than \$5000). These incidents must be investigated but are not required to be reported to the VA;

Moderate incident/impact - Any work-related injury or illness that results in:

1. Days away from work (any time lost after day of injury/illness onset);
2. Restricted work;
3. Transfer to another job;
4. Medical treatment beyond first aid;
5. Loss of consciousness;
6. A significant injury or illness diagnosed by a physician or other licensed health care professional, even if it did not result in (1) through (5) above or,
7. any incident that leads to major equipment damage (greater than \$5000).

These incidents must be investigated and are required to be reported to the VA;

Major incident/impact - Any mishap that leads to fatalities, hospitalizations, amputations, and losses of an eye as a result of contractors' activities. Or any incident which leads to major property damage (greater than \$20,000) and/or may generate publicity or high visibility. These incidents must be investigated and are required to be reported to the VA as soon as practical, but not later than 2 hours after the incident.

- E. Medical Treatment. Treatment administered by a physician or by registered professional personnel under the standing orders of a physician. Medical treatment does not include first aid treatment even through provided by a physician or registered personnel.

**1.3 REGULATORY REQUIREMENTS:**

- A. In addition to the detailed requirements included in the provisions of this contract, comply with 29 CFR 1926, comply with 29 CFR 1910 as incorporated by reference within 29 CFR 1926, comply with ASSE A10.34, and all applicable federal laws, ordinances, criteria, rules and regulations. Submit matters of interpretation of standards for resolution before starting work. Where the requirements of this specification, applicable laws, criteria, ordinances, regulations, and referenced documents vary, the most stringent requirements govern except with specific approval and acceptance by the Contracting Officer Representative.

**1.4 ACCIDENT PREVENTION PLAN (APP):**

- A. The APP (aka Construction Safety & Health Plan) shall interface with the Contractor's overall safety and health program. Include any portions of the Contractor's overall safety and health program referenced in the APP in the applicable APP element and ensure it is site-specific. The Government considers the Prime Contractor to be the "controlling authority" for all worksite safety and health of each subcontractor(s). Contractors are responsible for informing their subcontractors of the safety provisions under the terms of the contract and the penalties for noncompliance, coordinating the work to prevent one craft from interfering with or creating hazardous working conditions for other crafts, and inspecting subcontractor operations to ensure that accident prevention responsibilities are being carried out.

- B. The APP shall be prepared as follows:

1. Written in English by a qualified person who is employed by the Prime Contractor articulating the specific work and hazards pertaining to the contract (model language can be found in ASSE A10.33). Specifically articulating the safety requirements found within these VA contract safety specifications.

2. Address both the Prime Contractors and the subcontractors work operations.
3. State measures to be taken to control hazards associated with materials, services, or equipment provided by suppliers.
4. Address all the elements/sub-elements and in order as follows:
  - a. **SIGNATURE SHEET.** Title, signature, and phone number of the following:
    - 1) Plan preparer (Qualified Person such as corporate safety staff person or contracted Certified Safety Professional with construction safety experience);
    - 2) Plan approver (company/corporate officers authorized to obligate the company);
    - 3) Plan concurrence (e.g., Chief of Operations, Corporate Chief of Safety, Corporate Industrial Hygienist, project manager or superintendent, project safety professional). Provide concurrence of other applicable corporate and project personnel (Contractor).
  - b. **BACKGROUND INFORMATION.** List the following:
    - 1) Contractor;
    - 2) Contract number;
    - 3) Project name;
    - 4) Brief project description, description of work to be performed, and location; phases of work anticipated (these will require an AHA).
  - c. **STATEMENT OF SAFETY AND HEALTH POLICY.** Provide a copy of current corporate/company Safety and Health Policy Statement, detailing commitment to providing a safe and healthful workplace for all employees. The Contractor's written safety program goals, objectives, and accident experience goals for this contract should be provided.

d. **RESPONSIBILITIES AND LINES OF AUTHORITIES.** Provide the following:

- 1) A statement of the employer's ultimate responsibility for the implementation of his SOH program;
- 2) Identification and accountability of personnel responsible for safety at both corporate and project level. Contracts specifically requiring safety or industrial hygiene personnel shall include a copy of their resumes.
- 3) The names of Competent and/or Qualified Person(s) and proof of competency/qualification to meet specific OSHA Competent/Qualified Person(s) requirements must be attached.;
- 4) Requirements that no work shall be performed unless a designated competent person is present on the job site;
- 5) Requirements for pre-task Activity Hazard Analysis (AHAs);
- 6) Lines of authority;
- 7) Policies and procedures regarding noncompliance with safety requirements (to include disciplinary actions for violation of safety requirements) should be identified;

e. **SUBCONTRACTORS AND SUPPLIERS.** If applicable, provide procedures for coordinating SOH activities with other employers on the job site:

- 1) Identification of subcontractors and suppliers (if known);
- 2) Safety responsibilities of subcontractors and suppliers.

f. **TRAINING.**

- 1) Site-specific SOH orientation training at the time of initial hire or assignment to the project for every employee before working on the project site is required.
- 2) Mandatory training and certifications that are applicable to this project (e.g., explosive actuated tools, crane operator, rigger, crane signal person, fall protection, electrical lockout/NFPA 70E, machine/equipment lockout, confined space, etc...) and any requirements for periodic retraining/recertification are required.

- 3) Procedures for ongoing safety and health training for supervisors and employees shall be established to address changes in site hazards/conditions.
- 4) OSHA 10-hour training is required for all workers on site and the OSHA 30-hour training is required for Trade Competent Persons (CPs)

**g. SAFETY AND HEALTH INSPECTIONS.**

- 1) Specific assignment of responsibilities for a minimum daily job site safety and health inspection during periods of work activity: Who will conduct (e.g., "Site Safety and Health CP"), proof of inspector's training/qualifications, when inspections will be conducted, procedures for documentation, deficiency tracking system, and follow-up procedures.

**i. PLANS (PROGRAMS, PROCEDURES) REQUIRED.** Based on a risk assessment of contracted activities and on mandatory OSHA compliance programs, the Contractor shall address all applicable occupational, patient, and public safety risks in site-specific compliance and accident prevention plans. These Plans shall include but are not be limited to procedures for addressing the risks associates with the following:

- 3) Fire Prevention;
- 12) General Electrical Safety;
- 14) Site-Specific Fall Protection & Prevention;
- 28) Public (Mandatory compliance with ANSI/ASSE A10.34-2012).

**1.6 PRECONSTRUCTION CONFERENCE:**

- A. Contractor representatives who have a responsibility or significant role in implementation of the accident prevention program, as required by 29 CFR 1926.20(b)(1), on the project shall attend the preconstruction conference to gain a mutual understanding of its implementation. This includes the project superintendent, subcontractor superintendents, and any other assigned safety and health professionals.

**1.8 TRAINING:**

- A. The designated Prime Contractor must meet the requirements of all applicable OSHA standards and be capable (through training, experience, and qualifications) of ensuring that the requirements of 29 CFR 1926.16 and other appropriate Federal, State and local requirements are met for the project. As a minimum must have completed the OSHA 30-hour Construction Safety class and have five (5) years of construction industry safety experience or three (3) years if he/she possesses a Certified Safety Professional (CSP) or certified Construction Safety and Health Technician (CSHT) certification or have a safety and health degree from an accredited university or college.
- D. All other construction workers shall have the OSHA 10-hour Construction Safety Outreach course and any necessary safety training to be able to identify hazards within their work environment.

**1.10 ACCIDENTS, OSHA 300 LOGS, AND MAN-HOURS:**

- B. Conduct an accident investigation for all Minor, Moderate and Major incidents as defined in paragraph DEFINITIONS, and property damage accidents resulting in at least \$20,000 in damages, to establish the root cause(s) of the accident. Complete the VA Form 2162 (or equivalent), and provide the report to the COR and Facility Safety Manager within 5 calendar days of the accident.
- C. A summation of all man-hours worked by the contractor and associated sub-contractors for each month will be reported to the COR monthly.
- D. A summation of all Minor, Moderate, and Major incidents experienced on site by the contractor and associated sub-contractors for each month will be provided to the Contracting Officer Representative (COR) as requested.

**1.11 PERSONAL PROTECTIVE EQUIPMENT (PPE):**

- A. PPE is governed in all areas by the nature of the work the employee is performing. For example, specific PPE required for performing work on electrical equipment is identified in NFPA 70E, Standard for Electrical Safety in the Workplace.
- B. Mandatory PPE includes:

1. Hard Hats - unless written authorization is given by the Contracting Officer Representative in circumstances of work operations that have limited potential for falling object hazards such as during finishing work or minor remodeling. With authorization to relax the requirement of hard hats, if a worker becomes exposed to an overhead falling object hazard, then hard hats would be required in accordance with the OSHA regulations.
2. Safety glasses - unless written authorization is given by the Contracting Officer Representative in circumstances of no eye hazards, appropriate safety glasses meeting the ANSI Z.87.1 standard must be worn by each person on site.
3. Appropriate Safety Shoes - based on the hazards present, safety shoes meeting the requirements of ASTM F2413-11 shall be worn by each person on site unless written authorization is given by the Contracting Officer Representative in circumstances of no foot hazards.
4. Hearing protection - Use personal hearing protection at all times in designated noise hazardous areas or when performing noise hazardous tasks.

#### **1.12 INFECTION CONTROL**

- A. Infection Control is critical in all medical center facilities. Exterior construction activities that creates dust in some other manner must be controlled.
  1. Class II requirements:
    - a. During Construction Work:
      - 1) Notify the COR.
      - 2) Provide active means to prevent airborne dust from dispersing into atmosphere such as wet methods or tool mounted dust collectors where possible.
      - 3) Water mist work surfaces to control dust while cutting.
      - 4) Seal unused doors with duct tape.
      - 5) Block off and seal air vents.

- 6) Remove or isolate HVAC system in areas where work is being performed.

b. Upon Completion:

- 1) Wipe work surfaces with cleaner/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) Upon completion, restore HVAC system where work was performed.
- 5) Notify the Contracting Officer Representative.

B. Barriers shall be erected as required based upon classification (Class III & IV requires barriers) and shall be constructed as follows:

1. Class III and IV - closed door with masking tape applied over the frame and door is acceptable for exterior projects as needed.

C. Products and Materials:

1. Sheet Plastic: Fire retardant polystyrene, 6-mil thickness meeting local fire codes
2. High Efficiency Particulate Air-Equipped filtration machine rated at 95% capture of 0.3 microns including pollen, mold spores and dust particles. HEPA filters should have ASHRAE 85 or other prefilter to extend the useful life of the HEPA. Provide both primary and secondary filtrations units. Maintenance of equipment and replacement of the HEPA filters and other filters will be in accordance with manufacturer's instructions.
3. Adhesive Walk-off Mats: Provide minimum size mats of 24 inches x 36 inches
4. Disinfectant: Hospital-approved disinfectant or equivalent product
5. Portable Ceiling Access Module

D. Before any construction on site begins, all contractor personnel involved in the construction or renovation activity shall be educated

and trained in infection prevention measures established by the medical center.

- E. A dust control program will be establish and maintained as part of the contractor's infection preventive measures in accordance with the FGI Guidelines for Design and Construction of Healthcare Facilities. Prior to start of work, prepare a plan detailing project-specific dust protection measures with associated product data, including periodic status reports, and submit to Facility CSC for review for compliance with contract requirements.
- F. Medical center Infection Control personnel will monitor for airborne disease (e.g. aspergillosis) during construction. A baseline of conditions will be established by the medical center prior to the start of work and periodically during the construction stage to determine impact of construction activities on indoor air quality with safe thresholds established.
- H. In general, the following preventive measures shall be adopted during construction to keep down dust and prevent mold.
  - 1. Contractor shall verify that construction exhaust to exterior is not reintroduced to the medical center through intake vents, or building openings. HEPA filtration is required where the exhaust dust may reenter the medical center.
- I. Final Cleanup:
  - 1. Upon completion of project, or as work progresses, remove all construction debris from above ceiling, vertical shafts and utility chases that have been part of the construction.
  - 2. Perform vacuum cleaning of all surfaces in the construction area. This includes walls, ceilings, floor, etc.
- J. Exterior Construction
  - 1. Contractor shall verify that dust will not be introduced into the medical center through intake vents, or building openings. HEPA filtration on intake vents is required where dust may be introduced.
  - 2. Dust created from disturbance of soil such as from vehicle movement will be wetted with use of a water truck as necessary

3. All cutting, drilling, grinding, sanding, or disturbance of materials shall be accomplished with tools equipped with either local exhaust ventilation (i.e. vacuum systems) or wet suppression controls.

#### 1.14 FIRE SAFETY

- A. Site and Building Access: Maintain free and unobstructed access to facility emergency services and for fire, police and other emergency response forces in accordance with NFPA 241.
- C. Separate temporary facilities, such as trailers, storage sheds, and dumpsters, from existing buildings and new construction by distances in accordance with NFPA 241. For small facilities with less than 6 m (20 feet) exposing overall length, separate by 3m (10 feet).
- F. Means of Egress: Do not block exiting for occupied buildings, including paths from exits to roads. Minimize disruptions and coordinate with the Contracting Officer Representative.
- H. Fire Extinguishers: Provide and maintain extinguishers in construction areas and temporary storage areas in accordance with 29 CFR 1926, NFPA 241 and NFPA 10.
- L. Existing Fire Protection: Do not impair automatic sprinklers, smoke and heat detection, and fire alarm systems, except for portions immediately under construction, and temporarily for connections. Provide fire watch for impairments more than 4 hours in a 24-hour period. Request interruptions in accordance with Article, OPERATIONS AND STORAGE AREAS, and coordinate with the COR and Facility Safety Manager. All existing or temporary fire protection systems (fire alarms, sprinklers) located in construction areas shall be tested as coordinated with the medical center. Parameters for the testing and results of any tests performed shall be recorded by the medical center and copies provided to the Resident Engineer.
- P. Smoking: Smoking is prohibited in and adjacent to construction areas inside existing buildings and additions under construction. In separate

and detached buildings under construction, smoking is prohibited except in designated smoking rest areas.

- Q. Dispose of waste and debris in accordance with NFPA 241. Remove from job site daily.

#### **1.15 ELECTRICAL**

- A. All electrical work shall comply with NFPA 70 (NEC), NFPA 70B, NFPA 70E, 29 CFR Part 1910 Subpart J - General Environmental Controls, 29 CFR Part 1910 Subpart S - Electrical, and 29 CFR 1926 Subpart K in addition to other references required by contract.
- B. All qualified persons performing electrical work under this contract shall be licensed journeyman or master electricians. All apprentice electricians performing under this contract shall be deemed unqualified persons unless they are working under the immediate supervision of a licensed electrician or master electrician.
- C. All electrical work will be accomplished de-energized and in the Electrically Safe Work Condition ( refer to NFPA 70E for Work Involving Electrical Hazards, including Exemptions to Work Permit). Any Contractor, subcontractor or temporary worker who fails to fully comply with this requirement is subject to immediate termination in accordance with FAR clause 52.236-5(c)
  - 1. Development of a Hazardous Electrical Energy Control Procedure is required prior to de-energization. A single Simple Lockout/Tagout Procedure for multiple work operations can only be used for work involving qualified person(s) de-energizing one set of conductors or circuit part source. Task specific Complex Lockout/Tagout Procedures are required at all other times.
  - 2. Verification of the absence of voltage after de-energization and lockout/tagout is considered "energized electrical work" (live work) under NFPA 70E, and shall only be performed by qualified persons wearing appropriate shock protective (voltage rated) gloves and arc rate personal protective clothing and equipment, using Underwriters Laboratories (UL) tested and appropriately rated contact electrical testing instruments or equipment appropriate for the environment in which they will be used.

3. Personal Protective Equipment (PPE) and electrical testing instruments will be readily available for inspection by the COR and Facility Safety Manager.

#### **1.16 FALL PROTECTION**

- A. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) for ALL WORK, unless specified differently or the OSHA 29 CFR 1926 requirements are more stringent, to include residential (wood) construction and scaffolding work.
  1. The use of a Safety Monitoring System (SMS) as a fall protection method is prohibited.
  2. The use of Controlled Access Zone (CAZ) as a fall protection method is prohibited.
  3. A Warning Line System (WLS) may ONLY be used on floors or flat or low-sloped roofs (between 0 - 18.4 degrees or 4:12 slope) and shall be erected around all sides of the work area (See 29 CFR 1926.502(f) for construction of WLS requirements). Working within the WLS does not require FP. No worker shall be allowed in the area between the roof or floor edge and the WLS without FP. FP is required when working outside the WLS.
  4. Fall protection while using a ladder will be governed by the OSHA requirements.

#### **1.17 SCAFFOLDS AND OTHER WORK PLATFORMS**

- A. All scaffolds and other work platforms construction activities shall comply with 29 CFR 1926 Subpart L.
- B. The fall protection (FP) threshold height requirement is 6 ft (1.8 m) as stated in Section 1.16.
- C. The following hierarchy and prohibitions shall be followed in selecting appropriate work platforms.
  1. Scaffolds, platforms, or temporary floors shall be provided for all work except that can be performed safely from the ground or similar footing.
  2. Ladders less than 20 feet may be used as work platforms only when use of small hand tools or handling of light material is involved.

3. Ladder jacks, lean-to, and prop-scaffolds are prohibited.
  4. Emergency descent devices shall not be used as working platforms.
- D. Contractors shall use a scaffold tagging system in which all scaffolds are tagged by the Competent Person. Tags shall be color-coded: green indicates the scaffold has been inspected and is safe to use; red indicates the scaffold is unsafe to use. Tags shall be readily visible, made of materials that will withstand the environment in which they are used, be legible and shall include:
1. The Competent Person's name and signature;
  2. Dates of initial and last inspections.

### 1.23 LADDERS

- A. All Ladder use shall comply with 29 CFR 1926 Subpart X.
  - B. All portable ladders shall be of sufficient length and shall be placed so that workers will not stretch or assume a hazardous position.
  - C. Manufacturer safety labels shall be in place on ladders
  - D. Step Ladders shall not be used in the closed position
  - E. Top steps or cap of step ladders shall not be used as a step
- A. Portable ladders, used as temporary access, shall extend at least 3 ft (0.9 m) above the upper landing surface.
1. When a 3 ft (0.9-m) extension is not possible, a grasping device (such as a grab rail) shall be provided to assist workers in mounting and dismounting the ladder.
  2. In no case shall the length of the ladder be such that ladder deflection under a load would, by itself, cause the ladder to slip from its support.
- G. Ladders shall be inspected for visible defects on a daily basis and after any occurrence that could affect their safe use. Broken or damaged ladders shall be immediately tagged "DO NOT USE," or with similar wording, and withdrawn from service until restored to a condition meeting their original design.

**1.24 FLOOR & WALL OPENINGS**

A. All floor and wall openings shall comply with 29 CFR 1926 Subpart M.

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