

ATTACHMENT "I"  
90-25-374-1

CONTRACTOR'S  
HANDBOOK



**Valleywise Health**  
**Medical Center**  
2601 E. Roosevelt Street  
Phoenix, Arizona 85008

By signing, you agree to the terms and conditions of the Contractors handbook.

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**Printed Name of Authorized Individual**

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**Name of Submitting Organization**

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**Signature of Authorized Individual**

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**Date**

May 2023

CONTRACTOR'S ACKNOWLEDGEMENT

## Valleywise Health

\_\_\_\_\_  
**Name**

\_\_\_\_\_  
**Company**

\_\_\_\_\_  
**Project**

**SIGNATURE\*** \_\_\_\_\_

**DATE:** \_\_\_\_\_

**\*My signature verifies that I have read the Contractor's Handbook, am familiar with its contents, and am aware of the appropriate resources for concerns relating to health and safety on the job, have received and will strictly adhere to Valleywise Infection Control and Wall, Ceiling & Floor Penetration Policies and Procedures.**

***For General Contractor\* Use Only:***

***The Contractor\* Handbook was reviewed with sub-contractors:***

\_\_\_\_\_  
***Sub-Contractor Name***

\_\_\_\_\_  
***Date***

\_\_\_\_\_  
***Sub-Contractor Name***

\_\_\_\_\_  
***Date***

\_\_\_\_\_  
***Sub-Contractor Name***

\_\_\_\_\_  
***Date***

\_\_\_\_\_  
***Sub-Contractor Name***

\_\_\_\_\_  
***Date***

## **Introduction**

Welcome to Valleywise Health. The purpose of this handbook is to summarize safety and infection control procedures as well as other required knowledge of hospital procedures and policies that will be helpful, and/or useful to you, during your work here at Valleywise Health.

Did you know that patients are at an elevated risk of infection whenever they are in a healthcare environment, and that risk increases during construction projects? This fact places the construction worker squarely on the front line with hospital staff when it comes to protecting patients from infection. In addition to avoiding the spread of infection, you need to contain the dust your work creates because it can affect everything from a patient allergy and breathing to the clogging of medical instruments.

It is the contractor's sole responsibility to assure that the contractor, their employees, and sub-contractors are adequately trained and informed of all applicable safety practices, and to make sure that employees are provided with, and wear the necessary safety equipment necessary for the task they are performing.

Questions regarding specific guidelines should be addressed with the Director of Facilities. General safety and life safety related questions may be directed to the Director of Environmental Health and Safety (Safety Officer). Infection Control issues should be directed to the Infection control department. Your cooperation with the expressed guidelines in this handbook will assist the hospital in maintaining a safe working environment for patients, visitors and staff.

## **Hospital Policy**

The Board of Trustees of Valleywise Health strive to assure that the hospital is a functionally safe, accessible, effective and an efficient environment. This is consistent with the mission, Vision, and Values of our hospital. The focus is to maintain a safe and sanitary health care environment for patients of all ages, visitors, employees, volunteers, and medical staff by requiring and supporting the establishment and maintenance of an effective safety and infection control program. The hospital shall comply with all current occupational, health, safety and environmental laws and develop the most appropriate operations, procedures, and policies to provide such conditions.

All contractors working at Valleywise Health will complete the Vendormate vetting process prior to starting work on any property. This process includes a background check, proof of immunizations, and various other mandatory requirements.

Contractor's failure to obey all safety rules and work practices, including the use of safety equipment, may be subject to action, up to and including being barred from future work here at Valleywise Health.

## **Patient Privacy-HIPAA**

The Contractor must instruct their employees that proper behavior is expected in a Patient Care Environment. If your work takes you into a patient care area, the privacy of a patient's care must be strictly understood and followed.

- Patient privacy is the law. Patients' needs take priority over construction needs.
- Recording images of patients, patient's information or other protected health information is prohibited.
- Non-compliance to patient privacy may result in the contractors' immediate removal from the hospital.

## **Personal Conduct**

The Contractor will be responsible for the personal conduct of all workers and subcontractors while on the jobsite. All conversations will be meet professional standards in all languages spoken. Workers shall not be intoxicated or under the influence of alcohol or other substances. Sexual harassment or racist behaviors will not be tolerated.

## **Telephone - Contractors Responsibility**

- The contractor assumes full responsibility for their employees and their sub-contractor's employee conduct and activity while on hospital property.
- The contractor is responsible for any specific job training with respect to work procedures in accordance with any State, Federal and Local laws (e.g., as may be required for confined spaces, or hazards specific to a job, not covered by regulatory activity, as in work to be performed above any ceiling).
- Damages caused by contractors and/or their subs must be immediately brought to the attention of the Director of Facilities or designated project manager.
- Hospital telephones are not for private use unless there is an emergency situation.

## **Telephone Extension Numbers**

Director of Facilities	602-344-2732	Fire (inside building)	34747
Safety Officer	602-344-5656	Security	602-344-5000
Infection Control	602-344-0710	Medical Emer. Outside hosp.	911
Hospital Operator	602-344-5011		

# Emergency Procedures

## Hospital Emergency Codes

- **Code Red** Fire
- **Code Pink** Infant abduction (less than 1yr old)
- **Code Purple** Hospital Saturation
- **Code Grey** Combative Patient
- **Code Orange** Hazardous material spill/release
- **Code Blue** Cardiac Arrest
- **Code Lavender** Internal High Volumes
- **Code Green** Interna/External Disaster
- **Code Silver** Active Shooter
- **Code Black** Bomb Threat
- **Code White** Medical Assistance Needed

**NOTE:** Engineering has a sign in sheet to keep a daily log of who is on site to help account for all in case of emergency.

## Construction Personnel Responses to Codes Above

- **Code Pink** Stand at nearest exit or hallway looking for any suspicious individual(s) until code is announced all clear. Contact Security 602-344-5000 if suspicious person spotted.
- **Code Black** Turn off all cell phones and check surrounding area for suspicious items. Contact Security 602-344-5000 if suspicious item found.
- **Code Orange** Hazardous material spill/release. If you spill a chemical or witness a spill, call security to report it. Isolate the spill if you can, keep people away.
- **Code Green** Report to Construction Superintendent and stay in area. Wait for further instructions from Engineering. You may call Engineering for incident status. Construction superintendent to account for all personnel and report to Hospital Command Center with status.
- **Code Silver** Depending upon the situation, choose to – Run, Hide or Fight in order to protect yourself. There are two situations for this code: 1) a person brandishing a weapon. Stay clear of that area if not in the area of the code; if in the area of the code or it happens in front of you, contact Valleywise Security at 602-344-5000) a person discharging a weapon. If not in the area of the code, go in the opposite direction of the code and leave the facility immediately. If in the area of the code, choose to run, hide or fight in order to protect yourself. If hiding, ensure you are adequately barricaded and do not leave the barricaded space until law enforcement has cleared the area and let you know that it is safe to leave.

## Code Red - Fire Emergency

- **Rescue** - Remove endangered persons if safe to do.
- **Activate** the nearest wall Fire Alarm Pull Box.
- **Contain** the space where the fire is located - Close all doors and windows.
- **Extinguish/Evacuate** – Use Fire Extinguisher if safe to do so.
- Dial and give specific information regarding the location and injuries.
- A “**CODE RED**” with location will be paged three times, then again 30 seconds later.
- Discontinue construction operations.
- Cease using any chemical or gas, which promotes combustion.
- Remove all equipment and materials from the corridor.
- Contractors are expected to participate in all “Code Reds” called within the hospital.
- A “Code Red All Clear” will be paged when the fire situation is under control.

## Evacuation

- In the event of a disaster that impacts the hospital (e.g., earthquake, explosion, and aircraft disaster) requiring an evacuation, it will be paged as “**Code Green**”.
- If the contractor’s employees volunteer to assist the hospital in the event of a disaster, they must report to the Labor Pool (located in the Education Pavilion) before assisting with disaster duties.
- If any injury occurs to a contractor in the event of a disaster, the injured worker may be taken to the emergency room, or to a casualty collection point if activated.
- The contractor shall follow all exit signs, evacuation plans and procedures as trained, to properly exit the facility.

## Pre-construction Risk Assessment

A pre-construction life safety and infection control risk assessment will be conducted prior to all construction or renovation projects. The risk assessment team includes Director of Employee health services and/or designee, Director of Facilities and/or designee, Director of Security, Infection Control Nurse, and the Contractor responsible for the project. A Pre-construction Risk Assessment Form and an Infection Control Risk Assessment Form will be utilized, and their results analyzed. All safety risks scored at moderate or high will require a mitigation plan to be developed and implemented prior to the beginning of construction and/ or renovation. Infection Control risks scored **Class III or IV** will require an infection control permit, which includes the appropriate infection control precautions.

Infection Control Risk Assessment (ICRA) need to be posted on Construction Entrance Doors at all times.

Patients are not the only ones at risk of infection during construction projects. The risk assessment should take into consideration hospital staff and visitors to the facility. The important step is to establish a perimeter of the area affected and identify protective measures for the environment within that area.

## **Fire and Smoke Barriers Shall Be Maintained at All Times**

**NOTE:** Any impairment to the fire detection or fire protection systems must be approved and coordinated prior to the onset of work with any one of the following hospital staff:

- Director of Facilities or designee
- Director of Employee health services or designee

## **Fire System**

- Understand the fire/smoke compartment layout for smoke control.
- Know the location of all firefighting equipment and alarms.
- Assess each area of construction for types of alarm, detection, and extinguishing systems. These systems vary throughout the buildings. Temporary systems should be evaluated for need during construction with the Director of Facilities before proceeding.
- Shut down or modification of any fire system must first be coordinated with the Director of Facilities and the Safety Officer.

## **Security**

- All contractors that work within the facility must have a valid ID badge that is always visible and worn above the waist while on hospital property.
- Contractors will be required to sign in at facilities prior to starting work.
- If the construction crew needs to access any area that requires a key, they must contact facilities for assistance.
- Unauthorized use of badges, such as giving them to another person, is prohibited.

## **Prohibited/Restricted Items**

- Alcohol or illicit substance (drug) usage **is not allowed** on hospital property.
- Alcoholic beverages or illicit substance usage on hospital property, are grounds for immediate termination of contracted services.
- Firearms and weapons are not allowed on hospital property. Evidence that someone has brought a firearm or weapon into the hospital will result in the individual's removal from the premises and possible report to the Police.

## **Smoking**

- Valleywise is a “**Non-Smoking**” campus to reduce risk of fire hazard and to set a standard that prohibits the use of smoking materials throughout the hospital building.
- There is no smoking within any construction areas (inside or out).

## **Storage**

- Tools, equipment, materials, and debris must be properly stored to comply with building and fire codes.
- Your supervisor in conjunction with the Director of Facilities can assign an area where you can store your tools and equipment.
- Aisles, corridors, and stairwells can never be used for storage - even temporarily.
- All debris must be removed daily. Debris must either be taken to a pre-designated location on site or immediately hauled off.

## **Housekeeping**

- Debris, tools, and construction materials shall be put away or cleaned at the end of each day.
- Aisles and other walking surfaces must be kept free of equipment, tools, materials, and debris.
- Arrange extension cords and hoses so people cannot trip over them. If you must run a cord or hose across an aisle or walkway, you need to get approval from either the Director of Employee Health Services, or Director of Facilities. You must also take additional precautions to protect people from tripping.
- Clean up all liquid drips and spills immediately and dispose of properly.
- When necessary, barricade your work area to keep unauthorized people out.
- Review of cleaning procedures shall be done for each patient care area prior to starting any project, including dust and barrier controls, walk-off mats, etc.
- All power tools are to be unplugged and properly stored when unattended, especially during breaks, lunch periods and when employees are away for extended periods of time.
- No means of egress is to be impeded with debris, tools or equipment.

## **CONSTRUCTION SITE SHALL BE MAINTAINED IN A NEAT AND ORDERLY CONDITION AT ALL TIMES.**

### **Vehicles**

#### Parking

- Contractors must park in designated parking areas.
- Parking in reserved areas, patios, sidewalk, red curb zone or handicapped parking spaces is prohibited. Improperly parked vehicles will be towed away.
- Loading docks or loading areas are to be used for loading or unloading only. When you are finished, your vehicle must be moved into authorized parking areas.

#### Speed Limits

- The maximum speed limit for the parking lots is 5mph. Please obey this posted speed limit for your safety and others.
- Please be aware of pedestrian walking in parking areas and around the hospital grounds.

### **Tools**

- The use of powder-actuated tools in the hospital is prohibited, unless specifically authorized by the Director of Facilities.



- Only ground fault circuit interrupters (GFCI's) are used for all cord - connected and equipment used outdoors or on temporary construction wiring.
- Extension cords must be the three-wire type for grounded tools and must not be frayed.
- All electrical equipment used must be properly grounded. Portable tools and appliances protected by an approved system of double insulation need not be grounded.
- Impact/hammer type drills may only be used as approved by Valleywise Safety and Facilities Department.
- Lights or portable tools used with, or around flammable/combustible liquids and gases must be an explosion-proof type.

## **Personal Protective Equipment (PPE)**

- Contractors involved in specific work activities requiring personal protective equipment (e.g., hard hats, gloves, foot protection, hearing protection, eye protection) will be expected to wear the required protection.
- Your employer must provide you with any required personal protective equipment and train you in its use and care.
- Contractors working in the operating rooms, or rooms with sterility requirements, will be provided with the appropriate coverings as needed by the hospital.
- You are expected to follow all posted requirements for use of PPE while on the Hospital premises.

**You should not perform a job if you do not have the personal protective equipment required for your safety!!**

## **Work Area/ Work Clothing / Accessories**

- As a contractor you must confine your activities to the area where your work is being performed.
- If work clothes become overly soiled, appropriate coverings must be worn when walking in/around the patient care areas and other public areas, (e.g., employee dining areas, lobbies, hallways, etc.).
- Use of the cafeteria is prohibited without prior hospital authorization.

## **Hazard Communications Standard**

Hospital policy is to comply with local, state and federal agency requirements. We require contractors who work at Valleywise Facilities to comply as well. All chemicals used by contractors must be labeled with the appropriate warning signs. If the product is transferred to another container, the new container must also be appropriately labeled. Labels are to be in English, legible, prominently displayed on the container, and readily available to any contractor and/or hospital employee. Valleywise Health will inform you of any hazardous chemical or materials used by the hospital which you may be exposed to in the course of your work, to include SDS's and an explanation of the hospital chemical labeling system.

## **Safety Data Sheets (SDS) (formerly MSDS)**

All hazardous chemicals used by contractors must have an accompanying SDS reviewed by the Safety Manager prior to the commencement of a project. SDS's must remain at the site and accessible to

contractors and hospital employees who may be assisting/overseeing the project. Contractors must be trained in the usage of hazardous chemicals used on the project. The training must include:

- Where the hazardous chemical is used in the hospital
- Availability of SDS onsite at all times.
- Methods of observation used to detect the presence or release of the hazardous substance.
- Physical health hazard associated with each hazardous chemical.
- Use and location of personal protective wear.
- Proper storage and location of hazardous materials

**A COPY OF THESE TRAINING PROCEDURES MUST BE GIVEN TO THE DIRECTOR OF EMPLOYEE HEALTH SERVICES PRIOR TO THE COMMENCEMENT OF ANY PROJECT WHERE HAZARDOUS MATERIALS ARE USED.**

### **Asbestos/Lead**

Any work involving asbestos / lead and lead containing materials must be done in accordance with all local, state, and federal requirements and under the direction of the Director of Facilities and The Director of Employee Health Services. If Asbestos is found during completing construction, work will cease immediately, and the contractor will notify the Director of Facilities and the Director of Employee Health Services.

### **Hazardous Materials/ Waste Disposal**

- All hazardous materials must be stored in accordance with hospital policy and with local, state and federal laws.
- All hazardous waste must be disposed of in accordance with local, state, and federal laws.
- If hazardous waste is anticipated during the course of the project, the Director of Facilities must be notified prior to the commencement of the project.
- The hauler used by the contractor must be pre-approved by the Director of Facilities/ Director of Employee Health Services.
- All hazardous waste manifests must be signed by the Valleywise authorized person. Contractors are not authorized to sign manifests for Valleywise Health.
- **No hazardous waste is to be discharged into the ground, air, sanitary sewer, or storm drains.**

### **Compressed Gases**

- All compressed gas cylinders (oxygen, acetylene, nitrogen, argon etc.,) must be properly secured in an upright position for both storage and use.
- No more than 300 cubic feet of compressed gases may be stored in any one location.
- When not in use, all cylinders must be properly secured and stored only in authorized controlled access areas.
- Valve caps must be kept in place when cylinders are not in use.
- Proper hand trucks must be used to move cylinders. **Do not drag or roll cylinder and do not drop or bang cylinders together.**

### **Cutting/Welding**

- All cutting and welding operations will comply with applicable OSHA standards.
- Only the Director of Facilities or designee can give authorization for any cutting/welding/hot work prior to the onset of work.
- If a permit is required, the permit will be kept on file in the Facilities Administration office. A cutting/welding/hot work tag will be affixed to the area under construction, with all applicable rules followed as stated on the permit.
- Extreme caution is to be used at all times during this type of work.
- Any deviation from permit requirements may be cause for immediate cessation of work at the contractor's expense.
- The contractor must make fire suppression equipment available where cutting/welding/hot work is conducted. The contractor must protect adjacent areas potentially affected by any cutting/welding/hot work. Contractors to provide their own fire suppression equipment.
- Workers shall be licensed for all work performed. Licensure/certification is to be submitted to the Director of Facilities.

## **Excavations and Trenches**

- All excavations and trenches will comply with applicable OSHA standards.
- Existence and location of underground pipes and utilities must be determined prior to excavation work.
- The contractor is responsible for any notifications and permits which may be required.
- The Director of Facilities will provide available information regarding underground pipes or utilities at the site.
- Walls of all excavations and trenches more than five feet deep shall be guarded by shoring, sloping of the ground or other means required by government regulations.
- Contractor's Safety Officer must perform daily inspections of excavations and trenches.
- If there is evidence of a potential for cave-in or slides, all work shall immediately cease, until Corrections are made.
- All trenches and excavations must be completely guarded on all sides to prevent persons from accidentally falling in.
- Barricade and lighting must be provided to ensure adequate warning at night.

## **Floor Openings – OSHA Standards**

- All excavations and trenches will comply with applicable OSHA standards.
- All floor openings must be protected to prevent people or equipment from accidentally falling into openings.
- All floor openings must be covered with plank or plywood of adequate strength, when unattended.
- Covering must be posted with sign reading: "Floor Opening- Do Not Remove."
- Guard rails and toe boards in place of planking may be used when it is impractical to cover an opening.

## **Ladders**

- All ladders must be in good working order and must comply with OSHA regulations, they must be equipped with anti-skid feet, and labeled with the Contractors' name.
- Always inspect the ladders carefully before using them. If there are any defects such as broken rungs or steps, split rails or other construction problems, the ladder must be removed from use and replaced by your employer.
- Use of hospital ladders is prohibited.
- Carry tools in a tool belt when climbing up or down a ladder.

## **Plumbing and Air Conditioning**

- Abandoned pipes, air ducts, electrical conduits etc., should be removed and capped at the main feed.
- When installing new air conditioning ductwork, old ducting should be removed. When eliminating thermostats, lines should be removed and permanently capped at the main air line and air conditioning unit.
- Any questions concerning plumbing and air conditioning should be referred to Director of Facilities.
- Any holes in the fire wall because of the work must be sealed. Other penetrations in the fire wall must be reported to the Director of Facilities.
- All junction boxes must have a cover on them. Report any Junction boxes without covers to the Director of Facilities.

## **Alternate Life Safety Measures (ALSM)**

The area under construction must be assessed for possible compromise to the building's life safety systems. The ALSM's form developed by the hospital will be used and the site inspected by the Director of Facilities, and/or Director of Employee Health Services. Safety Measures will be put in place according to the ALSM Risk Assessment.

## **Safety and Health Inspection**

The hospital conducts ongoing safety and infection control surveillance. The construction project will be monitored by the Director of Facilities and The Director of Employee Health Services. The hospital Infection Control Department may survey the area for proposed construction for the possibility of Aspergillus and any other construction related infectious disease. Results of this survey will be given to the contractor upon request. Engineering, Safety, and Infection Control will monitor the project area and may require more frequent air filters changes based on their current condition and the type and duration of the construction project.

## **Use of Elevators**

- Workers should use only the service elevators designated by the hospital, for movement of personnel, materials and removal of debris and waste.
- When necessary protective curtains shall be used to protect the elevator sides
- All debris carried in elevators and hallways shall be covered.

## **Scaffolding**

- All scaffold work will comply with applicable OSHA standards.
- Scaffolds and work platforms more than four feet above the floor, or ground, will require guardrail and toe board on all open sides except where there is an entrance to a ramp, stairway, or fixed ladder.
- For work on an elevated platform or scaffold, which cannot be equipped with guardrails, safety belts and lifelines are required.
- If other employees pass underneath the scaffold, it must be equipped with a screen between the top rail and toe board.
- All scaffolds must be provided with an access ladder or other safe means of access.
- The contractor's Safety Officer is responsible for evaluating government regulations to determine the level of protection required when working above ground level.

### **Utilities/Lock-Out/Tag-Out**

- All operations involving Lock/out Tag/out will comply with applicable OSHA standards.
- Your work must not affect the utility service to the hospital, unless previously authorized by Director of Facilities.
- You must not under any circumstance, operate any switch or valve, which controls building services, processes or equipment unless your supervisor has obtained written authorization from the Facilities and Engineering Department.
- A **LOCK-OUT/TAG-OUT** system that complies with government regulation must be implemented to identify and secure switches and controls in the off positions while work is being performed. Before work begins, the Facilities Department and Employee Health and Safety must check any work involving "lock-out/tag-out" procedures. **NOTE:** Electrical wiring must never be left uncovered or unprotected during the entire course of the project.
- All J boxes are to be covered once work is completed on them.

### **Confined Space**

Valleywise does not work in any confined space, nor do we issue any confined space permits to contractors. Confined space permits must be issued by the contractor to the committee along with the ICRA/ ALSM package for review and approval prior to work being done.

### **Documentation & Records**

The hospital is required by law to keep records and documentation of activities during the construction project. The general contractor and sub-contractors are required to maintain current, up to date records and files as required by the hospital and the authority(s) having jurisdiction.

### **Cable Penetrations**

All cables, which pass through fire or smoke barriers, must be housed in solidly set steel pipe sleeves that extend four (4) inches beyond each side of the wall. The void area between the pipe and the wall must be filled with a UL approved fire barrier material installed in accordance with the Fire Marshal requirements. In addition, Valleywise Health requires the approved product to be of an odor free nature. The void inside of the pipe must also be filled with the same material installed in accordance with Manufacture Specifications.

## **Wall and Floor Penetration Policy / Procedure**

### **Policy**

To comply with NFPA, LSC 101, 2012 edition, fire walls and smoke barriers have been constructed throughout the hospital to provide safe areas of refuge for patients, visitors, and staff in the event of a fire. Fire and smoke barriers are placed from the floor to the adjacent floor and from the exterior wall to exterior wall.

Smoke barriers and fire walls are partitions consisting of multiple layers of fire rated drywall or metal lath and plaster attached on opposite sides of a metal stud, built in conformance with Arizona Building Codes, to contain smoke and fire matching the existing fire rating.

Penetrations to fire or smoke barrier walls, ceiling, or floors, must be repaired and filled with UL approved fire barrier material installed or fire barrier assembly in accordance with; Arizona Building Code, Fire Marshall, and Valleywise Health requirements.

A “Penetration Report” must be completed by the contractor and submitted daily to the Director of Facilities, when any wall, ceiling or floor penetration is conducted.

### **Cable Penetrations**

All cables, which pass through fire or smoke barriers, must be housed in solidly set steel pipe sleeves that extend four (4) inches beyond each side of the wall. The void area between the pipe and the wall must be filled with a UL approved fire barrier material installed in accordance with Fire Marshal requirements. In addition, Valleywise Health requires the approved product to be of an odor free nature. The void inside of the pipe must also be filled with the same material installed in accordance with Manufacturer Specifications.

### **Conduit and Pipe Penetrations (i.e., drain lines vacuum, piping, pneumatic tube)**

All voids created by all pipe penetrations must be filled with UL approved fire barrier material installed in accordance with Fire Marshall requirements.

### **Other Penetrations (i.e., ducts, access doors)**

All other openings made through walls and floors, must be reviewed by the Director of Facilities.

Penetrations made by Contractor and/or Sub-contractor employee, and not addressed according to the specifications will be charged back to the Contractor and/or Sub-contractor performing the work on a time and materials basis, according to market conditions at the time of discovery.

### **Procedure**

#### **Contractor**

Contractor will review the fire life safety drawing for inclusion of wall patching, fire smoke dampers, etc., in the contract prior to the final bid, which can be obtained from the Director of Facilities.

Life safety drawings are available in the Facilities office.

Contractor will report all existing wall or floor penetrations found to the Facilities Department before work commences. A photographic record and the "Penetration Report" of the existing penetrations shall be submitted to the Facilities Department.

The Contractor will notify the Director of Facilities when the project is complete and request an inspection.

The Contractor's final application for payment shall not be processed until all wall and floor penetrations have been filled in accordance with the requirements listed above and approved by the Director of Facilities.

Questions regarding wall and floor penetrations should be directed to the Director of Facilities.

## **Infection Control Policies and Procedures**

### **Scope**

All Contractors and subcontractors are responsible for construction, demolition and remodeling at Valleywise Health.

### **General Information**

Hospital construction, demolition, and renovation and repair activities (e.g., removing ceiling tiles, running cables through the ceiling, etc.) can be risk factors for certain hospital acquired infections in patients, especially those who are immuno-suppressed. Activities that disturb dust may facilitate the transmission of *Aspergillus*, or other fungi found in ceiling and wall spaces where dust has accumulated. Disease may occur if a susceptible patient inhales fungal spores released into the environment.

### **Policy**

- Plans for new construction or renovation adjacent to or in patient care areas must be reviewed by the Infection Control Nurse before the project commences.
- Consultation will be obtained as necessary from the Infection Control Nurse and the Director of Facilities.
- The Director of Facilities, Director of Employee Health Services will be responsible for routinely monitoring construction/renovation areas for compliance with this policy.
- An infection control risk assessment will be conducted, prior to construction involving the contractor, Infection Control Nurse, Director of Facilities, and Director of Employee Health Services, to determine the type and class of construction activity. Based on the outcome of this assessment, an Infection Control Permit will be issued and followed by the contractor.

### **Procedure**

#### Before Construction Begins

- Contractor will fill out ICRA/ALSM package and submit it to our Valleywise Committee.
- Committee will meet to approve permit or send it back for revision.

#### Types of Projects that Require Barrier Precautions

- Demolition of wall board, plastic, ceramic tiles, or ceiling tiles
- Demolition of floor tiles
- Removal of case work
- Removal of windows or doors

#### Barrier Requirements

- A closed door with a sealed frame and/or door using dust tape may be applied over the frame and door to a room for a project that is to be contained with a single room.
- For projects less than one week, the barrier should be constructed of double layer fire rated plastic sheeting.
- For projects greater than one week, the barrier should:
  - Be constructed of metal studs and gypsum board.
  - Be extended from floor to ceiling.
  - Have sealed seams with appropriate sealant.
  - Have ceiling access panel without barriers, which must be closed when unattended.
  - Have ventilation intakes, which must be sealed, in construction areas as appropriate.
  - Close windows in construction area, unless used to exhaust air from the areas. All adjacent, patient care, windows should be kept closed during construction, and temporarily sealed if necessary.
  - Debris must be completely covered to contain dust when transported through patient care areas.
  - Project supervisors must coordinate with Environmental Services to ensure placement of mats at doors, to barrier areas and more frequent wet mopping to decrease the collection of dust.
  - Certain circumstances may require relocation of patients during construction. Nursing service staff, attending physicians and the Infection Control Nurse will be involved in patient relocation decisions.

### **Air Handling Precautions**

#### **Outside Projects**

- The location of outdoor demolition or dirt-moving construction projects, with respect to Building air intakes must be identified.
- A determination will be made whether to cover the air intake and /or switch to maximum re-circulation of return air during active construction hours.
- The integrity of the air filtration system must be maintained in order to minimize the penetration of construction aerosols into the building(s).
- Air filters will be visually inspected and changed more frequently. Their integrity will be mechanically measured by magnehelic static pressure tests weekly. The work site will be monitored daily to ensure that construction aerosols are not situated near air intakes.



## **Indoor Projects**

- Extreme caution shall be taken to prevent the spread of dust or odors to any surrounding areas.
- Negative air pressure shall be maintained in all construction areas. They may be accomplished by blocking off supply air registers in the construction area if it is fully exhausted after verification by the Director of Facilities.
- A negative air filter machine (HEPA FILTER) may be required, with dust exhaust to the outside air. Infection Control Nurse will confirm the need for this equipment.

## **Construction and Renovation**

- During indoor construction/renovation the construction site must be completely contained with barriers extending from the floor, beyond the false ceiling, to the underside of the floor above in order to separate the construction zone from other hospital locations.
- Wallboard reinforced barriers should be used.
- All penetrations into construction area must be sealed, windows closed, and air ducts capped.
- The construction area should be vacuumed prior to beginning working in order to minimize disruption of fungal spores.
- Construction worker access and egress to and from the construction site must be via clearly defined corridors and, when possible, segregated.
- Delivery of construction materials and debris removal from the site must be performed via a predetermined route and time so as to minimize the chance of contaminating the adjacent environment. Debris removal should be accomplished in containers with tight-fitting covers.
- Any dust or debris tracked outside of the construction barrier must be removed immediately.
- The debris route must be cleaned at least once a day during construction activities.
- Biological agents monitoring will be done on an as needed basis.

The contractor is responsible for obtaining the Infection Prevention and Control Permit from the Engineering Department prior to commencing construction. The Safety Officer and Infection Prevention and Control staff will evaluate work orders and reserve the right to add requirements to a project on an individual basis.

Engineering Staff, the Safety Officer and Infection Prevention and Control Staff will make periodic visits to work sites to ensure policy compliance.

## **Barrier Precautions**

Construction/renovation personnel must observe cover precautions. This means that whenever they are working outside, with sewer lines, above ceiling tiles, or at any job site where they contaminate their clothing with materials not usually associated with a clean indoor hospital environment, they must:

- Wear body covers (coveralls or Tyvek suits) and shoe covers.
- Remove these covers before reentry into the hospital.
- Wash their hands thoroughly.
- Ensure that they have not contaminated their hair. This may require using a hair cover or washing their hair. As an alternate to this protocol, a set of separate work clothes and footwear may be kept for these tasks. If they contaminate their clothing and cannot change into clean

clothing, they will be denied entry into the hospital. This prohibition includes access to the hospital for food or restroom.

Designated corridors must be used for entry and departure to and from construction sites. These Corridors are established as part of the Interim Life Safety Measures and are designed to control and contain personnel movement as well as building supply access and debris removal. All construction maintenance personnel should understand and observe the use of these corridors.