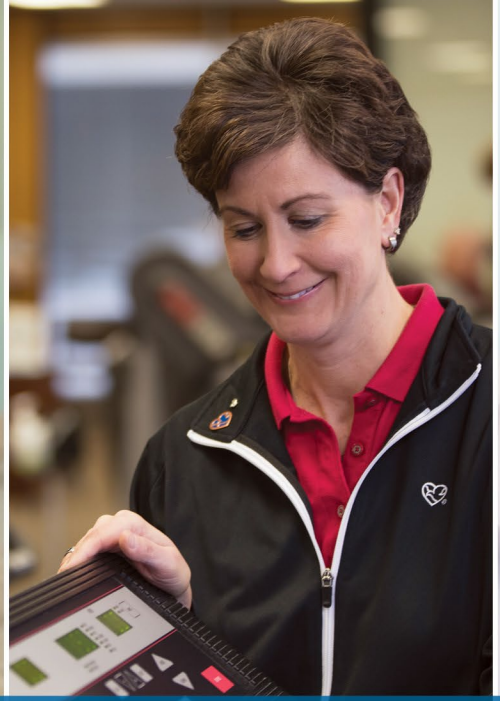
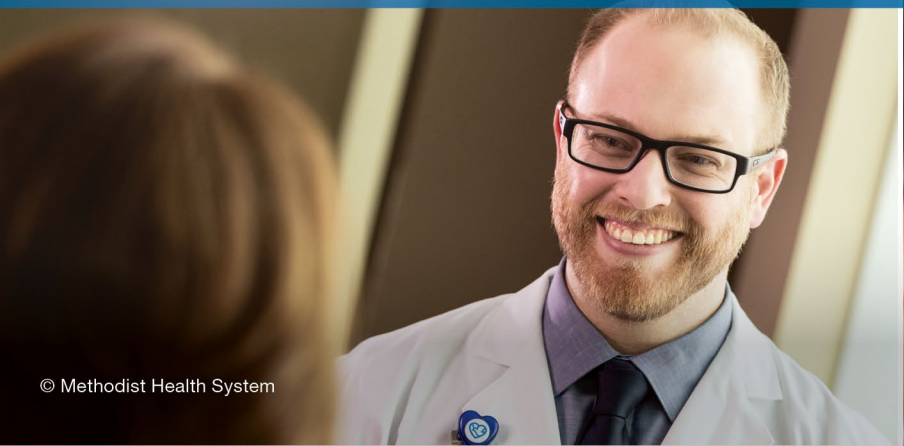
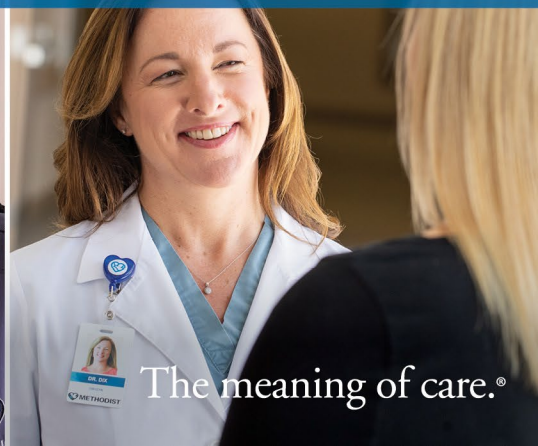


Methodist Health System
Contractor Safety Orientation





The meaning of care.®

Contractor Safety Orientation

Welcome to Methodist Health System!

Mission:

Improving the Health of our Communities by the way we Care, Educate and Innovate.

Core Values:

- Patient Focus
- Compassion
- Teamwork
- Learning
- Respect
- Integrity
- Excellence

Contractor Safety Orientation

Purpose:

Provide information to: contractors, sub-contractors, and all hospital staff on the specific policies, procedures and measures that ensure a safe environment for all who are on the Methodist Health System Campuses or in the buildings where construction, renovation or repair is taking place.

Contractor Safety Orientation

Objectives:

Upon completion of this session the participant will:

- Be Aware and informed of MHS "Construction Guidelines".
- Understand the concepts of Life Safety and the interim measures put into place when Life Safety cannot be met. This will include:
  - What to do in the event of a fire
  - The use of fire extinguisher
  - Elements of fire protection related to penetrations.
  - Hot Work Permits
  - Fire Watch
  - Wall penetration procedures

Contractor Safety Orientation

Objectives:

- Explain how to determine the possible hazards of the chemicals that you will use, to include:

  - Determining the measures necessary to keep these chemicals from harming anyone.

  - Have an awareness of where asbestos might be located.

Contractor Safety Orientation

Objectives:

- Understand the principles of Infection Control related to construction, renovation or repair projects, to include:
  - Disease transmission
  - Patient populations
  - Measures to control dust
  - Actions necessary to minimize risks

Contractor Safety Orientation

Objectives:

- Recognize and respond to Methodist Health System overhead pages to include:
  - Fire response
  - Code Black… Bomb response
  - Active Shooter response
  - Missing or abducted child or adult
  - Severe Weather/Tornado… “Watch”, “Warning” or “High Winds”

Contractor Safety Orientation

Methodist Health System divides the Construction Guidelines into four sections.

- General Guidelines
- Life Safety/Interim Life Safety
- Preconstruction Risk Assessment and Plan
- Infection Control Risk Assessment and Plan

Contractor Safety Orientation

Key Contacts

- System Director Construction/Project Management – Joe Turecek
- Project Manager (Methodist Hospital) – Scott Hogan
- Project Manager (Women's Hospital) – Morgan Hankins
- Project Manager (College and Clinics) – Megan Esch
- Project Manager (Jennie Edmundson Hospital) – Brandon Clogston
- Project Manager (Fremont) – Nick Dotzler

Contractor Safety Orientation

Your Role!

Patient Privacy and Respect:

- HIPAA
- Never discuss what you see or what you hear
- No photos
- Stay out of patient rooms
- Avoid health care related conversations
- Elevator usage – Preference to patients and staff

Contractor Safety Orientation

Security:

All construction personnel will:

- Wear your Contractor ID above your waist at all times in the facilities.
- Sign in and out of pre-designated areas if determined necessary.
- Park in designated areas. Parking in the wrong lot could result in being towed.
- Not go to unauthorized areas. Public areas are allowed.
- Not use *any tobacco products* on the property.
- Not have, share, sell or distribute illegal drugs, paraphernalia, alcoholic beverages or weapons.
- No soliciting.

Contractor Safety Orientation

General Rules:

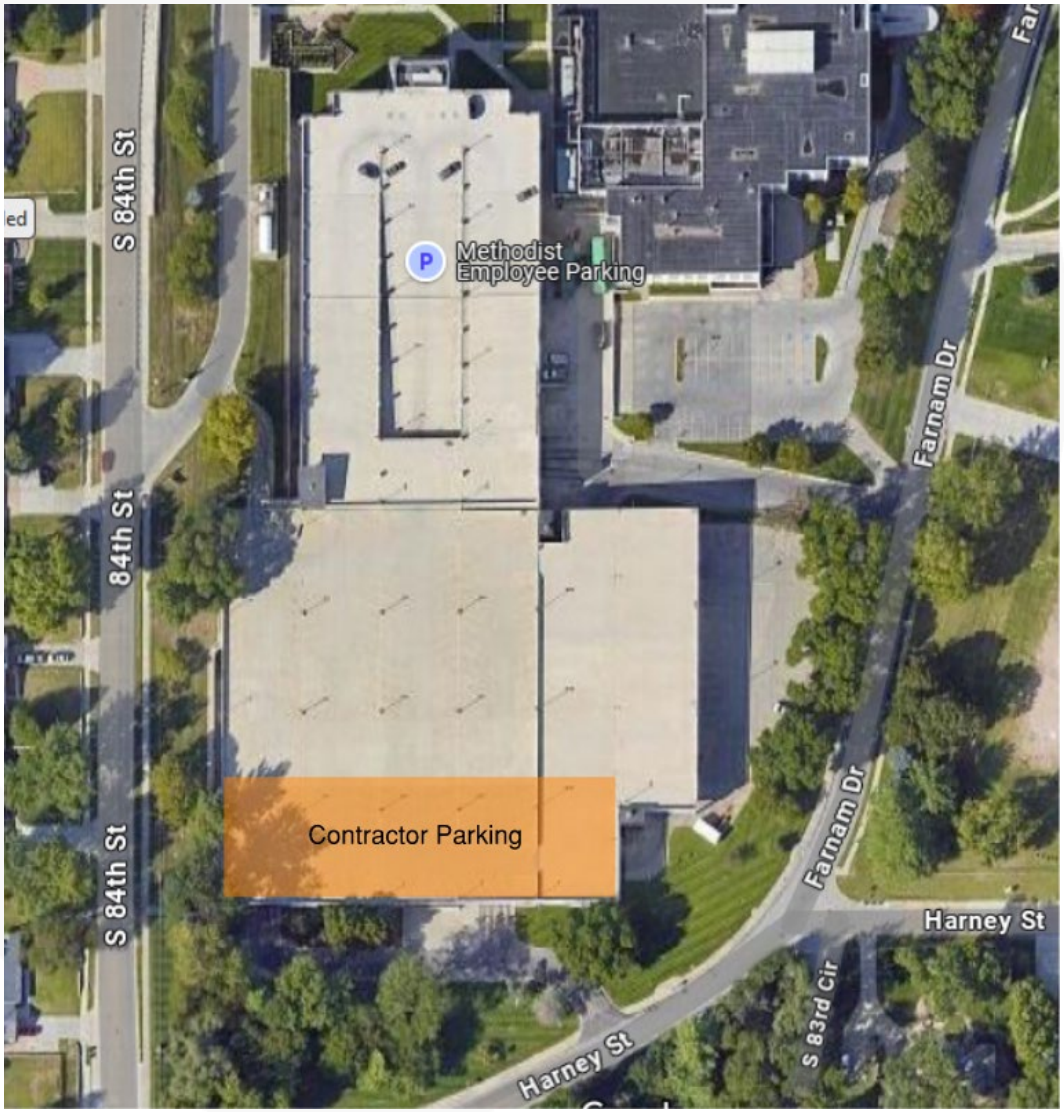
All construction personnel will:

- Remove dust from clothing and equipment before you move through the hospital.
- Not eat any type of seed that requires you to spit out the shells.
- Not play radios in project area.
- Wear appropriate shirts, long pants and shoes. No union logos.
- Not wear your hardhat in the cafeteria.
- No harassment of patients, visitors or staff.
- Maintain patient confidentiality at all times.
- Follow all MHS policies!

Contractor Safety Orientation

Methodist Hospital
8303 Dodge St.

- Parking on the south end of the employee garage, top level.



Contractor Safety Orientation

Contractor Safety Orientation

Methodist Jennie Edmundson
933 E. Pierce St.

- Parking on the south end of the MOB parking lot.

Contractor Safety Orientation

Methodist Fremont Health
450 E. 23rd St.

- Parking on the west end of the west parking lot.

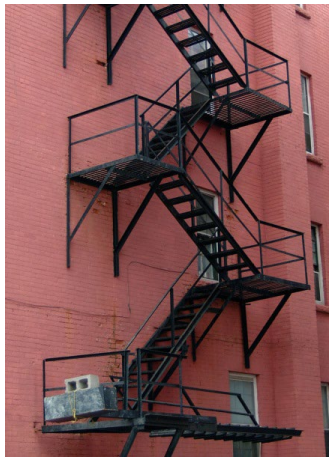
Contractor Safety Orientation

Hazards found in the Hospital

- Chemicals – Chemo, ETO, Formaldehyde
- Radiation – Radiology, X-ray, Cat Scan
- Radioactive materials – Nuclear Medicine, Gamma Knife
- Lead – Nuclear Medicine
- Magnetic Resonance Imaging (MRI) – No metal in here.
- Confined Space – Boilers, chillers, certain rooms
- Lockout/Tagout – Technical Services owned, other subs
- Pay attention to signs and symbols located in each area. They will provide you with information to hazards located there.
- Help distressed or lost persons find hospital staff.
- Report safety and infection concerns!

Contractor Safety Orientation

Life Safety – Interim Life Safety Measures



Contractor Safety Orientation

Fire is a special concern in hospitals because 75% of all patients are often unable to move to safety by themselves. This requires constant vigilance about the building features, the process and products that aid a fire and about measures put into place when the Life Safety Codes cannot be met due to construction, renovation or repair.

Contractor Safety Orientation

Life Safety is about the design features of the building to protect the occupants from fire and those occupants reporting and responding to fire when it occurs.

Contractor Safety Orientation

Interim Life Safety Measures

During construction periods when the Life Safety Code cannot be met, a determination is made if any one of the 13 measures can be put into place to protect the hospital occupants. Some of the more important ones that effect you are:

The hospital notifies the fire department and initiates a fire watch when a fire alarm or sprinkler system is out of service more than 4 hours in a 24-hour period in an occupied building. Notification and fire watch times are documented.

Contractor Safety Orientation

Interim Life Safety Measures

The hospital has a written interim life safety measure (ILSM) policy that covers situations when Life Safety Code deficiencies cannot be immediately corrected or during periods of construction. The policy includes criteria for evaluating when and to what extent the hospital follows special measures to compensate for increased life safety risk.

Contractor Safety Orientation

Interim Life Safety Measures

Contractors are expected to:

- Inspect exits in affected areas on a daily basis
- Provide temporary but equivalent fire alarm and detection systems for use when a fire system is impaired.
- Provide additional firefighting equipment.
- Uses temporary construction partitions that are smoke-tight, or made of noncombustible or limited-combustible material that will not contribute to the development or spread of fire

Contractor Safety Orientation

Interim Life Safety Measures

LIFE SAFETY MEASURES ASSESSMENT / SPECIAL CONTROLS: ILSM PLAN

Project Name: Location:

Project Date:

Preparer: Date:

Risk #	Risk Elements	Yes	No	Controls
LS-1	Will existing exits be impaired?	☐	☐	
	a. Alternative exits be necessary?	☐	☐	
	b. Existing corridor width be reduced?	☐	☐	
	c. Construction area escape routes be needed?	☐	☐	
LS-2	Will existing fire safety systems be impaired?	☐	☐	
	a. Existing fire alarm system be impaired?	☐	☐	
	b. Existing fire detection system be impaired?	☐	☐	
	c. Existing sprinkler system be impaired?	☐	☐	
	d. Temporary or equivalent systems be needed?	☐	☐	
LS-3	Will additional firefighting equipment be needed?	☐	☐	
LS-4	Will temporary, smoke-tight construction partitions that are non-combustible or limited-combustible be needed?	☐	☐	
LS-5	Will increased hazard surveillance of patient buildings be needed?	☐	☐	
	a. Hazard surveillance of buildings, grounds or equipment	☐	☐	
	b. Special attention to excavations, construction storage or work areas.	☐	☐	
LS-6	Will reduction in the flammable or combustible fire load be needed?	☐	☐	
	a. Temporary construction storage be needed?	☐	☐	
	b. Housekeeping or debris removal be needed?	☐	☐	
LS-7	Will additional fire response training be needed?	☐	☐	
LS-8	Will additional fire drills be needed?	☐	☐	
LS-9	Will it be necessary to inspect and test temporary systems monthly and document inspection information?	☐	☐	
LS-10	Will organizational training in LSC deficiencies, construction hazards be needed?	☐	☐	
LS-11	Will training to compensate for structural or compartmentalization deficiencies be needed?	☐	☐	

Instructions: Safety Representative or Lead Security Officer will identify what Life Safety **Risk Element** that is or will be deficient by marking it "**YES**" or "**NO**". If a "YES" is identified for any **Risk Element**, then a **Control** needs to be identified, established and the Plan implemented and monitored.

ILSM MONITORING LOG

Project Name: Location:

Inspection Date: Security Team Leader:

#	Badge Number / Date / Controls	Life Safety Control Required Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
LS-1	Inspects exits in affected areas on a daily basis. Identify new exits if necessary.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-2	Provide temporary but equivalent fire alarm and detection systems for use when a fire system is impaired.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-3	Provide additional firefighting equipment.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-4	Use temporary construction partitions that are smoke-tight or made of non-combustible material that will not contribute to the development or spread of fire.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-5	Increase surveillance of buildings, grounds and equipment, giving special attention to construction areas; storage, excavation and field offices.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-6	Enforce storage, housekeeping and debris removal practices that reduce the buildings flammable and combustible fire load.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-7	Provide additional training to those who work in the hospital on the use of firefighting equipment.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-8	Conduct one additional fire drill per shift per quarter.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-9	Inspect and test temporary systems monthly. The completion date of tests are documented.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-10	Conduct education to promote awareness of building deficiencies, construction hazards and temporary measures to maintain fire safety.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
LS-11	Train those who work in the hospital to compensate for impaired structural or compartmental fire safety features.	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
#	**Safety Inspection**																		
S-1	Are the ILSM permits current	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
S-2	All exits into area can be secured	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
S-3	Are compressed gas cylinders secured	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
S-4	Are there signs of staff smoking	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐
S-5	Other	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐	☐

NOTICE

ILSM Permits

Interim Life Safety Measures (ILSM) are a series of administrative actions that must be taken to compensate temporarily for the hazards posed by existing NFPA Life Safety Code 101, 2012 deficiencies or construction activities.

ILSM are instituted in for one or more of the following reasons:

☐ 1. Normal exits or exit routes have been compromised.
☐ 2. Compartmentalization (smoke or fire containment) has been compromised.
☐ 3. Fire alarm system, detection, and/or an extinguisher system are impaired or disabled.
☐ 4. Hot-work, including but not limited to cutting, burning, welding.
☐ 5. A collection of an abnormal amount of combustible products or debris.

ILSM are in effect in this area from to

Maintenance of a safe environment during the temporary deficiency condition will be managed by:

Phone
Phone
Phone

Please cooperate and comply with the following Interim Life Safety Measures listed below. The following activities have been designed to manage the risks that may occur during this project:

- Ensuring free and unobstructed exits.
- Ensuring free and unobstructed access to emergency services for Fire and Police.
- Ensuring fire alarm, detection, and suppression systems are accessible and in good working order.
- Ensuring temporary construction barriers are smoke tight and built of noncombustible or limited combustible materials.
- Providing additional firefighting equipment and training.
- Prohibiting smoking.
- Developing and enforcing storage, housekeeping, and debris removal guidelines.
- Conducting additional fire drills (if the project extends past 30 days).
- Increase hazard surveillance of areas affected by the current project.
- Training personnel to compensate for the impaired structural or compartmentalization features of fire safety.
- Conducting organization-wide safety education programs to promote awareness of ILSM.

There are three documents used for ILSM:

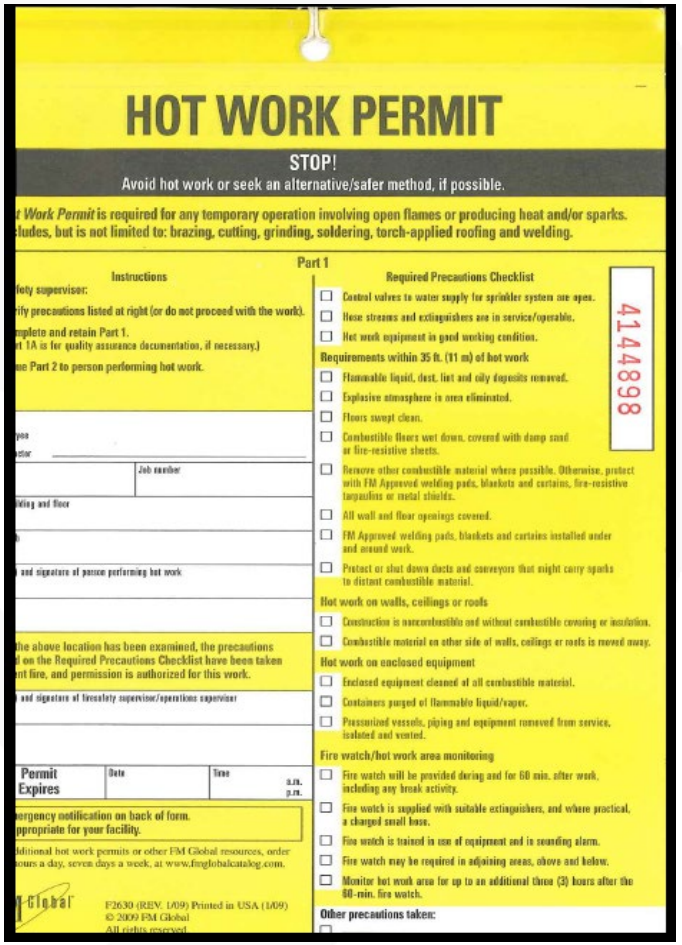
1. Assessment
2. Monitoring Log
3. Notice

Contractor Safety Orientation

Hot Work Permit:

Is a Methodist Health System policy.

- Contractor obtains permit from Technical Services Department
- Must do a check of the area before obtaining permit.
- Must request to have fire systems put on stand by.
- Needs to have good observation techniques.
- Hot Work is for 8 hours, last hour is for a cool down period. Additional work will require additional permit.



HOT WORK PERMIT

STOP!

Avoid hot work or seek an alternative/safer method, if possible.

Work Permit is required for any temporary operation involving open flames or producing heat and/or sparks. Includes, but is not limited to: brazing, cutting, grinding, soldering, torch-applied roofing and welding.

Part 1

Instructions

Required Precautions Checklist

4144898

Job number

Permit Expires

Date

Time

a.m. p.m.

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Contractor Safety Orientation

Hot Work Permit con't.:

Hot Spot during Hot Work

- If you did not pull a fire alarm but put out the fire, report your activities to your supervisor immediately
- Make sure you notified Security by dialing 6911 and ask to be connected to Security because of a Hot Spot
- Security will make sure that the Safety Officer is notified.

Contractor Safety Orientation

Fire Response

When working in the hospital buildings it is important to remember that Fire Response is the most important aspect of this training. **If you smell smoke or see fire you must …**

Respond by using the R.A.C.E. x 5:

- **R**escue those in danger
- **A**lert others by pulling the fire pull station and dialing 4-6911 MHS, 5-6911 MWH, 6-6911 MJE or 9-911
- **C**ontain the fire by closing doors or using an extinguisher
- **E**xtinguish if safe to do so or **E**vacuate using the x 5 rule

Contractor Safety Orientation

Fire Response

Fire Extinguishers using P.A.S.S.:

- When using a fire extinguisher follow
  - **P**ull the pin
  - **A**im the nozzle
  - **S**queeze the handle
  - **S**weep the nozzle from side to side at the base of the fire.

Contractor Safety Orientation

Construction Risk Assessment

METHODIST

PRE-CONSTRUCTION RISK ASSESSMENT (PCRA)

Date:

PROJECT NAME:

PRIMARY RESPONSIBLE PARTY
Project Owner:
Project Manager:
Contractor:

EMERGENCY CONTACT NUMBERS:
Project Manager:
Contractor:

Required:	Yes	No
Above the Ceiling Permit	☐	☐
Hot Works Permit	☐	☐
Dust Cart Use	☐	☐
Fire Watch	☐	☐
Epidemiology, Safety & FMP Inspection	☐	☐
Perimeter Check For Separation	☐	☐
External Equipment Staging	☐	☐
Noise Reduction Precautions	☐	☐
IT/Network Involvement	☐	☐

NOTE: This pre-construction risk assessment is applicable if the work is to begin in the next 30-45 days. A new risk assessment should be completed if any of these occur: the work has not started within this time period; there is a change in scope, a change in representatives of the affected areas. The project manager is responsible for determining if a new PCRA must be completed.

Representatives from the following are present: Areas impacted are present (Area where work is being done, those that will occupy the project area after the project is complete, representatives from areas adjacent to (beside, above and below) – depending upon the scope of the work, contractors, respiratory care if medical gas system will be affected, safety and infection control.

Will Life Safety Assessments be needed during the project?
☐ YES ☐ NO

Will additional Life Safety Assessments be needed throughout the project?
☐ YES – See attached ILSM ☐ NO

ESTIMATED START DATE:
ESTIMATED COMPLETION DATE:

SCOPE OF PROJECT:

Departments Located Above Work Area:

Departments Located Below Work Area:

Departments Located Adjacent to Work Area:

HOURS OF OPERATION: *(Will work on this project be done after normal business hours and/or weekends?)*

On (INSERT DATE), the following people gathered together to complete a Construction Risk Assessment for this project: See attendance list.

Risk Element	Plan of Action	Yes	No	Responsibility	Comments
Will **Infection Control** be compromised? Yes ☐ No ☐	See attached ICRA	☐	☐	Infection Control	
	Asbestos Abatement required?	☐	☐	Construction	
	Provide contractor with air intake locations, protect if necessary.	☐	☐	Construction	
	Negative Air Machine Monitoring	☐	☐	Construction	
Will **Utility Systems** be effected? Yes ☐ No ☐ If Yes, check below: ☐ Medical Air ☐ Oxygen ☐ Water ☐ Sanitary Sewer ☐ Elevators ☐ Natural Gas ☐ HVAC ☐ Plumbing ☐ Steam ☐ Fire Suppression ☐ Fire Alarm ☐ Lighting ☐ Emergency Power ☐ UPS Power	Schedule utility outages with construction and technical services	☐	☐	Construction	
	Verify Emergency Power does not serve active patient area. Provide back-up generator for emergency power supply if required.	☐	☐	Technical Services	
	Existing fire suppression being impaired by removing the ceiling tiles?	☐	☐	Technical Services	
	Fire Alarm detection heads need to be taken out of service/system on hold?	☐	☐	Technical Services	
	Verify Medical Air and Oxygen does not serve active patient area.	☐	☐	Construction	
	Verify Water does not serve active patient area.	☐	☐	Construction	
	Verify Lighting circuit does not serve active patient area.	☐	☐	Construction	
	Verify UPS Power does not serve active patient area. Provide backup power source for UPS power if required.	☐	☐	Construction	
Will there be **Noise**? Yes ☐ No ☐ If Yes, check below: ☐ Saw Cutting ☐ Overhead Crane ☐ Heavy Equipment ☐ Sanitary Sewer ☐ Coring ☐ Powder Actuated Tool ☐ Power Tools ☐ Pumps ☐ Hand Tool Pounding	Schedule noise producing activities around patient care	☐	☐		
	Alert effected departments prior to noisy activity	☐	☐		
	Move Patients away from noise producing activities if possible	☐	☐		
	Use alternate methods of demolition and construction if possible	☐	☐		
	Other	☐	☐		
Will there be **Vibration**? Yes ☐ No ☐ If Yes, check below: ☐ Saw Cutting ☐ Jack Hammering ☐ Overhead Crane ☐ Heavy Equipment ☐ Sanitary Sewer ☐ Coring ☐ Powder Actuated Tool ☐ Power Tools ☐ Pumps ☐ Hand Tool Pounding	Schedule noise producing activities around patient care	☐	☐		
	Alert effected departments prior to noisy activity	☐	☐		
	Move Patients away from noise producing activities if possible				
	Use alternate methods of demolition if possible	☐	☐		
	Other	☐	☐		

Contractor Safety Orientation

Construction Risk Assessment

When planning for demolition, construction or renovation the hospital conducts a **Construction** Risk Assessment and sets a Plan for:

Noise
Emergency procedures
Vibration
Infection Control
Air quality requirements
Utility needs and shutdowns

This Plan of Action may have requirements which must be identified and meet daily, weekly or through some other periodic measurement. Please notify us when your work tasks have changed and the Plan for Construction must be monitored for this phase.

Contractor Safety Orientation

Construction Risk Assessment

Utility Outages:

Any time during demolition, construction or renovation there is to be a utility , i.e. electricity, water, piped medical gases, pneumatic lines, elevators or any other potential service which may be providing for the care of patients, the contractor must have notified the owner in writing for the need to have this outage:

A TWO WEEK notice to Methodist is required for internal planning.

Lockout/Tag out required and coordinated with hospital Technical Services department.

If you accidentally turn off a utility without a permission, immediately notify your supervisor and make sure they contacted the Project Manager.

Contractor Safety Orientation

Construction Risk Assessment

Electrical Utilities:

Do Not use Life Safety and Critical Branch (**red**) outlets without specific permission.
Check with Technical Services dept. to ensure adequate amperages in circuit. **ASK – DON'T ASSUME!**

Never reset a circuit. Only hospital Technical Services staff or licensed electricians may do this.
Use care around all low voltage wiring. Lives depend on public address, nurse call, fire alarm, computers, etc
GFI construction plugs are required for all construction equipment.

Contractor Safety Orientation

Construction Risk Assessment

HVAC Utilities:

Protect HVAC Systems. **ASK – DON'T ASSUME!**

- Do Not cut or vibrate duct until the related HVAC system has been shut down and the duct work isolated.
- Seal all ventilation identified before beginning work.
- Set up dust isolation and/or Negative Air process
- Clean dust that has been effected inside the duct.
- Be aware that roof vent discharges pose a hazard to you, i.e. chemo drug fumes, lab hoods, sterilizers and isolation rooms.

Contractor Safety Orientation

Construction Risk Assessment

Water, Sewer and Sprinkler Utilities:

- Prevent releases of these sealed systems.
- All three system can cause damage and mold.
- Protect sprinklers – damage can result in the entire system above draining out.
- Communicate if one of these systems is accidentally broken open. Notify your supervisor, project manager, project owner, Technical Services dept. and Safety Dept. Remember to call 402-354-4111.
- Everyone will help clean up.

Contractor Safety Orientation

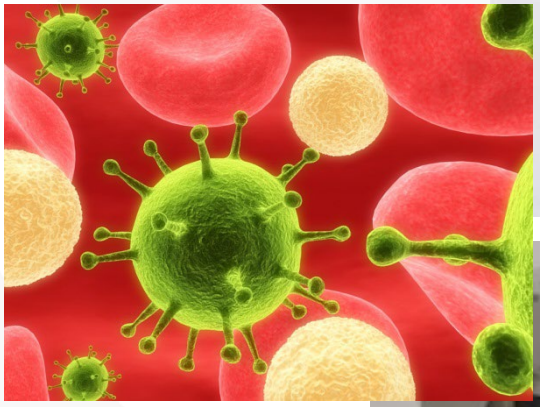
Construction Risk Assessment

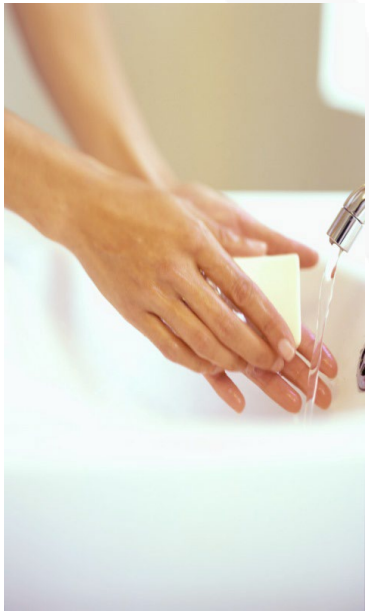
Medical Gas Utilities:

- Before starting any type of work, identify where these pipes and valves are located. **ASK – DON'T ASSUME!**
- Never shut these off without a Utilities Outage Permit.
- If working in a Patient care area and one of these gets damaged, go to the nurses station immediately and tell them what happened. Then call 402-354-4111 immediately.

Contractor Safety Orientation

Infection Control Risk Assessment





Contractor Safety Orientation

Infection Control Risk Assessment

Infection Control:

As we mentioned before, we plan prior to demolition, construction or renovation to determine what hazards might be present or we might incur as we move forward to do the work. One area that poses a high risk to our patients is the fact that we might create or disturb dust that has mold or germs in it.

Contractor Safety Orientation

Infection Control Risk Assessment

Dust Control or Clean Person:

- Examine yourself for dust or dirt on your clothes.
- Brush or vacuum your clothes off before entering occupied areas of the hospital.
- Follow the personal hygiene rules.

Contractor Safety Orientation

Infection Control Risk Assessment

Personal Hygiene:

- Wash your hands frequently with disinfectant soap.
- Cover your cough. Sneeze into shirt at elbow. Don't use your hands!
- Clean or cover your feet when entering an occupied area of the hospital.
- Wipe feet on mats before leaving construction area.
- Peel layers of sticky mats when necessary.
- Stay home if you are ill.

Contractor Safety Orientation

Infection Control Risk Assessment

Nebraska Methodist Health System
Fremont Methodist Hospital

Project Name: Wellness & Health Coach office	Project Classification:
Location: HPP 3505	Project Start date: TBD
Project Coordinator: Nick Dotzler	Estimated Duration: TBD
Contractor/s:	

Infection Control Risk Assessment
Matrix of Precautions for Construction Projects

Step 1. Using the following table, identify the construction project type (Types A-D)

Type A	**Inspection and noninvasive activities** Includes, but is not limited to, the following: • Removal of ceiling tiles for visual inspection – For further direction for above ceiling inspection and non-Invasive activities refer to NMHS policy: System Dust Containment • Painting (but not sanding) • Wall covering, electrical trim work, minor plumbing and activities that do not generate dust or require cutting of walls or access to ceilings other than for visual inspection
Type B	**Small-scale, short duration activities that create minimal dust** Includes but is not limited to, the following: • Installation of telephone and computer cabling • Access to chase spaces • Cutting of walls or ceiling where dust migration can be controlled
Type C	**Work that generates a moderate to high level of dust or requires demolition or removal of any fixed building components or assemblies** Includes but is not limited to, the following: • Sanding walls for painting or wall covering • Removing floor coverings, ceiling tiles and casework • New wall construction • Minor ductwork or electrical work above ceilings • Major cabling activities • Any activity that cannot be completed with a single work shift
Type D	**Major demolition and construction projects** Includes but is not limited to, the following: • Activities that may require consecutive work shifts • Activities that require heavy demolition or removal of a complete ceiling system • New construction

Infection Control Risk Groups

Step 2: Using the following table, identify the patient risk groups (low to highest risk) that will be affected. If more than one risk group will be affected, selected the higher-risk group

Low	Medium	High	Highest
1. Engineering 2. Environmental Services 3. Laboratory (excluding Micro) 4. Medical Records 5. Meeting rooms 6. Office Areas 7. Volunteer Services office	1. Cardiopulmonary Rehab 2. Cafeteria seating area 3. Diagnostic Services (except GI Lab) 4. Hospital Lobby 5. Patient Registration 6. Physical Therapy, Occupational Therapy 7. Outpatient Areas with low risk patients (Most Methodist Physicians Clinics)	1. BioMed 2. Blood draw area 3. Central supply 4. Emergency Department 5. General areas near highest risk areas (OR, etc.) 6. Nuclear Medicine 7. Radiology/MRI 8. Respiratory therapy 9. Inpatient Units (Acute Care for Elders, Medical /Surgical, Rehab, Observation, Cardiac Step down, Orthopedics /Neurology, Mother/Baby, Newborn Nursery, Labor and delivery)	1. Adult and Neonatal Intensive Care Units (including Cardiac ICU) 2. Any area caring for immune-compromised patients (Oncology, Radiation oncology, or Head and Neck clinic) 3. Cafeteria - food prep and serving 4. Cardiac catheterization/EP lab 5. Endoscopy/GI Lab 6. Intervention radiology 7. Invitro Fertilization 8. Laboratory – Micro 9. Operating Rooms (including C-Section) 10. Pharmacy 11. Postoperative unit 12. Preoperative unit 13. Pulmonary unit (inpt.) 14. Sterile Processing

Contractor Safety Orientation

Infection Control Risk Assessment

Class of Precautions: Construction Project Type by Patient Risk Group				
Step 3. Match the Following: • Construction Project Type (A, B, C, D) with the • Patient Risk Group (Low, Medium, High, Highest) to find the • Class of Precautions (I, II, III, IV) or level of infection control activities required (Class I-IV Precautions are described at the end of this matrix)				
Construction Project Type	Infection Control Risk Group Low	Medium	High	Highest
Type A	I	I	I	III
Type B	II	II	III	III/IV
Type C	II	III	III/IV	III/IV
Type D	III/IV	IV	IV	IV

Step 4. Identify the areas surrounding the project area, assessing potential impact					
Below	Above	Lateral (West)	Lateral (East)	Front (North)	Behind (South)
Lab (micro)	n/a	Office	n/a	Hallway/meeting room	n/a
Risk group	Risk group	Risk group	Risk group	Risk group	Risk group
Highest	n/a	Low	n/a	Low	n/a

Contractor Safety Orientation

Infection Control Risk Assessment

Additional considerations for the project
Step 5. Identify the specific site of the activity (patient rooms, medication room)
Health Park Plaza Room 3505; framing in a new wall & adding door with hardware. Will ensure privacy & no sound transmittance.
Step 6. Identify issues related to ventilation, plumbing, and electrical in terms of the occurrence of probable outages.
Low risk to potential outages
Step 7. Identify containment measures, using prior assessment. What types of barriers (solids, wall barriers) are needed? Will high-efficiency particulate air (HEPA) filtration be required?
Poly with HEPA air scrubber
Step 8. Consider the potential risk of water damage. Is there a risk due to compromising structural integrity (wall, ceiling, roof)?
Low risk to compromising existing wall, ceiling or roof
Step 9. Work hours: Can or will the work be done during non-patient care hours?
no
Step 10. Do plans allow for an adequate number of isolation/negative airflow rooms?
n/a
Step 11. Do the plans allow for the required number and type of hand-washing sinks?
n/a
Step 12. Do the infection control staff agree with the minimum number of sinks for this project? (Verify against required guidelines for types and areas.)
n/a
Step 13. Does the infection control staff agree with the plans relative to clean and soiled utility rooms?
n/a
Step 14. Plan to discuss the following containment issues with the project team • Patient traffic flow • Construction personnel traffic flow • Housekeeping • Debris removal
See Interventions listed below

Contractor Safety Orientation

Infection Control Risk Assessment

Description of Infection Control Precautions by Class	
Class II	
Before Project Begins	1. Notify Department of Infection Control before construction begins 2. Execute work by methods to minimize raising dust from construction operations 3. Complete barriers before construction begins a. Seal unused doors with duct tape b. Seal holes, pipes, conduits, and punctures appropriately c. Block off/seal ventilation supply and return vents d. Remove or isolate HVAC system in areas where work is being done to prevent contamination of the duct system 4. Use walk off mat system (wet and/or dry) at project entrances
During Project	5. Provide active means to prevent airborne dust from dispersing into atmosphere 6. A dust cart is required when removing ceiling tiles for construction related projects outside of established construction barriers (hard wall or plastic containment walls) 7. Vacuum the tops of ceiling tiles with a HEPA-filtered vacuum before removal to minimize dust generation 8. Immediately replace any ceiling tile displaced for visual inspection 9. Cover transport receptacles or carts and wipe down before removing and returning to area 10. Contain construction waste before transport in tightly covered containers 11. Use vacuum sander and/or wet sanding method for drywall sanding and assure dust control barriers are in place 12. Water-mist work surfaces to control dust while cutting
Upon Completion of Project	13. Cleaning of the area will be determined by the ICRA team during the CRA meeting 14. Do not remove barriers from work area until completed project is thoroughly cleaned by the contractor and environmental services department, as determined by the ICRA team during the CRA meeting

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Above Ceiling Permits

Opening ceiling anywhere in the hospital will always require you to go to Maintenance and obtain a permit, and a dust cart or put up a poly rated barrier.

Permit Holder

All hospital locations have these but they are on a first come, first save basis

Contractor Safety Orientation

Containment

- Immediately close doors when entering or exiting construction areas.

Negative Air Pressure & Negative Air Monitoring:

- All construction work that would create or stir up dust in high risk patient care areas must be within a containment area that has negative air pressure.
- **Never** turn off or tamper with negative air machines or instruments.

Contractor Safety Orientation

Asbestos

Asbestos is present in certain buildings located throughout the Methodist Health System. The hospital will identify the presence of asbestos prior to any demolition, construction or renovation that might disturb it. Asbestos is not dangerous unless disturbed which then releases the hazardous fibers into the air.

Contractor Safety Orientation

Chemical Hazards

Your employer is responsible for providing the you with a list of chemicals and the Safety Data Sheet for those chemical(s). They are also responsible for you being trained on the hazards related to those chemicals and how you protect yourself from those hazards when you use them.

Contractor Safety Orientation

FIRST DAY

- Contractor Orientation
- Obtain ID Badge
- Project logistics
- Where do I park?
- Where do I eat lunch?
- Where do I restroom?
- How do I access my project location?
- Follow the rules
- Respect patient confidentiality
- Remember the emergency codes
- Do your job in a way that minimizes all known risks.

Above all, serve the patients, staff and visitors!