CONSTRUCTION
RENOVATION
REPAIR

CONTRACTOR’S
ORIENTATION HANDBOOK
HEALTH CARE CONSTRUCTION, RENOVATION AND REPAIR CONTRACT WORKER’S HANDBOOK: AN INTRODUCTION TO WORKING IN A MEDICAL FACILITY.

This guide is an introductory training tool to educate contractors on the “Do’s” and “Don’t’s” of working in any of the Methodist Health System facilities, especially the hospitals. You will learn about privacy issues and the special needs of departments such as the Intensive Care Unit, the Cancer Center, the Operating Room, MRI, Pathology and the Emergency Department.

During construction, renovation, and repairs, materials as seemingly harmless as dust or debris could potentially disrupt or cause harm to patients and patient care. This work could stir up the release of molds and fungus, putting all occupants of the building, especially the patients at risk. With CONSTRUCTION RENOVATION REPAIR CONTRACTOR’S HANDBOOK, construction crews, whether contracted or internal, will understand the safety issues at the Methodist Health System facilities before they begin any work. This guide will provide answers to the workers’ most important safety or infection control related questions.

This practical guide includes information on the following:
- What’s unique about construction work in a medical facility
- The importance of a Life Safety assessment
- The importance of a Preconstruction Risk assessment
- The Importance of an Infection Control Risk assessment
- Safety, Security and conduct issues
- Utility management
- Real life on the job lessons learned at medical facilities covering airflow problems, water leaks, mold and the spread of asbestos.

This handbook also includes general security and safety information about our facilities. Information you should know so you are safe on our campus!

YOUR RESOURCES

Your resources at the Health System can be contacted by calling the Methodist Health System Customer Service Call Center at 402-354-4111.

- Department of Construction, Facility and Project Management
- Department of Epidemiology (Infection Control) for Nebraska Methodist Hospital & Women’s Hospital
- Department of Infection Control for Methodist Jennie Edmundson
- Department of Technical Services, i.e. Maintenance, Plant & BioMed
- Department of Environmental Services (Housekeeping)

- Department of Safety
- Security Department
- Employee Health Department
  - Methodist Hospital Switchboard 402-354-4000
  - Methodist Jennie Edmundson Switchboard 712-396-6000

This education is a collaborative process of the individuals from Methodist Health System with specialized training in these areas. This includes facilities owned or rented by Methodist Health System such as Methodist Health System Corporate, Nebraska Methodist Hospital, Methodist Jennie Edmundson, Methodist Women’s Hospital, Methodist Physicians Clinics and Methodist College of Nursing and Allied Health.
INTRODUCTION

Before beginning any construction, renovation or repair project, determine first what you and the Methodist Health System want to accomplish. A project becomes meaningless if serious efforts are not made to protect the patients, staff, visitors and you! Through your work, you become an important part of Methodist’s team. Working seamlessly with us is one of the best ways to ensure the safety of the patients, employees and yourself.

Why do you need to be so concerned about safety? The most obvious reason is that someone could die or be seriously injured! Secondly, Methodist is governed by different regulatory agencies that oversee safety if problems come up from the work that you do. And finally, from your company’s viewpoint, future construction jobs could result from a successful working relationship with Methodist Health System.

Every aspect of your task, including your conduct on the job, has the potential to effect the facility’s operation – whether it is a large or small project.

You need to have an understanding of certain functions and associated hazards, in case you work in areas such as:

- Intensive Care
- Surgical Operating Rooms
- Cancer Center
- Neonatal Intensive Care - NICU
- MRI
- Pathology
- Emergency Department

Lack of familiarity with the layout of the area, lack of knowledge of the associated hazards and/or the lack of communication on your part could spell disaster for you and all who work or receive care in the area. An error as simple as turning off the wrong switch or walking into a room can mean the difference between life and death for a patient or you!

The typical communication on small projects involves:

- Your business being contacted.
- You are dispatched to do the work.
- You make contact with the party who made the request.
- As you enter the floor, talk to a receptionist or the person who made the request and let him/her know you are here to do the work.

For most projects, a designated person who works for Methodist Hospital, Methodist Jennie Edmundson, Women’s Hospital or Methodist Physicians Clinic is your primary contact.

Update this contact person of your progress or changes as established in your plans. This communication strengthens the bond between you and the Health System and ensures there are no surprises for any of the parties involved as the project unfolds.

Make sure that a Life Safety Assessment/Pre-Construction Risk Assessment/Infection Control Risk Assessment has been done before the first jack hammering, wire pulling or paintbrush strokes occur. Address all requirements before beginning, so no one is caught off guard. Don’t be afraid to come forward and communicate anything that might have been missed during the assessments. Regulatory officials may need to be contacted to address all requirements, such as building inspectors and fire marshals.
Be aware that the Life Safety Assessment/Pre-Construction Risk Assessment/Infection Control Risk Assessment covers issues such as:

- Details about the areas in which you will be doing your work.
- Type of equipment needed
- Rules and regulations, including hot work, burn permits, utility shut off permits, etc.
- Plans for removing debris
- Air Quality
- Ceiling/Ceiling Tile entry

You will find these assessments helpful to you and key to the medical facility’s compliance with many of its governing regulations.

This handbook will help guide you through the Methodist Health System construction, renovation or repair processes. It highlights the issues most critical to creating an effective and safe environment for you, your co-workers and those providing care, receiving care or visiting the facility.

Additional education is available regarding the Methodist Health System construction, renovation or repair processes. Please talk with your Health System resources on setting up a training session for you or your staff.
METHODIST HEALTH SYSTEM
MISSION, VISION, AND CORE VALUES

Methodist Health System (MHS) is a regional network of health care providers and educators who share a dedication to providing high quality, affordable health care to people of Nebraska and southwestern Iowa. Established in 1982, MHS was the first health system to be created in the region. Through its affiliates, MHS has developed health care programs that have become national models. Methodist Health System includes the following organizations:

- Methodist Jennie Edmundson
- Nebraska Methodist College
- MHS - Corporate Offices
- Methodist Hospital
- Methodist Women’s Hospital
- Methodist Hospital Foundation
- Methodist Physicians Clinic
- Shared Service Systems

MISSION

Improving the quality of life through excellence in healthcare.

VISION

We will be the provider of choice for healthcare in the community we serve.

VALUES IN OUR WORKPLACE (CULTURAL COMPETENCE AND DIVERSITY)

At MHS, we recognize the importance of respecting the individual differences of our co-workers, patients, and customers through our core values and employee standards of behavior. These differences may include such areas as age, race, creed, ancestry, national origin, color, religion, ethnicity, gender, disability, marital status, veteran status, socioeconomic factors, sexual orientation or gender identification.

We believe the differences in background, outlook, and experience we all bring to the table make us a well rounded team. Does it present challenges? Yes! But by working together towards our common goal – the patient – we can overcome any challenge.

Affirmative Action

Methodist is an Equal Employment/Affirmative Action employer, meaning that it is committed to providing equal employment opportunity to all applicants and employees, regardless of their race, color, gender, religion, national origin, sexual orientation, gender identity and disabled or veteran status. Specifically, Methodist is required to comply with the requirements of Executive Order 11246, as amended, related to affirmative action; Section 503 of the Rehabilitation Act and the Americans with Disabilities Act, covering the employment of the disabled; and Section 402 of the Vietnam Era Readjustment Assistance Act of 1974, covering the employment of veterans. As part of these obligations, Methodist is required to monitor and analyze its employment practices to ensure equal employment opportunity for all individuals, regardless of their membership in any protected class. Should you have any concerns or suggestions on how to better promote equal employment opportunity, please contact 402-354-2200.

CORE VALUES

We are patient centered, patient driven.
We honor and respect the dignity of all.
We strive for excellence and push beyond.
We work as one.
We are dedicated to serving our community.
MHS STANDARDS OF BEHAVIOR

The Standards of Behavior are a powerful tool for building a culture of Service Excellence. The Standards of Behavior set the rules by which employees behave and are held accountable. We expect the same behavior standards from our contract workers.

Employee Standards of Behavior

As a MHS employee, I am committed to being respectful, courteous, and providing exceptional care and service to our patients/customers, their families, and to each other.

I take responsibility to:

- Ensure every person, be they: patient, family member, physicians, volunteers, customer, etc. in our facility is treated with dignity and respect.
- Respect our customers’ values, privacy, and environment.
- Value our customers’ time. I understand they are the reason I am here.
- Meet each patient/customer’s immediate need or take them to someone who can meet their needs adequately.

Compassion andCourtesy - As a Methodist Employee, I am committed to Service Excellence.

I take responsibility for every patient/customer in our facility. I am committed to:

- Welcoming and acknowledging patients/customers, physicians, and each other in a friendly manner by smiling, making eye contact, greeting them, and introducing myself.
- Making people feel welcomed by giving every person who approaches me, my undivided attention.
- Being courteous and kind to patients/customers and families in our facility, addressing them with “please”, “thank you”, and “you’re welcome”.
- Listening to concerns intently and completely, and then answering questions in a calm, patient, and empathetic manner.
- Offering assistance when required to make our patients/customers feel safe and secure, even if I am not directly responsible for the care of that particular patient/customer.
- Keeping other members of my team and my patients/customers updated on procedures and/or delays, so everyone is aware of changes in timeframes and circumstances.
- Listening to patient/customer concerns, apologizing and resolving issues with empathy for them while striving to enhance the image of our institution, utilizing the Customer Service Recovery Policy when necessary.
- Thanking our patients/customers for choosing our organization by my words, attitude, and actions.
- Welcoming and mentoring all students (nursing, medical, pharmacy, therapists, etc.) as a commitment to education and accepting them as part of our team with kindness and courtesy.

Ownership and Pride - As a Methodist Employee, I take ownership and pride in our organization and in my individual job.

I take responsibility to:

- Conduct myself in a professional manner that displays ownership, pride, and compassion through actions, appearance, and attitude in front of patients/customers and each other at all times, according to Methodist’s Core Values.
- Keep personal and work problems away from patients/customers and/or families. If I have a problem/concern, I will talk with my supervisor in a private place and/or use the services of Methodist’s Employee Assistance Program (EAP).
- Know, understand, and accept the responsibilities of my job and related policies and procedures.
- Strive to do my job right the first time and every time by paying attention to details and completing tasks in a timely manner.
- Take pride in my personal appearance and in the appearance of our facilities. (Adhering to dress code policies, picking up litter and disposing of properly, ensuring spills are properly cleaned up, informing
Housekeeping Department when necessary, and returning equipment to its proper location.)

- Recognize that a warm and friendly smile is reassuring to all our patients/customers, especially those who are ill, anxious or afraid.
- Accept criticism without becoming defensive or angry and use it as a mechanism to help me improve.
- Understand it is my responsibility to keep current on information that is sent to me via email, posted on mhsintranet, and/or presented at unit meetings.
- Take pride in my work environment by offering suggestions for improvements for patient/customer care.

I am dedicated to:

- Adhering to policies.
- Contributing to the safety and security of the working environment by reporting all safety accidents/incidents immediately.
- Wearing my identification badge where it can be seen by others to assure our customers of my identity and my role, and increase their feeling of safety. I will introduce myself by name and by my role so others will know exactly who I am.
- Confidentiality by:
  - Communicating with patients and their families in the most private way feasible, closing doors or curtains when indicated and assisting physicians to do the same.
  - Always knocking or announcing my presence before entering a patient’s room and closing curtains or doors during examinations, procedures, or whenever needed.

Commitment to Safety - As a Methodist Employee, I understand that keeping our patients and ourselves safe is everyone’s responsibility.

I take responsibility to:

- Practice safety because it is the right thing to do for our patients/customers, their families and my co-workers.
- Know the policies and procedures of our institution relating to safety.
- Be prepared for emergencies and know the correct actions to take in the event of an emergency.
- Ensure patient safety by checking armbands before performing any procedure or administering any medication.
- Take responsibility for identifying and protecting patients/customers at risk for injury.
- Keep all patient/customer information confidential, only sharing if there is a “need to know”.
- Promptly respond to all alarms and take necessary action.
- Be aware of potential hazards and wear personal protective equipment when appropriate.
- Identify safety hazards as they are seen, correct and report as necessary.
- We will keep ourselves fit and practice good body mechanisms to prevent back and shoulder injuries, especially when lifting, pulling or carrying.
- Ask for help when necessary.
- Be proactive in identifying and reporting mistakes so we can learn from them and make recommendations to prevent future mistakes.
- Promptly report any job-related injury.
- Utilize the services of employee health department and its designated physician for any work related incident.
PATIENT / CUSTOMER SAFETY

Violence, Abuse and Neglect

As members of the health care community, we each have a special duty to be aware of the safety and well-being of our patients, our visitors and ourselves at work.

Threats in our workplace may take the form of angry co-workers, patients or visitors, co-workers or patients who are suffering from domestic violence or patients experiencing other mistreatment or abusive conditions at home. We are obligated to pay attention and do something if the situation warrants our intervention.

Please talk to a Health System contact if you have concerns.

ENVIRONMENTAL SAFETY

All Methodist Health System locations have site-specific policies and procedures outlined in the Emergency Procedures Manual. Ask your Methodist Health System contact to show you where these manuals are kept. Please refer to these for all emergency-related issues (fire safety, disaster, missing persons, utility and equipment management, lock-out/tag-out, hazardous materials and waste, codes, and responses).

Emergency Preparedness

Any number of hazardous events may disrupt the hospital’s ability to provide normal healthcare services/operations.

Event examples include:

- Natural: e.g., tornado, blizzard, flood
- Human: e.g., mass casualty, active shooter
- Technology: e.g., information system (computer) failure, electrical failure
- Hazardous Materials: e.g., chemical spill/exposure, radiological accident/exposure

The top two identified risks the Methodist healthcare settings are vulnerable to are tornado (evacuation with structural damage) and mass casualty with an influx of patients.

- When such an event occurs involving the hospitals, the Administrator on call or the on-duty Administrative Coordinator (AC) makes the decision to activate/announce Code Triage.
- Once announced the Administrator on call or AC opens the hospital command center as the incident commander and may request additional trained incident command staff to assist in managing the event response.

ACTIVE SHOOTER/ARMED INTRUDER

“CODE SILVER”

Code Silver is the announcement/code for an active shooter or armed intruder. Preparedness and response are important in an Active Shooter event. Please discuss the action plan for your area with your Methodist Health System contact.

CODE ADAM / CODE WALKER / MISSING ADULT VISITORS / DR. MAJOR

- Code Adam is the announcement/code for infant/child abduction.
- Code Walker is the announcement/code for patient elopement (leaves unit or campus).
- Dr. Major is the announcement/code used to identify an agitated patient or visitor.

Please discuss the action plans for your area with your Methodist Health System contact.
Fire Response Q & A

**Question:** How would you rescue a victim if the room was half full of smoke?

**Answer:** Go in low, on your hands & knees with a co-worker at the doorway.

**Question:** At what point would you not rescue a person from a room that is on fire?

**Answer:** When the room is completely filled with smoke.
Question: How would you alert others that a patient’s room has been checked and evacuated?
Answer: By placing a towel or garbage bag over the door and closing it.

Question: Describe the “Alert” steps of R.A.C.E
Answer: Shout Code Red, Call 6911/9911, pull the fire pull station.

Question: Describe two ways to contain smoke.
Answer: Closing doors to rooms and closing doors to hallways.

Question: Can you describe how to use a fire extinguisher?
Answer: Use the acronym P.A.S.S. (Pull, Aim, Squeeze, Sweep)

In case of a fire, use the term “Code Red.” Be sure to do your part:

- Know where fire extinguishers, fire pull stations, compartments and exits are located in your work area.
- Know your duties in case of a fire.
- Refer to the Emergency Procedures Manual for site-specific and department-specific policies and information.

Protecting yourself and patients/customers during a fire is essential.

**Hazardous Materials and Waste**

You may come into contact with chemicals or other hazardous materials and waste at work.

- All chemicals have labels.
- Know your chemicals and the hazards of those chemicals
- To review the Safety Data Sheet on any chemical, call the Safety Department or access via mhsintranet / Quick Links / SDS Safety Data Sheets.

**Important Note:** We are responsible for all the chemicals brought to our campus locations. Please DO NOT bring chemicals to work unless they are cataloged and listed on a Safety Data Sheet or approved by Safety. Chemicals not listed on our SDS system, or approved by Safety are forbidden in the workplace.

**Infection Control**

**Cough Etiquette**

Preventing the spread of respiratory infections at the first point of contact is key. Elements of respiratory / cough etiquette include:

- Cover your mouth and nose with a tissue when coughing or sneezing.
• Clean hands frequently with soap and water or alcohol hand rub.
• Supply a mask for a person coughing to wear.
• Proper hand hygiene after contact with respiratory secretions.
• Disinfect work surfaces, telephones and keyboards

**Hand Hygiene and Why it is important**

Hand hygiene is *the single most important thing* you can do to prevent the catching and spreading of infection. Did you know . . . some viruses and bacteria live for prolonged periods of time, on surfaces such as tables, doorknobs, and desks?

Hand hygiene is *everyone’s* responsibility! It is for *your* protection as well as the patient’s protection.

The spread of infectious disease can be controlled easily by following established practices and guidelines.

**What is unique about construction, renovation or repair at a medical facility?**

All medical facilities, particularly hospitals, present their own unique sets of features and qualities that make them different from other locations in which you may have worked previously. One of the most challenging aspects is working in close proximity to patients, while not disrupting their care. You may also work near people who have medical conditions you are unfamiliar with.

Today, medical facilities operate in a competitive market and under strict rules and regulations from organizations that oversee safety and other issues. In fact, hospitals are probably the most regulated industry in the United States. Medical personnel often work under stressful and ever changing conditions. Trying to understand the challenges medical facility employees face will go a long way in helping you complete your project in a timely and safe manner.

Given the uniqueness of medical facilities, there are many precautions you should take with the help of your facilities’ resource staff, including the following:

• Review the layout of the areas in which you might have to travel to get to the areas where you will work.
• Review all engineering plans and diagrams appropriate for the job.
• Create an alternate fire safety path if your work will interfere with the current path.
• Determine which utilities control the machines and lighting in your work area.
• Structure your project to comply with Life Safety Measures and make sure that Interim Life Safety Measures are developed and implemented if necessary.
• Review local and state regulations that affect construction for compliance.
• Don’t work in a vacuum! Use the personnel and resources available to you to help ease the way and improve the plan.

Medical facilities also present distinctive environmental issues, including the need to maintain appropriate indoor air quality. Hospitals in particular contain areas that must remain free of any contaminants. Take care to maintain proper indoor air quality levels, whether you work with chemicals, solvents, glues, paints, stains, aerosols, or anything that produces odors or fumes. Using proper containment techniques and air monitoring devices are essential in protecting patients who may be susceptible to airborne illnesses.
Fire/Life Safety/Interim Life Safety Assessment

Of the various industries in the United States, hospitals have worked the hardest to reduce fires. Medical facilities’ fires are not only devastating, but often life-threatening because of the risk to patient safety. Construction, renovation and repair projects raise some significant concerns relative to fire safety. The process of “Hot Work” such as welding, brazing or soldering creates additional hazards because of the flammable gases that are used. Cutting of materials, the use of chemicals and processes where steam, heat or vapors are present poses risk to setting off detectors. The staging of material or the demolition or construction of an area which interrupts the pathways to escape must be re-routed. Education must be provided to the staff in that area.

Preparing the alternate Life Safety Plan is necessary if the project requires us to disarm fire alarms, smoke detectors, heat detectors, or sprinkler systems. The processes are known as Interim Life Safety Measures (ILSM). These actions may require us to notify the local fire department, the state fire marshal and the facility’s insurance provider and have special inspections known as “Fire Watches.”

Methodist Health System facilities, particularly the hospitals, have adopted their own fire prevention standards based on regulatory requirements. For example, one ILSM is for you to inform us when you are doing “Hot Work”. It is important that you follow hospital staff instructions during an actual fire emergency.

Familiarize yourself and your coworkers to the R.A.C.E. expectation when there is a fire emergency.

R - Remove anyone from the immediate scene of the fire.
A - Alert others by pulling the fire alarm and dialing 6911/911
C - Confine the fire and smoke by closing doors or using a fire extinguisher in the early stages of the fire.
E - Evacuate times 5: From the room, the smoke compartment, to the next floor in adjacent building, down the elevator in that next building if directed by the fire department or down the stairs to the outside.

Know how to use a fire extinguisher and make sure there are extra fire extinguishers (provided by your company) in the area where you are working, especially if “Hot Work” is being done.

P - Pull the pin on the extinguisher
A - Aim the nozzle at the base of the fire
S - Squeeze the handle of the extinguisher
S - Sweep the handle back and forth

All of the Methodist Health System facilities are tobacco free which means no smoking or chewing of tobacco or tobacco products. This also means no chewing of sunflower or other types of seeds.

Tip! Obtain permission before penetrating any wall. If a wall is penetrated, you must restore the wall to its original condition, including sealing any penetrations and UL Systems on a daily basis!
Fire and smoke walls are critically important in limiting the passage of smoke and fire from one room to another. Without this protection, if there were a fire, staff could not keep patients safe without a complete evacuation of the building.

**Pre-Construction Risk Assessment**

Once you are hired, anticipate what risks you could encounter on the job. The best way to do this is to meet with your Health System resources. Work with them to identify hazards that you and your co-workers may face while working in the facility and how you will manage those hazards. Even though this assessment is done at the onset of work, constant re-assessment needs to be done to minimize the possibility of things changing or something being overlooked.

This assessment should also identify hazards that effect the facility’s environment beyond the construction area. Every activity that you conduct during the course of a project could negatively impact your surroundings. In addition, the Plan that is developed from the assessment should specify what actions to take if unanticipated events occur such as:
- Water leaks
- Loss of negative pressure
- Barriers that come down
- Utility failures
- Fires
- Other emergencies

The key element of this process is completing a pre-construction risk assessment prior to every construction, renovation or repair project – regardless of its size or scope. This assessment will identify the potential hazards that could affect patient care and the safety of everyone involved. Among other things, the assessment should cover whether your construction, renovation or repair will affect:
- Noise
- Emergency procedures
- Vibration
- Infection Control
- Air Quality
- Utilities
- Employee/Patient ingress/egress

Your company will also provide Methodist with a list of chemicals with Safety Data Sheets and materials you plan to use on the job. Your Methodist resources need to know if you work with hazardous materials, how you will dispose of them and how you will handle a spill or leak. Plan ahead for how to move materials in and debris out. Identify the route construction workers will take and establish appropriate areas for the disposal of materials so they can be secured.

Remember, patient care takes precedent over construction activities, so contractors need to be flexible with scheduling and make sure that the plan keeps all occupants of the buildings safe!

**Noise, Vibrations and Electronic Communication Devices**

Try to keep noise to a reasonable minimum for the comfort of the patients and staff. Understandably, you will not be able to control the noise level of the machinery or tools you use. Alert staff members before hand so nearby patients and employees can be prepared and know what to expect. Stop immediately if you are told to do so! During the pre-construction risk assessment, discuss the noise and vibrations that you will create and determine
the best time of day to conduct that work. Vibrations that result from your work can not only disrupt patient care, but could significantly impact delicate and expensive medical equipment.

Pay attention to noise levels and vibrations when setting up or removing equipment.

**Tip!** Learn the facility’s policy for use of electronic communication devices, especially walkie-talkies, cameras on cell phones, boom boxes and radios.

Electronic communication devices such as walkie-talkies will interfere with some medical equipment. Permission should be sought prior to use. Although cell phones don’t pose the interference problem, if pictures are taken, problems could arise from a confidentiality perspective. Radios, I-pods and music devices should never be used.

Make every effort to keep your voice down when talking. Conversations among you and your co-workers on the job could disrupt patients and staff.

**EMERGENCY PROCEDURES**

During the Pre-Construction Assessment, your resources will consult with the Construction Leaders to determine if an emergency could arise while the work is being done. This includes the possibilities of:

- Fire/ILSM – Code Red
- Utility outages
- Weather/Tornado – Watches/Warnings
- Ambulance passage to work area
- Other types: Code Silver – Active Shooter, Code Black – Bomb Threat

Through these discussions, a plan is devised so all parties know who and how to respond.

**UTILITIES**

Be familiar with all the different types of medical facility utilities, their functions, connections and pathways.

Literally, lives are at stake when working with utilities such as water, electricity, medical gases and oxygen. Even devices such as suction lines and elevators could be affected during the project.

In some instances, labeling on existing utility lines could be inaccurate or outdated. Check with appropriate Methodist Technical Facility staff to verify the information on the lines is current.

**Tip!** Before touching any utility line, make sure that your work has been approved in the Pre-Construction Risk Assessment. If the utility is to be shut off, make sure a permit has been issued.
If a utility fails while you are working on it, notify all necessary parties and seek permission from Methodist Technical Services before turning it back on. These parties include:

- Charge or Core Nurse in immediate area
- Your supervisor
- Methodist Customer Service Call Center at 402-354-4111
  - Inform the Call Center to contact:
    - Technical Services
    - Construction Manager
    - Safety
    - Infection Control

Report all failures or outages and seek permission to reconnect a utility. Turning it back on could cause injury or death!

In the event of a burst water pipe or sewer pipe during construction, renovation or repair, be aware that the liquids can spread to different floors (not only the physical plant, but also spread to other utilities, such as electrical lines). Problems that result could include the spread of infectious waste or contamination of a sterile area. Leaks might also affect asbestos if in the area. MHS has policy and procedures on water leaks. Reporting them is the best way to make sure they are cleaned up properly to prevent mold growth later.

**INFECTION CONTROL RISK ASSESSMENT**

**INFECTION CONTROL**

In a medical facility setting, material as seemingly innocent as dust could harm patients because it might spread infections. During the assessment phase, your resources will:

- Examine the type of work being done
- Review how that work will make dust, dirt and debris
- Determine the potential for injury based on the types of patients located in or nearby the work location
- Determine the best pathways for debris and materials to come in/out of the building and work area.

This assessment will also look at plans for eliminating the spread of dust from getting into air ducts and exhaust fans, by sealing off exhaust ducts yet allowing air to come into the area to maintain temperature and air flow.

**Tip!** Monitor air quality around the work site to determine whether dust and other materials have escaped the measures planned, especially the containment barriers.

When the room configuration does not allow sole containment, containment barriers will either be:

- A temporary hard wall made up of studs and sheetrock that is taped and sealed at the ceiling and the floor
- A temporary wall made up of fire rated polyethylene sheeting that runs from ceiling to floor utilizing ‘Zip-wall Barrier Systems’, duct tape and closed door entry with zippers.
Sticky walk off mats will be located at the entrance to the work site. Please make every effort to eliminate dust which may attach to your clothes or equipment when leaving the work site, as this dust may be spread throughout the hospital.

**AIR QUALITY**

The construction, renovation or repair has the potential to impact air quality no matter where in the facility you work.

The Infection Control Risk Assessment (ICRA) Plan will provide the ways for containing dirt, dust and debris in and around the job site. Odors and fumes from painting, “Hot Work” or laying tiles or carpeting could have far reaching impact on the quality of the air that patients breathe. The plan must prevent odors and fumes from reaching the ventilation systems. Be on constant vigilance for odor, fumes and dust traveling from the work site to other areas in the building.

The Plan will include ways to make the work site ‘negative’ pressured compared to the perimeter areas. That is, the air from outside the work site will be sucked into the work site. This makes sure that dust, odors and fumes are being pulled back. Negative air pressure machines may be used and they must be maintained, running at all times. The machines may have monitoring equipment on them to make sure that this negative air pressure gradient is not interrupted, otherwise the monitor will alarm. In some instances, it may be necessary to install fire dampers where the negative air machine dumps its air into another space.

Although we have discussed many ways to promote Infection Control, there are some areas that may require further measures, i.e. surgery suites and cancer treatment areas. It may be necessary to install ante rooms between the work space and the perimeter work areas of the facility. Ante rooms are used for controlling the infectious potential in and out of the workspaces. This includes changing in and out of coveralls, vacuuming yourself and equipment with Hepa-vacuums and cleaning anything going into or out of the work space.

Asbestos regulations differ from state to state. Asbestos is present in some of the buildings in the Methodist Health System. The PCRA/ICRA assessment and plans will identify if asbestos is present and what work will be done that might disrupt it. If you are not sure if asbestos is present and/or that your work will disrupt it, talk with a Health System resource.

**PRIVACY AND SECURITY**

Under the federal law called ‘HIPAA’ (Health Insurance Portability and Accountability Act of 1996), patients have the right of privacy from staff, visitors and other on-site persons. No matter where you work in a medical facility, you could inadvertently learn about private patient matters. If you do become aware of confidential matters, do not discuss them with anyone inside or outside the facility.

**Tip!** Everyone at sometime will come into contact with someone they know who is a patient. Please do not talk to anyone about this. It is a violation of HIPAA!
Please do not wander the hallways during breaks. If you leave the job site or go from one work area to another, respect the privacy of patients and staff. If patients are present or the area appears to be “off limits” to the general public, obtain permission from staff before entering any room or area in which you need to work.

Before you start work, obtain the proper photo ID from the Methodist Health System Security department. This photo ID is usually provided after a class orientation or from your supervisor or Methodist Health System Technical Services representative. Wear your identification tag at all times on your shirt while you are on the property.

**COURTESY AND APPEARANCE**

Since many of the Health System construction projects, renovations and repairs require you to work among staff and patients, be aware of your appearance and behavior on the job! You represent yourself and your company, and want to make sure that you are invited back to handle future projects. Given the round the clock functioning of the hospital and our other medical facilities, there will always be staff and patients on-site, even if you work odd hours.

**Tip!** At each site where you work, introduce yourself to the person in charge of that area. He or she can become an invaluable resource throughout the project!

**‘The Rules’**

To preserve the safe and health promotion environment of all MHS facilities, please be aware and follow our rules. The following will be helpful for you to know:

- Wear a photo ID issued by the Security department
- 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.
- Don’t go to unauthorized areas. Public areas are allowed.
- Do not use any tobacco products on the property.
- Don’t have, share, sell or distribute illegal drugs, paraphernalia, alcoholic beverages or weapons.
- Don’t solicit or distribute. (Provide Solicitation & Distribution policy)
- Remove dust from clothing and equipment before you move through the hospital or other facilities.
- Don’t eat any type of seed that requires you to spit out the shells.
- Don’t play radios in the project area.
- Wear short sleeved or long sleeved shirts without noticeable tears, long pants and shoes.
- Don’t wear your hat or cap in the cafeteria.
- Don’t harass or flirt with patients, visitors or staff, i.e. cat calls, whistles, etc
- Maintain patient confidentiality at all times.

**THE BOOK**

Methodist Health System utilizes three ring binders with the related assessment forms and plans as discussed in this handbook. The binders are located at each construction site.

**YOUR FIRST DAY!**

Before you start your project, be sure to:

- Complete hospital/facility training
- Obtain your ID badge
- Discuss project logistics
- Know where to park
- Know where to eat lunch
- Know where the restrooms are located
- Know how to access your project location
- Remember to follow the rules
- Remember to respect patient confidentiality
- Remember the emergency codes as provided on the laminated card.
- Do your job in a way that minimizes all known risks.

Thank you for being a member of our team! We look forward to working together to serve our patients, their loved ones, our staff and visitors!

**REAL-LIFE LESSONS LEARNED**

**You Are Fired**

**Courtesy and Appearance**

**Situation #1**

A construction worker shows up on the hospital campus for orientation not knowing that the T-shirt he is wearing that shows the name of his favorite rock band with skull and cross bones and other rock paraphernalia is not allowed. He goes to orientation and has his coat on during that time. Near the end of the day, his supervisor comes to him and informs him that T-shirts like this are not allowed. On the next day he wears another T-shirt with an advertisement on it identifying a favorite beer. Again,
the hospital staff notifies his supervisor that this is not appropriate. On the third day, he wears a shirt that identifies his union affiliation and again he is informed that this is not appropriate. He finally asks what is appropriate and is informed that only shirts with sleeves that have no printing on it or bear the name of his company are allowed. This information is covered in orientation.

**Risk Assessments**

**Situation #2**

Recently at a hospital, a construction project to work on boilers was reviewed by the appropriate resources.

It was determined that all Life Safety, Interim Life Safety, Pre-Construction Risk Assessments/Plans, Infection Control Risk Assessment/Plans and all other issues were identified. Provisions were made to account for the safety of patients, staff, visitors and construction personnel. Several weeks into the project, the work in the boiler room was complete. The boiler room is a contained area and no special needs were necessary for this work. The second phase of the project was ready to go into effect. However, the pre-construction risk assessment did not indicate that there was a second phase. This second phase meant that the construction company needed to bring in dry mix concrete and take it to the penthouse of the North Tower. Although several employees along the way pointed out problems such as dust issues and propping doors open, the contractor continued to try to take the concrete upstairs. Because of the education in this handbook and the complaints, the contractor should have recognized to stop and seek assistance from a Health System resource. Hopefully this education will help contractors to stop the process when concerns are raised.

**Fire/Life Safety/Interim Life Safety and Emergency Procedures**

**Situation #3**

These are three situations where contractors were soldering, sawing wood and heat seaming carpet together. In the first situation, the contractor was aware of the fact that he needed a Hot Work Permit. In the last two situations, neither the contractor nor the Health System resources realized that this type of work may set off a smoke detector. In all three situations, the smoke detector was set off and the fire department arrived on the scene. As a result, patients lives were put into jeopardy because valuable staff had to leave their jobs and respond to the fire alarm. This left 120 Pathology staff standing outside for 30 minutes while the fire department investigated before giving the “All Clear.” In the last two situations, clinical staff had to investigate the situation to determine if patients needed to be moved. We need to review each type of work and determine if it will set off a smoke detector in the room we are working in, in the air duct of the room we are working in, or if the heat of the work might set off a heat detector. The local fire department also fines the organization, depending on the number of false alarms in a given time frame.

**Fire/Life Safety**

**Situation #4**

In this situation, the contractor had all the right documents. The Health System resources had identified all the necessary means to prevent a fire, but the contractor failed to make sure that the elevator shaft where they were welding was free from debris and other flammable products. The hot slag from the welding fell from the second floor in the Methodist Estabrook Cancer Center and landed in a box of rags. This started smoking, which filled the elevator shaft with heavy smoke and required the entire building to be evacuated.
**Infection Control**

**Situation #5**

In this situation, the contractor was hired to replace sheetrock on the walls of a patient room.

All PCRA and ICRA assessments were done and plans put into place. The room was isolated, negative air pressure was put into place. There was no expectation to find mold. However, as the contractor opened the wall, it was apparent that mold might be present. They immediately halted work, notified their supervisors and contacted the Health System resources. The room was sealed off; an abatement company was brought in as well as a monitoring company. The moldy walls were removed, following OSHA and EPA requirements. Once completely abated and cleaned, the project was resumed.
Contractor’s Handbook Receipt

| Please read, print, sign and give this receipt to your Methodist Health System contact, JC Moore, in Safety. Failure to complete this mandatory orientation may result in termination of assignment or contract. |

You are encouraged to read this handbook carefully and become familiar with its contents. Should you have questions regarding policies and procedures or issues on the job, you are encouraged to communicate with your Methodist Health System contact, JC Moore, Safety Officer at 402-354-4048. Contract workers on the campus of Methodist Health System are held in the highest regard by the Methodist Health System leadership. Working as a team, it is our goal to provide the highest quality of care to our patients.

**ORIENTATION HANDBOOK RECEIPT:**

I acknowledge having received and reviewed the Contractor’s Handbook. I agree to abide by the guidelines as listed in the handbook, as covered in the training I received, and as listed in the MHS policy “Construction/Renovation/Repair Guidelines” which was covered in the training for my particular area.

________________________________________
Contract Worker Name (Print)

________________________________________
Contract Worker Name (Signature)

________________________________________
Employer

________________________________________
Date