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SPEC WRITER NOTES:

1. This section of specifications covers the requirements for safety and occupational health requirements for the protection of Contractor and Government personnel, property, and resources on Construction Projects.

2. All references to the Army Corps of Engineers Safety and Health Requirements Manual EM385-1-1 are specific to "Major Construction" Projects administered by the Office of Construction and Facilities Management (CFM.) The use of the EM385 manual by other offices is not required but highly recommended. Edit these specification requirements by deleting references to the EM385 Manual when not applicable.

3. Edit these specification requirements by deleting sections or requirements that are not applicable due to the presence or absence of work operations that would necessitate those requirements. Consultation with VA/CFM Safety and Occupational Health officers before deletion or substitution is highly recommended. For bracketed items, choose applicable items(s) or insert appropriate information.

4. Many states and municipalities have more stringent or additional requirements and this section should be modified as required to meet the most stringent requirements.
1.1 APPLICABLE PUBLICATIONS:

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

B. American Society of Safety Professionals (ASSP):

   A10.1-2011.........Pre-Project & Pre-Task Safety and Health Planning
   A10.34-2012........Protection of the Public on or Adjacent to Construction Sites
   A10.38-2013........Basic Elements of an Employer’s Program to Provide a Safe and Healthful Work Environment American National Standard Construction and Demolition Operations
   Z359.0-2012........Definitions and Nomenclature Used for Fall Protection and Fall Arrest
   Z359.1-2016........The Fall Protection Code

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

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

D. The Facilities Guidelines Institute (FGI):


E. National Fire Protection Association (NFPA):

   10-2018..........Standard for Portable Fire Extinguishers
   30-2018..........Flammable and Combustible Liquids Code
   51B-2019..........Standard for Fire Prevention During Welding, Cutting and Other Hot Work
   70-2020..........National Electrical Code
1.2 DEFINITIONS:

A. Critical Lift. A lift with the hoisted load exceeding 75% of the crane’s maximum capacity; lifts made out of the view of the operator (blind picks); lifts involving two or more cranes; personnel being hoisted; and special hazards such as lifts over occupied facilities, loads lifted close to power-lines, and lifts in high winds or where other adverse environmental conditions exist; and any lift which the crane operator believes is critical.
B. OSHA "Competent Person" (CP). One who is capable of identifying existing and predictable hazards in the surroundings and working conditions which are unsanitary, hazardous or dangerous to employees, and who has the authorization to take prompt corrective measures to eliminate them (see 29 CFR 1926.32(f)).

C. Competent Person, Confined Space
The CP, Confined Space, is a person meeting the competent person requirements as defined EM 385-1-1 Appendix Q, with thorough knowledge of OSHA's Confined Space Standard, 29 CFR 1910.146, and designated in writing to be responsible for the immediate supervision, implementation and monitoring of the confined space program, who through training, knowledge and experience in confined space entry is capable of identifying, evaluating and addressing existing and potential confined space hazards and, who has the authority to take prompt corrective measures with regard to such hazards.

D. Competent Person, Cranes and Rigging.
The CP, Cranes and Rigging, as defined in EM 385-1-1 Appendix Q, is a person meeting the competent person, who has been designated in writing to be responsible for the immediate supervision, implementation and monitoring of the Crane and Rigging Program, who through training, knowledge and experience in crane and rigging is capable of identifying, evaluating and addressing existing and potential hazards and, who has the authority to take prompt corrective measures regarding such hazards.

E. Competent Person, Excavation/Trenching.
A CP, Excavation/Trenching, is a person meeting the competent person requirements as defined in EM 385-1-1 Appendix Q and 29 CFR 1926, who has been designated in writing to be responsible for the immediate supervision, implementation and monitoring of the excavation/trenching program, who through training, knowledge and experience in excavation/trenching is capable of identifying, evaluating and addressing existing and potential hazards and, who has the authority to take prompt corrective measures with regard to such hazards.

F. Competent Person, Fall Protection
The CP, Fall Protection, is a person meeting the competent person requirements as defined in EM 385-1-1 Appendix Q and in accordance with ASSE/SAFE Z359.0, who has been designated in writing by the employer to be responsible for immediate supervising, implementing and monitoring of the fall protection program, who through training, knowledge and experience in fall protection and rescue systems and equipment, is capable of identifying, evaluating and addressing existing and potential fall hazards and, who has the authority to take prompt corrective measures with regard to such hazards.

G. Competent Person, Scaffolding

The CP, Scaffolding is a person meeting the competent person requirements in EM 385-1-1 Appendix Q and designated in writing by the employer to be responsible for immediate supervising, implementing and monitoring of the scaffolding program. The CP for Scaffolding has enough training, knowledge and experience in scaffolding to correctly identify, evaluate and address existing and potential hazards and has the authority to take prompt corrective measures with regard to these hazards. CP qualifications must be documented and include experience on the specific scaffolding systems/types being used, assessment of the base material that the scaffold will be erected upon, load calculations for materials and personnel, and erection and dismantling. The CP for scaffolding must have a documented, minimum of 8-hours of scaffold training to include training on the specific type of scaffold being used (e.g. mast-climbing, adjustable, tubular frame), in accordance with EM 385-1-1 Section 22.B.02.

H. Competent Person (CP) Trainer

A competent person trainer as defined in EM 385-1-1 Appendix Q, who is qualified in the material presented, and who possesses a working knowledge of applicable technical regulations, standards, equipment and systems related to the subject matter on which they are training Competent Persons. A competent person trainer must be familiar with the typical hazards and the equipment used in the industry they are instructing. The training provided by the competent person trainer must be appropriate to that specific industry. The competent person trainer must evaluate the knowledge and skills of the competent persons as part of the training process.
I. High Risk Activities
High Risk Activities are activities that involve work at heights, crane and rigging, excavations and trenching, scaffolding, electrical work, and confined space entry.

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

K. Qualified Person, Fall Protection (QP for FP)
A QP for FP is a person meeting the requirements of EM 385-1-1 Appendix Q, and ASSE/SAFE Z359.0, with a recognized degree or professional certificate and with extensive knowledge, training and experience in the fall protection and rescue field who is capable of designing, analyzing, and evaluating and specifying fall protection and rescue systems.

L. USACE Property and Equipment
Interpret "USACE" property and equipment specified in USACE EM 385-1-1 as Government property and equipment.

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

N. Mishap: Mishap in this specification is defined according to the EM 385-1-1. A mishap is any unplanned, undesired event that occurs during the course of work being performed. This includes accidents, incidents, and near misses.

O. Mishap Criticality Categories
1. No impact/Near-Miss - near miss incidents that shall be investigated and reported to the VA within 24 hours.

2. Minor incident/impact - incidents that require first aid or result in minor equipment damage (less than $5000). These incidents must be investigated and reported to the VA within 24 hours.
3. Moderate incident/impact – Any work-related injury or illness that results in:
   a. Days away from work (any time lost after day of injury/illness onset);
   b. Restricted work;
   c. Transfer to another job;
   d. Medical treatment beyond first aid;
   e. Loss of consciousness;
   f. A significant injury or illness diagnosed by a physician or other licensed health care professional, even if it did not result in (1) through (5) above or,
   g. any incident that leads to major equipment damage (greater than $5000). These incidents must be investigated and are required to be reported to the VA within 2 hours.

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

P. Load Handling Equipment (LHE)
LHE is a term used to describe cranes, hoists and all other hoisting equipment (hoisting equipment means equipment, including crane, derricks, hoists and power operated equipment used with rigging to raise, lower or horizontally move a load).

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

1.3 SUBMITTAL REQUIREMENTS:

Government approval is required for submittals with a "G" designation; submittals not having a "G" designation are submitted for information only.

A. Preconstruction Submittals

1. Accident Prevention Plan (APP); G

B. Reports

1. Monthly Contractor Health Safety and Environmental (HS&E) Performance Report;
2. Notifications and Reports;
3. Mishap Reports; G
4. Near-Miss Reports;
5. LHE Inspection Reports

C. Work Plans

1. Standard Lift Plan; G
2. Critical Lift Plan; G
3. Activity Hazard Analysis (AHA)
4. Confined Space Entry Permit
5. Hot Work Permit
6. Radiography Operation Planning Work Sheet; G
7. Portable Gauge Operations Planning Worksheet; G

D. Certificates

1. Contractor Safety Self-Evaluation Checklist
2. Crane Operators/Riggers Certifications G
3. Certificate of Compliance
4. Mobile Cranes Inspection Certificate
5. License Certificates
6. Machinery & Mechanized Equipment Certification Form

1.4 REGULATORY REQUIREMENTS:

A. In addition to the detailed requirements included in the provisions of this contract, comply with the most recent edition of USACE EM 385-1-1, comply with 29 CFR 1926, comply with 29 CFR 1910 as incorporated by reference within 29 CFR 1926, comply with ASSP A10.34, and all applicable federal, state, and local laws, ordinances, criteria, rules and regulations. Submit matters of interpretation of standards for resolution before starting work. Where the requirements of this specification, applicable laws, criteria, ordinances, regulations, and referenced documents vary, the most stringent requirements govern except with specific approval and acceptance by the Resident Engineer// Regional Safety Engineer or Contracting Officer Representative or Government Designated Authority.

SPEC WRITER NOTE: VHA Directive 7715-17 requires inclusion of FAR Clause 52.236-13, Accident Prevention in all construction contracts. Paragraph (f) of the requisite clause, which requires the contractor to develop an Accident Prevention Plan (APP) and Activity Hazard Analyses (AHAs), should be routinely included with the clause as most construction is sufficiently hazardous to warrant inclusion.

1.5 ACCIDENT PREVENTION PLAN (APP):

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

B. The APP shall be prepared as follows:

1. Written in English by a qualified person who is employed by the Prime Contractor articulating the specific work and hazards pertaining to the contract. Specifically articulating the safety requirements found within these VA contract safety specifications and the United States Army Corps of Engineers – Safety and Health Requirements Manual – EM 385-1-1-2014. Model language and format can be found in Appendix A of the EM 385-1-1-2014 Manual

2. Address both the Prime Contractors and the subcontractors work operations.

3. State measures to be taken to control hazards associated with materials, services, or equipment provided by suppliers.

4. Address all the elements/sub-elements and in order as follows:

   a. **SIGNATURE SHEET.** Title, signature, and phone number of the following:

      1) Plan preparer (Qualified Person such as corporate safety staff person or contracted Certified Safety Professional with construction safety experience);

      2) Plan approver (company/corporate officers authorized to obligate the company);

      3) Plan concurrence (e.g., Chief of Operations, Corporate Chief of Safety, Corporate Industrial Hygienist, project manager or superintendent, project safety professional). Provide concurrence of other applicable corporate and project personnel (Contractor).

   b. **BACKGROUND INFORMATION.** List the following:

      1) Contractor;

      2) Contract number;
3) Project name;

4) Brief project description, description of work to be performed, and location; phases of work anticipated (these will require an AHA).

c. **STATEMENT OF SAFETY AND HEALTH POLICY.** Provide a copy of current corporate/company Safety and Health Policy Statement, detailing commitment to providing a safe and healthful workplace for all employees. The Contractor’s written safety program goals, objectives, and accident experience goals for this contract should be provided. The Statement of Safety and Health Policy must be signed by a company executive.

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

1) A statement of the employer’s ultimate responsibility for the implementation of his SOH program;

2) Identification and accountability of personnel responsible for safety at both corporate and project level. Contracts specifically requiring safety or industrial hygiene personnel shall include a copy of their resumes.

3) The names of Competent and/or Qualified Person(s) and proof of competency/qualification to meet specific OSHA or EM 385-1-1 Competent/Qualified Person(s) requirements must be attached.

4) Requirements that no work shall be performed unless a designated competent person is present on the job site;

5) Requirements for pre-task Activity Hazard Analysis (AHAs);

6) Lines of authority;

7) Policies and procedures regarding noncompliance with safety requirements (to include disciplinary actions for violation of safety requirements) should be identified;

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

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

f. TRAINING.

1) Site-specific SOH orientation training at the time of initial hire or assignment to the project for every employee before working on the project site is required.

2) Mandatory training and certifications that are applicable to this project (e.g., explosive actuated tools, crane operator, rigger, crane signal person, fall protection, electrical lockout/NFPA 70E, machine/equipment lockout, confined space, etc...) and any requirements for periodic retraining/recertification are required.

3) Procedures for ongoing safety and health training for supervisors and employees shall be established to address changes in site hazards/conditions.

4) OSHA 10-hour Construction Outreach training within the past five years is required for all workers on site and the OSHA 30-hour Construction Outreach training within the past five years is required for Trade Competent Persons (CPs)

g. SAFETY AND HEALTH INSPECTIONS.

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

2) Any external inspections/certifications that may be required (e.g., contracted CSP or CSHT)

h. MISHAP INVESTIGATION & REPORTING.

1) The APP shall include identify person(s) responsible to provide the following to the Resident Engineer // Contracting Officer Representative // Government Designated Authority:

   a. Monthly HS&E Performance Report (Exposure Hours Data)
b. Mishap investigation reports

c. Project site injury and illness logs

d. Near-Miss reports

i. **PLANS (PROGRAMS, PROCEDURES) REQUIRED.** Based on a risk assessment of contracted activities and on mandatory OSHA and/or EM 385-1-1 compliance programs, the Contractor shall address all applicable occupational, patient, and public safety risks in site-specific compliance and accident prevention plans. These Plans shall include but are not limited to procedures for addressing the risks associated with the following:

1) Emergency response;

2) Contingency for severe weather;

3) Fire Prevention;

4) Medical Support;

5) Posting of emergency telephone numbers;

6) Prevention of alcohol and drug abuse;

7) Site sanitation (housekeeping, drinking water, toilets);

8) Night operations and lighting;

9) Hazard communication program;

10) Welding/Cutting “Hot” work;

11) Electrical Safe Work Practices (Electrical LOTO/NFPA 70E);

12) General Electrical Safety;

13) Hazardous energy control (LOTO);

14) Site-Specific Fall Protection & Prevention;

15) Excavation/trenching;

16) Asbestos abatement;

17) Lead abatement;

18) Crane Critical lift;
19) Respiratory protection;
20) Health hazard control program;
21) Radiation Safety Program;
22) Abrasive blasting;
23) Heat/Cold Stress Monitoring;
24) Crystalline Silica Monitoring (Assessment);
25) Demolition plan (to include engineering survey);
26) Formwork and shoring erection and removal;
27) Pre-Cast Concrete;

C. Submit the APP to the Resident Engineer // Contracting Officer Representative // Government Designated Authority for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES 15 calendar days prior to the date of the preconstruction conference for acceptance. Work cannot proceed without an accepted APP.

D. Once accepted by the Resident Engineer // Contracting Officer Representative, the APP and attachments will be enforced as part of the contract. Disregarding the provisions of this contract or the accepted APP will be cause for stopping of work, at the discretion of the Contracting Officer in accordance with FAR Clause 52.236-13, Accident Prevention, until the matter has been rectified.

E. Once work begins, changes to the accepted APP shall be made with the knowledge and concurrence of the Resident Engineer, Contracting Officer Representative or Government Designated Authority. Should any severe hazard exposure, i.e. imminent danger, become evident, stop work in the area, secure the area, and develop a plan to remove the exposure and control the hazard. Notify the Resident Engineering Office and Contracting Officer within 2 hours of discovery. Eliminate/remove the hazard. In the interim, take all necessary action to restore and maintain safe working conditions to safeguard onsite personnel, visitors, the public and the environment.
1.6 ACTIVITY HAZARD ANALYSES (AHAS):

A. AHAs are also known as Job Hazard Analyses, Job Safety Analyses, and Activity Safety Analyses. Before beginning each work activity involving a type of work presenting hazards not experienced in previous project operations or where a new work crew or sub-contractor is to perform the work, the Contractor(s) performing that work activity shall prepare an AHA (Example electronic AHA forms can be found on the US Army Corps of Engineers web site).

B. AHAs shall define the activities being performed and identify the work sequences, the specific anticipated hazards, site conditions, equipment, materials, and the control measures to be implemented to eliminate or reduce each hazard to an acceptable level of risk.

C. Work shall not begin until the AHA for the work activity has been accepted by the Resident Engineer, Contracting Officer Representative or Government Designated Authority and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings.

1. The names of the Competent/Qualified Person(s) required for a particular activity (for example, excavations, scaffolding, fall protection, other activities as specified by OSHA, EM 385-1-1, or other State and Local agencies) shall be identified and included in the AHA. Certification of their competency/qualification shall be submitted to the Government Designated Authority (GDA) for acceptance prior to the start of that work activity.

2. The AHA shall be reviewed and modified as necessary to address changing site conditions, operations, or change of competent/qualified person(s).

   a. If more than one Competent/Qualified Person is used on the AHA activity, a list of names shall be submitted as an attachment to the AHA. Those listed must be Competent/Qualified for the type of work involved in the AHA and familiar with current site safety issues.

   b. If a new Competent/Qualified Person (not on the original list) is added, the list shall be updated (an administrative action not
requiring an updated AHA). The new person shall acknowledge in writing that he or she has reviewed the AHA and is familiar with current site safety issues.

3. Submit AHAs to the Resident Engineer // Contracting Officer Representative // Government Designated Authority for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES for review at least 15 calendar days prior to the start of each phase. Subsequent AHAs as shall be formatted as amendments to the APP. The analysis should be used during daily inspections to ensure the implementation and effectiveness of the activity's safety and health controls.

4. The AHA list will be reviewed periodically (at least weekly) at the Contractor supervisory safety meeting and updated as necessary when procedures, scheduling, or hazards change.

5. Develop the activity hazard analyses using the project schedule as the basis for the activities performed. All activities listed on the project schedule will require an AHA. The AHAs will be developed by the contractor, supplier, or subcontractor and provided to the prime contractor for review and approval and then submitted to the Contracting Officer Representative or Government Designated Authority for review for compliance.

SPEC WRITER NOTE: Include FAR Clause 52.236-26, Preconstruction Conference to ensure that it takes place.

1.7 PRECONSTRUCTION CONFERENCE:

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

B. Discuss the details of the submitted APP to include incorporated plans, programs, procedures and a listing of anticipated AHAs that will be developed and implemented during the performance of the contract. This
list of proposed AHAs will be reviewed at the conference and an agreement will be reached between the Contractor and the Contracting Officer's representative as to which phases will require an analysis. In addition, establish a schedule for the preparation, submittal, review, and acceptance of AHAs to preclude project delays.

1.8 SAFETY MEETINGS:

Conduct safety meetings to review past activities, plan for new or changed operations, review pertinent aspects of appropriate AHA (by trade), establish safe working procedures for anticipated hazards, and provide pertinent Safety and Occupational Health (SOH) training and motivation. Conduct meetings at least once a month for all supervisors on the project location. The SSHO, supervisors, foremen, or CDSOs must conduct meetings at least once a week for the trade workers. Document meeting minutes to include the date, persons in attendance, subjects discussed, and names of individual(s) who conducted the meeting. Maintain documentation on-site and furnish copies to the Contracting Officer on request. Notify the Contracting Officer of all scheduled meetings 7 calendar days in advance.

1.9 "SITE SAFETY AND HEALTH OFFICER" (SSHO) AND "COMPETENT PERSON" (CP):

A. The Prime Contractor shall provide a Safety oversight team that includes a minimum of one (1) person at each project site, for each shift, to function as the Site Safety and Health Officer (SSHO), and an Alternate Safety Officer. The Prime Contractor shall provide a minimum of one "Full-Time" SSHO at each project site, for each shift (with no other duties) that holds as current, a professional safety certification with at least 3 years of dedicated construction safety related experience. The SSHO shall ensure that the requirements of the VA and of 29 CFR 1926.16 are met for the project. The SSHO must be at the work site at all times, during construction activities, to implement and administer the Contractor's safety program and government-accepted Accident Prevention Plan. If the SSHO is off-site for a period longer than 8 hours, or one shift, and not exceeding 40 hours, or 5 shifts, a qualified Alternate Safety Officer shall be provided and shall fulfill the same roles and responsibilities as the
primary SSHO. The Alternate Safety Officer shall have the required training, experience, and qualifications in accordance with EM 385-1-1 Section 01.A.17, and all associated sub-paragraphs. When the Primary SSHO is temporarily (not to exceed 8 hours) off-site, a Designated Representative (DR) from the Prime Contractors’ staff, as identified in the AHA may be used in lieu of an Alternate Safety Officer and shall be on the project site, at all times, when work is being performed. Note that the DR is a collateral duty safety position, with safety duties in addition to their full-time occupation. Each subcontractor shall designate a minimum of one CP in compliance with 29 CFR 1926.20 (b)(2) that will be identified as a CP to administer their individual safety programs.

B. Further, all specialized Competent Persons for the work crews will be supplied by the respective contractor as required by 29 CFR 1926 (i.e. Asbestos, Electrical, Cranes, & Derricks, Demolition, Fall Protection, Fire Safety/Life Safety, Ladder, Rigging, Scaffolds, and Trenches/Excavations).

C. These Competent Persons can have collateral duties as the subcontractor’s superintendent and/or work crew lead persons as well as fill more than one specialized CP role (i.e. Asbestos, Electrical, Cranes, & Derricks, Demolition, Fall Protection, Fire Safety/Life Safety, Ladder, Rigging, Scaffolds, and Trenches/Excavations). However, the SSHO has be a separate qualified individual from the Prime Contractor’s Superintendent and/or Quality Control Manager with duties only as the SSHO

D. The SSHO or an equally qualified Designated Representative/alternate will maintain a presence on the site during construction operations in accordance with FAR Clause 52.236-6: Superintendence by the Contractor. CPs will maintain presence during their construction activities in accordance with above mentioned clause. A listing of the designated SSHO and all known CPs shall be submitted prior to the start of work as part of the APP with the training documentation and/or AHA as listed in Section 1.8 below.

E. The repeated presence of uncontrolled hazards during a contractor’s work operations will result in the designated CP as being deemed incompetent and result in the required removal of the employee in
11-01-23

accordance with FAR Clause 52.236-5: Material and Workmanship, Paragraph (c).

1.10 TRAINING:

A. The designated Prime Contractor SSHO must meet the requirements of all applicable OSHA standards and be capable (through training, experience, and qualifications) of ensuring that the requirements of 29 CFR 1926.16 and other appropriate Federal, State and local requirements are met for the project.

B. As a minimum the SSHO must have completed the OSHA 30-hour Construction Safety Outreach class within the past five (5) years and:

1. Seven (7) years of construction industry safety related experience.

2. OR have a safety and health degree from an accredited university or college and five (5) years of construction industry safety related experience

3. OR hold as current, a Certified Safety Professional (CSP) or a Construction Health and Safety Technician (CHST) certification and five (3) years of construction industry safety related experience.

C. The Alternate Safety Officer shall meet, at a minimum, the requirements of EM 385-1-1 Section 1 and have five (5) years of construction industry safety experience If the SSHO does not have a current certification, certification must be obtained within 90 days, maximum, of contract award.

D. All designated CPs shall have completed the OSHA 30-hour Construction Safety course and/or EM 385-1-1 40-hour training within the past 5 years. In addition, all CPs with high hazard work operations (such as operations involving asbestos, electrical, cranes, demolition, work at heights/fall protection, fire safety/life safety, ladder, rigging, scaffolds, and trenches/excavations) shall have a specialized formal course in the hazard recognition and control associated with those high hazard work operations. Documented “repeat” deficiencies in the
execution of safety requirements will require retaking the requisite formal course.

E. All other construction workers shall have the OSHA 10-hour Construction Safety Outreach course within the past 5 years and any necessary safety training to be able to identify hazards within their work environment.

F. Submit training records associated with the above training requirements to // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES 15 calendar days prior to the date of the preconstruction conference for acceptance.

G. Prior to any worker for the contractor or subcontractors beginning work, they shall undergo a safety briefing provided by the SSHO or his/her designated representative. As a minimum, this briefing shall include information on the site-specific hazards, construction limits, VAMC safety guidelines, means of egress, break areas, work hours, locations of restrooms, use of VAMC equipment, emergency procedures, accident reporting etc... Documentation shall be provided to the COR that individuals have undergone contractor’s safety briefing.

H. Ongoing safety training will be accomplished in the form of weekly documented safety meeting.

1.11 INSPECTIONS:

A. The SSHO shall conduct frequent and regular safety inspections (daily) of the site and each of the subcontractors CPs shall conduct frequent and regular safety inspections (daily) of their work operations as required by 29 CFR 1926.20(b)(2). Each week, the SSHO shall conduct a formal documented inspection with a written report of the entire construction areas with the subcontractors’ “Trade Safety and Health CPs” present in their work areas. Coordinate with, and report findings and corrective actions weekly to // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.

B. A Certified Safety Professional (CSP) with specialized knowledge in construction safety or a certified Construction Safety and Health
Technician (CSHT) shall randomly conduct a monthly site safety inspection. The CSP or CSHT shall be one that is not a part of the immediate site project team. The individual can be a corporate safety professional or independently contracted who is not an immediate member of the construction project site team. The CSP or CSHT will provide their certificate number on the required report for verification as necessary.

1. Results of the inspection will be documented with tracking of the identified hazards to abatement.

2. The // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // will be notified immediately prior to start of the inspection and invited to accompany the inspection.

3. Identified hazard and controls will be discussed to come to a mutual understanding to ensure abatement and prevent future reoccurrence.

4. A report of the inspection findings with status of abatement will be provided to the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // within one week of the onsite inspection.

1.12 MISHAPS, OSHA 300 LOGS, AND MAN-HOURS:

A. The prime contractor shall establish and maintain a Near-Miss and Mishap reporting, recordkeeping, and analysis system to track and analyze all injuries and illnesses, high visibility incidents, accidental property damage (both government and contractor) and Near-Misses that occur on site. Notify and provide an initial report to the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // as soon as practical, but no more than two hours after any Moderate or Major Mishap, High Visibility Incidents, or any weight handling and hoisting equipment mishap. No Impact/Near-Miss and Minor Mishaps shall be reported within 24 hours or as soon as practical. Within the notification the sender shall include contractor name; contract title; type of contract; name of activity,
installation or location where mishap occurred; date and time of accident; names of personnel injured; extent of property damage, if any; extent of injury, if known, and brief description of mishap (to include type of construction equipment used, PPE used, etc.). Preserve the conditions and evidence on the Mishap site until the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // determines whether a government investigation will be conducted.

B. Conduct a mishap investigation for all Mishaps including mishaps resulting in at least $20,000 in damages without injury, to establish the root cause(s) of the mishap. The Mishap investigation shall include images, 5 whys, the injured person’s firsthand account, any witness accounts, methods of procedures, related AHA to the task, and corrective action plan signed by the president, vice president, or appropriate corporate-level leadership identified in the company’s org chart for the project. Additionally, complete the VA Form 2162 (or equivalent) and provide the report to the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // within 7 calendar days of the accident. The // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // will provide copies of any required or special forms.

C. A summation of all man-hours worked by the contractor and associated sub-contractors for each month will be reported to // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.

D. A summation of all Minor, Moderate, and Major incidents experienced on site by the contractor and associated sub-contractors for each month will be provided to the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // monthly. The contractor and associated sub-contractors’ OSHA 300 logs will be made available to the // Resident Engineer // Project Manager // and
1.13 PERSONAL PROTECTIVE EQUIPMENT (PPE):

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

B. Any PPE above and beyond the Mandatory PPE identified below and determined by the Contracting Officer or their Representative to be necessary in the performance of the Governments duties relative to this contract, shall be provided to the Government upon written notification by the Contracting Officer and at no additional expense to the Government. All PPE provided to the Government shall also be accompanied by any relevant or required training necessary to ensure its proper use.

C. Mandatory Minimum PPE includes:

1. Hard Hats - unless written authorization is given by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // in circumstances of work operations that have limited potential for falling object hazards such as during finishing work or minor remodeling. With authorization to relax the requirement of hard hats, if a worker becomes exposed to an overhead falling object hazard, then hard hats would be required in accordance with the OSHA and/or EM 385-1-1 regulations.

2. Safety glasses - unless written authorization is given by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // in circumstances of no eye hazards, appropriate safety glasses meeting the ANSI Z.87.1 standard must be worn by each person on site.

3. Appropriate Safety Shoes - based on the hazards present, safety shoes meeting the requirements of ASTM F2413-11 shall be worn by each person on site unless written authorization is given by // Resident Engineer // Project Manager // and Facility Safety //
Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // in circumstances of no foot hazards.

4. Hearing protection – Use personal hearing protection at all times in designated noise hazardous areas or when performing noise hazardous tasks.

5. High-visibility Safety Apparel – appropriate brightly colored clothing that feature some type of reflective material on them, such as safety vests, shall be worn by personnel or visitors on construction sites.

SPEC WRITER NOTE: VA Medical Facility Construction Safety Committee Chair designates who will complete VHA Pre-Construction Risk Assessments (PCRA) for each construction, renovation or maintenance project. Project or construction activity scope and complexity determine the need for multiple VHA-PCRAs. VHA-PCRAs are to be completed and documented in accordance with Directive 7715. The VHA-PCRA form must be used to assess and document all construction-associated hazards that affect VA medical facilities, their occupants, services and mission-essential functions and capabilities. VHA-PCRAs are intended to eliminate or minimize construction-associated risks. The VHA-PCRA form, use instructions and other guidance are available at http://vaww.hefp.va.gov/resources/vha-pre-construction-risk-assessment-pcra. NOTE: This is an internal VA website that is not available to the public.

1.14 PRE-CONSTRUCTION RISK ASSESSMENT

A. Control of all construction-associated hazards that affect VA medical facilities, their occupants, services and mission-essential functions and capabilities is critical in all medical center facilities. VHA Pre-Construction Risk Assessments (PCRAs) for construction, renovation and maintenance projects are included with this contract solicitation with required mitigations of identified hazards. VHA-PCRAs will be re-validated and updated as needed based on but not limited to changes from original designs, affected individuals, areas/locations, scope,
contractor means and methods, safety requirements, phasing, contractor
competencies and capabilities.

SPEC WRITER NOTE: Based upon construction activities where the initial infection
control review within the VHA-PCRAs identifies potential risks of infectious
disease transmission affecting the care, treatment or services of patients or
residents include this paragraph. A detailed analysis must be conducted using
the VHA-Infection Control Risk Assessment for Construction, Renovation and
Maintenance form to document in-depth infection risk assessments and
identification of mitigation actions/activities. The VHA-ICRA form use
instructions and other guidance are available at:
http://vaww.hefp.va.gov/resources/vha-
infection-control-risk-assessment-icra.
NOTE: This is an internal VA website that is not available to the public.

B. Infection Prevention and Control is critical in all medical center
facilities. Interior construction activities causing disturbance of
existing dust, or creating new dust, must be conducted within
ventilation-controlled areas that minimize the flow of airborne
particles into patient areas. A detailed analysis of potential risks
for infectious disease transmission affecting the care, treatment or
services of patients or residents has been conducted. VHA Infection
Control Risk Assessments (ICRAs) are included with this contract
solicitation with required mitigation actions/activities. VHA-ICRAs
will be re-validated and updated as needed based on changes in original
designs, affected individuals, area(s) or location(s), scope,
contractor means and methods, infection prevention and control
requirements, differing site conditions, phasing, contractor
competencies and capabilities, and infectious disease outbreaks.

C. Products and Materials:

1. Sheet Plastic: Fire retardant polyethylene, 6-mil thickness meeting
   local fire codes

2. Barrier Doors: Self Closing // One-hour // Two-hour // fire-rated //
solid core wood in steel frame, painted
3. Dust proof // one-hour // two-hour // fire-rated // drywall

4. High Efficiency Particulate Air-Equipped filtration machine rated at 95% capture of 0.3 microns including pollen, mold spores and dust particles. HEPA filters should have ASHRAE 85 or other prefilter to extend the useful life of the HEPA. Provide both primary and secondary filtrations units. Maintenance of equipment and replacement of the HEPA filters and other filters will be in accordance with manufacturer’s instructions.

5. Exhaust Hoses: Heavy duty, flexible steel reinforced; Ventilation Blower Hose

6. Adhesive Walk-off Mats: Provide minimum size mats of 24 inches x 36 inches

7. Disinfectant: EPA-registered, Hospital-approved disinfectant or equivalent product

8. Portable Ceiling Access Module

SPEC WRITER NOTES:

1. VAMC’s Infection Control Risk Assessment (ICRA) Team shall prepare an Infection Control plan and continue oversight during design, planning and construction on a regular basis. (VHA Directive 7715-17).

2. ICRA Team may provide a separate document to be included as part of the contract documents or may modify requirements included in the following article.

1.15 INFECTION CONTROL

A. Infection Control is critical in all medical center facilities.

Interior construction activities causing disturbance of existing dust, or creating new dust, must be conducted within ventilation-controlled areas that minimize the flow of airborne particles into patient areas. Exterior construction activities causing disturbance of soil or creates dust in some other manner must be controlled.
SPEC WRITER NOTE: Include the specifications B – D as work operations would make necessary.

B. For work occurring at a VA medical facility, coordinate with the facility Safety Manager/Officer, as several aspects of this section directly relate to infection control risk assessments required in or adjacent to construction affecting occupied buildings accredited by The Joint Commission.

C. An AHA associated with infection control will be performed by VA personnel in accordance with FGI Guidelines (i.e. Infection Control Risk Assessment (ICRA)). The ICRA procedure found on the American Society for Healthcare Engineering (ASHE) website will be utilized. Risk classifications of Class II or lower will require approval by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // before beginning any construction work. Risk classifications of Class III or higher will require a permit before beginning any construction work. Infection Control permits will be issued by the COR. The Infection Control Permits will be posted outside the appropriate construction area. More than one permit may be issued for a construction project if the work is located in separate areas requiring separate classes.

SPEC WRITER NOTE: Consider the following and coordinate:

1. Analyze each site during design to determine the effects of blocking HVAC ducts and their impact on existing air handling systems that must remain operational before initiating a dust control program. The method of capping ducts shall be dust tight and withstand airflow.

2. Construct anteroom to maintain negative airflow from clean area through anteroom and into work area where required.
3. High risk patient care areas may require additional measures like air locks, special signage, smoke and negative pressure alarms.

4. Identify these areas clearly on the drawings and work with Medical Center personnel to achieve desired level of isolation suited to the scope of risk involved.

5. Other considerations.

1. Class I requirements:

   a. During Construction Work:

      1) Notify the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //

      2) Execute work by methods to minimize raising dust from construction operations.

      3) Ceiling tiles: Immediately replace a ceiling tile displaced for visual inspection.

   b. Upon Completion:

      1) Clean work area upon completion of task

      2) Notify the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //

2. Class II requirements:

   a. During Construction Work:

      1) Notify the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //
2) Provide active means to prevent airborne dust from dispersing into atmosphere such as wet methods or tool mounted dust collectors where possible.

3) Water mist work surfaces to control dust while cutting.

4) Seal unused doors with duct tape.

5) Block off and seal air vents.

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

b. Upon Completion:

1) Wipe work surfaces with cleaner/disinfectant.

2) Contain construction waste before transport in tightly covered containers.

3) Wet mop and/or vacuum with HEPA filtered vacuum before leaving work area.

4) Upon completion, restore HVAC system where work was performed

5) Notify the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //

3. Class III requirements:

a. During Construction Work:

1) Obtain permit from the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //

2) Remove or Isolate HVAC system in area where work is being done to prevent contamination of duct system.

3) Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit)
before construction begins. Install construction barriers and ceiling protection carefully, outside of normal work hours.

4) Maintain negative air pressure, 0.01 inches of water gauge, within work site utilizing HEPA equipped air filtration units and continuously monitored with a digital display, recording and alarm instrument, which must be calibrated on installation, maintained with periodic calibration and monitored by the contractor.

5) Contain construction waste before transport in tightly covered containers.

6) Cover transport receptacles or carts. Tape covering unless solid lid.

b. Upon Completion:

1) Do not remove barriers from work area until completed project is inspected by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // and thoroughly cleaned by the VA Environmental Services Department.

2) Remove construction barriers and ceiling protection carefully to minimize spreading of dirt and debris associated with construction, outside of normal work hours.

3) Vacuum work area with HEPA filtered vacuums.

4) Wet mop area with cleaner/disinfectant.

5) Upon completion, restore HVAC system where work was performed.

6) Return permit to the Contracting Officer Representative or Government Designated Authority

4. Class IV requirements:

a. During Construction Work:

1) Obtain permit from the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting
Officer Representative // or Government Designated Authority //

2) Isolate HVAC system in area where work is being done to prevent contamination of duct system.

3) Complete all critical barriers i.e. sheetrock, plywood, plastic, to seal area from non-work area or implement control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum for vacuuming prior to exit) before construction begins. Install construction barriers and ceiling protection carefully, outside of normal work hours.

4) Maintain negative air pressure, 0.01 inches of water gauge, within work site utilizing HEPA equipped air filtration units and continuously monitored with a digital display, recording and alarm instrument, which must be calibrated on installation, maintained with periodic calibration and monitored by the contractor.

5) Seal holes, pipes, conduits, and punctures.

5) Construct anteroom and require all personnel to pass through this room so they can be vacuumed using a HEPA vacuum cleaner before leaving work site or they can wear cloth or paper coveralls that are removed each time they leave work site.

6) All personnel entering work site are required to wear shoe covers. Shoe covers must be changed each time the worker exits the work area.

b. Upon Completion:

1) Do not remove barriers from work area until completed project is inspected by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // with thorough cleaning by the VA Environmental Services Dept.

2) Remove construction barriers and ceiling protection carefully to minimize spreading of dirt and debris associated with construction, outside of normal work hours.
3) Contain construction waste before transport in tightly covered containers.

4) Cover transport receptacles or carts. Tape covering unless solid lid.

5) Vacuum work area with HEPA filtered vacuums.

6) Wet mop area with cleaner/disinfectant.

7) Upon completion, restore HVAC system where work was performed.

8) Return permit to the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //

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

1. Class III and IV - closed door with masking tape applied over the frame and door is acceptable for projects that can be contained in a single room.

2. Construction, demolition or reconstruction not capable of containment within a single room must have the following barriers erected and made presentable on hospital occupied side:

   a. Class III & IV (where dust control is the only hazard, and an agreement is reached with the COR and Medical Center) - Airtight plastic barrier that extends from the floor to ceiling. Seams must be sealed with duct tape to prevent dust and debris from escaping

   b. Class III & IV - Drywall barrier erected with joints covered or sealed to prevent dust and debris from escaping.

   c. Class III & IV - Seal all penetrations in existing barrier airtight

   d. Class III & IV - Barriers at penetration of ceiling envelopes, chases and ceiling spaces to stop movement air and debris
e. Class IV only - Anteroom or double entrance openings that allow workers to remove protective clothing or vacuum off existing clothing

f. Class III & IV - At elevators shafts or stairways within the field of construction, overlapping flap minimum of two feet wide of polyethylene enclosures for personnel access.

E. Products and Materials:

1. Sheet Plastic: Fire retardant polystyrene, 6-mil thickness meeting local fire codes

2. Barrier Doors: Self Closing // One-hour // Two-hour // fire-rated // solid core wood in steel frame, painted

3. Dust proof // one-hour // two-hour // fire-rated // drywall

4. High Efficiency Particulate Air-Equipped filtration machine rated at 95% capture of 0.3 microns including pollen, mold spores and dust particles. HEPA filters should have ASHRAE 85 or other prefilter to extend the useful life of the HEPA. Provide both primary and secondary filtrations units. Maintenance of equipment and replacement of the HEPA filters and other filters will be in accordance with manufacturer’s instructions.

5. Exhaust Hoses: Heavy duty, flexible steel reinforced; Ventilation Blower Hose

6. Adhesive Walk-off Mats: Provide minimum size mats of 24 inches x 36 inches

7. Disinfectant: Hospital-approved disinfectant or equivalent product

8. Portable Ceiling Access Module

F. Before any construction on site begins, all contractor personnel involved in the construction or renovation activity shall be educated and trained in infection prevention measures established by the medical center.

G. A dust control program will be established and maintained as part of the contractor’s infection preventive measures in accordance with the FGI Guidelines for Design and Construction of Healthcare Facilities.
Prior to start of work, prepare a plan detailing project-specific dust protection measures with associated product data, including periodic status reports, and submit to // Resident // Project // Engineer // and Facility CSC // for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES.

H. Medical center Infection Control personnel will monitor for airborne disease (e.g. aspergillosis) during construction. A baseline of conditions will be established by the medical center prior to the start of work and periodically during the construction stage to determine impact of construction activities on indoor air quality with safe thresholds established.

H. In general, the following preventive measures shall be adopted during construction to keep down dust and prevent mold.

1. Contractor shall verify that construction exhaust to exterior is not reintroduced to the medical center through intake vents or building openings. HEPA filtration is required where the exhaust dust may reenter the medical center.

2. Exhaust hoses shall be exhausted so that dust is not reintroduced to the medical center.

3. Adhesive Walk-off/Carpet Walk-off Mats shall be used at all interior transitions from the construction area to any occupied medical center area. These mats shall be changed as often as required to maintain clean work areas directly outside construction area at all times.

4. Vacuum and wet mop all transition areas from construction to the occupied medical center at the end of each workday. Vacuum shall utilize HEPA filtration. Maintain surrounding area frequently. Remove debris as it is created. Transport these outside the construction area in containers with tightly fitting lids.

5. The contractor shall not haul debris through patient-care areas without prior approval of the COR and the Medical Center. When, approved, debris shall be hauled in enclosed dust proof containers or wrapped in plastic and sealed with duct tape. No sharp objects should be allowed to cut through the plastic. Wipe down the exterior
of the containers with a damp rag to remove dust. All equipment, tools, material, etc. transported through occupied areas shall be made free from dust and moisture by vacuuming and wipe down.

6. There shall be no standing water during construction. This includes water in equipment drip pans and open containers within the construction areas. All accidental spills must be cleaned up and dried within 12 hours. Remove and dispose of porous materials that remain damp for more than 72 hours.

7. At completion, remove construction barriers and ceiling protection carefully, outside of normal work hours. Vacuum and clean all surfaces free of dust after the removal.

I. Final Cleanup:

1. Upon completion of project, or as work progresses, remove all construction debris from above ceiling, vertical shafts and utility chases that have been part of the construction.

2. Perform HEPA vacuum cleaning of all surfaces in the construction area. This includes walls, ceilings, cabinets, furniture (built-in or free standing), partitions, flooring, etc.

3. All new air ducts shall be cleaned prior to final inspection.

J. Exterior Construction

1. Contractor shall verify that dust will not be introduced into the medical center through intake vents or building openings. HEPA filtration on intake vents is required where dust may be introduced.

2. Dust created from disturbance of soil such as from vehicle movement will be wetted with use of a water truck as necessary

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

SPEC WRITER NOTE: VHA Directive 7715-17 requires a TB pre-construction risk assessment for the transmission of Tuberculosis (TB) to the contracted
construction workers based upon the construction site location, patient population, hospital layout, and the defined risk as outlined in the “CDC Guidelines for preventing the transmission of Mycobacterium Tuberculosis in Health-Care Setting, 2005”. A pre-placement tuberculin screening is only required when/if contracted construction worker(s) have been determined to be at risk for transmission of TB to them based upon this TB pre-construction risk assessment. Include the following section only as applicable.

1.16 TUBERCULOSIS SCREENING

A. Contractor shall provide written certification that all contract employees assigned to the work site have had a pre-placement tuberculin screening within 90 days prior to assignment to the worksite and been found have negative TB screening reactions. Contractors shall be required to show documentation of negative TB screening reactions for any additional workers who are added after the 90-day requirement before they will be allowed to work on the work site. NOTE: This can be the Center for Disease Control (CDC) and Prevention and two-step skin testing or a Food and Drug Administration (FDA)-approved blood test.

1. Contract employees manifesting positive screening reactions to the tuberculin shall be examined according to current CDC guidelines prior to working on VHA property.

2. Subsequently, if the employee is found without evidence of active (infectious) pulmonary TB, a statement documenting examination by a physician shall be on file with the employer (construction contractor), noting that the employee with a positive tuberculin screening test is without evidence of active (infectious) pulmonary TB.

3. If the employee is found with evidence of active (infectious) pulmonary TB, the employee shall require treatment with a subsequent statement to the fact on file with the employer before being allowed to return to work on VHA property.
SPEC WRITER NOTE: Coordinate editing with facility Safety Manager/Officer at VA medical facilities. Edit subparagraphs D, F, H, I, N, Q and R carefully as they directly relate to interim life safety measures required in or adjacent to construction affecting occupied buildings by the Joint Commission on Accreditation of Healthcare Organizations. At other sites, edit for project and delete // and facility Safety // Manager // Officer// provisions.

1.17 FIRE SAFETY

A. Fire Safety Plan: Establish and maintain a site-specific fire protection program in accordance with 29 CFR 1926. Prior to start of work, prepare a plan detailing project-specific fire safety measures, including periodic status reports, and submit to // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // for review for compliance with contract requirements in accordance with Section 01 33 23, SHOP DRAWINGS, PRODUCT DATA AND SAMPLES. This plan may be an element of the Accident Prevention Plan.

B. Site and Building Access: Maintain free and unobstructed access to facility emergency services and for fire, police and other emergency response forces in accordance with NFPA 241.

C. For work occurring at a VA medical facility, coordinate with the facility Safety Manager/Officer, as several aspects of this section directly relate to interim life safety measures required in or adjacent to construction affecting occupied buildings accredited by The Joint Commission.

D. Separate temporary facilities, such as trailers, storage sheds, and dumpsters, from existing buildings and new construction by distances in accordance with NFPA 241. For small facilities with less than 6 m (20 feet) exposing overall length, separate by 3m (10 feet).

E. Temporary Construction Partitions:
SPEC WRITER NOTE: Where phasing drawings are used, show locations and hourly fire ratings of anticipated temporary construction partitions and hourly fire ratings of nearby existing construction on phasing drawings. Detail unusual conditions.

1. Install and maintain temporary construction partitions to provide smoke-tight separations between construction areas the areas that are described in phasing requirements and adjoining areas. Construct partitions of gypsum board or fire-retardant treated plywood (fire-retardant treated in accordance with NFPA 703) on both sides of fire-retardant treated wood framing or metal steel studs. Extend the partitions through suspended ceilings to floor slab deck or roof. Seal joints and penetrations. At door openings, install Class C, ¾ hour fire/smoke rated doors with self-closing devices.

2. Install one-hour two-hour fire-rated temporary construction partitions as shown on drawings to maintain integrity of existing exit stair enclosures, exit passageways, fire-rated enclosures of hazardous areas, horizontal exits, smoke barriers, vertical shafts and openings enclosures.

3. Close openings in smoke barriers and fire-rated construction to maintain fire ratings. Seal penetrations with listed through-penetration firestop materials in accordance with Section 07 84 00, FIRESTOPPING.

F. Temporary Heating and Electrical: Install, use and maintain installations in accordance with 29 CFR 1926, NFPA 241 and NFPA 70.

G. Means of Egress: Do not block exiting for occupied buildings, including paths from exits to roads. Minimize disruptions and coordinate with Resident Engineer Project Manager and Facility Safety Manager Officer or Contracting Officer Representative or Government Designated Authority.
H. Egress Routes for Construction Workers: Maintain free and unobstructed egress. Inspect daily. Report findings and corrective actions weekly to Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.

I. Fire Extinguishers: Provide and maintain extinguishers in construction areas and temporary storage areas in accordance with 29 CFR 1926, NFPA 241 and NFPA 10.


K. Standpipes: Install and extend standpipes up with each floor in accordance with 29 CFR 1926 and NFPA 241. Do not charge wet standpipes subject to freezing until weather protected. SPEC WRITER NOTE: Modify to suit design. Coordinate with phasing.

L. Sprinklers: Install, test and activate new automatic sprinklers prior to removing existing sprinklers. //

M. Existing Fire Protection: Do not impair automatic sprinklers, smoke and heat detection, and fire alarm systems, except for portions immediately under construction, and temporarily for connections. Provide fire watch for impairments more than 4 hours in a 24-hour period. Request interruptions in accordance with Article, OPERATIONS AND STORAGE AREAS, and coordinate with Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //. All existing or temporary fire protection systems (fire alarms, sprinklers) located in construction areas shall be tested as coordinated with the medical center. Parameters for the testing and results of any tests performed shall be recorded by the medical center and copies provided to the Resident Engineer.

N. Smoke Detectors: Prevent accidental operation. Remove temporary covers at end of work operations each day. Coordinate with Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.
SPEC WRITER NOTE: Use facility permit process at existing VA medical facilities. For other sites, use contractor's process.

O. Hot Work: Perform and safeguard hot work operations in accordance with NFPA 241 and NFPA 51B. Coordinate with // Resident Engineer// Facility Safety Office //. // Obtain permits from // Resident Engineer// facility Safety // Manager // Officer // at least ____ hours in advance // . // Designate contractor's responsible project-site fire prevention program manager to permit hot work. //

P. Fire Hazard Prevention and Safety Inspections: Inspect entire construction areas weekly. Coordinate with, and report findings and corrective actions weekly to // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.

Q. Smoking: Smoking is prohibited in and adjacent to construction areas inside existing buildings and additions under construction. In separate and detached buildings under construction, smoking is prohibited except in designated smoking rest areas.

R. Dispose of waste and debris in accordance with NFPA 241. Remove from buildings daily.

SPEC WRITER NOTE: If it is anticipated that work will be performed in compartmentalized areas, add the following subparagraph.

S. If required, submit documentation to the // Resident Engineer// Facility Safety Office // COR // or other Government Designated Authority // that personnel have been trained in the fire safety aspects of working in areas with impaired structural or compartmentalization features.

1.18 ELECTRICAL

A. All electrical work shall comply with NFPA 70 (NEC), NFPA 70B, NFPA 70E, 29 CFR Part 1910 Subpart J - General Environmental Controls, 29 CFR Part 1910 Subpart S - Electrical, and 29 CFR 1926 Subpart K in addition to other references required by contract.
B. All qualified persons performing electrical work under this contract shall be licensed journeyman or master electricians. All apprentice electricians performing under this contract shall be deemed unqualified persons unless they are working under the immediate supervision of a licensed electrician or master electrician.

C. All electrical work will be accomplished de-energized and in the Electrically Safe Work Condition (refer to NFPA 70E for Work Involving Electrical Hazards, including Exemptions to Work Permit). Any Contractor, subcontractor or temporary worker who fails to fully comply with this requirement is subject to immediate termination in accordance with FAR clause 52.236-5(c). Only in rare circumstance when achieving an electrically safe work condition prior to beginning work would increase or cause additional hazards or is infeasible due to equipment design or operational limitations is energized work permitted. The Chief Engineer, Chief of Facilities Management, Resident Engineer, Project Manager, Facility Safety Manager, Officer or Contracting Officer Representative or Government Designated Authority with approval of the Medical Center Director will make the determination if the circumstances would meet the exception outlined above. An AHA and permit specific to energized work activities will be developed, reviewed, and accepted by the VA prior to the start of that activity.

1. Development of a Hazardous Electrical Energy Control Procedure is required prior to de-energization. A single Simple Lockout/Tagout Procedure for multiple work operations can only be used for work involving qualified person(s) de-energizing one set of conductors or circuit part source. Task specific Complex Lockout/Tagout Procedures are required at all other times.

2. Verification of the absence of voltage after de-energization and lockout/tagout is considered “energized electrical work” (live work) under NFPA 70E, and shall only be performed by qualified persons wearing appropriate shock protective (voltage rated) gloves and arc rate personal protective clothing and equipment, using Underwriters Laboratories (UL) tested and appropriately rated contact electrical testing instruments or equipment appropriate for the environment in which they will be used.
3. Personal Protective Equipment (PPE) and electrical testing instruments will be readily available for inspection by the //Chief Engineer// Chief of Facilities Management // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority //.

D. Before beginning any electrical work, an Activity Hazard Analysis (AHA) will be conducted to include Shock Hazard and Arc Flash Hazard analyses (NFPA Tables can be used only as a last alternative and it is strongly suggested a full Arc Flash Hazard Analyses be conducted). Work shall not begin until the AHA for the work activity and permit for energized work has been reviewed and accepted by the // Resident Engineer // Project Manager // and Facility Safety // Manager // Officer // or Contracting Officer Representative // or Government Designated Authority // and discussed with all engaged in the activity, including the Contractor, subcontractor(s), and Government on-site representatives at preparatory and initial control phase meetings.

E. Ground-fault circuit interrupters. GFCI protection shall be provided where an employee is operating or using cord- and plug-connected tools related to construction activity supplied by 125-volt, 15-, 20-, or 30-ampere circuits. Where employees operate or use equipment supplied by greater than 125-volt, 15-, 20-, or 30-ampere circuits, GFCI protection or an assured equipment grounding conductor program shall be implemented in accordance with NFPA 70E - 2015, Chapter 1, Article 110.4(C)(2).

1.19 FALL PROTECTION

A. The fall protection (FP) threshold height requirement is 4ft for ALL WORK, unless specified differently or the OSHA 29 CFR 1926 or EM 385-1-1 requirements are more stringent, to include steel erection activities, systems-engineered activities (prefabricated) metal buildings, residential (wood) construction and scaffolding work.

1. The use of a Safety Monitoring System (SMS) as a fall protection method is prohibited.

2. The use of Controlled Access Zone (CAZ) as a fall protection method is prohibited.
3. A Warning Line System (WLS) may ONLY be used on floors or flat or low-sloped roofs (between 0 – 18.4 degrees or 4:12 slope) and shall be erected around all sides of the work area (See 29 CFR 1926.502(f) for construction of WLS requirements). Working within the WLS does not require FP. No worker shall be allowed in the area between the roof or floor edge and the WLS without FP. FP is required when working outside the WLS.

4. Fall protection while using a ladder will be governed by the more stringent of OSHA and EM 385-1-1 requirements.

### 1.20 SCAFFOLDS AND OTHER WORK PLATFORMS

A. All scaffolds and other work platforms construction activities shall comply with 29 CFR 1926 Subpart L.

B. The fall protection (FP) threshold height requirement is 4 ft as stated in Section 1.16.

C. The following hierarchy and prohibitions shall be followed in selecting appropriate work platforms.

1. Scaffolds, platforms, or temporary floors shall be provided for all work except that can be performed safely from the ground or similar footing.

2. Ladders less than 20 feet may be used as work platforms only when use of small hand tools or handling of light material is involved.

3. Ladder jacks, lean-to, and prop-scaffolds are prohibited.

4. Emergency descent devices shall not be used as working platforms.

D. Contractors shall use a scaffold tagging system in which all scaffolds are tagged by the Competent Person. Tags shall be color-coded: green indicates the scaffold has been inspected and is safe to use; red indicates the scaffold is unsafe to use. Tags shall be readily visible, made of materials that will withstand the environment in which they are used, be legible and shall include:

1. The Competent Person’s name and signature;

2. Dates of initial and last inspections.
E. Mast Climbing work platforms: When access ladders, including masts designed as ladders, exceed 20 ft (6 m) in height, positive fall protection shall be used.

1.21 EXCAVATION AND TRENCHES

A. All excavation and trenching work shall comply with 29 CFR 1926 Subpart P. Excavations less than 5 feet in depth require evaluation by the contractor’s “Competent Person” (CP) for determination of the necessity of an excavation protective system where kneeling, laying in, or stooping within the excavation is required.

B. All excavations and trenches 24 inches in depth or greater shall require a written trenching and excavation permit (NOTE – some States and other local jurisdictions require separate state/jurisdiction-issued excavation permits). The permit shall have two sections, one section will be completed prior to digging or drilling and the other will be completed prior to personnel entering the excavations greater than 5 feet in depth. Each section of the permit shall be provided to the // Resident Engineer // Project Manager // and/or Facility Safety Manager // Officer // and/or other Government Designated Authority // prior to proceeding with digging or drilling and prior to proceeding with entering the excavation. After completion of the work and prior to opening a new section of an excavation, the permit shall be closed out and provided to the // Resident Engineer // Project Manager // and/or Facility Safety Manager // Officer // and/or other Government Designated Authority //. The permit shall be maintained onsite, and the first section of the permit shall include the following:

1. Estimated start time & stop time
2. Specific location and nature of the work.
3. Indication of the contractor’s “Competent Person” (CP) in excavation safety with qualifications and signature. Formal course in excavation safety is required by the contractor’s CP.
4. Indication of whether soil or concrete removal to an offsite location is necessary.
5. Indication of whether soil samples are required to determined soil contamination.
6. Indication of coordination with local authority (i.e. "One Call") or contractor’s effort to determine utility location with search and survey equipment.

7. Indication of review of site drawings for proximity of utilities to digging/drilling.

C. The second section of the permit for excavations greater than five feet in depth shall include the following:

1. Determination of OSHA classification of soil. Soil samples will be from freshly dug soil with samples taken from different soil type layers as necessary and placed at a safe distance from the excavation by the excavating equipment. A pocket penetrometer will be utilized in determination of the unconfined compression strength of the soil for comparison against OSHA table (Less than 0.5 Tons/FT² – Type C, 0.5 Tons/FT² to 1.5 Tons/FT² – Type B, greater than 1.5 Tons/FT² – Type A without condition to reduce to Type B).

2. Indication of selected protective system (sloping/benching, shoring, shielding). When soil classification is identified as “Type A” or “Solid Rock”, only shoring or shielding or Professional Engineer designed systems can be used for protection. A Sloping/Benching system may only be used when classifying the soil as Type B or Type C. Refer to Appendix B of 29 CFR 1926, Subpart P for further information on protective systems designs.

3. Indication of the spoil pile being stored at least 2 feet from the edge of the excavation and safe access being provided within 25 feet of the workers.

4. Indication of assessment for a potential toxic, explosive, or oxygen deficient atmosphere where oxygen deficiency (atmospheres containing less than 19.5 percent oxygen) or a hazardous atmosphere exists or could reasonably be expected to exist. Internal combustion engine equipment is not allowed in an excavation without providing force air ventilation to lower the concentration to below OSHA PELs, providing sufficient oxygen levels, and atmospheric testing as necessary to ensure safe levels are maintained.

D. As required by OSHA 29 CFR 1926.651(b)(1), the estimated location of utility installations, such as sewer, telephone, fuel, electric, water
lines, or any other underground installations that reasonably may be expected to be encountered during excavation work, shall be determined prior to opening an excavation.

1. The planned dig site will be outlined/marked in white prior to locating the utilities.

2. Use of the American Public Works Association Uniform Color Code is required for the marking of the proposed excavation and located utilities.

3. 811 will be called two business days before digging on all local or State lands and public Right-of-Ways.

4. Digging will not commence until all known utilities are marked.

5. Utility markings will be maintained

E. Excavations will be hand dug or excavated by other similar safe and acceptable means as excavation operations approach within 3 to 5 feet of identified underground utilities. Exploratory bar or other detection equipment will be utilized as necessary to further identify the location of underground utilities.

F. Excavations greater than 20 feet in depth require a Professional Engineer designed excavation protective system.

1.22 CRANES

A. All crane work shall comply with 29 CFR 1926 Subpart CC and EM 385-1-1.

B. Prior to operating a crane, the operator must be licensed, qualified or certified to operate the crane. Thus, all the provisions contained with Subpart CC are effective and there is no “Phase In” date.

C. A detailed lift plan for all lifts shall be submitted to the Resident Engineer, COR and/or other Government Designated Authority 14 days prior to the scheduled lift complete with route for truck carrying load, crane load analysis, siting of crane and path of swing and all other elements of a critical lift plan where the lift meets the definition of a critical lift. Critical lifts require a more comprehensive lift plan to minimize the potential of crane failure and/or catastrophic loss. The plan must be reviewed and accepted by the General Contractor before being submitted to the VA for review. The
lift will not be allowed to proceed without prior acceptance of this
document by the // Resident Engineer // Project Manager // and/or
Facility Safety // Manager // Officer // and/or other Government
Designated Authority //.

D. Crane operators shall not carry loads

1. over the general public or VAMC personnel

2. over any occupied building unless

   a. The top two or more floors are vacated under the lift affected
      area AND a Contractor provided engineering analysis, performed by
      a Professional Engineer, demonstrates that overhead protection
      provided by the roof and vacated floors is sufficient to protect
      against the potential loss of a load being lifted or a minimum of
      300 psf of protection is provided, whichever is greater

   b. OR Overhead protection is designed by a Professional
      Engineer and installed over the roof by the Contractor to
      protect the occupants below. The installed system shall be
      sufficient to protect against the potential loss of a load
      being lifted or a minimum of 300 psf of protection is
      provided, whichever is greater.

   c. OR A formal request may be submitted to the Contracting Officer
      for documentation, if available, indicating the roof of the
      building has been previously designed and constructed using a
      reinforced concrete roof slab or other means to provide overhead
      protection from construction activities specifically associated
      with the vertical or horizontal expansion of the same
      building AND a Contractor provided engineering analysis,
      performed by a Professional Engineer, demonstrates that overhead
      protection provided by the roof is sufficient to protect against
      the potential loss of a load being lifted or a minimum of 300 psf
      of protection is provided, whichever is greater.

1.23 CONTROL OF HAZARDOUS ENERGY (LOCKOUT/TAGOUT)

A. All installation, maintenance, and servicing of equipment or machinery
   shall comply with 29 CFR 1910.147 except for specifically referenced
   operations in 29 CFR 1926 such as concrete & masonry equipment
[1926.702(j)], heavy machinery & equipment [1926.600(a)(3)(i)], and process safety management of highly hazardous chemicals (1926.64). Control of hazardous electrical energy during the installation, maintenance, or servicing of electrical equipment shall comply with Section 1.15 to include NFPA 70E and other VA specific requirements discussed in the section.

1.24 CONFINED SPACE ENTRY

A. All confined space entry shall comply with 29 CFR 1926, Subpart AA except for specifically referenced operations in 29 CFR 1926 such as excavations/trenches [1926.651(g)].

B. A site-specific Confined Space Entry Plan (including permitting process) shall be developed and submitted to the // Resident Engineer // Project Manager // and/or Facility Safety // Manager // Officer // and/or other Government Designated Authority //.

1.25 WELDING AND CUTTING

As specified in section 1.14, Hot Work: Perform and safeguard hot work operations in accordance with NFPA 241 and NFPA 51B. Coordinate with // Resident Engineer // Project Manager // and/or Facility Safety // Manager // Officer // and/or other Government Designated Authority //.
Obtain permits from // Resident Engineer // Project Manager // and/or Facility Safety // Manager // Officer // and/or other Government Designated Authority // at least ____ hours in advance //.
Designate contractor's responsible project-site fire prevention program manager to permit hot work. //

1.26 LADDERS

A. All Ladder use shall comply with 29 CFR 1926 Subpart X and EM 385-1-1.

B. All portable ladders shall be of sufficient length and shall be placed so that workers will not stretch or assume a hazardous position.

C. Manufacturer safety labels shall be in place on ladders

D. Step Ladders shall not be used in the closed position

E. Top steps or cap of step ladders shall not be used as a step

F. Portable ladders, used as temporary access, shall extend at least 3 ft (0.9 m) above the upper landing surface.
1. When a 3 ft (0.9-m) extension is not possible, a grasping device (such as a grab rail) shall be provided to assist workers in mounting and dismounting the ladder.

2. In no case shall the length of the ladder be such that ladder deflection under a load would, by itself, cause the ladder to slip from its support.

G. Ladders shall be inspected for visible defects on a daily basis and after any occurrence that could affect their safe use. Broken or damaged ladders shall be immediately tagged "DO NOT USE," or with similar wording, and withdrawn from service until restored to a condition meeting their original design.

1.27 FLOOR & WALL OPENINGS

A. All floor and wall openings shall comply with 29 CFR 1926 Subpart M and EM 385-1-1.

B. Floor and roof holes/openings are any that measure over 2 in (51 mm) in any direction of a walking/working surface which persons may trip or fall into or where objects may fall to the level below. Skylights located in floors or roofs are considered floor or roof hole/openings.

C. All floor, roof openings or hole into which a person can accidentally walk or fall through shall be guarded either by a railing system with toe boards along all exposed sides or a load-bearing cover. When the cover is not in place, the opening or hole shall be protected by a removable guardrail system or shall be attended when the guarding system has been removed, or other fall protection system.

1. Covers shall be capable of supporting, without failure, at least twice the weight of the worker, equipment and material combined.

2. Covers shall be secured when installed, clearly marked with the word "HOLE", "COVER" or "Danger, Roof Opening-Do Not Remove" or color-coded or equivalent methods (e.g., red or orange "X"). Workers must be made aware of the meaning for color coding and equivalent methods.

3. Roofing material, such as roofing membrane, insulation or felts, covering or partly covering openings or holes, shall be immediately cut out. No hole or opening shall be left unattended unless covered.
4. Non-load-bearing skylights shall be guarded by a load-bearing skylight screen, cover, or railing system along all exposed sides.

5. Workers are prohibited from standing/walking on skylights.

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