## APPENDIX A of CONSTRUCTION, RENOVATION, AND MAINTENANCE INFECTION CONTROL RISK ASSESSMENT

INFECTION CONTROL RISK ASSESSMENT AUTHORIZATION									
Project:						Class:			
WO#:				Location of Construction (BLD#):					
Project Description/Scope of Work:									
Project Start Date:				Project Duration/Project End Date:					
UVa Project Manager Contact Info (Cell # & email)				UVa Construction Adm. Manager Contact Info (Cell # & email)					
Contracted Company Performing Work:				Contractor PM or Superintendent Contact Info (Cell # & Email):					
Check highest Risk Group				Check 1	Constr	Construction Activity TYPE			
_	Low Risk Area			ТҮРЕЛ		PE A: Inspection, non-invasive activity			
	Medium Risk Area					: Small scale, short duration			
	High Risk Area				TYPE C: Activity generates moderate to hig				
	Highest Risk Area				TYPE D: Major duration and constru		ruction ad	ctivities.	
Risk Group↓		ТҮРЕ А		ТҮРЕ В		ТҮРЕ С		TYPE D	
Low Risk		I		I		Ш		ш	
Medium Ris	k	I		II	III			IV	
High Risk		I.		Ш		III or IV <sup>2</sup>		IV	
Highest Risk II				II or III <sup>1</sup>		III or IV <sup>2</sup>		IV	
<ul> <li><sup>1</sup>Higher class when working above ceiling</li> <li><sup>2</sup>Higher class may be required dependent on duration, location and potential impact of work</li> <li>Check here I if: Plenum Ceilings exist (complete negative pressure cannot be obtained) or negative pressure rooms will be affected</li> <li>Note: Infection Prevention &amp; Control approval of the ICRA Authorization Form will be required for Class III or Class IV projects.</li> </ul>									
Note: In		omplete the following for				-	or class	iv projects.	
Identify the area		rea and the risk group for those					gher risk g	iroup.	
Unit Bel	ow Unit	Above Later	al	L	ateral	Behind		Front	
Risk Gro	oup Risk	Group Risk Group		Risk Group		Risk Group		Risk Group	
		•	•					•	
Has IP&C been consulted on the design (e.g. clean/soiled rooms, handwashing sinks, isolation rooms, etc.)?									
Specific site of activity (patient room, corridor, medication room, storage room, etc.). Specify room numbers.									
How will unit based equipment be protected? If equipment is to be moved, provide specifics:									

Possible HVAC, plumbing, and electrical issues and the probability	γ of unplanned outages that will impact patient care:
Is there a risk for water damage or will water be aerosolized durir	ng this work?
HVAC: Describe local or system isolation of work site (will supply	or return be active?):
Indicate type of work to be done during patient care hours:	
Describe patient, staff and construction traffic flow patterns during	ng construction
ICRA containment: Barrier/Door type:         Plastic containment required for construction of barrier         Inspection prior to start of construction required         Need elevator lockout or appropriate measures if elevator	ors are within work area?
Ante-room (yes/no):	
How will negative pressure be maintained? Indicate on floor plan. Reference Section III.C.	Number of HEPA air exchanges and location of HEPA machines (indicate on floor plan) (min 6 ACH): (Ft <sup>3</sup> /10= req. CFM)
Can supply air be completely isolated vs damped down? Have you coordinated with HSPP?	
How will negative pressure be monitored? Minimum -0.01. For ( Continuous read negative air pressure monitor Smoke test with daily log	Class IV work must be -0.03
IP&C to complete: Need for final IP&C approval before reoccupa	incy?

	Infect	ion Control Interventions for the assigned classification include interventions for all lower classes (i.e. Class IV includes Classes I, II, & III)				
Class I	1.	. Patients must be removed from the Work area while the Work is being performed.				
	2.	Execute work by methods to minimize raising dust from construction operations.				
	3.	Immediately replace ceiling tile if displaced.				
	4.	Contractor is educated before the start of the project about the importance of adhering to Infection Prevention & Control				
		measures.				
	5.	Clean (wipe down or HEPA vacuum) work area upon completion of task				
Class II	1.	All Class I interventions				
	2.	High Risk Patients must remain out of room for one hour after completion of work.				
	3.	Provide active means to prevent air-borne dust from dispersing.				
	4.	Contain work area with an approved ICRA containment barrier (section H on page 4).				
	5.	Clean/sterile patient care items must be removed from within ICRA barrier. Contractor to notify RP if not removed.				
	6.	Take appropriate measures at the source (e.g. HEPA vac, water mist, etc.) to control dust while cutting.				
	7.	Seal unused doors with painters tape.				
	8.	For Type C Work, take appropriate measures to isolate HVAC system as specified in ICRA authorization				
	9.	Doors and windows within the work zone to remain closed at all times except during ingress/egress. Use appropriate cleaning				
		measures to minimize all visible debris throughout the site.				
	10.	Maintain dust control mats (carpet and/or adhesive walk off mat) at site access points as necessary. Any dust or construction				
		debris tracked outside of the work area will be promptly cleaned.				
	11.	All renovation, construction, maintenance & tool carts entering/leaving area must be tightly covered and wiped and/or vacuumed				
		so they are of free of dust and debris				
		Cover construction waste before transport using clean, hard-covered containers.				
		Use designated travel route/elevators for all construction related activities.				
	14.	Area to be free of dust and or debris at end of job or end of work shift. RP to Coordinate with EVS for Discharge Clean if work				
		done outside of mobile dust containment booth.				

Class III	1.	All Class I and II interventions				
	2. Isolate HVAC system in areas where work is being performed to prevent contamination of duct system. Maintain until barrier is					
	removed at completion of project.					
	3.	Designate entry and exit traffic pattern, unauthorized personnel are not permitted to enter wo				
	4.	Complete all barriers (or implement portable containment with HEPA vacuum) before construct	ction begins. When working above			
		ceiling, barriers must go to deck unless exception approved on ICRA authorization. Barriers wi	ll stay in place until PM authorizes			
		removal				
	5.	Seal all holes, pipes and conduit penetrations in critical barriers.				
	6.	Maintain negative pressure within work site and utilize HEPA equipped air machines. Both wil	l be maintained until finishes are			
	complete, the HVAC system is operational and PM authorizes removal. Air from work zone within Operating room theatre must					
	not be exhausted into adjacent corridors.					
	7		act)			
	7. Air pressure to be monitored & documented at least daily (range -0.01 to -0.05 wc or smoke test).					
	8. The contractor will maintain the construction zone in a clean manner.					
	a. Vacuum debris from clothing and shoes prior to exiting barriers (including containment booth)					
	b. The area will be HEPA-vacuumed or damp mopped daily or more often as necessary to minimize dust.					
	c. Daily cleanup of debris, material and waste shall be completed. Walk off mats monitored & changed on a regular basis so					
		that they remain effective.				
	d. Any dust or construction debris tracked outside of the work area will be promptly cleaned.					
	9.	Do not open previously sealed HVAC registers and grills until finishes are in place and site is cle	ean.			
	10.	Barriers will be removed carefully to minimize spreading of construction dust and debris.				
	11.	RP to Coordinate with EVS for a Terminal Clean.				
	12.	For Type C and D work, additional steps for re-occupancy may be required as outlined in Section	on IV of this document.			
	13.	**For adjacent outdoor work, many of the above interventions may not apply, however, additional additiona	ional interventions may be required			
	to isolate construction from building entrances and mitigate construction impact to patient care (e.g. re-route patient traffic, wet					
		down excavation areas, charcoal filters on air intakes, additional physical barriers at entrance/				
	1.	All Class I, II, and III interventions	)			
	2.	Continuous air pressure monitoring may be required (range -0.01 to -0.05 wc). For all Class IV v	work in highest risk areas			
Class IV	2.	continuous pressure and daily particle count monitoring outside of construction entrance is re				
Class IV	2					
	3. When exhausting into adjacent space, daily particle count monitoring of the HEPA exhaust efficiency in highest risk areas is also					
		required.				
	4. Utilize anteroom and require all personnel to pass through this room so that they can be vacuumed using a HEPA vacuum cleaner					
	before leaving work site.					
	a. In certain situations wearing coveralls and/or shoe covers upon leaving the worksite may also be required.					
	5.	To erect a barrier in Highest Risk areas a temporary plastic barrier must be first established usi				
		retardant poly. To remove barriers upon completion of work a temporary barrier must again b	be established and the permanent			
	barrier removed within the temporary barrier.					
	6. Portable air scrubbers used in Class IV interventions should be connected to emergency power, if available					
ADDITIO	NALO	COMMENTS OR REQUIREMENTS:				
		Required Signatures	Date			
UVa Proj	ect N	lanager/CAM/Responsible Person – Class I - IV				
Contracto	or PN	1/Superintendent (unless TBD at time of signing)				
contract						
Infection	Prev	entionist – Class III/IV only				
Clinical A	roa N	Aanager or Designee – Class III/IV only				
	led I	המוומצבו טו שבאצווכב – נומגא ווויויע טווויע				