

**SECTION 015020
MEDICAL FACILITY DUST CONTROL PROCEDURES**

FOR ALL CONSTRUCTION/RENOVATION PROJECTS IN ANY FACILITY OR AREA DIRECTLY RELATED TO, OR VERTICALLY OR HORIZONTALLY ADJACENT TO PATIENT AREAS. A FACILITY REPRESENTATIVE WILL COMPLETE AN INFECTION CONTROL RISK ASSESSMENT (ICRA) AUTHORIZATION FOR CONSTRUCTION. THE CONSTRUCTION SHALL BE SCHEDULED AND PHASED TO MINIMIZE DISRUPTION TO THE OCCUPANTS OF THE FACILITIES AND TO PROTECT THE OCCUPANTS AGAINST CONSTRUCTION TRAFFIC, DUST, AND DIRT.

1.01 GENERAL

- A. Construction activities causing disturbance of existing dust, or creating new dust, must be conducted in tight enclosures cutting off any flow of dust particles into adjacent occupied areas to prevent the spread of fungal spores and bacteria.
- B. Before any construction on site begins, properly brief all workers on site to ensure full compliance with the dust control measures established by the completed ICRA and the construction documents. Conduct a field review of all dust control policies. Fill out and sign a checklist, approved by the Facility.
- C. Install temporary construction dust control barriers and closures above ceilings to prevent the transmission of dust into adjacent occupied areas.
- D. Do not allow dust and debris to accumulate. Remove dust daily. Transport all demolished or removed material in tightly sealed, covered rubber tired containers. Fit out containers with clean polyethylene covers. Seal completely at perimeters. Before leaving construction areas wipe clean all containers with a damp sponge to prevent tracking of dust. Place the sponge and pail inside the dust control barrier entrance and keep them clean and changed daily.
- E. Provide temporary fans, associated ductwork, and dust control barriers required to maintain a negative pressure in the work area relative to the surrounding occupied areas. Provide HEPA filtered exhaust fans when utilizing existing exhaust duct system. Submit plan for achieving negative pressure to the Facility Construction Administration Manager for review. Install a visual monitoring system to demonstrate that the area is under negative pressure at all times until construction barriers are removed.
- F. Provide walk off mats at inside dust control barrier entrances. Vacuum or change walk-off mats daily or more often as necessary to prevent accumulation of dust. Additionally, provide (sticky) walk-off mat immediately outside dust control barrier entrances.
- G. Immediately remove any dust tracked outside a dust control barrier.
- H. Immediately replace any ceiling access panels opened for investigation beyond the sealed areas when unattended. If the ceiling tile is removed from any inpatient area, outpatient transplant clinic or outpatient cancer clinic, then patients must be removed from the space for at least one hour after the ceiling tile is replaced.
- I. Block off existing ventilation ducts within the construction area. Cap ducts to be dust tight and to withstand airflow and pressure.
- J. Carefully remove dust control barriers and ceiling protection to minimize the spread of dirt and debris. Obtain approval of Facility's Construction Administration Manager before proceeding with removal of dust control barriers and ceiling protection. Clean the renovated area before removal of barriers by: a) wet mop all vinyl or sheet flooring, b) vacuum all carpet or soft surfaces with a HEPA filtered vacuum, c) wipe all surfaces with disinfectant.
- K. Take immediate action to clean deficient areas. Cease other construction work until deficiencies are corrected.

1.02 TEMPORARY DUST CONTROL BARRIERS

- A. Provide temporary dust control barriers where indicated and where reasonably required to ensure protection from dust. (FOR CLASS V ONLY- Dust control barriers shall be full height, non-combustible construction, with a minimum 1/2" gypsum board on one side.) (FOR CLASS IV ONLY- Install plastic dust barriers to seal work area from non-work areas, or implement

control cube method (cart with plastic covering and sealed connection to work site with HEPA vacuum). Use 3-inch wide duct tape to tightly seal the perimeter of both sides of the barriers. Install tape in a neat and continuous manner. Finish paint outer surface of each barrier. Match door and frame finish to existing adjacent areas.

1. Dust control barrier doors: 3'-0" minimum width, with frame, hardware, lock set keyed to Facility system, and heavy duty closer. Tightly weather-strip door to prevent flow of dust into patient areas. Locate doors as directed and swing into construction areas. Keep barrier doors locked outside of working hours. Precut all material for barriers in unoccupied areas.
2. Dust control barriers may not reduce exit access corridors below the required width of 44 inches.
3. (CLASS V ONLY) Seal all door openings to adjacent areas with duct tape.
4. Provide rigid non-combustible board barriers to seal patient areas from work areas, at the perimeter of work areas, and between finish ceiling and upper concrete slab. Cut to fit around all existing utilities. Seal with tape around penetrations. (Note: dust barriers may also be constructed as temporary fire/ smoke barriers.) As such the gypsum board should continue to the floor slab above. See drawings for appropriate wall type.
5. Schedule with the Facility Construction Administration Manager work described in the construction documents outside the construction dust control barriers, including work in corridors and lobbies.
6. Do not store any construction equipment or material outside the construction dust control barrier without the Facility's written permission.
7. Keep dust control barriers in a neat clean and dust tight condition at all times. Provide necessary manpower and equipment (dust and wet mops, brooms, buckets and clean wiping rags, HEPA Vacuums) for cleaning fine dust from floors in occupied areas and to keep adjacent occupied areas clean at all times.
8. Provide dust tight fire resistant polyethylene covering taped in place to completely seal opening until final patching is done, whenever openings are made into walls or ceilings in-patient occupied areas. This procedure may only be done if work is completed in one shift.
9. Keep construction areas swept clean with sweeping compound and keep clear of debris daily throughout the course of construction.
10. Complete and place into operation all of the above described items of work before beginning demolition.

1.03 EXECUTION

- A. Maintain and operate dust control systems to provide continuous protection to occupied areas of the Facility.
- B. Modify and extend systems as required.
- C. Removal and reconditioning:
 1. Remove all temporary services installed as a requirement of the Contract Documents. Restore utilities to original condition at the completion of the Work.
 2. Legally and properly dispose of all debris resulting from the removal and reconditioning operations.

1.04 ENFORCEMENT

- A. If violations and/or non-compliance occur, the Facility has the right to halt all construction until deficiencies are corrected. The Contractor will bear full responsibility for any delay of work.
- B. A record of each dust control violation will be maintained by the Facility's Construction Administration Manager.
- C. Failure of the Contractor to immediately mitigate and promptly correct deficiencies is sufficient grounds for termination and will result in corrective action being taken by the Facility. All resulting costs will be the responsibility of the Contractor.
- D. Continued violations will be cause to find the Contractor in non-compliance with contract documents and shall be sufficient grounds for termination

1.05 DUST CONTROL PLAN (OPTIONAL)

- A. Require, if appropriate, after consultation with the Facility's Project Manager the contractor may be required to submit for approval by the Facility, a contractor dust control plan that includes all features noted.

END OF SECTION