

**University of Kentucky HealthCare  
Physical Plant Division  
Chandler Medical Center,  
Good Samaritan Hospital &  
Eastern State Hospital**



**Vendor Relations Guidelines**

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## **PPDMC Mission Statement**

**To provide high quality, professional facilities services to support the healthcare, research, and educational programs of the University of Kentucky Medical Center Complex through innovative and cost effective housekeeping, preventative maintenance, corrective maintenance, renovation and life safety initiatives.**



**The purpose of this manual and activities is to create effective communication and support to our vendors/contractors.**

## **University of Kentucky HealthCare Acronyms:**

**DLAR = Department for Laboratory Animal Research**

**ESH= Easter State Hospital**

**UKGS = Good Samaritan Hospital**

**ICRA= Infection Control Risk Assessment**

**ILSM = Interim Life Safety Measures**

**MSDS= Material Data Sheets**

**PAV A or PCF = Pavilion A (new patient care facility for UK Hospital)**

**PAV H= Hospital**

**PAV HA = CCC**

**PAV CC= Roach**

**PAV WH= Whitney Hendrickson**

**PAV G= Gill**

**PAV A = Patient Care Facility**

**PPDGS = Physical Plant Division Good Samaritan**

**PPDMC = Physical Plant Division Medical Center**

**PTS = Parking and Transportation Service**

**UKHC = University of Kentucky Health Care (This includes all medical campus and hospitals.)**

**VRP = Vendor Relations Program (offered only through PPD)**

## **Introduction**

As a vendor/contractor assigned to University of Kentucky HealthCare facilities, you must remember that you are working adjacent to space occupied by patients, visitors, students, and staff. Sometimes this requires modifications to and/or changes in the way a project or service call is handled.

In an effort to ensure that all vendors/contractors assigned to UKHC facilities have the information necessary to perform their job within this environment, the hospital provides a general orientation and reference guide.

The project manager or supervisor with your company should inform you of the specific requirements of each project or service call. This written guide outlines general information and basic procedures and is designed as a supplement to the Vendor Relations Orientation session.

Please read this information carefully. If you have additional questions, please notify your UK PPDMC representative.

## **Vendor Appearance and Conduct**

All contracted vendors performing work for The University of Kentucky HealthCare facilities must dress in a professional manner. A company uniform is preferred; however, if one is not provided, men should wear work pants and a work shirt and women should wear appropriate non-provocative attire. Casual sportswear such as blue jeans, shorts, sweat suits, t-shirts, or tank tops are not approved apparel. The attire is intended to portray the image of well groomed, professional individuals. Contracted vendors are expected to take pride in their personal hygiene. In addition, all contracted employees will conduct themselves in a professional manner. Professional conduct must be exercised at all times. Loud and boisterous conduct will not be tolerated. Cursing and abusive language is prohibited. Courtesy, confidentiality and privacy for patients is essential to ensure and maintain patient dignity. Courtesy to others must also be exercised, displaying a good attitude, and creating a caring atmosphere.

Failure to comply can lead to the vendor being asked to leave the premises until the issues have been resolved.

## **Appearance**

The identification badge shall be worn at all times on the upper torso while on the premises. No pins or labels shall be attached.

Clothing must be clean, and without rips or tears. Shirt tails will be tucked in, and the shirt will be appropriately buttoned. If a contracted vendor's appearance is unacceptable or hygiene is poor, the vendor will be asked to leave the property and return with acceptable attire. If a contracted vendor continues to show up inappropriately dressed or hygienically offensive, further disciplinary action will be taken.

All hats must either have the company logo or be a solid color with no logo. Hard hats will be required in designated construction sites where applicable.

Footwear must be suitable for an assigned task, clean, and in good repair.

Hair must be clean and securely fastened so as not to compromise safety around machinery and patients. Facial hair shall not impede safe respirator use by creating a potential safety hazard.

Beards and mustaches, when permitted must be neatly groomed; otherwise the face shall be clean shaven daily.

Jewelry worn must be consistent with good safety practice. If jewelry items impede safety in any way, they are not permitted.

## **Conduct**

Appropriate behavior is expected on the University of Kentucky campus at all times. Horse play and crude behavior will not be tolerated. Professional behavior is expected.

## **HIPAA**

(The Health Insurance Portability and Accountability Act)

While working on the University of Kentucky Medical Center you will encounter patients or research. We must protect the well being of patients, families and visitors as well as any and all research projects that are vital to the University. You shall respect the privacy of our patients, their families and any research that you may encounter while on campus.

For a complete understanding of the HIPAA Rules & Regulations please visit:

<http://www.cdc.gov/mmwr/preview/mmwrhtml/m2e411a1.htm>

## **Tobacco Product Use**

UK is now Tobacco Free throughout the entire University of Kentucky campus. There is to be no tobacco use on University of Kentucky Property.

If tobacco use is observed on the UK campus and reported, violators will be asked to leave the campus immediately.

## **Security**

General Contractor's & vendors shall secure the project areas for safety of building users working in adjacent spaces. In the case of a security emergency, notify **Campus Police at 323-6156 or call 911** immediately. Contractor's and Vendors are responsible for the security of their own materials, tools or equipment on the project site. The owner is not responsible for theft or vandalism to any such materials, tools or equipment. The General Contractor or Vendor will coordinate with Medical Center Security prior to entering spaces other than contraction limits. This General Contractor shall assist in providing workers schedule to Medical Center Security personnel when it is evident his workmen will have access to unsecured areas within the building after normal work hours. Any General Contractor having a field office or job trailer shall provide a key to the Owner's Project Manager, only to be used in the case of fire or security emergency.

The Owner will provide construction cores for keying during the life of the project and permanent cores at conclusion of construction. For key assistance you may contact the University Key Shop.

**Security Enclosure and Lockup:** Install substantial temporary enclosure around partially completed areas of construction. Provide lockable entrances to prevent unauthorized entrance, vandalism, theft, and similar violations of security. Maintain security by limiting number of keys and restricting distribution to authorized personnel. Provide Owner with one set of keys.

## **Keys**

1. Project managers will complete the online request form requesting key(s) in their name. They will indicate in the Special Instructions field the name of the contractor and person to pick up the keys.
2. The contractor will go to the key shop and pick up the key(s). While they are there they will sign an electronic agreement releasing the University of Kentucky and the Key Shop from liability, and accepting responsibility for the key(s); also agreeing that a portion of their pay will be retained to cover any and all expenses relating to the loss or misuse of the key up to \$5000.
3. The Key shop will retain the original copy of the signed agreement on file.
4. The project manager will make sure the contractor returns the key to shop when the project is complete. PPD MC Project Team 859-323-6283 and Key shop @ 859-257-4789
5. Payment up to \$5,000.00 can be held on services rendered until keys have been returned

### **Contact information for Key Shop:**

50 Donovan Hall  
Lexington, Ky 40526

## Identification

Before beginning work on University of Kentucky HealthCare campus, all contractors must obtain an ID badge. Authorization forms can be obtained in the Kelley Building for vendors working at the Chandler Medical Center facilities. Badges for Good Samaritan can be obtained in the Human Resources Office at the Good Samaritan Hospital, Room B102, for vendors working at Good Samaritan Hospital.

A UKHC identification badge must be worn on the upper torso at all times when working on UKHC property. If you have not been issued an ID badge, consult with your supervisor or PPDMC Representative immediately. Badge applications must be obtained through PPDMC Rep

Medical Center Planning Design and Construction Office, 209 Kelley Bldg, 859-323-6283.

If you report to work without your badge, you must proceed to the Security Office in the new Patient Care Facility (A00807) or Good Samaritan Human Resources Office (B102) to purchase a temporary badge. If your badge is lost or stolen, report it to Security, 859-323-6946, immediately. You or your company must pay for all badges. **Cash or check only is accepted for payment. New badges are \$14.00 and lost badges will be \$28.00 to replace.** If a vendor/contractor has not yet complied with the ***PPDMC Vendor Relations Program*** a manual will be provided and expected to sign at the time a badge is requested. A record will be kept to help every party stay in compliance and up to date on policies or procedures.

## Purchase Order Requirements

Quotes and proposals should be electronically submitted to the proper PPDMC rep; at this time a Purchase Order will be issued.

In order for contractors/vendors to perform work at UK they must first obtain a Purchase Order from their PPDMC rep. Do not begin work without a PO, unless given specific authorized permission (example: emergency situation).

Invoices should be sent to your PPDMC rep as well as Accounts Payable for your security. Accounts Payable information: 331 Peterson Service Building 0005 Phone: (859) 257-1402 Fax: (859) 323-1954

Below is a helpful link from Purchasing to help you understand how to do business with UK.

<http://www.uky.edu/Purchasing/docs/supplierhowto.pdf>

OR

<http://www.uky.edu/EVPFA/Controller/BPM.htm>



## **Parking**

Any general contractor who is employed by the University of Kentucky for campus construction is eligible to purchase two "E" parking permits at the current fee if approved by the UK HealthCare PPDMC. Only the general contractor and/or key subcontractors may use these permits during the work period. Additional parking for service workers is available in the K lots at Commonwealth Stadium or in lots designated by Parking Services. The Director of Parking and Transportation Services, or designee, must approve exceptions. **Phone:** (859) 257-4789

Contractors begin the process of obtaining a parking permit by getting a letter from their UKHC PPD Representative which states what work they have been approved for, how long the construction will take to complete, and any other pertinent information. Contractors then bring this letter to the main PTS office at 721 Press Avenue, and fill out a construction application for the proper permit(s). Contractor or Contractor's Company will have to pay for these permit(s).

There are 2 parking spots behind the UK Hospital at Dock 2 that are reserved for Vendors that are here for short visits to the UK Hospital. Parking is limited in this area. A temporary parking pass can be provided by PPDMC dispatch. (859-323-6281)

## **Corporate Compliance**

### **Gifts, Gratuities, and Entertainment**

In order to maintain compliance with federal and state law, and to avoid any potential conflicts of interest, the University of Kentucky and its employees will not knowingly accept anything of value (including gifts, gratuities, or entertainment) offered by a supplier intended to induce or gain referrals, the purchase, lease, or rental of any item or service, or to otherwise influence the decision-making process.

### **To help eliminate the possibility of conflict of interest:**

- Departments may not accept anything of value from potential or current suppliers except promotional or advertising items of nominal value (pens, pads, etc.) or modest food that is given as part of a legitimate educational session. Product sales representatives will not leave food without cleaning the area thoroughly after the food is consumed.
- Donations to any unit of UK HealthCare made by current or potential suppliers must be made to the University of Kentucky Fund Development Office. Donations cannot, in any way, be tied to referrals, the purchase, lease, or rental of any item or service, or to otherwise influence the decision-making process. If reasonable questions regarding the supplier's intent to influence the decision-making process exist, appropriate action will be taken, including the return of the donation to the supplier.
- Education sessions, in-servicing opportunities, and other issues not expressly addressed in this policy that may conflict with these guidelines must be approved by Hospital Administration or PPDMC Director.

## Paging Codes

The UK HealthCare facilities use specific codes to alert staff about hazards or potential hazards in the area, and to call designated staff to action. These codes are designed to communicate information to those that need it without unduly alarming patients and visitors.

Here is a list of pertinent codes outlined below:

- **Code Black** Bomb/Bomb Threat
- **Code Blue:** Medical Emergency (adult or pediatric)
- **Code Pink:** Infant or Child abduction
- **Code Red:** Fire
- **Code Silver:** Active Shooter
- **Code Yellow:** Stand by Disaster plan activation (internal or external)
- **Code Yellow** –Complete Disaster plan activation (internal or external)
- **Assistance please (location)**  
**Uncontrolled individual**

Designated staff members have assigned roles in response to these codes. You may be asked to stop work and secure your area in response to any of these codes.

## Safety and Fire Prevention

### **Hazardous Material**

On the job site, you may use or work around hazardous material, such as glues or other products, that contain chemicals. These products could adversely affect your health if they are not handled safely and properly. It is your responsibility to understand the hazards associated with the chemicals or materials used and take appropriate precautions.

UK HealthCare requires that all contractors have material safety data sheets (MSDS) for all hazardous materials that they bring to or use on the job site. In case of spill please contact PPDMC Dispatch immediately 859-323-6281.

### **Fire Prevention**

UK HealthCare has a fire prevention program to protect patients, visitors, and staff from the dangers of fire. As a part of your orientation to this facility, please locate the fire alarms, extinguishers, and evacuation routes within or adjacent to the project site.

## Fire Notification

If fire, smoke, or excessive heat is detected within the UK HealthCare facilities, the fire notification system is activated. You will hear chimes over the paging system, followed by “code red” and the location of the alarm. In addition, the alarm system is activated periodically for fire drills and system testing.

When an alarm is activated, smoke and fire doors throughout the building will close. Staff will close doors to patient rooms, clear corridors, and implement other response procedures. In all UK HealthCare facility buildings with exception of the Hospitals you must evacuate immediately when the fire alarm sounds. In the Hospitals, you will be able to remain in the project site throughout the response. Please listen carefully to the overhead paging announcements for instructions that might affect you. If an order is given to evacuate, please secure the project site and exit the building.

## Your Role in Fire Response

As a Contractor, you have a role in fire response.  
If you discover a fire in your area:

- R**escue anyone in immediate danger, if possible.
- A**ctivate the nearest fire alarm and call 911.
- C**ontain, close doors that line the corridor.
- E**xtinguish, if possible, and evacuate, if necessary.

## Building Life Safety Features

UK HealthCare facilities are constructed with many life safety features to protect building occupants from fire. You must know the location of the following:

- Fire Alarms (at least two in every area in which you work)
- Fire Extinguishers
- Emergency Exits
- Evacuation Routes

Medical Gas Valves for the area in which you are working. **Contractors/vendors are NEVER to close medical gas valves**

If any life safety system must be taken out of service, you must coordinate the outage with the PPD Project Manager and the PPD Outage Coordinator prior to beginning work. You must put in place a temporary but equivalent system approved by the Campus Fire Marshall.

The UK HealthCare Medical Facilities are composed of smoke and fire compartments designed to contain the hazard should a fire break out. If a rated fire, smoke, or corridor wall is penetrated, you must patch the wall using a UL listed firestop assembly the day that the penetration is made. In the course of construction, if any existing holes are discovered adjacent to the work that is being done, they will be reported to the PPDMC Representative for immediate remedial action to correct the deficiency. The person who signs off on contract orders will ensure that Contractors and others who create penetrations in smoke and fire partitions will use approved assemblies to repair these holes prior to release of payment. All documentation on rated assemblies used must be provided to PPDMC

## **Hot Work Permit**

A hot work permit must be in place before you can begin any work that involves open flames or any other temporary source of ignition, such as welding, soldering, cutting, etc. Permits must be posted in the work area, and all precautions must be taken prior to commencement of work. Upon completion of work, a 30 minute fire watch must also be provided. All contractors performing hot work must comply with OSHA hot works procedures and provide their hot works program documentation to PPDMC.

## **Utility Outages**

All outages for construction projects must be performed by UK HealthCare PPDMC personnel and must be approved prior to date needed. Any contractor desiring an outage will complete the Utility Outage Request Form online. <https://www.uky.edu/ppdmc/contractors/utility-outage-request>

The utility systems involved include, but are not limited to, electrical power, water, sewer, medical gases (air, vacuum, oxygen, nitrous oxide), fire protection (fire alarm/sprinkler), HVAC (fans, heating, cooling, fume hoods), control air, tube transport, and TV systems.

### Utility Outage - Procedure:

1. Minor outages require three working days advance notice. Major outages require a two week minimum notice. Giving such notice does not guarantee the outage will occur on the date requested.(HVAC, RO Water, Security, Pneumatic)
2. PPD has an Outage Coordinator who will research and record all the pertinent information necessary to schedule the outage. PPD employees, departments, operations, etc. will be notified by the Outage Coordinator about the pending outage.
3. The Outage Coordinator will document the work necessary to schedule, noting any difficulties that cannot be solved.
4. The Outage Coordinator will schedule the outage and notify contractor. If outage cannot be scheduled, they will notify appropriate parties.
5. The Outage Coordinator will make all notifications to affected personnel and will alert the proper staff so necessary preparations can be made within the affected areas.
6. When work has been completed, the Outage Coordinator, or his designate, will notify affected personnel that the system is back in service.
7. Contractors DO NOT have the authority to turn utilities off or on. This should only be done by the PPDMC Outage Coordinator.

See outage policy page: <https://www.uky.edu/ppdmc/policies/category-04/17-mc-utility-outages-renovation-construction-projects>

## **Interim Life Safety Measures (ILSM)**

The University of Kentucky has established an Interim Life Safety Program to manage safety hazards that could be created by construction, renovation, internal disaster, or other alteration to UK HealthCare buildings or grounds.

Interim Life Safety Measures (ILSM) a review will be done for every project and will be implemented when a life safety code deficiency or other hazard places building occupants at significant risk. When life safety systems are impaired, the Hospital Safety Officer, Contractor, or designee, will use established criteria to evaluate the risk and to implement appropriate ILSM to compensate for these deficiencies.

When construction or renovation poses other significant safety hazards, the safety officer, contractor, or designee, will implement other safety measures appropriate to the situation.

## **Planning for Interim Life Safety Measures**

The Hospital Environment of Care Committee has approved criteria to be used to help determine appropriate ISLM to implement when a life safety code deficiency is identified.

The Hospital Safety Officer, or designee, will participate in or review documentation from project development, pre-construction, and construction progress meetings to ensure that safety issues and concerns are identified and addressed proactively, whenever possible.

UK PPDMC will notify the Hospital Safety Officer prior to the start of any construction or renovation project and prior to the start of a new project phase. The Key project participants will identify safety issues, concerns, and methods of maintaining a safe work environment.

The Safety Officer and PPDMC staff will regularly inspect all construction sites. The Safety Surveillance Team will conduct regular building inspections to identify risks and hazards.

## **Criteria for Implementation of Interim Life Safety Measures (ILSM) at the University of Kentucky HealthCare Facilities.**

In general, the Safety Officer or designee will use the criteria below to determine appropriate interim life safety measures. In all cases, additional measures may be taken, if warranted, to protect the building's occupants.

When the integrity of an exit access, exit, or discharge area is altered or compromised:

Ensure free and unobstructed exit

- Ensure escape route for construction workers
- Provide additional training for UK staff and signage when alternative exits are designated
- Increase debris removal schedule to reduce building's flammable and combustible load to lowest feasible level
- Conduct at least two fire drills per shift per quarter
- When the integrity of a building's defend-in-place compartments/features (fire barriers,

- smoke barriers, floor slabs, corridor wells) are significantly compromised
- Ensure that construction partitions are smoke-tight and built of noncombustible or limited combustible materials

**When a building's fire alarm, detection, and/or suppression systems are impaired:**

- Implement temporary but equivalent, fire alarm, detection, or suppression systems
- Inspect and test temporary systems monthly
- Ensure that construction partitions are smoke tight and built of noncombustible or limited combustible materials
- Provide additional fire-fighting equipment & train staff to use

**When temporary sources of ignition (cutting, welding, plumber's torch) are involved:**

- Initial contractor will provide hot work permit and follow its guidelines
- Ensure free and unobstructed exits
- Ensure fire alarm, detection, and suppression systems are in working order
  
- Provide additional fire-fighting equipment (a fire extinguisher every 50 feet) and train staff to use
- Decrease combustible load to lowest feasible level

**When large quantities of combustibles or debris are present or involved:**

- Increase debris removal schedule
- Provide additional fire-fighting equipment (a fire extinguisher every 50 feet) and train staff to use
- Ensure that construction partitions are smoke tight and built of noncombustible or limited combustible material **Infection Control**

**When an employee is working in any patient care area or on any patient care equipment, he/she must follow the standard precautions outlined below:**

1. Wear gloves when there is a possibility that you will touch any body substances or equipment contaminated by body substances (blood, urine, feces, wound drainage, oral secretions, sputum, and vomitus.)
2. Wear a fluid resistant gown, masks and/or goggles when there is any possibility that your eyes, mucous membranes or clothing will be splashed or sprayed by body substances or exposure to contaminated equipment.
3. During construction/renovation projects or in situations when plumbing is inadvertently interrupted, it is recommended that personnel wear appropriate personal protective equipment. Traffic must be restricted from this area.
4. Discard all personal protective clothing in accordance with standard precautions.
5. Wash hands thoroughly with antibacterial soap immediately following work.
6. Eating, drinking and smoking are restricted to designated areas.

## **Infection Control Policy for construction at the University of Kentucky Healthcare Facilities**

It is the policy of the University of Kentucky HealthCare to prevent illness in patients related to construction dust and airborne fungi. This document spells out requirements that contractors with University of Kentucky Chandler and Good Samaritan Hospital and in-house workers should follow in order to minimize risks of construction to our patients.

### **Classification of Jobs:**

**Class I:** These projects do not generate appreciable dust or airborne particulate matter. Examples include minor plumbing, electrical, carpentry and duct work; some aesthetic improvements; installation of phones, computers, gas and TV hook-up lines in existing conduits, etc.

**Class II:** These projects generate dust or other airborne particulate matter and hence require barrier precautions. Examples include construction of new walls; construction of new rooms; major utility changes; major equipment installation; demolition of wallboard; plaster, ceramic tile, ceiling and floor tile removal; removal of windows; removal of casework, etc. Routine maintenance where dust is produced in patient care areas is included. These projects must follow construction standards for the hospital.

### **Sequence of Events:**

PPDMC will determine if the project is Class I or Class II ICRA completed by the Infection Control Department.

The project manager should invite a representative of Infection Control to the initial design meeting for the project (and other meetings as appropriate).

The ICRA will be posted on the job site and must be adhered to throughout the project unless otherwise determined by the Infection Control Representative.

### **Ventilation System**

1. All ventilation systems to operating rooms, recovery rooms, delivery rooms, newborn nurseries and special care units will have a HEPA filtered clean air supply. These systems will be maintained and serviced according to the established preventive maintenance programs to assure clean air supply.
2. Patient rooms which house patients with air-borne infections (requiring negative pressure) will be inspected according to the preventive maintenance program to prevent the spread of potential air-borne pathogens.
3. Personnel performing routine maintenance or repairing ventilation systems of negative pressure should wear a NIOSH approved respirator.
4. Personnel entering rooms housing known or suspected TB patients are required to wear a properly fitted NIOSH approved respirator.

## **Aspergillums**

Aspergillums are a microbial contaminant which can cause serious complications for patients who are susceptible or in a high risk category. Most nosocomial airborne mold infections are caused by aspergillums; species. This species is widely distributed in our natural environment and can grow on almost anything. When ceilings or walls are disturbed, or activity associated with normal renovations or maintenance, it results in airborne disbursements of particulate matter (dust), which may carry aspergillums spores and infect patients.

PPD and its contractors will make every effort to minimize the release of aspergillums in high risk areas. Renovation in or adjacent to high risk areas will be controlled through proper separation and HEPA air flow filtering to reduce the potential dangers to patients. The method used to control dust control must be reviewed by and approved by the Infection Control Department.

High risk areas are defined as follows:

Any area a patient with an immune compromised system will be put in additional harm's way by your service or act of service.

Example: Not wearing proper PPEs when in or around a patient area.

No major construction shall occur in the Transplant Clinic without involvement of the Transplant Department Director. The area must be vacated of patients before any such work can occur.

## **PROCEDURE:**

1. Before construction begins contact one of the following:

**Kimberly Blanton (MC/UKGS) 859-323-4609**

2. Proceed cautiously when removing or installing ceiling tiles in the high risk areas.
3. On major construction/renovation, air tight partitions shall separate the renovation site from other space occupied by patients. The barrier shall be tested for tightness. Ventilation leading from the area being renovated should be blocked at its point of exit from the room.
4. HEPA filtration of air will be required
5. Whenever possible, create a negative air flow on the construction/renovation site.
6. Keep the work area as clean and dust free as possible.
7. Ensure that infection control measures are in effect.
8. Use sticky mats outside of barrier.

## **Infection Control Oversight**

1. Infection Control must inspect work site before demolition/construction begins.
2. Infection Control will make periodic visits to work site to ensure compliance ICRA standards.
3. Contractors will receive information and education about Infection Control Standards at the preconstruction meeting



**Vendors working in/or around DLAR areas must:**

1. First complete DLAR training.
2. Hold a University of Kentucky security badge.
3. Notify PPD Project Manager or Maintenance Supervisor before work begins.
4. Arrange any and all work activities with DLAR staff member Ellen Croxford @ 859-323-3616, who can also set up a time for DLAR training.
5. Follow all PPD guidelines as well as DLAR guidelines.

To obtain a visitors pass you can go to the main office of HSRB 204 or call 859-323-5885 and be escorted into the animal facility by a DLAR staff member. If you are visiting DLAR on behalf of a pending job, make sure you have also contacted a PPD Project Manager or PPD Maintenance Supervisor.

If you are not required to work in or around the DLAR areas you should not be in these areas for the safety of your staff, our animals and our staff.

Contact information  
Room 204  
Health Sciences Research Building  
40536-0298  
Main Phone line: 859-323-5885

<https://www.research.uky.edu/division-laboratory-animal-resources>

## Materials

Materials may not be stored in mechanical or electrical rooms without prior authorization from PPD MC or PPD GS Maintenance Supervisor. All materials must be delivered to the loading dock of the building in which you are working. Your UKHC Representative/Project Manager will provide information on a designated construction route for transportation of material through the building to the job site.

## Construction Standards for UKHC Facilities.

### Construction Requirements for Submittals:

- **Submittals:** The University requires a minimum of four (2) bound copies and two (1) digital copies of the final installation, training, operation, maintenance and repair manuals to be turned over to the Owner's Project Manager and approved for content by the Consultant, by or before the time construction is 75% complete.
- **Owner & Operator manuals:** must be provided in an electronic form such as PDF.
- **O&Ms:** When equipment has been added, along with O&Ms there must be an add sheet provided with all required information. A PPDMC rep can provide you with assistance for this.
- **Certifications/Testing:** All certification and test data must be sent to the PPDMC representative once certification/ testing has been completed.
- **Equipment List:** A Complete equipment list will be required when adding new equipment. (PPDMC will provide blank Excel spreadsheets in electronic form for use in compiling the information, if desired).
- **Drawings:** updated drawings will be required for all construction projects. At the end of a project as built drawings will be required by superintendants before final bill can be paid.
- **Training:** must be provided to users/PPDMC before a project can be completed as required.  
Requirement for training:
  1. Training agenda
  2. Two training sessions, to accommodate for staffing hours (preferable on same day) Tuesdays or Thursdays. (pre approved by Maintenance Managers and Project Managers)
  3. Two week or month notice from time of training approval.
- In the event the General Contractor fails to provide these required electronic submittals prior to reaching 75% completion, it is agreed that the Owner at its sole discretion may deduct from the current and subsequent Applications for Payment an amount deemed by the Owner to be sufficient to encourage prompt compliance with this contractual requirement, until such time as acceptable O&M manuals are received.
- With the express purpose of expediting construction and providing the opportunity for cooperation of affected parties, progress meetings will be held and attended by representatives of:
  - (1) The Owner's Project Manager
  - (2) The Consultant.
  - (3) General Contractor.
  - (4) Sub-contractors.
  - (5) Others requested to attend (as deemed necessary by CPMD).
  - (6) Physical Plant Division Representative
  - (7) Hospital Representative
  - (8) Medical Center Physical Plant Representative
- Additional special conditions may be added under contracts as written when projects are bid through the official University procedures.

## Controls Work

1. Control devices, wiring, systems work, etc. must be discussed & coordinated with a PPDMC Project Manager & Bobbie Tincher with the UEM Controls Team before work begins.  
(Bobbie Tincher @ 859-323-6012)

## Loading Dock

1. All demolition materials will be brought through the loading dock to the dumpster.
2. All new material and equipment, except for items requiring use of the front entry, shall be delivered to the main loading dock.
3. The loading dock shall be the primary access for construction workers. Construction workers shall use stairway near the designated elevator.

## Construction Path

1. Elevators indicated by drawing, may be used by construction workers and material access, except for hours specified by project managers or supervisors.
2. All materials and equipment are to be brought into the hospital through elevators indicated in Pre Construction meetings, except for large equipment and casework. General Contractor shall identify time and schedule to allow accessing such items through said elevators and shall coordinate with the Owners/Project Managers or Supervisors.

## Hospital Project Procedure:

1. Certain projects involve part of a fully functioning Hospital and teaching facility. During the construction of the new work and all renovation, the Hospital is to remain fully functioning. No service offered by the Hospital will be allowed to be interrupted. This will require careful scheduling and consultation with the Owner and the Consultant. The Hospital will attempt to cooperate as possible but their need to provide full medical care will supersede any construction aspect.
2. The General Contractor shall organize his Work so that the Work shall cause a minimum of interference and disturbance to the Owner. A major portion of the Work will occur over an occupied---TYPE OF SPACE---. The remaining work is above the --TYPE OF SPACE-----. This will require anticipation and careful scheduling of any noisy work above the area, or access through the area.
3. Coordination shall occur between the General Contractor and the Owner regarding access to areas outside of the immediate designated construction areas, including access to room's adjacent horizontal, or vertical that the General Contractor may need to access in order to run/connect utilities. Coordination for access shall be discussed in the monthly Progress Meetings as required by Article 10 of these Special Conditions. General Contractor shall also provide to the Owner written notice, one week prior to the anticipated need for access. Approval for access to the adjacent areas must be received by the General Contractor, prior to final scheduling of the Work. Failure to notify the Owner of the need for access will result in the stoppage of Work in the area for which access is required until approval is obtained. Any additional cost for such stoppage will be the General Contractor's responsibility.
4. No live electrical wiring, including temporary lighting, may be left exposed in areas of public or staff access.
5. In no instance may a corridor be blocked or its clear width reduced to less than 4'0".
6. **"NOISY WORK"**: Areas to receive noisy Work above --indicate areas of the facility---. The General Contractor shall utilize tools or equipment of low velocity or drilling to limit the noise generated from Work which will be disruptive to patients. Any hammer drilling and impact type tools/equipment which are to be utilized in the Work by the General Contractor shall be strictly limited. Falling materials that damage ceilings, walls, pipes, and equipment shall become the General Contractor's

responsibility to repair and/or replace at no cost to the Owner.

7. The General Contractor is hereby advised that any noisy Work which is disruptive will be required to stop upon notice from Owner's Project Manager. General Contractor will be notified by Owner's Project Manager when noisy Work can resume. General Contractor shall notify Owner's Project Manager 48 hours prior to the start of any noisy Work.
  - o Noisy work shall be performed after 6:00 p.m. and before 7:00 a.m.
  - o Perimeter wall construction around the Work Area shall be erected after 6:00 p.m. and before 7:00 a.m.
  - o All bulky materials shall be delivered after 6:00 p.m. and before 7:00 a.m.

#### **Working Hours /Access: For Medical Center/ Hospital**

Normal Work hours are defined as a period between 7:00 a.m. to 5:00 p.m., Monday through Friday. General Contractor shall notify Owner's Project Manager one working day prior to performance of any Work for permission to do any Work during non-normal Work hours.

#### **Ceiling Clearance**

1. Work above ceiling: All work above an area with lay-in ceiling must be coordinated and installed so there is a minimum of 4" between the top of the ceiling grid runners and bottom of the installation. Installation shall not obstruct equipment access space or equipment removal space. Also, conduit and pipe attached to the wall must be above the 4" minimum level.
2. Coordination between trades: Request and examine all drawings and specifications pertaining to the construction before installing above ceiling work. Cooperate with all other contractors in locating piping, ductwork, conduit, openings, chases, and equipment in order to avoid conflict with any other contractor's work. Give special attention to points where ducts or piping must cross other ducts and piping, and where ducts, piping and conduit must fur into the walls and columns. Make known to other trades intended positioning of materials and intended order of work. Determine intended position of work of other trades and intended order of installation.

#### **Metal Anchors**

1. All anchoring devices utilized to secure materials to the building shall be metal. Plastic or plastic expansion components shall not be used. This shall include all fasteners for mechanical/electrical hangers.

#### **Hospital Construction Certification**

1. Certain Projects involve working in a fully functioning Hospital. Individuals responsible for the work occurring on the site should be thoroughly familiar with the hazards and procedures associated with construction in the healthcare environment.
2. All superintendents and foremen for the General Contractor and the Mechanical and Electrical sub-contractors shall be required to hold at least one of the certifications listed below from the associated organizations prior to working in the University of Kentucky Chandler Hospital or UK Good Samaritan Hospital. Any other trade contractor with more than four (4) individuals working on the site at one time shall have one individual who holds at least one of the certifications listed below from the associated organizations prior to working in the University of Kentucky Chandler Hospital.
  - o Healthcare Construction Certificate - American Society for Healthcare Engineers
  - o Certified Healthcare Contractor – Kentucky Society of Healthcare Engineers
3. Should the required certifications not be in effect at the date of the work order, the University project manager may, at his or her discretion, grant a grace period for the required training.

## **Ventilation**

1. All air vents must be blocked off and sealed to prevent contamination of the duct system before demolition/construction begins.
2. Negative pressure air-flow relative to adjacent patient care areas should be created and maintained.

## **Dust Barriers**

All barriers must be completed before demolition/construction begins.

1. A closed door with duct tape applied over the frame and door is acceptable for short projects which can be contained and completed within a single room.
2. Construction, demolition or reconstruction not capable of containment within a single room must have the following barriers erected.
3. An air-tight plastic or drywall barrier that extends from floor to ceiling to prevent dust and debris from escaping. If the false ceiling is not violated, the barrier only needs to be extended to the ceiling tiles. When construction penetrates a smoke or fire wall, additional safety standards may apply to barrier construction.
4. Each entrance must be constructed so that it has an ante-room to prevent escape of dust and debris. The ante-room can be constructed of plastic or drywall barriers.
5. If elevator shafts or stairways are within the area of construction, they must have proper barriers installed.
6. Penetration of ceilings chases, ceiling spaces, and slabs must be sealed with approved fire-stopping material to stop movement of air, debris, smoke and fire.
7. Construction workers must pass through an anteroom where their clothing should be vacuumed using a HEPA vacuum cleaner before leaving the work site, or they may wear a disposable coverall that is removed each time they leave the work site.
8. Workers should wear shoe covers if travel to other areas in the facility is necessary. Shoe covers must be changed each time the worker exits the area.
9. Sticky mats should be used at work area entrance/exit.
10. Dust tracked outside the barriers should be removed immediately.
11. Holes cut or punctured in walls, ceilings, floors or doors should not be left exposed longer than 4 hours. If work cannot be completed within this time span, the holes should be temporarily plugged or covered. For outside construction, adequate seals must be maintained on windows of patient care areas to prevent infiltration of outside air.

### **Debris Removal**

1. Debris removal from the construction site should be completed through predetermined route approved by Infection Control.
2. Debris should be transported in clean (wiped down) containers with tight-fitting covers.

### **At Project Completion**

1. Barriers should not be removed from work area until the completed project is inspected by Infection Control and thoroughly cleaned by Environmental Services or the contractor.
2. The work area should be vacuumed with a HEPA filtered vacuum and then wet mopped.
3. Barrier materials should be removed carefully to minimize spreading of dirt/debris associated with construction.
4. Barrier and construction waste should be either bagged or transported in carts with tight fitting lids.
5. Barriers should be treated as debris.
6. Blockage should be removed from vents.

**Closing statement:**

Every two years the Vendor Relations Program & Manual will be revised to update policies, procedures & contact information. Contractors/vendors will be expected to review the latest policies or procedures at that time.

Once each company has reviewed the manual they will be expected to sign the Vendor Relations Manual “**Statement of Responsibility**”.

Current contact information will be requested of each vendor/contractor at the time of the orientation session.

Please make every effort to send updated contact information to PPDMC reps.

**Thank you for helping us on our mission.**



**PPDMC Contact Information:**

**Annex Supervisors: 859-257-6787**

**Badges, Vendor Relations and Service Parking:  
Medical Center Planning Design and Construction Office  
859-323-6283**

**Construction/ Project Management Administration:  
859-323-6283**

**Design Team: 859-323-4865 or 859-323-1931**

**Dispatch: 859-323-6281**

**Eastern State Hospital: 859-246-8596 or 859-246-8902**

**Estimating Team: 859-257-3444 or 859-257-2755**

**Fire & Safety Officer: 859-576-7170**

**GSAM Main Office PPDGS: 859-226-7110**

**Hospital Maintenance: 859-323-3787**

**Housekeeping: Contact Kelley Main Office for Assistance at  
(859) 323-5792 or Dispatch at 323-6281**

**IT/ Desktop Support: 859-257-6943**

**Kelley Building Main Office PPDMC: 859-323-5792**

**Maintenance Supervisors: 859-323-5634 or 859-323-1459**



***Statement of Responsibility for Orientation of Contracted Staff for the UK HealthCare Physical Plant Division Medical Division***

***Forms must be filled out and sent to the Medical Center Planning Design and Construction Office at 209 Kelley Bldg to be kept on file.***

I have been oriented to the “***Vendor Relations Manual***”, policies and other requirements of working within the University of Kentucky HealthCare Chandler Medical Center & Good Samaritan Hospital. I understand my responsibilities for maintaining a safe environment for service staff, hospital staff, patients, visitors, students and if applicable my employees. I understand that it is my responsibility to orient all applicable service staff including sub contractors to the UK HealthCare environment and their responsibilities for project and construction safety.

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Name & Name of Company

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Current contact information # & email address

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Date signed