



HEALTH HOLDING

HAFER ALBATIN HEALTH
CLUSTER
MATERNITY AND
CHILDREN HOSPITAL

Department:	Facility Management Safety		
Document:	Multidisciplinary Policy and Procedure		
Title:	Construction and Renovation Guidelines		
Applies To:	All MCH Staff		
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1. PURPOSE:

- 1.1 To ensure that the infection prevention and control risk assessment, interventions and control practices are incorporated into the planning, construction and renovation in the health care setting by defining the steps and precautions compliant to infection prevention and control procedures.
- 1.2 To eliminate infection and environmental hazards that poses the danger to personnel in all patients healthcare setting.

2. DEFINITION:

- 2.1 Dumpster:
 - 2.1.1 A large steel waste receptacle designed to be emptied into garbage trucks.
- 2.2 High Efficiency Particulate Air:
 - 2.2.1 HEPA filter or high efficiency particulate air filter is a type of high efficiency air filter that can remove at least 99.97% of airborne particles. 0.3 micrometres (um) in diameter.
- 2.3 Heating, Ventilating, and Air Conditioning (HVAC):
 - 2.3.1 System which is important in the design of the building and offices where safe and health building conditions are regulated with temperature and humidity as well as fresh air from outdoors.

3. POLICIES:

- 3.1 Infection Prevention and Control Department shall be involved and pre-informed of all current and future construction activities in all health care facilities.
- 3.2 Infection Prevention and Control Department shall be an active team member in all phases of any construction/renovation projects where they will play a major role in providing education to workers and staff involved in the project to ensure that preventive measures are outlined, implemented and maintained.

4. PROCEDURES:

4.1 Preconstruction Preventive Measures:

- 4.1.1 The Infection Prevention and Control Department is to be consulted to provide information on infection and environmental control risk assessment in all current and future construction activities in MCH.
- 4.1.2 Information's to be provided by an infection control practitioner includes the following:
 - 4.1.2.1 Specific site activity (e.g., patient care areas including rooms, requiring isolation precaution)
 - 4.1.2.2 Identify issues related to ventilation, plumbing and electrical in term of probable outages.
 - 4.1.2.3 Containment measures using prior assessment like identifying types of barriers required for HEPA filtration.

- 4.1.2.4 Potential risk of water line damage.
- 4.1.3 Infection control practitioner should perform the following:
 - 4.1.3.1 Assess the plan to allow adequate number isolation/negative airflow rooms.
 - 4.1.3.2 Assess the plan to include adequate number of hand washing sinks.
 - 4.1.3.3 Assess the plan relative to clean and soiled utility rooms.
 - 4.1.3.4 Discuss the traffic flow, housekeeping, debris removal (how and when) with the project team.
 - 4.1.3.5 Educate project managers and contractors who in turn will ensure that the construction workers will receive the appropriate education.
- 4.1.4 Multidisciplinary established (infection control safety engineering) to cooperate demolition, construction and renovation projects.
- 4.2 **Construction Preventive Measures:**
 - 4.2.1 Move patient to an area away from the construction zone if the air quality could not be ensured during construction. These patients wear mask if it is necessary to transport them through or near construction area.
 - 4.2.2 Seal all windows, doors, air intake and exhaust vents should be sealed in areas of the hospital, adjacent to buildings that are going to be demolished including areas housing patients who are susceptible, to prevent air leaks into patient care areas.
 - 4.2.3 Create a dust barrier from the floor to the ceiling and edges sealed.
 - 4.2.4 Ensure that air from construction/renovation areas is not re-circulated to other areas of the facility. Closing dampers temporarily to reduce air circulation.
 - 4.2.5 Place a moist carpet inside the anteroom and inside the entrance of the construction zone to trap dust.
 - 4.2.6 Clean the carpet daily or when visibly soiled.
 - 4.2.7 Place dust mat at entrance and exit of work area.
 - 4.2.8 Protective clothing is to be worn by construction workers in the construction zone because of the high concentration of dust.
 - 4.2.9 All personnel entering the working site are required to wear shoe cover, and must be removed each time they will exit.
 - 4.2.10 Clean the construction zone daily using a wet mop technique.
 - 4.2.11 Enclosed the used supplies and equipment in covered containers when being transported out of the area to prevent spillage.
 - 4.2.12 Place adequate signage in the construction area.
- 4.3 **Post Construction Preventive Measures:**
 - 4.3.1 Thoroughly clean the construction zone, including all horizontal surfaces, before the barrier is removed.
 - 4.3.2 Clean the construction zone after the barrier is removed and before patients are readmitted to the area. Allow time for all dust to settle before doing final cleaning.
 - 4.3.3 Infection Control checks the area before patients are readmitted to the finished area.
 - 4.3.4 Ensure that multidisciplinary project committee or designate conducts a final walk. Through to ensure ventilation system is functioning properly in construction zone and adjacent area.
 - 4.3.5 Flush water lines prior to use if they were disrupted.
 - 4.3.6 If there are concerns about legionella, consider hyper chlorinating stagnant water or superheating and flushing all distal sites before restoring or depressurizing the water system.
 - 4.3.7 Disinfect unused cooling towers and water supply in unoccupied portions of building before they are put to use.
 - 4.3.8 Assess hot water temperature to determine that it meets the standards set by the hospital.
 - 4.3.9 Ensure that multidisciplinary project committee or designate evaluates the preventive measures and reviews their effectiveness for any problems and positive outcomes.
 - 4.3.10 Fungal air samples will be obtained by Infection Control department when appropriate and the area has been thoroughly cleaned and inspected by housekeeping and by Infection Control.
 - 4.3.10.1 Fungal air sample will be taken by the Infection Control department before opening the area.
 - 4.3.10.2 Areas are opened if the culture is negative.

- 4.3.10.3 The area is not opened if the culture is positive. Cleaning repeated then another re-culturing is to be done by the Infection Control Department.
- 4.3.10.4 If the repeated culture is proven negative, the area is to be opened for operation after clearance from of the Infection Control Department is obtained.

5. MATERIALS AND EQUIPMENT:

N/A

6. RESPONSIBILITY:

- 6.1 Building Renovation and Construction Project Manager
- 6.2 Infection Prevention and Control, Utilities, Maintenance and Environmental Services
- 6.3 The multidisciplinary team is responsible in planning, implementing, preventing measures for the duration of the construction project and in establishing clear lines of communications among all concerned to ensure patients' safety.


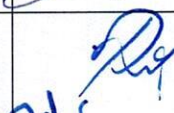



7. APPENDICES:

N/A

8. REFERENCES:

- 6.1 Association for Professionals in Infection Control and Epidemiology. Chapter 108 Construction and Renovation, Revised 2004, pp. 108-1 to 108-16.
- 6.2 The Role of Infection Control during Construction in Healthcare Facilities; AJIC (American Journal of Infection Control) Vol. 28:156-169.

9. APPROVAL:

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