NYU WINTHROP HOSPITAL
Engineering Department

HOSPITAL ENGINEERING POLICY
FOR
PERFORMING WORK IN OUR FACILITY

AMENDMENT TO THE POLICY
Effective June 28, 2017
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GENERAL REQUIREMENTS

1. PURPOSE

NYU Winthrop Hospital’s General Requirements is intended to provide the Engineering Department a Guideline for planning and working with Contractors during construction, while maintaining a safe environment for our patients, visitors and hospital employees. These requirements define specific policies and procedures for carrying out construction work at NYU Winthrop Hospital which is designed to minimize the health and safety risk of the construction site adjacent hospital occupancies, by preventing the dissemination of airborne contaminants generated by construction activities.

All Contractors performing work at NYU Winthrop Hospital should use these Requirements in conjunction with applicable laws and regulations of any governmental entity or sovereign authority which has jurisdiction over the construction work performed at the Hospital.

The General Requirements shall be considered minimum standards applied to all work performed at NYU Winthrop Hospital and its off-site facilities. All contractors are required to ensure that their employees, sub-contractors, suppliers, vendors, and visitors, while on the job site, must comply with the provisions in this agreement. THE PROVISIONS OF THESE REQUIREMENTS WILL BE STRICTLY ENFORCED. Non-compliance will result in work stoppage, employee dismissal; and, willful or repeated non-compliance will result in Contractor dismissal.

The Project Safety requirements noted herein are considered supplemental to governmental rules, codes and regulations, and does supersede, alter or change jurisdictional regulations. The purpose of the General Requirements is intended to supplement and enforce an overall coordinated safety effort amongst contractors, sub-contractors, suppliers, vendors, and visitors. It is understood that job safety starts with each individual.

Job safety will not be compromised for production. Safety will be considered an integral part of quality control, cost reduction, and job efficiency. Every level of management and supervision shall be held accountable for the safety performance demonstrated by the employees under their supervision.

The Contractor shall designate a Supervisor for the job site who will be responsible for all safety-related activities on the site, and the assignee will remain the designated “Safety Supervisor” for the duration of the Project. The Safety Supervisor must possess a valid OSHA Certificate of training (minimum of OSHA 10). The Safety Supervisor will be present on the site whenever work is being performed. If the designated supervisor is unavoidably absent, an acting supervisor will be appointed and identified to the Project Manager. The designated Safety Supervisor will have the Contractor’s full authority to enforce all safety-related requirements throughout the construction site.

2. GENERAL REQUIREMENTS

2.1 CONTRACTOR RESPONSIBILITIES:

2.1.1 Contractors are part of the Hospital’s Project Team.

2.1.2 Construction milestones shall be achieved in accordance with the agreed-upon Schedule.

2.1.3 Contractors are expected to deliver a quality project while ensuring a safe construction area at all times.

2.1.4 Contractors are to assist with monitoring Environment of Care issues and inspect the job site before and during construction. Notify the Project Manager immediately upon discovery of any issues.

2.1.5 Contractors shall respect Regulatory Officials and comply with applicable Codes and Guidelines.
2.1.6 Contractors and all outside vendors are now required to register with Vendor Credentialing Service (VCS) prior commencement of any work or deliveries are made by your firm. (See Article 3.1) of this document for additional information regarding this policy.

2.1.7 GC/CM shall report any and all incidents and/or accidents immediately to NYUWH’s Project Manager. A written report of all incidents and/or accidents shall be written and delivered to the Project Manager within 24 hours of the occurrence.

2.1.8 GC/CM must submit Emergency Phone Numbers including off-hours contact information to the Project Manager & NYU Winthrop Hospital Engineering Department before any work commence. Emergency Phone List must be posted on project site. (see Attachment #4)

2.1.9 The General Contractor or Construction Manager (GC/CM) Job Superintendent should be on the job site at all times when work is being done. This includes all work done on overtime. The presence or absence of the Project Manager or Engineering personnel does not relieve the GC/CM from maintaining continuous inspection and supervision. Each Subcontractor must also maintain adequate supervision and inspection at all times. This person must be able to effectively communicate with the Project Manager and NYU Winthrop Hospital representatives.

2.1.10 A GC/CM representative (Foreman, Super or GC/CM Project Manager) must sign in at Engineering Office at the beginning of every workday/shift with anticipated total workforce count, list of subcontractors and location(s) of work

2.1.11 The GC/CM shall not wait for job meetings to bring up issues that are affecting progress, but should immediately advise the Architect and Project Manager. Effective communication is vital to the success of the project.

2.1.12 Any job meetings held between the GC/CM and their subcontractors which affect the progress of the project, should include the presence of the Project Manager whenever possible. If this is not possible, minutes of the meeting should be forwarded to the Project Manager.

2.1.13 Care should be taken not to damage existing building utility (ex: water, oxygen, vacuum, sprinkler, or electric lines) during demolition. If services to the area must be turned off, notify Engineering (see Shut Down Request). If any piping or wiring is accidentally broken or cut, it must be reported immediately to NYU Winthrop Hospital Engineering. As soon as practical, the Project Manager should be notified of the incident. (See Emergency Phone List – Attachment #4).

2.1.14 GC/CM to maintain existing low voltage wiring, wall jacks and terminals. At no time, should the contractor cut into or remove existing wiring unless otherwise directed by the Project Manager. Existing wiring should be tied up and supported so to avoid damage during construction.

2.1.15 GC/CM should never disconnect any alarm devices without notification to NYU Winthrop Hospital Engineering Department in the form of a written Shut Down Request.

2.1.16 In case of Chemical Spills, GC/CM must notify NYU Winthrop Hospital Safety Officers or Engineering for immediate proper handling.

2.1.17 All existing and new pipes, conduits, and ducts must be securely hung with proper hangers and clamps to building structure. GC/CM must re-support existing utilities after demolition so to avoid damage and incidents.

2.2 INSURANCE POLICIES & CERTIFICATES
Contractor shall provide all required insurance certificates and proof of coverage as outlined in our Insurance Requirements & Policies prior to commencement of construction. (Please refer to the RFP or Contract Document for NYUWH’s insurance coverage requirements)
2.3 CODES, STANDARDS & REGULATIONS
Contractor must adhere to the following:

2.3.1 Federal – NFPA, AIA, The Joint Commission, OSHA, NIOSH
2.3.2 NY State Building Code
2.3.3 Nassau County and Local/Town requirements

2.4 PERMITS & FORMS
The following permits and forms shall be completed for any construction or renovation project prior to work beginning where applicable:

2.4.1 PCRA, ICRA & ILSM Permits & Forms – NYUWH Project Manager & Construction Manager
2.4.2 Above Ceiling Permit (see Attachment #1) – NYUWH Project Manager & Contractor
2.4.3 Hot Work Permit – NYUWH Project Manager & Contractor
2.4.4 Shutdown Notification (see Attachment #2) – NYUWH Project Manager & Contractor
2.4.5 Contractors Daily Inspection Checklist (see Attachment #3) – Contractor
2.4.6 Other Safety Considerations - All

Contractor shall submit, in-writing, a “shut-down” request to the Hospital’s Project Manager prior to any interruption of services, for example, Water, Fire Alarm, Medical Gases, Sprinkler, Communications, HVAC intakes, etc. in order to send proper and timely notification to the Hospital’s Engineering staff.

2.5 CLEAN-UP / DUMPSTER
2.5.1 It is the Contractor’s responsibility to clean-up all construction areas and dispose of waste in the properly designated and labeled containers. The construction site shall be cleaned and free of debris and / or hazards daily.
2.5.2 The dumpster location must be coordinated with NYU Winthrop Hospital’s Project Manager.
2.5.3 The Contractor is responsible for daily work site clean-up and debris removal on a continual basis throughout the work day, and broom-swept at the end of the day.
2.5.4 The Contractor must designate a person to be responsible for mopping public areas outside of the construction area on a regular basis, with the proper safety signage in-place.
2.5.5 The Contractor shall coordinate any special clean-up and trash hauling requirements, including covering of the containers. Routing containers through high-risk areas must be reviewed and approved by the Hospital’s Project Manager.
2.5.6 Area worked in to be cleaned daily. Dangerous or sharp items protruding from floor to be cut away if possible. Holes in floors should be covered at the end of upon discovery. Electric lines should be properly secured. Caution tapes and cones to be placed where tripping hazard exist in construction sites.
2.5.7 All GC/CM rubbish and debris shall be promptly removed from the premises.
2.5.8 The GC/CM and its subcontractors shall not use NYU Winthrop Hospital’s refuse facilities, and shall not place any rubbish or debris in NYU Winthrop Hospital’s dumpsters, incinerators, or garbage containers.
2.5.9 Staging areas outside the facility where GC/CM rubbish is placed shall be kept broom clean after rubbish pick-up.
2.5.10 If aerosol or any other material that require special waste disposal is used on site, GC/CM is responsible for proper disposal of all such waste. Waste that requires special handling should NEVER be placed in hospital dumpsters or refuse containers. Any monetary fine to NYU Winthrop Hospital associated with the inappropriate disposal of waste that requires special handling generated by GC/CM will be the responsibility of the GC/CM.
2.5.11 For sanitary reasons, garbage generated by GC/CM employees through eating or drinking must be removed the same day.
2.5.12 End of Project Cleanup- the GC/CM is to leave the job site in a clean, usable condition by removing protective paper from floors and hardware, cleaning glass and whatever else may be appropriate.
2.6 DELIVERIES
Due to the large volume of deliveries that are received by the Hospital, Contractor’s material shall be delivered in a manner that minimizes the impact to our facility’s receiving area.

2.6.1 Service trucks should unload equipment and materials then move to an authorized parking area. If it necessary to park a truck or any other delivery vehicle near the Hospital for more than 30 minutes, then the Contractor, receiving the material, should contact the Project Manager to make proper arrangements.

2.6.2 Sub-contractor deliveries should be coordinated through the GC/CM and the NYU Winthrop Hospital’s Project Manager.

2.6.3 If the use of the Hospital’s Loading Dock is required, prior approval and scheduling deliveries of material should be made with the NYU Winthrop Hospital’s Project Manager.

2.6.4 Restriction of access to public right-of-way, emergency entries, or loading dock areas will not be permitted unless it is authorized by the Project Manager.

2.6.5 If Materials must be shipped to the Hospital, the General Contractor must ensure that the name of the Sub-Contractor receiving the material is identified on the shipping label. The NYU Winthrop Hospital Project Manager will notify the loading dock staff of the pending delivery.

2.6.6 Deliveries must be coordinated in order to minimize the disruption to patients, visitors and hospital employees.

2.6.7 Deliveries shall not be made unless sufficient manpower and equipment is provided by the GC/CM to receive and unload the delivery, and promptly move it to the construction area.

2.6.8 All crating and packaging is to be removed by the GC/CM and materials moved to the construction area promptly. NYUWH receiving areas, yards, driveways and corridors shall not be used for the temporary storage of deliveries. NYUWH reserves the right to remove such material at the expense of the GC/CM. If necessary, the GC/CM shall arrange and pay for off-site storage.

2.6.9 NYUWH regulations prohibit its personnel from accepting, signing or otherwise assuming any responsibility for GC/CM deliveries. All deliveries must be coordinated with the NYUWH Receiving Department Manager who has the authority to control all shipments and deliveries.

2.6.10 GC/CM must secure their equipment and materials stored outside of the construction area and they should never leave it unattended.

2.7 ELEVATOR USAGE
The General Contractor shall coordinate the use of the Hospital’s elevators with the NYU Winthrop Hospital’s Project Manager; however, all contractors should be advised that patient, visitor and Hospital employ activities have priority over construction activity.

2.7.2 Whenever possible, contractors should not ride the elevators with patients and visitors.

2.7.3 Elevator shut-downs, or extended use for deliveries, must be scheduled through NYU Winthrop Hospital’s Project Manager.

2.7.4 The inside surfaces of the elevator cabs and door frames must be properly protected when used for construction.

2.7.5 Elevator load capacities must be checked and verified prior to use for construction activities.
3 ORIENTATION

It is the General Contractor’s, or Prime Contractor’s responsibility to orient the Contractor’s Sub-Contractors and their employees to understand and abide by NYU Winthrop Hospital’s General Requirements. The General Contractor shall incorporate these Requirements into their sub-contractor agreements. It’s the General Contractor’s responsibility to provide documentation that their sub-contractors and their employees have received Orientation.

3.1 CONTRACTOR/VENDOR REGISTRATION & CREDENTIALING

All Contractor employees, as well as sub-contractors employees, are required to wear identification badges. The badges must identify the name of the company, and the individual employee’s name. Identification (ID) badges will be obtained by registering with Symplr/VCS.

3.1.1 Corporate registration with Symplr/VCS is a one-time and free service. However, once your firm is registered with Symplr you will then be required to register your individual employees at an annual fee for Access Level 5 clearance.

3.1.2 How the system works. Your employees upon entering our facility will swipe their badge at a kiosk/automated terminal located in our main lobby. If all of the employee information is correct and up to date, the kiosk will then print a self-adhesive “board pass” giving your employee the approval to proceed to their pre-described location in the hospital. If the information is invalid or your registration has expired, you will not be given a boarding pass and he or she will not be allowed access to our facility until the problem has been corrected. Your employees must also sign out in the same fashion upon leaving our facility for the day. Additional training or instructions will be available at the Symplr website.

3.1.3 Contacting Symplr - If you have any questions about registration, please visit the Symplr website or contact them by phone at (866) 373-9725 Option 1 or email at support@symplr.com.

3.2 BEHAVIOR AT THE CONSTRUCTION SITE

NYU Winthrop Hospital strives to promote a healing environment for our patients, therefore while on hospital property, contractors are expected to behave appropriately. Any personnel found in violation will be escorted offsite immediately at contractor’s expense.

3.2.1 While performing work at NYU Winthrop Hospital and its satellite facilities, Contractors must comply with the following:

3.2.1.1 Always be courteous to patients, their families, visitors and Hospital employees.
3.2.1.2 Respect patient privacy and confidentiality.
3.2.1.3 Any harassment of Hospital patients, staff, general public, etc. will result in immediate removal from the project / facility.
3.2.1.4 No offense or obscene language is permitted.
3.2.1.5 If contractors are approached by patients, visitors, or Hospital staff, regarding suggestions or requests, they shall refer such suggestions or requests to the Hospital Project Manager.

3.2.2 The Hospital reserves the right to remove any contractor employee for failure to meet established safety procedures. Workmen under the influence of alcohol or other drugs that impair judgment or cause intoxication will be evicted from the hospital property.

3.2.3 The use of NYU Winthrop Hospital’s Food Services facilities, (i.e., cafeteria, coffee shop, vending machines etc.) by GC/CM and their employees is a privilege. NYU Winthrop Hospital has reserved the right and the GC/CM and all subcontractors are prohibited to use of these facilities. The GC/CM shall make alternate arrangements to provide these services.

3.2.4 GC/CM is responsible for parking arrangement for their employee’s personal and work vehicles. Vehicles parked in unauthorized areas may be towed at owner’s expense. Any on site parking privilege may be withdrawn at NYU Winthrop Hospital’s discretion.
3.3  CLOTHING POLICY

While performing work at NYU Winthrop Hospital and its satellite facilities, Contractors must comply with the following:

3.3.1 Shirts must be worn at all times, even when working outdoors.
3.3.2 Long pants are required (no shorts, cut-offs, etc.)
3.3.3 Work boots are required.
3.3.4 Clothing must be in good condition (not torn or tattered).
3.3.5 Clothing with obscene words or gestures is not allowed.
3.3.6 Clothing must be appropriate for the work environment and for the work being performed.
3.3.7 Personal protection equipment should be used as needed while working in the construction area.

3.4  SMOKING POLICY

3.4.1 NYU Winthrop Hospital is a “Smoke Free” environment. It is the policy of NYU Winthrop Hospital to maintain a smoke-free environment which prohibits smoking on its property.

3.4.1.1 Smoking is defined as smoking cigarettes, cigars, pipes, the use of smokeless or “spit” tobacco products and the sale of any tobacco products on the premises.

3.4.1.2 Property is defined as all of NYU Winthrop Hospital indoor facilities and outside areas including campuses, grounds and parking lots.

3.4.1.3 GC/CM employees shall abide by all “No Smoking” regulations. Any violators of the Hospital’s “No Smoking” policy will be barred from working on the premises. GC/CM is responsible for loss of productivity due to workmen’s removal for smoking on the premise.

3.5  WORK PLACE VIOLENCE

NYU Winthrop Hospital is concerned for and committed to its employees’ safety, health and well being. There is zero tolerance for violence in the workplace. Workplace violence is defined as any violent behavior or threat of violence. Examples of violence include hitting, slapping, punching, poking, throwing objects, and verbal altercations where a threat is made to a person or person’s family or property. Individuals that participate is violent behavior will be immediately dismissed from the Project and escorted off of Hospital property.

3.6  MUSIC

No general entertainment devices, such as radios, boom boxes, DVD players, mp3 players (even with the use of ear / head phones) are allowed.

3.7  PARKING

Parking on NYU Winthrop Hospital Property is at a premium. Patients and Hospital employees will have priority. If on-site parking is not available, then use nearby municipal and private parking facilities.

3.7.1 NYU Winthrop Hospital does not provide parking. The Hospital’s Safety Department could be made available, upon request, to review parking policies and procedures with contractors, prior to the start of construction.

3.7.2 Parking Policies and Procedures, as defined by the Hospital’s Security Department will be enforced on a regular basis.
3.8 PERSONAL PROTECTIVE EQUIPMENT (PPE)
All contractors are required to use all necessary protective equipment as needed by the individual task at hand. PPE shall include, but not limited to the items below:

3.8.1 Hard Hats
3.8.2 Hearing Protection
3.8.3 Goggles or Face Shields
3.8.4 Respirators
3.8.5 Dust Masks
3.8.6 Gloves
3.8.7 Gowns
3.8.8 Aprons

4 FACILITIES PROJECT MANAGEMENT
The Project Manager is responsible to administer and enforce Hospital Policies and Procedures during construction. All communications to and from the Project will be routed through the Hospital’s Project Manager, and/or the Project Manager’s designee, to ensure accuracy, appropriateness and streamline efforts to operate safely and efficiently. All Site visits to the Project are to be coordinated through the Project Manager to ensure the safety of everyone involved.

The following is a list of 24-hour emergency service contacts (see Attachment #4), who may be contacted at any time, twenty-four hours-a-day, in the event of an emergency. Note: Operator will contact personnel/department listed above – Weekdays (4:00 PM – 8:00), Weekends and Holidays.

EMERGENCY SITUATION – 24 Hours / Day, 7 Days/Week
If alarms are activated inadvertently (fire alarm, utility interruptions, etc.), call NYU Winthrop Hospital’s emergency contact listed above, immediately. Identify your company, the incident, and the location, by room number, or building and floor.

4.1 HIGH RISK AREAS
4.1.1 Investigative work required in “High Risk” areas of the Hospital, and its satellite facilities must be scheduled and coordinated through the NYU Winthrop Hospital’s Project Manager.

4.1.2 High Risk areas include the following:
4.1.2.1 Laboratory and research areas
4.1.2.2 Neonatal Intensive Care Unit
4.1.2.3 Dressing rooms
4.1.2.4 Oncology
4.1.2.5 Morgue
4.1.2.6 Critical Care Units
4.1.2.7 Isolation rooms
4.1.2.8 Diagnostic imaging departments
4.1.2.9 Pharmacy
4.1.2.10 Rooms that display the radioactive symbol/sign
4.1.2.11 Sterile areas/operating rooms/surgery
4.1.2.12 In general – All “non-public” areas

Note: NYU Winthrop Hospital has a Policy and Procedure on “gowning” requirements prior to entering sterile areas. Contractors must schedule entry to these areas with the Hospital’s Project Manager.
SAFETY

5.1 CONSTRUCTION SITES
5.1.1 Construction Sites must be locked and secured at all times, in order to prevent unauthorized access by patients, visitors and Hospital employees.

5.2 FIRE PREVENTION
The Contractors must follow the Hospital’s Interim Life Safety Measures that are in effect. Stay within the construction area, keep egress areas clear at all times and wait until otherwise notified.
5.2.1 When the Fire Alarm sounds:
   5.2.1.1 Clear the corridors of construction material and personnel
   5.2.1.2 Remain calm inside the construction area
   5.2.1.3 Stand-by and wait for further instruction from the Hospital’s Project Manager, or Hospital Administrator.

5.3 SIGNAGE/CONSTRUCTION PARTITIONS
5.3.1 Proper signage around the construction site must be maintained at all times. If working in exposed areas for short periods of time, caution signs should be placed around ladders and equipment.
5.3.2 The NYU Winthrop Hospital’s Project Manager will coordinate with the contractor the use of construction warning signs within the Facility.
5.3.3 All dust or smoke partition must be marked with a temporary sign.
5.3.4 Construction Safety Guidelines should be reviewed with all onsite personnel and shall be posted in an area where it is easily accessible for all to see and review.

5.4 FACILITY REQUEST WORK STOPPAGE
5.4.1 The Contractors are required to stop work immediately, upon request of anyone. The details will be sorted-out later.
5.4.2 Obtain the name, department, and position of the person making the request.
5.4.3 Then, contact the Hospital’s Project Manager. Submit, to the PM, the above obtained information.
5.4.4 Keep a Log of stoppage times, durations, and the information of those who request the stoppage.
5.4.5 Communication is key to preventing work stoppages.

5.5 HAZARDOUS MATERIAL
All Contractors performing services within the hospital are required to provide the following:
5.5.1 A list of all the hazardous material to be used at the construction site.
5.5.2 A location at, or near, the construction site, accessible to hospital employees during working hours, including the Contractor’s MSDS file for all hazardous materials being used.
5.5.3 If there is a hazardous chemical release or spill, contact the Hospital spill team at 516-663-2222. Tell the Operator your name, exact location of the spill, and if known, the name of the material and its corresponding MSDS Sheet.
5.5.4 Secure the area affected by the spill in order to prevent anyone from walking into the material, and wait for the spill team to arrive.
5.5.5 All chemicals shall be disposed of within regulatory guidelines, and to be carted off properly by a licensed contractors
5.5.6 A Material Safety Data Sheet (MSDS) gives detailed information such as:
   5.5.6.1 Chemical hazards (type of health hazard, routes of entry, systems).
   5.5.6.2 Safety Procedures (proper protective equipment, ventilation, etc.).
   5.5.6.3 Emergency response (first aid, etc.).
   5.5.6.4 Chemical ingredients (Names, permissible exposure limits, etc.).
5.5.6.5 Physical and chemical characteristics (Boiling point, vapor density, appearance, odor, etc.).
5.5.6.6 Reactivity ( Explosive properties and vapor emitting).
5.5.6.7 Proper storage.
5.5.6.8 Spill and leak procedures.

Material Safety Data Sheets give more detailed information than the product label. Always read the MSDS before starting the job, and follow the instructions. All Material Safety Data Sheets must be retained, and accessible, at the Construction Site, at all times.

5.6 LABELING
Every chemical container must have a label. Information on the labels should include:
5.6.1 Identity of chemical or mixture.
5.6.2 Information about the manufacturer (Name and Address).
5.6.3 Physical hazards (flammable, reactive, etc.).
5.6.4 Health hazards (toxic, irritant, etc.).
5.6.5 Protective clothing and safe handling.
5.6.6 First aid instructions.
5.6.7 Safe Storage.

5.7 SANITARY FACILITIES
Sanitary facilities shall be provided for the Contractor’s personnel, based on the discretion of the NYU Winthrop Hospital Project Manager.

5.8 STORAGE
Storage of materials may be subject to NYU Winthrop Hospital’s Project Manager’s review and placement. The Contractor shall work closely with the Project Manager to determine the best storage areas that will minimize the amount of time spent away from the Project Site. The following guidelines should be considered:
5.8.1 Storage of materials will be allowed only in areas approved by NYU Winthrop Hospital’s Project Manager.
5.8.2 Storage of flammable and/or hazardous materials should be maintained at the minimal quantity necessary for daily operations, and to be stored in appropriate containers.

5.9 TOOL/EQUIPMENT POLICY
5.9.1 All construction tools should be kept inside the work areas
5.9.2 The NYU Winthrop Hospital’s Project Manager must be notified of tools that create excessive noise and cause vibration that will transmit in areas outside of the construction area, in order for the Project Manager to have ample time to notify the affected Hospital departments.

5.10 FIRE DOOR/EQUIPMENT ROOM DOORS/EMERGENCY EXITS
Mechanical and Electrical Room doors must not be blocked open, or left unlocked, at any time. Fire doors must not be blocked in the open or closed positions for any reason. If work is to be performed in an emergency exit way, it should be coordinated through the Project Manager. It should activate the Interim Life Safety Measures Plan (ISLM).

5.11 OCCUPATIONAL HEALTH & SAFETY (OSHA)
5.11.1 It is the GC/CM’s responsibility to be in compliance with all OSHA requirements
5.11.2 GC/CM must have OSHA “competent person” on site at all times. As defined by OSHA, the competent person must have the authority to stop work and implement corrective measures.

5.11.3 GC/CM must provide Material Safety Data Sheet (MSDS) for all chemical used on the project. The documents should be submitted as a submittal for review prior to material delivery or application on site.

5.11.4 GC/CM must provide Personal Protection Equipment (PPE) such as hard hats, safety goggles, work gloves, hearing protection, fall protection harness, etc for all workmen while they are in construction area.

5.11.5 GC/CM must ensure that all fall protection guidelines are followed.

5.11.6 Workmen must be dressed according to OSHA requirements (ex: must wear sleeved shirts, long pants and proper footwear).

5.11.7 When adhesives, aerosol or other odorous substances are used, adequate ventilation must be maintained. When necessary, fans should be utilized to keep odors from permeating an area. GC/CM must submit an inventory of chemical used on site to NYU Winthrop Hospital Engineering Department for review prior to use. Another set of MSDS for all chemicals on site must be maintained by GC/CM in a binder at the field office, ready for inspection on demand.

5.11.8 All personnel on site must possess and carry a minimum of an OSHA 10 course card.

6 ENVIRONMENT OF CARE

6.1 ABOVE CEILING WORK (See Attachment #1)

6.1.1 No “Above Ceiling” work shall be performed without prior coordination with the Hospital’s Project Manager. An “Above Ceiling” permit must issued by a NYU Winthrop Hospital’s personnel prior to any above ceiling work is to be performed.

6.1.2 All penetrations through smoke, and/or fire partitions, shall be done by the Contractor and sealed by NYU Winthrop Hospital’s personnel.

7 SYSTEM INTERRUPTIONS / SHUTDOWNS

7.1 SHUTDOWNS (See Attachment #2)

7.1.1 Prior to any utility tie in / shutdown complete a Utility Disruption Mitigation (UDM) Assessment form and submit to Director of Engineering.

7.1.2 All shutdowns require written notification of system(s) interruption with at least 72 hour advance notification. GC/CM shall submit their shutdown request to NYUWH Engineering Department with a copy to the Project Manager. Approval must be received prior to proceeding with the required work. The NYU Winthrop Hospital Engineering Department will perform the following list of shutdowns, as well as witness testing whenever possible:

7.1.2.1 Fire Alarm System
7.1.2.2 Emergency Power
7.1.2.3 HVAC Systems
7.1.2.4 Sprinkler System
7.1.2.5 Medical Gas Systems
7.1.2.6 Nurse Call Systems
7.1.2.7 Security Systems
7.1.2.8 Waste and Vent Systems
7.1.2.9 Pneumatic Tube System
7.1.3 Any work, which will cause unusual noise or vibration, must be scheduled in advance with the NYU Winthrop Hospital. GC/CM will monitor for interference with adjacent areas.

7.1.4 Any work that affects area outside of construction project site (adjacent, above and below) must be scheduled in advance. Particularly, core drill of slabs must be coordinated with NYU Winthrop Hospital and Project Manager.

7.1.5 NYU Winthrop Hospital may employ the use of Hospital labor forces to complete specific items of project work. The GC/CM is required to coordinate with and work in conjunction with the Hospital’s in-house labor force. This work shall include, but not be limited to, service shutdowns, locksmith work, painting, moving, cleaning, electrical, plumbing, carpentry, telephone and computer wiring.

7.1.6 GC/CM must take special precaution when chemicals such as fuels, solvents, paints are used on site. These materials must be supervised during used and must be removed from unit after use.

7.2 UTILITY SHUTDOWN

7.2.1 The NYU Winthrop Hospital’s Project Manager shall be notified, in writing, when Utilities will be interrupted.

7.2.2 The NYU Winthrop Hospital’s Project Manager shall assist in determining where the shutdown should occur, and what areas will be affected. Occupants will be notified.

7.2.3 If performing work that in any way disturbs smoke, heat, or duct detectors, the work should be “isolated” by the Project Manager.

7.2.4 After completion, or at the end of each day, the Project Manager will put the isolated area back into active operation.

7.2.5 Any major or critical utility interruptions should be coordinated in advance with the NYU Winthrop Hospital Project manager. Written notification should be received, by the Project Manager, a minimum of 72-hours prior to the planned interruption. The Contractor shall coordinate all planned interruptions with the NYU Winthrop Hospital’s Project Manager, in order to determine who should be notified of the utility shut-downs. The Project Manager, or the Project Manager’s designee, shall be present before, during, and after the interruptions to supervise all operations.

7.2.6 All work which requires minor utility interruption, and/or the assistance of NYU Winthrop Hospital’s Project Manager should be scheduled a minimum of 48-hours in advance the Hospital’s Engineering Department. This includes investigations, inspections, repairs, and construction.

8 EQUIPMENT REQUIREMENTS

8.1 FUME HOODS, BIOLOGICAL SAFETY CABINETS & EXHAUST DUCTWORK

8.1.1 Construction personnel are not permitted to perform any work on or in fume hoods, bio-safety cabinets, or their associated ductwork, until clearance is obtained from the NYU Winthrop Hospital Project Manager.

8.2 HVAC SYSTEMS START-UP

Caution shall be used when planning to start-up an HVAC System to prevent dislodging dirt and/or contaminants. Working on an existing duct system (cutting, hammering of duct) can dislodge the residue inside of the duct, and with system start-up, this residue may blow into the rooms that are serviced by the ductwork.

8.3 HVAC WORK IMPACT

Essential services may be disrupted during construction; follow these steps to compensate to disruption:
8.3.1 Prior to modifying or removing Mechanical, Electrical & Plumbing (MEP) systems, determine the effect on all areas outside of the immediate construction area.

8.3.2 Areas served by electrical circuits being shut-off, or disconnected, should be verified by the NYU Winthrop Hospital Project Manager. If this cannot be provided, all circuits should be traced to determine if areas outside of the construction area will be affected by the shutting or disconnection of electrical circuits.

8.3.3 Plumbing risers affecting floors above and below the construction area should also be checked.

8.3.4 Be prepared

8.3.5 Determine if areas remote to the construction area were isolated when scheduled mechanical and electrical work is performed. The related work on valves, junction boxes, etc. may require special protection of the surrounding area with the installation of construction/dust barriers.

8.3.6 The NYU Winthrop Hospital Project Manager shall coordinate the shut-down of HVAC systems as necessary.

8.4 MEDICAL GAS & VACUUM SYSTEMS

8.4.1 Construction personnel are not allowed to shut-off medical gas or vacuum systems.

8.4.2 Lock-out/tag-out procedures will be followed by the NYU Winthrop Hospital’s Engineering Department personnel.

8.4.3 If medical gases are detected after the shut-down, STOP WORK IMMEDIATELY, and notify the NYU Winthrop Hospital Project Manager.

8.5 MECHANICAL, ELECTRICAL & PLUMBING (MEP) SYSTEMS

Contractors must be responsive to any MEP systems issues during construction as follows:

8.5.1 Identify and isolate mechanical and electrical systems.

8.5.2 Affected utilities disconnected or de-energized (gas, water, sewer, medical gases, fire protection, electrical power sources, fire alarm, etc.)

8.5.3 All ventilation plenums have been shut-down or isolated from the rest of the HVAC system

8.5.4 Temporary power and lighting shall be addressed.

8.5.5 If phase construction is required, then determine how the phasing plan affects the MEP systems outside of the direct area of phased completion/occupancy, where the MEP systems may need to be modified or expanded to make them whole.

8.5.6 Maintain proper pressure relationships through the entire phase construction.

8.6 TUBE STATIONS (PNEUMATIC)

8.6.1 Outage of pneumatic tube systems should be treated in the same manner as mechanical and electrical outages.

8.6.2 The work area must be physically isolated from adjacent space.

8.6.3 Before starting any demolition or work which may create dust, the tube station, and/or exposed surface should be covered with plastic and sealed around the edges.

8.7 WORKING NEAR IMAGING, SENSITIVE EQUIPMENT (i.e. MRI)

Heavy equipment, large amounts of materials, and general construction activity can distort imaging results. The NYU Winthrop Hospital’s Project Manager will work with the Contractor to determine the proper clearances for working around imaging equipment.

Additionally, some imaging systems can create hazardous situations in the form of magnetic fields. Prior to starting work around imaging systems, the Contractor must ensure that the proper protocol is understood can be followed by all parties.
9 ASBESTOS
NYU Winthrop Hospital will notify the Contractor of any active program for managing the evaluation and/or the abatement of potential Asbestos Containing Material (ACM). If Asbestos Containing Materials are uncovered during construction activities, the Contractor must STOP WORK IMMEDIATELY, and notify the Hospital’s Project Manager.

10 PROJECT CLOSE-OUT
10.1 PRE-PUNCH LIST
The Contractor should perform a pre-punch list of the construction area prior to scheduling the NYU Winthrop Hospital’s punch list walk-through, unless the current circumstances preclude it.

10.2 PUNCH LIST
NYU Winthrop Hospital recommends that the punch list walk-through be scheduled at least one week in advance. The time frame for completing punch list items shall be a mutually agreed upon with the Hospital’s Project Manager.

10.3 FINAL CLEANING
Final cleaning may occur before or after the punch list walk-through, depending on jobsite conditions and scheduling requirements. The NYU Winthrop Hospital’s Project Manager will expect the Contractor to coordinate final cleaning in the correct sequence with the Project’s furnished equipment and furniture installation. Due to the sensitive nature of the Facility or Department, the Hospital may have special requirements for cleaning chemicals and equipment. These requirements will be coordinated closely with the NYU Winthrop Hospital’s Manager.

10.4 DOCUMENTATION
The Contractor must ensure that the NYU Winthrop Hospital’s Project Manager has the proper documentation to operate and maintain the new construction. Required documentation shall include, but not limited to, the following:

10.4.1 Project inspections
10.4.2 Certificate of Occupancy
10.4.3 Consent of Surety (for release of final payment)
10.4.4 Owner/Operator training
10.4.5 Certifications
10.4.6 Operation & Maintenance Manuals
10.4.7 Close-out Submittals
10.4.8 Project Photographs
10.4.9 Record Documents
10.4.10 Warranties and Guarantees
10.4.11 Attic Stock
10.4.12 Test Report(s)

10.5 ACCEPTANCE
Prior to completion and acceptance by the Hospital, the following must be accomplished, where applicable:

10.5.1 All mechanical systems shall be tested, balanced and operated to demonstrate that the installation and performance of these systems conform to the requirements of the plans, specifications and applicable Codes.
10.5.2 Upon completion of the contract, the Contractor shall furnish the Hospital with a complete set of Manufacturer’s operating and maintenance instructions, including a parts list with part numbers and a description of each piece of equipment. The Contractor shall also provide instructions in the operational use of the installed systems and equipment, as required.

10.5.3 Contractor’s Material and Test Certificate for the Sprinkler System, as per NFPA 13.

10.5.4 Certification of Inspection and test of the Sprinkler System

10.5.5 Certification that the Fire Detection System has been fully installed, inspected, tested and is connected to the Fire Alarm System.

10.5.6 Certification that the Fire Alarm System has been fully installed, inspected, tested and is fully operational. Emergency forces notification shall be in accordance with NFPA 101.

10.5.7 Certification that the Essential Electrical System (EES) complies with NFPA 110 and NFPA 99. Listing of the functions to be served must be submitted (See NFPA 99 – Appendix for format for Type 1 EES, the form may be modified for Type 2 and Type 3 EES’s).

10.5.8 Certification that all medical gas and vacuum systems have been install, tested, and inspected in accordance with NFPA 99 and/or NFPA 50.

10.5.9 Documentation indicating that the plumbing systems have been installed in accordance with the National Standard Plumbing Code.

10.5.10 Documentation that the potable water supply systems have been thoroughly flushed, is under sufficient pressure, and is ready for use. If private wells are the water source, provide evidence of approval by the local authority having jurisdiction.

10.5.11 Documentation indicating Flame Spread and Smoke Production ratings of all interior finishes with associated laboratory testing references.

10.5.12 Manufacturers Certification indicating that draperies and curtains (including cubicle curtains) are fire retardant.

10.5.13 The Classification of all interior floor finishes, including associated laboratory testing references.

10.5.14 Fire Protect and Disaster Plans (Plans must be site specific).

10.5.15 Route Evacuation Plans (posted).

10.5.16 Fire Regulations (posted).

10.5.17 Smoking Regulations (posted).

10.5.18 The Coding of the Fire Alarm (distributed).

10.5.19 Certification from the Contractor that all sterilization equipment has been installed and tested in accordance with the Manufacturer’s instructions and recommendations.

10.5.20 Documentation of sterilization equipment testing indicating test results and the status of equipment functionality.

10.5.21 Certification of ventilation and fire suppression systems for commercial kitchens have been installed and tested in accordance with NFPA 96.

10.5.22 For Renal Dialysis Units, submit pre and post water treatment (i.e., bacteriological and chemical) test results.

10.5.23 Site specific housekeeping, infection control, and maintenance manuals.

10.5.24 Certification that imaging equipment (e.g., X-Ray) and Nuclear Medicine Equipment have been installed and tested in accordance with the Manufacturer’s instructions and recommendations, and in accordance with 10NYCRR711.2(b)(7), (b)(8), and (b)(9).

10.5.25 Elevator inspection and test Certifications.

10.5.26 Certification that Electrical Systems have been installed in compliance with applicable codes (e.g., NFPA 70) and in accordance with approved plans.

10.5.27 Boiler Inspection Certificate.
CLOSE-OUT DOCUMENTS (See Attachment #5)
Closing out a project is one of the most important aspects of a project. The Contractor is responsible for providing all the pertinent documents as outlined in the attached Closeout Checklist.

REFERENCES
12.1 AIA Guidelines for Design and Construction of Hospital & Healthcare Facilities
12.2 ASHRE
12.3 CDC Guidelines on Environmental Infection Control
12.4 The Joint Commission Standards for Environment of Care
12.5 NFPA 99 – Standards for Healthcare
12.8 NFPA 51B – Standards for Fire Prevention during Welding, Cutting and other Hot Work
12.9 NFPA 70 – National Electrical Code
12.10 OSHA 29 CRF 1910 – General Industry Standards
12.11 OSHA 29 CRF 1926 – Construction Industry Standards

END OF GENERAL REQUIREMENTS
Appendix

Attachment #1- Above Ceiling Permit
Attachment #2- Shutdown Notification
Attachment #3- Contractor’s Daily Inspection Checklist
Attachment #4- Emergency Phone List
Attachment #5- Closeout Document Checklist
NYU Winthrop Hospital

***USE P&P STANDARD HEADER INFORMATION HERE***

ABOVE CEILING WORK PERMIT

Purpose
To provide a fire-safe environment of care and to protect the patients, visitors, staff and the facility from the spread of fire, smoke, and other products of combustion by maintaining the integrity of smoke and fire barriers.

Policy
It is the policy of NYU Winthrop Hospital Engineering Department that an Above Ceiling Work Permit is to be issued for any work being performed in the space above the ceiling in any part of the facility. This work and its impact on the integrity of smoke and fire barriers, and any additional follow-up will be the responsibility of the NYU Winthrop Hospital Engineering Department.

Procedure
1. All applicable personnel - including but not limited to - outside telephone/data/cabling contractors and/or in-house maintenance crews shall obtain an Above Ceiling Work Permit from the NYU Winthrop Hospital Engineering Department prior to beginning any work that requires above ceiling system access. Permits will be obtained from the NYU Winthrop Hospital Engineering Department between 8:00 am – 4:00 pm Monday through Friday (excluding holidays).
2. The full scope of the work planned will be reviewed with the NYU Winthrop Hospital Engineering Department. Emphasis is to be placed on any penetration of any fire/smoke barriers. All elements of the planned work must be agreed to in advance by both parties to ensure the careful coordination of resources.
3. NO one is permitted to perform their own sealing of penetrations made as a result of the work discussed. It shall be the responsibility of the NYU Winthrop Hospital Engineering Department to ensure that all penetrations are properly sealed or firestopped in a timely manner.
4. The impact of the work being performed will be reviewed by the NYU Winthrop Hospital Engineering Department. If applicable, the appropriate Interim Life Safety Measures will be implemented and monitored in accordance with hospital policy.
5. Above Ceiling Work Permits will not be issued on a blanket basis, except as related to multiple locations/penetrations in a single job (e.g. – the routing of pipe or cable/electrical conduits penetrating several fire walls).
6. The permit holder shall notify the Engineering Department of penetrations that are made or found. The permit holder will replace all ceiling tiles.
7. The permit must be displayed at the work location at the beginning of the project and remain until the inspection is complete.
8. All appropriate in-house personnel who require ceiling access shall be trained in accordance to the procedures outlined in this policy and will display the appropriate approved designation/identified.
9. An Infection Control Risk Assessment (ICRA) must be also performed prior to the issuance of the permit. In-house personnel will attend annual training in ceiling access and Infection Control policies and procedures.

Responsibilities

- The Director of Engineering or his designee will:
  1) Administer the Above Ceiling Work Permit Policy Permit Program.
  2) Inspect on-going projects as necessary depending on the scope of work.
  3) Conduct final inspections of work areas and provide the necessary fire stopping before closing out permits.

- Contractors and in-house personnel will:
  1) Obtain a Ceiling Access Permit before beginning work, outlining walls to be penetrated within project and maintain a copy of the permit in the work area at all times.
  2) Notify the NYU Winthrop Hospital Engineering Department if there are questions regarding penetrations to be made. Once completed, schedule a final inspection with the Engineering Department.

- Infection Control will conduct random inspections to ensure that all Infection Control policies are followed while work is in progress.
## NYU Winthrop Hospital
Engineering Department

### Above Ceiling Work Permit

<table>
<thead>
<tr>
<th>Permit Number</th>
<th>Issue Date:</th>
<th>ICRA completed? Y or N</th>
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<tbody>
<tr>
<td>Approved By (Engineering Department Representative):</td>
<td>Estimated completion Date:</td>
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</tr>
<tr>
<td>Permit Issued To (Department/Contractor name, individual’s name, phone number)</td>
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<td></td>
</tr>
<tr>
<td>Location of barrier(s) to be penetrated (building, wing, floor, room number) Attach sketch if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Location corridor walls to be penetrated, (building, wing, floor, room number) Attach sketch if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Reason for penetration or work to be performed:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Final Inspection by Department/Contractor Engineering Department Representative:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date:</td>
<td>Date:</td>
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</tr>
</tbody>
</table>
Utility Disruption Mitigation (UDM) Assessment

Project #: ______________________ Date: ______________________

Project Description: ____________________________________________________________________________
_________________________________________________________________________________________________

Step 1: Determine Need for a UDM Plan (Answer for each category, “Will work or conditions likely disrupt operation of any of the following systems?”)

<table>
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<th>Step</th>
<th>Description</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>1</td>
<td>Electrical distribution (primary or back up / emergency power)</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>2</td>
<td>HVAC serving patient care or sensitive environment area</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>3</td>
<td>Air pressure relationships in isolation rooms or controlled pressure zones</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>4</td>
<td>Domestic water serving a patient care area (If Yes, IC Assessment Required)</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>5</td>
<td>Oxygen, medical gas, air, or vacuum</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>6</td>
<td>Sanitary or storm sewer</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>7</td>
<td>Natural gas distribution</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>8</td>
<td>Compactors or other waste disposal</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>9</td>
<td>Tube transport</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>10</td>
<td>Building control /alarm/warning system</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>11</td>
<td>Badge or key access/lock system</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>12</td>
<td>Boilers, steam, heating, or hot water</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>13</td>
<td>Nurse communication system (circle): Nurse Call Code Buttons Other:</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>14</td>
<td>Data/Video communication system (circle): Computers Hubs Cabling Fax Cameras TV Other</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>15</td>
<td>Voice communication system (circle): Radio Phone Intercom Overhead Paging</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>16</td>
<td>Elevators (Circle effected types): Service Passenger</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>17</td>
<td>Utility related inability to provide patient care or patient comfort</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>18</td>
<td>Utility related inability of hospital to respond to an emergency or disaster</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>19</td>
<td>Utility related problem blocking access to emergency care</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>20</td>
<td>Utility related problem blocking emergency services access to any area</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>21</td>
<td>Hot work will be done</td>
<td>□</td>
<td>□</td>
</tr>
<tr>
<td>22</td>
<td>Notify hospital Staff or affected departments via email or other</td>
<td>□</td>
<td>□</td>
</tr>
</tbody>
</table>

Other Hazards / Notes:
___________________________________________________________________________________________________

Page 23
Please be advised that there will be a shutdown of the:

Areas to be affected are:

Shutdown begins at:  (date & time)
Shutdown ends at:    (date & time)

Please contact (insert name & title) at extension 8379 if you have any questions.

CC:
**DEPARTMENT OF ENGINEERING**

**DAILY CONTRACTOR’S CONSTRUCTION SITE SURVEILLANCE**

<table>
<thead>
<tr>
<th>DESCRIPTION</th>
<th>YES/NO</th>
<th>COMMENTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Are exit &quot;paths&quot; maintained as designed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are exits/corridors unobstructed, well illuminated, and allow for emergency access?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are temp construction smoke partitions and dust partitions tight/non-combustible?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the job site entrance secured?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are construction safety signs posted?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the Hospital’s no smoking policy enforced, and NO SMOKING signs posted?</td>
<td></td>
<td></td>
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<tr>
<td>Are fire protection/detection systems functional?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there a fire watch in-place for non-functioning fire protection/detection systems?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there Interim Life Safety Measures in-place?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are fire extinguishers provided?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are hard hats/other PPEs in use when necessary?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is there an eye wash in the construction site?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are there negative pressure relationships maintained to adjacent areas?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is temporary lighting adequate?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are construction aisles illuminated and free from tripping hazards?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are adjacent ceilings intact?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are electrical panels protected?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are open shafts protected?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are floor/wall/ceiling penetrations protected/sealed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is housekeeping/storage of materials maintained?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If scaffolding is in use, are safe practices being followed?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If hazardous materials are present, are they properly labeled stored?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is waste management acceptable?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Are gas cylinders secured?</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Is the Contractor’s Site Safety Manual on the job site and available for inspection?</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
## EMERGENCY PHONE LIST

<table>
<thead>
<tr>
<th>Department</th>
<th>Contact</th>
<th>Phone No.</th>
<th>Cell Phone</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Engineering Office</td>
<td></td>
<td>516-663-2268/2269</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Regular Hours</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>VP Engineering &amp; Facilities</td>
<td>Joe Burke</td>
<td>516-663-4834</td>
<td>516-380-0802</td>
<td><a href="mailto:JWBurke@nyuwinthrop.org">JWBurke@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Director of Engineering</td>
<td>Brian Kenny</td>
<td>516-663-8937</td>
<td>917-709-5697</td>
<td><a href="mailto:BJKenny@nyuwinthrop.org">BJKenny@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Operations Manager</td>
<td>John Kriner</td>
<td>516-663-4836</td>
<td>516-551-2179</td>
<td><a href="mailto:JKriner@nyuwinthrop.org">JKriner@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Sr. Director Planning, Design &amp; Construction</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Night Engineer</td>
<td>Ask for night Eng.</td>
<td>516-663-2466</td>
<td></td>
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</tr>
<tr>
<td>Electrical</td>
<td>Russell Muckle</td>
<td>516-663-8729</td>
<td>516-509-9337</td>
<td><a href="mailto:RAMuckle@nyuwinthrop.org">RAMuckle@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Plumbing</td>
<td>Fred Dobler</td>
<td>516-663-2113</td>
<td></td>
<td><a href="mailto:FDobler@nyuwinthrop.org">FDobler@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>HVAC</td>
<td>Mike Hinchcliffe</td>
<td>516-663-8550</td>
<td>516-512-3091</td>
<td><a href="mailto:MHinchcl@nyuwinthrop.org">MHinchcl@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Maintenance</td>
<td>John Majewski</td>
<td>516-663-3773</td>
<td>516-491-9272</td>
<td><a href="mailto:JMajewski@nyuwinthrop.org">JMajewski@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Boiler Room</td>
<td></td>
<td>516-663-8550</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Director of Outside Properties</td>
<td>Ralph Pugliese</td>
<td>516-663-4813</td>
<td>516-252-8963</td>
<td><a href="mailto:RPugliese@nyuwinthrop.org">RPugliese@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Infection Control</td>
<td>Eileen Abruzzo</td>
<td>516-663-4436</td>
<td></td>
<td><a href="mailto:EAbruzzo@nyuwinthrop.org">EAbruzzo@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Security Director</td>
<td>Mark Warren</td>
<td>516-663-4489</td>
<td></td>
<td><a href="mailto:MJWarren@nyuwinthrop.org">MJWarren@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>Safety Officer and Emergency Manager</td>
<td>Frank Mineo</td>
<td>516-663-9607</td>
<td></td>
<td><a href="mailto:FMineo@nyuwinthrop.org">FMineo@nyuwinthrop.org</a></td>
</tr>
<tr>
<td>GC/CM</td>
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<tr>
<td>Project Manager</td>
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<tr>
<td>Project Super</td>
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<tr>
<td>NYUWH PM</td>
<td></td>
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</table>
### CLOSEOUT DOCUMENT CHECKLIST

#### TASK DESCRIPTION

<table>
<thead>
<tr>
<th>A. General Requirements</th>
<th>COMPLETED</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Certificate of Completion</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Executed by Architect, Contractor and Owner)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2. Inspections Certifications</td>
<td></td>
<td></td>
</tr>
<tr>
<td>a. Certificate of Occupancy</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(By Building Inspections Officials)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Copy of Building Official Inspection Card</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Showing required inspection approvals)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Regulatory Inspection Sign-Offs (as applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(1) General Building</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(2) Plumbing</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(3) Fire Marshal Inspection and Sign-off</td>
<td></td>
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<tr>
<td>(4) Outside F/A Consultant Program Test (if applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(5) Electrical – Underwriter’s Certificate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(6) Certification Reports for All Backflow Assemblies</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Includes Plumbing, HVAC, Fire Protection as applicable)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(7) DOH Inspection and Sign Off</td>
<td></td>
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<tr>
<td>(8) Other Certifications as Required</td>
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</tbody>
</table>

#### Closeout Reports & Documentation

| a. Owner Instruction and Training with Equipment and Systems | | |
| (Memo/List of Attendees required for each session) | | |
| b. HVAC Test and Balance Report | | |
| (Certified Independent Consultant) | | |
| c. Medical Gas Certification | | |
| (Certified Independent Consultant) | | |
| d. Fire Stop Certification | | |
| (Certified Independent Consultant) | | |
| e. Attic Stock Turnover | | |
| (Transfer to Owner with Typed Inventory Required) | | |
| f. Keys & Permanent Hardware Changeover | | |
| (Delivery of Final Keys and Cabinet to Owner) | | |

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**TASK DESCRIPTION**

<table>
<thead>
<tr>
<th>TASK</th>
<th>DESCRIPTION</th>
<th>COMPLETED</th>
<th>DATE</th>
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</thead>
<tbody>
<tr>
<td>h.</td>
<td>Utility Account Change Over</td>
<td></td>
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<tr>
<td>(1)</td>
<td>Electric Service</td>
<td></td>
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<tr>
<td>(2)</td>
<td>Gas Service</td>
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<tr>
<td>(3)</td>
<td>Water Service</td>
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<tr>
<td>(4)</td>
<td>Cable TV</td>
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<tr>
<td>(5)</td>
<td>Security/Alarm</td>
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<tr>
<td>(6)</td>
<td>Other Utility Service</td>
<td></td>
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<tr>
<td>i.</td>
<td>ICRA Documentation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>j.</td>
<td>ILSM Documentation (include all Daily Reports)</td>
<td></td>
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</tr>
<tr>
<td>k.</td>
<td>Above Ceiling Permit (include all issued permits)</td>
<td></td>
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<tr>
<td>l.</td>
<td>NYUWH Work Permit (include all issued permits)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>m.</td>
<td>Partial and Final Lien Releases from contractor</td>
<td></td>
<td></td>
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<tr>
<td>n.</td>
<td>In-House Work Permit Closed Out</td>
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<tr>
<td>o.</td>
<td>Update Master Plan</td>
<td></td>
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</tr>
</tbody>
</table>

**B. Record Document Requirements**

1. **As-built drawings** (electronic and 1 hard copy)
   - a. Site/Civil
   - b. Architectural & Structural
   - c. Plumbing
   - d. Fire Sprinkler
   - e. Fire Alarm
   - f. Mechanical
   - g. Electrical
   - h. Generator, ATS, UPS, etc
   - i. IT (cabling, phones, data, etc)
   - j. Security
   - k. Elevator
   - l. Other (Kitchen Equipment, etc.)

2. **Final Finish Schedule**
   (updated with actual finishes and bound in with O+M Manual)

3. **Operation & Maintenance (O+M) Manuals**
   (Approval cover letter from Designer required)
<table>
<thead>
<tr>
<th>TASK DESCRIPTION</th>
<th>COMPLETED</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Product &amp; Operations Data (<em>hardcopy &amp; electronic file required</em>)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>b. Maintenance Manuals</td>
<td></td>
<td></td>
</tr>
<tr>
<td>c. Product Warranty Certificates</td>
<td></td>
<td></td>
</tr>
<tr>
<td>d. Maintenance &amp; Cleaning Agreements</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4. Construction Site Documentation</td>
<td></td>
<td></td>
</tr>
<tr>
<td>(Contractor’s Job Log and Photographs)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Copy of the Building Permit</td>
<td></td>
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</tr>
</tbody>
</table>

**C. Warranty Period**

1. Roof Warranty  
(name the mfg, length of warranty, start dates)

2. Elevator Warranty  
(name the mfg, length of warranty, start dates)

3. HVAC Warranty  
(name the mfg, length of warranty, start dates)

4. Other Warranty  
(name the mfg, length of warranty, start dates)

5. Other Warranty  
(name the mfg, length of warranty, start dates)

6. Other Warranty  
(name the mfg, length of warranty, start dates)

**D. PM Requirements**

1. Confirm all closeout documents have saved to the S Drive  

2. Schedule a closeout meeting with the appropriate personnel to review and handoff all closeout documentation

**E. Final Requirements – by Contractor**

1. Contractor's Certification of Completion (notarized)  

2. Affidavit of Release of Liens (unconditional)  

3. Consent of Surety to Final Payment (if applicable)  

4. Final Request for Payment Certified by Architect & owner
<table>
<thead>
<tr>
<th></th>
<th></th>
<th>COMPLETED</th>
<th></th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.</td>
<td>Copy of Contractor’s Executed Contract</td>
<td></td>
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<tr>
<td>6.</td>
<td>Provide As-Built Drawings</td>
<td></td>
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</tr>
</tbody>
</table>

**TASK DESCRIPTION**

**F. Final Requirements – by Architect/Engineers**

1. Certification by Architect of Completed Final Punch List
2. Certification by Engineer of Completed Final Punch List
3. Completion Certificate executed by Architect
4. Completion Certificate executed by Engineer
5. Record Drawings (electronic file only)