Date: October 31, 2016
Request for Pricing: RFP P360-16 Design Installation & Demolition of Fire Alarm Systems
Name of buyer: Justin M Ayala

This Addendum becomes a part of the Original document and Modifies, as noted below, the original Request for Proposal:

**Clarification:** This RFP is to award fire alarm contractors design, install and demolition of fire alarm systems for multiple buildings that UNMH is responsible for. The contractor is expected to submit pricing based on labor rates, system component pricing and system compatibility. After this RFP is awarded, there will be separate requests for quotes for specific projects.

1. With the (25) buildings you have listed in Exhibit “J”, (13) of them are Gamewell/FCI systems. Question would be, would UNMH like to standardize for all buildings to be Gamewell/FCI?

   **ANS:** As of now, there is not a plan to standardize alarm systems throughout our facilities.

2. Can I make site visits to determine the state of the Fire Alarm systems?

   **ANS:** For this RFP the current state of the alarm system does not apply. It is for design, install and demolition of a fire alarm system. Since no buildings are specifically mentioned to bid, just material and labor costs are requested.

3. Are you looking for a company that can service and inspect all 25 buildings regardless of manufacturer?

   **ANS:** This RFP is for design, install and demolition. UNMH is asking for proposals based on design, install and demolition of the systems that the contractor is certified in.

4. Are the EOC procedures required because they are not listed. Example dust carts?

   **ANS:** Exhibit I outlines the expectations for contractors. This document states that contractors will be responsible for dust containment, fire barrier penetrations, etc...

5. On the exhibit there are multiple sites listed and are they part of the RFP?

   **ANS:** Exhibit J shows what we currently have installed in our buildings. This RFP covers design, install, and demolition for any of the buildings that belong to UNMH.
6. Is UNMH going to supply drawing and existing device counts?

ANS: Drawings and device counts will not be sent to the contractors. The contractor is bidding on this RFP using labor rates and system component costs.

7. Is the work to be done during normal or off hours

ANS: Please submit the hourly cost for both normal and off hours.

8. Are escorts required and who is going to provide access?

ANS: Until a specific job is requested, it is unknown if the contractor will need an escort. Usually escorts are not required. UNMH will provide access to the contractor for the area they are working in.

9. Who is going to hire the elevator company for the elevator recall?

ANS: This will depend on the complexity of the project at that time. The contractor does not need to account for an elevator company price in this RFP.

EXHIBIT I:
Exhibit I is hereby included in this addendum and incorporated into the RFP.

ALL OTHER TERMS AND CONDITIONS WILL REMAIN THE SAME.

This addendum becomes a part of the request Documents and modifies, as noted above, the original Request for Pricing documents identified. All other provisions of the pricing document shall remain unchanged. This addendum is hereby made a part of the Request for Pricing Documents to the same extent as those provisions contained in the original documents and all itemized listing thereof.

Acknowledgement of receipt of this Addendum in the space provided on the Request for Pricing Form. Failure to do so may cause your proposal to be considered non-responsive and your response rejected.

(End of Addendum)
THE UNIVERSITY OF NEW MEXICO HOSPITALS
at the HEALTH SCIENCES CENTER
CLINICAL OPERATIONS

EXPECTATIONS FOR CONTRACTORS DURING CONSTRUCTION

Revised By:

Steven Villescas, UNMH Safety
Claudia Tchiloyans, Infection Prevention and Control
Rhonda Reynolds, UNMH Construction & Planning
Rodney Roybal, UNMH Manager Facilities
Richard Crise, UNMH Manager Facilities

Revised 7/1/15
INTRODUCTION:

To ensure the health and safety of the patients, employees within UNM Hospitals and contractors, the safety standards listed within this document must be understood and followed by all contractors and sub-contractors working within UNM Hospitals, including off-site components managed by UNM Hospitals. These expectations, supplement the Project Specification Manual and the AIA and CSI Construction Contract Documents.

The Contractor is accountable for ensuring that Sub-contractors adhere to safety standards detailed in this information packet as well as those discussed at the pre-construction and progress meetings.

“Contractors” as used in this document, refers to all General Contractors, Sub-Contractor, On-Site Supplier-Installers, staff and employees.

Mandatory Requirement: UNMH Environment of Care (EC) Training and Certification must be completed prior to starting UNMH construction projects by all contractors’ sub-contractors and all of their employees working on site. All contractors shall obtain UNMH ID Badges that indicate this certification and wear it at all times while working on UNMH property. EC Training is available on line.

In addition to adhering to the expectations listed within this packet, Contractors shall comply with all applicable governing or licensing agency regulations including but not limited to:

CODES, UNMH POLICIES/ PROCEDURES
The contractor shall perform all work in compliance with all Building and Construction Codes adopted by the State of New Mexico, including all codes and associated amendments adopted as part of the New Mexico Administrative Code (NMAC). In particular the contractors shall be knowledgeable of the requirements of NMAC Title 14 Housing and Construction, and Title 7, Health. Links to the NMAC can be found on the New Mexico Regulation & Licensing Department website.

As of 4/11/2012, the Construction Industries Division indicated that they enforce the following codes:

- 2009 New Mexico Commercial & Residential Building Code
- 2009 International Building Code
- 2009 International Existing Building Code
- 2009 International Residential Code
- 2009 Solar Energy Code (IAPMO)
- 2009 NM Energy Conservation Code
- ICC/ANSI A117.1-2003
- 2009 New Mexico Plumbing and Mechanical Code
- 2009 Uniform Mechanical Code (IAPMO)
- 2009 Uniform Plumbing Code (IAPMO)
- 2009 Uniform Swimming Pool, Spa and Hot Tub Code
- 2011 New Mexico Electrical Code
- 2011 National Electrical Code
- 2008 National Electrical Safety Code
The contractor shall meet the requirements of the Codes currently under enforcement by CID unless other versions are indicated on CID approved Construction Documents for the specific project. It is recommended that the contractor review the sections of NMAC that are specific to Healthcare Construction, especially the following:

- Section 7.7.2 REQUIREMENTS FOR ACUTE CARE, LIMITED SERVICES, AND SPECIAL HOSPITALS
- Section 7.11.2 REQUIREMENTS FOR FACILITIES PROVIDING OUTPATIENT MEDICAL SERVICES AND INFIRMARIES

In addition to the State of New Mexico requirements, the contractor shall abide by the Facility Guidelines Institute (FGI) Guidelines for Design and Construction of Health Care Facilities and UNMH Policies and Procedures. Current copies of those policies and procedures directly related to construction are located in the UNMH Facilities Contractor Website. The website address is http://unmhfacilities.mrooms.net.

- Procedure – Compressed Gas Cylinder Safety
- Procedure – Confined Space Entry
- Policy - Construction and Renovation
- Procedure – Electrical Safety
- Procedure – Environment, Air Contamination Control
- Procedure – Environment of Care Work Permit
- Procedure – Hearing Conservation Program
- Guideline – Infection Control During Construction/Renovation
- Procedure – Interim Life Safety Measures
- Policy – Lockout, Tag Out
- Procedure - Management of Environmental Design
- Procedure – OSHA Respiratory Protection Program
- Procedure – Safe, Controlled Environment of Care
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The Contractor is responsible for compliance with NFPA 241, Standard for Safeguarding Construction, Alteration and Demolition Operations.

In the event of a fire or smoke at the worksite, contractors shall be familiar with the RACE procedures:

**R** Rescue people from immediate area if safe to do so.

**A** Alert people in area, Dial 455 to inform PBX (hospital operators) of the fire (dial 911 at offsite locations), pull the nearest fire alarm pull station

**C** Contain the fire by closing all doors in the area.

Shut-off gas cylinders at the work site being used for construction purposes only. Do not turn off oxygen or portable oxygen cylinders in areas where patients are located. The Person in Charge of the Department or the Emergency Response Team will assume these responsibilities.

**E** Extinguish the fire with an approved fire extinguisher with the current annual inspection tag attached. To operate a fire extinguisher, remember the word **PASS**:

- Pull the pin
- Aim at the base of the fire
- Squeeze the handle
- Slowly sweep the fire

Ensure the fire is extinguished. The Emergency Response Team will respond to assist in evacuation, firefighting activities or to direct the Albuquerque Fire Department to the incident location.

The Contractor will provide fire extinguishers at the construction site appropriate to the work being performed. The Contractor will ensure all subcontractors are trained in fire extinguisher use.

**Smoking is not permitted within the hospitals. Smoking is allowed only in designated areas outside the buildings on campus.**

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**FIRE ALARM ACTIVATION AND EVACUATION:**

When the fire alarms are activated within the construction site, construction workers will check the area to verify there is no fire or smoke causing the alarm activation. If fire or smoke is found, the fire plan (RACE procedures) will be implemented. All construction workers will evacuate the area through the nearest exit. A representative of the construction site will communicate pertinent information to the Emergency Response Team upon their arrival to the site. If no fire or smoke is found, the construction workers may remain on standby until the fire alarms are silenced. The Emergency Response Team will initiate evacuation if needed. Construction workers will follow the Emergency Response Team directions when evacuating.
**FIRE EXITS:**

Fire exits shall not be blocked. UNMH Life Safety, UNMH Safety, UNM Hospitals Facility Planning or Facilities Management will help ensure alternative fire exits are identified when construction obstructs the pathway for egress as required by Interim Life Safety Measures.

**SMOKE DETECTION DEVICES:**

Contractors will be responsible for replacing Smoke detectors with heat detection devices in the construction area to prevent false alarms from airborne dust. This must be done prior to the start of construction project and must be returned to smoke detectors upon completion of the project. Smoke detector covers, or any type of cover is prohibited. Contractors shall account for the number of devices changed at the beginning of work and at the end of work.

**FIRE PROTECTION FEATURES:**

Above ceiling work will be coordinated during the Risk Assessment prior to the start of the construction project. To limit the spread of fire and restrict the movement of smoke, fire and smoke compartments must remain intact. Where cable/wire penetrates a firewall or smoke barrier, the penetration must be filled with an approved NFPA fire stop material. Any wall extending floor-to-floor vertically and wall-to-wall horizontally will be considered a smoke barrier at a minimum. Fire doors may not be propped open at any time while work is being performed. See EOC permit information for further instructions.

The Contractor will provide at least 24 hour notice to the Life Safety Department and Facilities Management, for any work that will or may adversely impact the building fire alarm, detection, or suppression systems. In the event the fire detection, alarm or suppression system(s) is (are) disrupted due to negligence and/or failure to coordinate as required, the Contractor may be held liable for repair costs, and shall be required to assist in the execution of Interim Life Safety Measures, including providing personnel for a Fire Watch, if necessary.

Compartmentation: Integrity of fire and smoke compartments will be maintained in UNM Hospitals and off-site clinics at all times during construction.

**SECURITY:**

All Contractors and Sub-contractors must obtain identification badges from the Security Office prior to beginning work within the facility. To obtain a badge, the Contractor must first get signatures from the Facility Planning Project Manager, Plant Manager, or the Facilities Manager on an Access Authorization Form for each individual requiring access to the construction area. All badges can remain with the Contractors and Sub-contractors throughout the length of the project. If badges are not returned to the Security Office at the end of the project, the Contractors and Sub-contractors will be responsible to have them reactivated for any future projects. If a badge is lost during deactivation, the recipient will be charged a $50 replacement fee. The Project Manager is responsible to verify that all
Contractor and Sub-contractors working on the project are properly badged with current security badges.

It is the Contractors’ responsibility to secure equipment, tools and other valuable items prior to leaving the work site each day. Storage of materials will be determined by Facilities Management, Plant Engineering, or Facility Planning and the Contractor during the Pre-construction Meeting.

The Security Badging Office is located on the first floor, Main Hospital, North of the Urgent Care Clinic. The office hours are 7:30 A.M. to 3:00 P.M. Security can be contacted after 3:00 PM by dialing 272-2160 (dispatch).

Construction area keys shall be obtained through the Security Office. Contractors shall provide the Security Office with two sets of keys to areas that are locked by the contractor and are not keyed to the hospital lock system. A $10 fee per lost key and a $50 fee per lock to re-key or change a lock in connection with a key being lost or stolen. The Contractor will be charged for expenses incurred as a result of the loss or inappropriate use of keys issued. The contractor will be responsible for loaner keys until returned to the Security Department by the end of the work day issued.

Construction workers shall remain within the construction site. They are not permitted in other patient care areas of the hospital unescorted. Entrance to and exiting from the construction site will be discussed with Security, Facilities Planning, and Facility Management during the Preconstruction Meeting.

**PARKING:**

Construction workers and Contractors will park in designated parking areas only. Permits shall be obtained through the Parking Office. Please inquire through UNMH Parking Office, 272-4074, to obtain parking permits and updates on other parking related issues.

Parking is prohibited in green loading zones, blue handicapped zones and red fire lanes. Special parking (for debris removal, material deliveries, etc.) will be arranged on an individual basis through Facilities Planning, Facility Management and Security.

**PHYSICAL PLANT ACCESS:**

The Physical Plant area is restricted and may not be entered except by supervisory personnel needing to communicate with Facilities Management or Plant Engineering. Absolutely no material or tools are to be borrowed by outside contractors.

Access to Mechanical Rooms, Electrical Rooms and Telephone IT Rooms, is restricted Hospital personnel. Contractors requiring access to these facilities must coordinate with UNMH Plant Operations (272-2500). These rooms are to remain locked at all times. Propping doors open is prohibited.

UNM Hospitals Plant Operations, Maintenance and Utility Contacts

Plant Operations (Steam, Chilled Water, HVAC, Med Gas) 272-4304 or 272-2500
Plant Utility Management (Domestic water/sewer, plumbing and Electrical) 272-1070
General Maintenance (all building maintenance less plumbing and electrical) 272-0458

COMMUNICATION:

**Emergency Numbers**

<table>
<thead>
<tr>
<th>Location</th>
<th>Emergency Type</th>
<th>Dial #</th>
</tr>
</thead>
<tbody>
<tr>
<td>UH Main Hospital, BBRP, ACC</td>
<td>Fire</td>
<td>455</td>
</tr>
<tr>
<td>UH Main Hospital, BBRP, ACC</td>
<td>Medical Emergency</td>
<td>44</td>
</tr>
<tr>
<td>UH Main Hospital, BBRP, ACC</td>
<td>Security</td>
<td>457</td>
</tr>
<tr>
<td>Offsite UNMH Facilities *</td>
<td>Fire</td>
<td>911</td>
</tr>
<tr>
<td>Offsite UNMH Facilities *</td>
<td>Medical Emergency</td>
<td>911</td>
</tr>
</tbody>
</table>

* If the off-site telephone prefix is 277, 925 or 272, the phone is linked to the UNM campus and 911 calls will be answered by UNM Police Dispatch. You will need to provide the emergency information to the dispatcher who will then connect you with the City of Albuquerque emergency response.

**UNMH and UNMCC Key Facility Contacts**

<table>
<thead>
<tr>
<th>Facility Planning</th>
<th>Title</th>
<th>External</th>
<th>In-House</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bernie Loeffler</td>
<td>Executive Director, Facilities</td>
<td>250-4739</td>
<td>2-0021</td>
</tr>
<tr>
<td>Clay Gatewood</td>
<td>Director, Planning</td>
<td>249-5692</td>
<td></td>
</tr>
<tr>
<td>Jack Blenk</td>
<td>Manager, Facilities Planner</td>
<td>328-5488</td>
<td></td>
</tr>
<tr>
<td>Rodney Martinez</td>
<td>Financial Controller</td>
<td>925-6255</td>
<td>5-6255</td>
</tr>
<tr>
<td>Stewart Livsie</td>
<td>Facility Manager</td>
<td>272-0051</td>
<td>2-0051</td>
</tr>
<tr>
<td>John Couch</td>
<td>UNM Plant Operations</td>
<td>272-5070</td>
<td>2-5070</td>
</tr>
<tr>
<td>After hours call UNM PD</td>
<td>Dispatch</td>
<td>277-2241</td>
<td>7-2241</td>
</tr>
<tr>
<td><strong>Facilities Management</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Eric White</td>
<td>Life Safety Tech</td>
<td>463-4513</td>
<td></td>
</tr>
<tr>
<td>Ernest Lovato</td>
<td>Life Safety Tech</td>
<td>263-1652</td>
<td></td>
</tr>
<tr>
<td><strong>Environmental Services</strong></td>
<td></td>
<td>263-6305</td>
<td></td>
</tr>
<tr>
<td>Vince Adams</td>
<td>Manager</td>
<td>325-721-4102</td>
<td>5-0284</td>
</tr>
<tr>
<td><strong>Security</strong></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Felix Funes, UNMH</td>
<td>Manager</td>
<td>272-3857</td>
<td>2-3957</td>
</tr>
<tr>
<td><strong>Parking</strong></td>
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</tr>
<tr>
<td>Barbara Morck</td>
<td>Director Parking/Trans</td>
<td>277-1969</td>
<td>2-1969</td>
</tr>
<tr>
<td><strong>Facility Safety</strong></td>
<td></td>
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</tr>
<tr>
<td>Steve Villescas</td>
<td>Director, Facility Safety</td>
<td></td>
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</tr>
<tr>
<td>Mike Castleberry</td>
<td>Safety Specialist</td>
<td>272-4074</td>
<td>2-4074</td>
</tr>
<tr>
<td>Shemara Purto</td>
<td>Safety Specialist</td>
<td>925-7692</td>
<td>5-7692</td>
</tr>
<tr>
<td>Mark Blanco</td>
<td>Safety Specialist</td>
<td>272-0597</td>
<td>2-0597</td>
</tr>
<tr>
<td>Faron Valencia</td>
<td>Env Health &amp; Safety Tech</td>
<td>277-4964</td>
<td>7-4964</td>
</tr>
<tr>
<td><strong>Epidemiology (Pager 951-3000)</strong></td>
<td></td>
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</tr>
<tr>
<td>Claudia Tchiloyans,</td>
<td>Director</td>
<td>272-0131</td>
<td>730-1652</td>
</tr>
<tr>
<td><strong>Clinical Engineering</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Darren Shotwell,</td>
<td>Director, Clinical Engineering</td>
<td>272-2251</td>
<td>2-2251</td>
</tr>
</tbody>
</table>

The Contractor will provide to Facility Planning and Facilities Management Departments emergency phone numbers for off-hours construction site issues needing immediate attention.
REPORTING ACCIDENTS/INJURIES

Accidents resulting in OSHA recordable injuries to contractor personnel must be promptly reported to the UNM Hospitals Project Manager. The Project Manager will report the accident/injury to the UNM Hospitals Safety Department. The contractor will supply UNM Hospitals a copy of the accident report if requested.

UTILITY ISSUES:

Any shutdown of utility services must be coordinated through Plant Engineering and/or Facilities Management. **Two weeks’ notice is required** for all utility shutdowns including: Water, Medical Gas/Air, Sewer, Electrical, Ventilation, Fire protection systems (Fire Alarms, Sprinklers, Foam Systems, Fire/Smoke Rated walls and doors). The contractor shall provide a project schedule that will include anticipated utility shutdowns. This schedule and shutdowns will be discussed during the risk assessment. The project manager will coordinate these outages with the contractor and the hospital.

Ceiling tiles must be replaced prior to leaving the work site at the end of each workday unless documented arrangements are made with Facilities Management. **All smoke and firewalls, shafts, and floor openings must be patched using NFPA approved materials to maintain their integrity.**

**Electrical Safety:** At no time will a Contractor leave any electrical switch gear, panels or outlets open or exposed in a public area without having staff working on or guarding the electrical service exposed. Circuit breakers shall not be taped in the open position. Red Colored Outlets are not to be used by contractors.

MISCELLANEOUS:

**Restrooms**
During the Pre-construction Meeting, restroom facilities available for the construction staff will be designated. Portable restrooms shall be used, as patient rest rooms shall be off limits.

**Food**
No food will be authorized in or near the construction site. Construction personnel shall be allowed to carry bottled water on site only.

**Cell Phone and Photo Use**
Contractors will familiarize themselves with cell phone use and photo taking while working in healthcare facilities.

**Contractor’s Office**
During the Pre-construction Meeting, the Contractor, Facility Planning and Facilities Management will review Contractors’ needs for office space during the period of construction.
CONSTRUCTION RISK MANAGEMENT MEASURES

Contractors will adhere to 29 CFR 1926 Construction Standards
Contractors will adhere to 29 CFR 1910 General Industry

In accordance with The Joint Commission (TJC) requirements and the Guidelines for the Design and Construction of Healthcare Facilities, UNM Hospitals will assess and document mitigation efforts for likely issues relative to infection control, dust and debris, odors, noise, outages, which may develop during a construction project. The assessment process starts early in the planning stages for a project and is formally documented. A Pre-Construction Risk Assessment shall be conducted with the Project Team to familiarize the team with these risks, and required mitigation (if needed) during the construction period.

Construction documents and project manuals may also detail the required mitigation measures, particularly with regard to how dust-containment enclosures are to be provided by the Contractor. Most projects require some type of enclosure; others require more extensive measures. The extent of efforts required on the Contractor’s part, and how they are determined, are outlined on the OSHA Standard (Safety). Some highlights are noted below.

The Contractor is responsible for installing dust-containment enclosures for work as indicated and when required to protect areas occupied by patients from dust, debris and damage. Any penetrations to adjacent areas must be sealed. Dust-containment enclosures (floor to ceiling drywall or airtight fire retardant plastic barriers) must be inspected and approved by Epidemiology, pager 951-3000, Safety, cell 272-0327 and Life Safety, cell 463-4513.

The Contractor is responsible for supplying the appropriate signs, traffic cones, barricades hazard tape and accessories for identifying the construction area and to restrict entry. This will also include the hospital provided Construction Safety Poster. This applies to all projects, regardless of scope, size or duration. OSHA 1926 Subpart G: Safety and Health Regulations for Construction Signs, Signals, and Barricades.

The Contractor is responsible for ensuring that prior to construction; ventilation systems are isolated to prevent air re-circulation into patient care areas from the construction site. Return and supply grills may need to be sealed off to prevent re-circulation, or filters added. The Contractor will coordinate with Facilities Planning and Facilities Management to address ventilation issues prior to, during and after construction. Proper air exchange rates and pressure relationships in critical areas near construction must be maintained. Air quality will be evaluated at risk assessment and documented in paperwork.

Vibrations or disturbances may dislodge dust which has collected above suspended or false ceilings. Damp mopping should be used for dust control and cleaning. At a minimum, construction areas are to be damp mopped at the end of each workday. It may require more frequent damp mopping, as often as hourly, if visible dust is being generated. Clean mop and water are required at least daily or when water is dirty. Water will not be left standing in buckets.

Traffic should be minimized from construction area through patient care areas. Walk-off mats will be used to collect dust and prevent its spread to other areas of the hospital and clearly identified to prevent accidental tripping. Walk-off mats will be checked every hour and changed when sticky surface is becoming covered with dust/dirt. Walk-off mats will be changed more frequently as needed to prevent tracking in the hospital.
Debris transported through the hospital will be securely covered. Containers will be cleaned before entering the hospital and on exiting the construction site to prevent tracking in and out of the hospital. Transport should occur during lowest activity periods. Routing and timing will be coordinated with Facility Planning or Facilities Management.

The Contractor will follow any additional infection control requirements as indicated by any of the following: Project Manager, Epidemiology, Safety, Life Safety, or Facilities Engineering.

Noise
Construction noise transmits easily throughout patient care areas. Caution should be used when making loud noises and the probability of such disturbances should be communicated by the Contractor to Facility Planning in order to provide timely communication of such activities to the departments/areas affected. There may be times when noise and vibration disrupts a medical procedure and warrants a temporary shutdown of work. Only designated UNM Hospitals Facility Planning or Facility Management staff can authorize a work shut-down for this purpose. Details will be determined during the Pre-Construction meeting.
AM/FM radios, CD/tape players, amplified headphones are prohibited at the construction site.

Odors
The use of adhesives or other chemicals emitting strong odors must be reviewed with Safety prior to use in order for ventilation issues to be addressed. Cutting, welding, patching or other activities that emit odors will be coordinated with Safety, Facilities Planning and Facilities Management to minimize fire hazard and air contaminant infiltration into occupied areas.

GENERAL SAFETY

Inspections
The Contractor is responsible for ensuring the construction site is safely maintained and the workers are following the standards for personal protective equipment (PPE). The contractor’s site supervisor will conduct and document a daily site safety inspection using a checklist approved by UH Safety, Safety, Epidemiology, Plant Engineering and/or Facilities personnel will periodically inspect the construction site. Issues will be communicated to the Contractor through the Project Manager. SDS, and other construction documents, including the daily check list, are to be kept at the construction site and maintained in the project’s Blue Book. Check list are to be kept current. The contractor shall have their company’s Safety Plan on the jobsite and available.

Flammable Liquids
The contractor will notify the Project Manager prior to bringing or using any flammable liquids into a UNM Hospitals facility. If the contractor has prior knowledge of using flammable liquids during construction, the contractor will provide SDS’s at the Pre-construction meeting and the use of the flammables will be discussed. Work area must be secured during construction project. Storage of flammables is prohibited.

Storage of Combustibles
The contractor will notify the Project Manager prior to storing bulk combustibles at a UNM Hospitals.
Hazardous Chemicals
Whenever possible, nontoxic materials are to be purchased and used during construction. The contracting employer shall provide appropriate personal protective equipment (PPE) to the construction workers as needed.

Chemicals shall be properly stored when not in use. Storage of materials/chemicals is to be coordinated with Facilities Planning or Facilities Management and UNMH Safety Department.

The Contractor will ensure that a Safety Data Sheet is provided to the Safety Department for each chemical (solvents, adhesives, etc.) brought onto the worksite as required by OSHA Hazard Communication Standard. CFR 1910.1200 - SDS can be faxed to the UNMH Safety Department @ 272-0257

Cylinder Safety
All cylinders shall be properly labeled. All cylinders shall be kept in the upright position and properly secured. 29CFR 1910.253

Hot Work
All work involving welding, cutting or brazing equipment shall be required to have an approved permit on site and signed by UNMH Safety or UNMH Facilities Supervisor. The operator performing hot work and the supervisor of the hot work will be present at the risk assessment in order to issue the hot work permit. The hot work permit is to be posted in a conspicuous space at the construction site and a copy of the hot work permit shall be placed within the Construction Blue Book. The individuals responsible for authorizing hot work shall inspect the area before welding, cutting or hot work is performed. Combustible materials shall not be stored in areas where hot work occurs. Fire Watch listed on Hot Work Permit must be followed after Hot Work is completed. Work should be stopped one hour prior to the day’s end. 29 CFR 1910.252

Equipment Safety
The contractor will ensure safe operation of tools as stated in 29 CFR 1910 Subpart P-Hand & Portable Power Tools and Other Hand Held Equipment.

Housekeeping
The Contractor is responsible for ensuring the construction site is managed in order to maintain a safe environment. Debris shall not be allowed to accumulate and shall be removed at least daily and in such a manner to minimize dust at the construction site and during transport to the nearest exit. The Contractor is responsible for all construction debris removal and proper disposal. Wipe/clean carts and tools prior to bringing to construction site and when removing from site. All dust, dirt, and debris will be removed in covered containers. The Contractor shall supply covered container(s). The Contractor is required to make arrangement with Facilities Management for obtaining dumpsters as needed.

Personal Protective Equipment
Follow OSHA Regulations.
**OSHA Blood borne Pathogen Standard**
The contractor shall provide first aid kits for the construction workers in the event an injury occurs on the job. The injured employee will follow the accident/injury process according to their company’s policy and procedures.

In the event a needle or syringe or other infectious/hazardous waste is found in the construction area, the Superintendent of the construction workers shall call Environmental Services to safely remove the hazard and place it in the proper disposal container. 29 CFR 1910.1030

**Other OSHA Safety Program Requirements**
Contractors and subcontractors will adhere to the following OSHA Regulations & UNM Hospitals safety policies/programs. Contractors may be required to provide documentation of certification and or training of programs listed:

- Confined Space
- UNMH permit required
- Hearing Conservation
- Lock Out Tag Out
- Hazard Communication
- Personal Protective Equipment


**Project Managers**
Contractors shall coordinate regularly with the assigned UNMH Project Manager/Planner to facilitate the following Project Manager/Planner tasks:

1.) **Regular** site visits and sign off on calendar, worth frequency based on project specific needs.
2.) Periodic sign off contractors daily check list to ensure contractor has filled it out. Contractor shall regularly communicate work schedule to assigned Project Manager/Planner to help with scheduling of site visits.
3.) **Create a journal of project events** and issues as necessary i.e. mold, asbestos, etc.
4.) Document **observed** Infection Prevention, Life Safety, and Safety violations or any other issue and take corrective action, or contact the appropriate department to evaluate the issue.

**NOTICE TO CONTRACTORS:**
The Construction Risk Assessment process is your opportunity to ask any and all clarifying questions or to address any concerns that you have related to the project and how the Environment of Care may impact you as a contractor while you are on site. However, this is not your only opportunity. If at any time during the project you have a concern related to your health, safety, and welfare of your employees or sub-contractors, you can bring those concerns to the attention of the Project Manager at any time, and you are responsible for taking appropriate measures until such time that your concerns can be addressed. All questions and concerns whether addressed during the Risk Assessment process or during the project are to be documented in and acknowledged by a representative of UNMH in the Blue Book.
Facility Guidelines & Expectations for Contractors

UNM Hospitals Facility Guidelines & Expectations For Contractors

____________________
(Name of the General/Prime Contracting Construction Firm)

Hereby agrees to have all of the above-mentioned General/Prime Contractor employees and all subcontractor employees who are contracted by the above-mentioned General/Prime Contractor abide by the contents of these Facility Guidelines & Expectations for Contractors during the course of all construction operations at the University of New Mexico Health Sciences Center.

____________________
(Print Name)

________________________________________
(Authorized Construction Firm Representative Signature)  Date