

Guidelines and Instructions for Contractors



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SECTION 1: INTRODUCTION

1.1 INTRODUCTION AND OBJECTIVES

This document applies to all Contractors who work on the Facility grounds or within the Facility. It is not intended to replace the construction safety laws, regulations, codes and standards or any other legislation governing safety matters, nor should they be construed as an assumption of responsibility by the Facility. Each Contractor/Subcontractor must be familiar with all current legislation pertaining to the Work and will be responsible to follow and enforce such legislation. In case of conflicts regarding requirements, contractors must adhere to the most stringent requirement. The Contractor shall also ensure that copies of all relevant construction safety laws, regulations, codes and standards are accessible on the site at all times.

This guide is meant to supplement rather than replace the safety training and direction required to handle the specific safety requirements particular to the Work involved on the project. Each Contractor/Subcontractor must ensure that his/her workers receive the specific training and supervision required TO HANDLE any hazards particular to the Work.

This document is also intended to ensure that the work performed by Contractors meets or exceeds the outcomes that would be expected of a Professional Organization or Trades Person. All work conducted is to:

- Be performed to applicable legislative requirements;
- Be performed by knowledgeable trained technicians;
- Be completed to the standards of a first-class facility;
- Have the areas worked in left in a clean and useable condition.

The document is divided into three separate sections, the second section is meant to be a general orientation and to be read by all individuals working within the Facility or on the grounds. The Supporting Documents section provides additional information to aid in the completion of specific jobs such as welding, working in patient areas, or working on the roof.

This document shall be reviewed by both the ACML employees and Contractors together to ensure complete understanding of the following information.

SECTION 2: ORIENTATION

2.1 BUILDING SECURITY & ORIENTATION

Orientation

Site orientation & training will be provided by the ACML staff for areas and building systems that are applicable to the work being performed but will include no less than:

1. Site access and access routes
2. Hours of work
3. Parking
4. Emergency Code response
5. Site emergency contacts
6. Isolation and lockout procedures

Any Critical Equipment precautions will be communicated to the Contractor by the ACML Staff at the time of Orientation.

Security

If required, keys and/or access cards will be provided upon receipt of a driver's license or other form of picture ID along with Vehicle keys. Contractors are to only access areas that have been identified to them by ACML Staff as the work area.

Contractors are to ensure the following when entering access restricted areas:

- Ensure doors close and lock behind you.
- Do not permit tailgating, each person must use their access badge to enter the space in question.
- Exercise caution when working in lock down areas such as, the pediatric unit, or psychiatric area. Be aware of patients or other personnel congregating near the exit/entrance you intend to utilize as they may be intending on making an unauthorized entry or exit from the area. Approach and inform facility staff if this type of activity is noticed.
- Lost keys or access cards must be report immediately to the ACML Staff.

There may be a requirement that Contractors are escorted by a member of the ACML Staff in certain areas of the facility. In these cases, it is imperative that you remain with your escort at all times and follow their direction.

2.2 RULES OF CONDUCT

Every Contractor has a public relations obligation to demonstrate to the community that public resources are being used prudently, skillfully and responsibly. Every activity should demonstrate to the patients/residents and visitors that employees spend no more time on a task than is necessary, that each task is completed skillfully, thoroughly and without unnecessary noise or mess. Contractor actions shall not present a risk to others, as safety is ACML's number one priority. Contractors should always be courteous and helpful to patients, visitors and other staff members while in and around the Facility premises.

Occasionally Contractors may wish to borrow tools or have items that appear to be scrap such as plastic containers, wood scraps or wooden skids. The determination of what constitutes scrap rests solely with ACML Site Manager (or designate) and all items are considered ACML property until released by the Plant Services Department.

POLICY

1. Assist others whenever possible, for example, holding elevator doors and giving directions.
2. Present yourself in a courteous and cheerful manner.
3. Use a dust enclosure, if appropriate, when performing duties (Refer to the Infection Control section of this guide for requirements).
4. Position your tools and materials at the side of a corridor or public space for minimal obstruction.
5. Cordon off the work area so it is clearly marked and presents no risk to health and safety.
6. Try to undertake the noisiest tasks at a time when there is most general noise in the Facility.
7. Be happy and willing to explain the work that is in progress to any colleagues, patients/residents, or family members who may take an interest.
8. Do not start a task and leave it part way through; try to complete the task once it is started.
9. Never leave tools or equipment in a place that is accessible to patients/residents at any time in a lock down area, pediatric unit, or psychiatric area.
10. Do not leave debris lying around once a task is completed. Clean up immediately and/or arrange beforehand for the Facilities Housekeeping to give you a hand.
11. The staff member should obtain written approval from the Site Manager to borrow/remove an item for personal use.
12. When removing an item from the Facility property the Contractor must be able to demonstrate he or she has written permission.
13. Persons in unauthorized possession of any Facility property or ACML property will be subject to disciplinary action up to and including termination of employment / criminal charges.

2.3 ON SITE REQUIREMENTS

When on Facility property, Contractors and Subcontractors must ensure that they have the following, where applicable:

- A First Aid Kit that is adequate based on the type of work being performed and the regulations of all governing bodies is in the area of the work,
- Emergency phone numbers (including the Contractor's Project Manager or Operations Manager) are provided and posted on the site,
- If on-site for longer than two weeks, regular safety meetings (tailgate/tool box) are to be conducted and recorded. The Facility's ACML Representative, at their discretion and with prior notice, may request to join a tailgate/tool box or other safety meetings with the Contractor, Subcontractor or their agents.
- All paints, volatile liquids and other potentially hazardous substances are clearly identified as hazardous materials by means of proper labelling,
- All hazardous substances and materials shall be inspected frequently, and properly stored with a fire extinguisher adjacent to the storage area. If such hazardous materials are not in use, they shall be stored in a separate locked container,
- All accidents or near misses involving Contractors and Subcontractors, their agents or representatives are fully investigated, recorded with preventative measures identified and implemented. A copy of the report must be provided to the Facility.
- All Contractors, Subcontractors and/or their agents or representatives do not engage in any activity, process or work that may endanger the health and safety of any workers or members of this community, and
- All accidents where Facility employees are affected, the Contractor, Subcontractor or their agents and or representative must send a report to ACML representative on site.
- All contractor and subcontractor personnel must attend a contractor orientation session.
- All documented programs and schedules must be reasonably available. If the logbooks, WHMIS labels or any other safety requirements are found to be lacking, the Contractor, Subcontractor, their agents and/or representatives may be asked to leave the Facility property and this may constitute an event of default under any contract(s). It will be up to the Facility's ACML Representative or the Project Manager to determine whether the project shall continue. Contractors, Subcontractors, their agents and/or representatives will not be permitted to resume work on the Facility property until such time as they have proven compliance with all required safety requirements, legislation and practices. The Facility, ACML, or ISL Health will not be liable for any additional costs due to the stoppage of the work which would include, but not limited to, any increase in material, equipment and labour costs, overhead costs, contract costs, or delayed/extended duration costs suffered by the Contractor and/or any of its Subcontractors or Suppliers. ACML will not accept any type of delay claim charges. There will be no time extensions granted to the Contractor for

this type of delay and the Contractor will be expected to recover any lost time through the implementation of acceleration measures, the cost of which shall be to the Contractor's account.

- All Contractors, Subcontractors, their agents and/or representatives shall remove flammable material or rubbish promptly from the premises. If removal is unavoidably delayed, the potential for fire shall be reduced by wetting down flammable material and/or rubbish.
- Disposing of waste material by burning on or near the Facility premises is not permitted.
- All rubbish shall be cleaned up and removed into containers and the removal of such containers and disposal off the site, including dumping fees, will be the responsibility of the Contractor or its Subcontractors. Any contaminated or hazardous materials and designated substances will be disposed of according to local and provincial codes and bylaws and the requirements of the Ministry of the Environment. Notification of such disposal must be provided to the Facility, together with copies of all supporting documentation.
- The Contractor and any Subcontractor shall inspect and detect temporary wiring, drop cords or temporary extension cables frequently for defective insulation or connections.
- All temporary wiring shall be removed after completion of the project and all wiring must be in accordance with building codes and relevant safety requirements.
- The Contractor and any Subcontractors are responsible for ensuring that all precautions are taken to prevent overloading of any part of the structure/temporary structures, false work or scaffolding during operations. If doubt exists, necessary approval must be obtained from the appropriate inspector from the WorkSafeBC or other Governmental Agency.

2.4 UNIFORMS, IDENTIFICATION AND HYGIENE

ACML requires all contractors to demonstrate professionalism and good judgment at all times relating to physical appearance in the workplace.

POLICY

1. For security reasons contractors are required to wear a uniform (a distinctive outfit to identify those who wear it as employees of the Company) or clothing suitable for the nature of work. Wearing a dirty, torn, frayed or modified uniform is not acceptable attire.
2. Contractor Badges must be visible and affixed to a break away lanyard to prevent strangulation risk. Log sheet must be kept in the facility management office which identifies the contractor(s) on site.
3. Contractors may not wear baseball caps while on the Facility, except in particular circumstances, such as working outdoors on the grounds, as permitted by the ACML Site Manager.
4. All footwear must be CSA #1 safety shoes or boots, Safety footwear is to be worn at all times while working within the facility premises.
5. Due to close contact with occupants, patients and other staff, contractors are to maintain their personal hygiene and cleanliness.
6. The use of strong, heavy scents and fragrances is not permitted to protect those with allergies.
7. For safety reasons, hair shall be worn in such a way as to not obscure vision; hair must be pulled back and secured away from the face. Hair must be kept clean and neat at all times.
8. For safety reasons, hand jewellery must be limited to a smooth band without projections or mounted stones.
9. Any intentional body alteration that detracts from a professional image is prohibited. Examples include but are not limited to: visible tattoos, body piercing (other than traditional ear piercing for men and women), tongue splitting, earlobe expansion, etc. Tattoos must be discreet and covered at all times. For safety reasons, jewellery, spacers, retainers, or plugs are not permitted in any body piercing while working.
10. Any Contractor staff not in accordance with the provisions of this policy will be sent home and directed to return in attire that complies with this policy.
11. Contractors should discuss with the ACML Site Manager or Supervisor if they believe they require an accommodation to this policy on the basis of race, religion, ethnic origin, disability, etc. ACML respects cultural diversity and supports the wearing of cultural or religious attire, while maintaining compliance with employee and tenant safety.

2.5 GENERAL SAFETY REQUIREMENTS

Definitions

Employer/Contractor:

Section 1(1) Occupational Health and Safety Regulation, 1990 “employer” means a person who employs one or more workers or contracts for the services of one or more workers and includes a Contractor or Subcontractor who performs work or supplies services and a Contractor or Subcontractor who undertakes with an Owner, Constructor, Contractor or Subcontractor to perform work or supply services.

Constructor:

Section 1(1) Occupational Health and Safety Regulation, 1990, “Constructor” means a person who undertakes a project for an Owner and includes an Owner who undertakes all or part of a project by himself or by more than one employer.

Project Representative:

“Project Representative” means the person who is designated to act on the behalf of the building Owner. This person may be a representative of ACML or ISL Health and shall be considered to be the Project Manager. If a Project Manager has not been assigned, the person arranging for the Contractor to perform work on the grounds shall be considered the Project Manager.

Requirements

- The Contractor shall ensure the safe operation and completion of projects at the Facility. Where there is a disagreement as to the meaning of legislated requirements and practices, WorkSafeBC and applicable codes and regulations may be called in to render an interpretation.
- The Contractor shall comply and cause all of its Subcontractors and Suppliers to comply with all applicable provisions, requirements and safety standards of the British Columbia Occupational Health and Safety Regulation (OHSR) and regulations thereto, WorkSafeBC, the Ministry of the Environment and other ‘Authorities Having Jurisdiction’.
- The Contractor shall be designated and hereby accepts the responsibilities and designation as “Constructor” under the Occupational Health and Safety Regulation on the Project. The Contractor assumes all liabilities and obligations imposed on a “Constructor” by the Occupational Health and Safety Regulation and any other governing body. In the event that the Contractor is not the “Constructor” for the project the Contractor shall follow the directions of the designated “Constructor” for the project. Refer to Appendix F.
- The Contractor shall perform all obligations of the “Constructor” within the meaning of the OHSR, and shall be solely responsible for safety at the Place of Work and for compliance with the rules, regulations and practices required under the OHSR. The Facility will contractually require other contractors or the Facility’s own forces to comply with the Contractor’s health and safety program and instruction, and the Contractor, as

“Constructor”, will have the right to direct the other contractors and the Facility’s own forces, and to remove them in the event that they do not comply with the Contractor’s health and safety program and safety instructions.

- The Contractor shall ensure that they implement safety programs and procedures and train all staff, subcontractors and suppliers on safety requirements applicable to the type of work being performed. This would include but not be limited to items such as falls arrest, confined work space procedures, welding or hot work procedures, working with compressed gases, working with chemicals or other toxic substances, the need for and proper use of personal protective equipment as required by the Occupational Health and Safety Regulation.
- It is the responsibility of the Contractor to ensure that his/her employees are fully instructed and trained in the legislated and Facility Safety Regulations and Practices prior to commencing any work.
- Prior to commencement of the Work, the Contractor shall submit to the Facility’s ACML Representative a copy of the completed Notice of Project that has been submitted to WorkSafeBC or any other Authorities Having Jurisdiction.
- The Contractor shall indemnify and save harmless the Owner, together with the Owner’s agents, officers, directors, employees, consultants, successors and assigns from and against any and all safety infractions and other liabilities under the British Columbia Occupational Health and Safety Regulation and regulations thereto, including the payment of all fines and legal fees on a solicitor and client basis. The Contractor shall ensure that the design details of critical elements such as temporary construction, form work, scaffolding and the use of lifting equipment and its supports shall be approved and stamped by a professional engineer.

2.6 THEFT, FRAUD, CORRUPTION AND NON-COMPLIANT ACTIVITIES

The goal of ACML is to ensure the highest standard of ethical conduct from our contractors while working in the facility. All contractors are required to act with integrity, trust, honesty and practice ethical behavior.

Contractors have the responsibility to conduct themselves in an appropriate manner and report any irregularities. Contractors are to utilize the “newspaper test” or “News Media Test” to provide guidance on ethical behavior that being, when considering whether an action is ethical, decide how you would feel if that action was reported on the internet or in the Local or National newspaper. How would your family feel and react to your actions that they read about on the internet or in a newspaper article.

To ensure best practices, Contractors are responsible for reporting all unethical conduct and irregularities. Individuals reporting shall take precautions to maintain strict confidentiality and avoid all situations that may result in the communication of mistaken or unfounded accusations or alert suspected perpetrators to an impending investigation.

Once reported, ACML will co-jointly work with Northern Health’s Incident Management System (IMS) structure to investigate, prevent recurrences, and reduce incidents. If allegations of misconduct are found to be accurate, disciplinary actions may be taken.

It is the responsibility of all Contractor employees to review this requirement and all related documents prior to working on-site.

Contractor Supervisor is responsible for the following:

- Report any professional misconduct to the ACML site manager (or designate) and discipline the employee(s) as required.
- Ensure all employees are educated regarding irregularity risks and controls, as outlined in the ACML guidelines, policies, and procedures
- Review all internal irregularity control procedures

Contractor Employees are responsible for the following:

- Follow all guidelines, policies, and procedures as outlined in this document
- Act in good faith when reporting irregularities
- Ensure all concerns of irregularities are reported
- Cooperate with all investigations

2.7 GENERAL CONDITIONS, RULES AND REGULATIONS

Policies and Procedures

The Contractor, their employees and staff and the staff of sub-trades and suppliers are to comply with all of the Facility's policies and procedures.

Permits

Unless otherwise agreed upon, the Contractor is responsible for applying and paying for all the necessary permits and any refundable and damage deposits associated with performing the work.

Health Screening

The Contractor warrants that all staff, the staff of sub-trades and suppliers in attendance or working on the Facility premises have met the Public Facilities Act regarding surveillance protocols and health reviews including but not limited to self-screening and being symptom free.

Access and Access Routes

All Contractors and their employees will enter and leave the Facility through entrances specified. The Contractor's employees', Subcontractors, agents or representatives must not go into any area other than those areas in which they are working, or any other area without the approval of the Facility's ACML Representative. Workers availing themselves to vending machines, cafeteria, toilet facilities and any other public areas must abide by all posted signs, keep to marked aisles, and take the most direct route.

Designated Substance

All Contractors must review the Designated Substances Report(s) prior to undertaking demolition of an area or commencement of work in the area. Special care should be taken at all times during work activities that could disturb ACM (asbestos containing materials), other hazardous and designated substances. All Contractors will be required to execute a "Contractor Notification Form" indicating that they will comply with all requirements concerning the exposure to and handling of any "designated substances" including asbestos containing material (ACM).

Parking

The Contractor, Subcontractors and their agents or employees are not exempt from parking charges and/or fees when parking on Facility grounds.

All parking regulations are to be observed.

Exemption of designated parking will only be allowed for the Contractor's work equipment and must be pre-arranged with and approved by the Facility's ACML representative.

Smoking

Smoking is NOT permitted on the Facility property or it's grounds.

Good Work Practice

Good work practice must be followed and it is the responsibility of the Contractor and Subcontractors to ensure that;

- Dirt and debris are not tracked throughout the facility especially on the floors,
- Locked doors are kept locked. If additional locks are used, Protection Services is to be provided with a key. Locked doors and/or fire doors are not to be propped open.
- Extension cords, power cords for equipment and tools, materials and tools do not create a tripping hazard,
- Equipment and materials are left in a safe manner during break periods and at the end of shifts. The Facility, ACML or ISL Health is not responsible for stolen tools or supplies. When working in an area with vulnerable patients, tools should not be left unattended and when not in use must be locked away.
- Areas within and outside of the area of construction are properly protected during construction from dirt and debris. Measures such as impermeable barriers, blockage of exhaust vents, ventilating the area of construction to the exterior, creating negative pressure within the area of construction and proper protection of materials being moved throughout the facility per Infection Control Guidelines are to be employed as required.
- All corridors, walkways and doorways must be kept clear at all times. Accumulation of garbage and rubble will not be permitted. All debris and salvaged material is to be removed by the Contractor through the designated areas. Contractors are to provide their own garbage bins/containers. The Housekeeping Manager must agree upon location of garbage container/bin which must meet Infection Control Guidelines.
- All areas of work are kept in a clean and tidy condition.
- Upon completion of the job, the Contractor must ensure that the site is cleaned to the satisfaction of the Project Manager and unless specific arrangements to the contrary are made, all Contractors are required to arrange for removal and disposal of their own refuse.

Work Schedule and Notice

Prior to starting any construction, the Contractor must provide a work schedule and advise the ACML Project Manager two weeks before the proposed work starts. In the event of evening or night emergency Call-Out work the Contractor, Subcontractor and/or their agents or Tradesmen must report to the ACML Shift Operator (through Communications/Security).

Disruption of Service

If it is necessary to disrupt any Facility services for construction or installation purposes, the Contractor must complete a Disruption of Service Application/Notification Form and submit it to the ACML Project Manager two weeks in advance of the required disruption. A copy of this form is provided in Appendix A1.

Work requiring the disruption of services or tie-ins to existing infrastructure will be performed outside of normal working hours. The Contractor is responsible for all costs associated with afterhours work involving service disruptions and tie-ins.

Drilling

Special precautions must be taken before the drilling of walls, ceilings and floors to ascertain the location of conduits, electrical cables, water lines, gas lines and other services. Scanning and/or X-Ray of slabs and walls are to be undertaken by the Contractor at their expense for this purpose.

Structural Integrity

The impact to the structural integrity of the building and/or any of its components is to be assessed prior to any cutting and/or coring taking place. This review will be undertaken by the Facility's Engineer at the expense of the Contractor's. The Contractor will provide to the Facility's Engineer all relevant information from scanning and or x-raying.

Fire Integrity and Fire Alarm

The integrity of all fire separations/barriers and fire zones is to be maintained at all times. Any penetrations through or changes to separations are to be sealed/corrected/reinstated as required by all Authorities Having Jurisdiction and the Facility. All fire stopping is the responsibility of the Contractor and the methods or means for fire stopping must comply with all applicable codes and bylaws and maintain the applicable rating.

Fire alarm devices are to be protected during the course of construction. When required, due to the nature of the work being performed, the Contractor will arrange for a bypass on the fire alarm system. Bypasses shall be reinstated at the end of the shift. If due to the nature of the work or condition of the space it is not possible to reinstate the fire alarm system, the Contractor shall, at their expense, post a fire watch to the satisfaction of the Project Manager.

If in the course of the work, a false fire alarm is triggered, the Contractor will be charged \$2,000 per occurrence.

Roof Access

Access to roof areas is prohibited without the approval of the Facility's ACML Representative. A roof access permit is required prior to accessing any roof areas (refer to Appendix A3). The Contractor must supply their own fall protection equipment and follow proper work procedures, cautionary and protective measures as defined by the OHSR (Occupational Health and Safety Regulation).

Damages

If any of the ACML's equipment or services is damaged by the Contractor during the course of their work, the Contractor is to immediately notify the Facility's ACML Representative. No attempt at repair is to be done without the approval of the Project Manager.

Work Outside Normal Hours

Whenever the Contractor is to perform work outside of normal hours, prior arrangements must be made with the Project Manager.

Facility's Tools and Systems

Use of Facility tools and equipment is not allowed unless by special permission from the Facility's ACML Representative.

Contractors are not allowed perform work on the Facility's systems and/or enter service rooms (such as electrical, mechanical and communications rooms/closets) without the permission of the Project Manager.

Cost Plus Tracking

For Contractors who perform cost plus work, daily time sheets must be submitted to the ACML Representative in charge of the project.

2.8 POST CONSTRUCTION MEASURES

Prior to the admittance of patients, completely clean the construction area according to the Infection Control Contractor Guidelines.

Conduct a final walk-through with the Consultants and the Project Manager to ensure that the ventilation system is functioning properly in the completed construction area.

Walkthrough with JOHSC member, Infection Control representative, Plant Operations and Maintenance and Occupational Health & Safety Representative.

2.9 WORK STATEMENT AND SERVICE REPORT REQUIREMENTS

Work Initiation

- Contractors will provide a work plan detailing
 - (1) Scope
 - (2) Methodology
 - (3) Schedule (if required)
- All work must have a written Work Order and/or Purchase Order issued by ACML.
- All work affecting or potentially affecting a system's uptime will be scheduled through ACML Site Manager.
- Any deviations from the approved work scope must be evaluated prior to work performance. Changes affecting safety or risk will be re-scheduled through the ACML Site Manager / Project Manager.
- Use of the dock and storage of equipment, materials and tools will be discussed with the ACML Site Manager / Project Manager prior to start of a project. Agreement will be reached on hours of loading/unloading, duration of dock use, and storage arrangements.

Upon Completion of work

Contractor service reports shall include at a minimum the following information:

- Name of the Company;
- Name (s) of service technician who performed the work;
- Date and Time the work was performed;
- Name designation of the equipment that was worked on;
- Test parameters if applicable i.e. GPM, CFM, voltage, amperage;
- Parts used and indicate if supplied by Vendor or from site stock;
- Recommendations for additional service;
- Changes made to any settings/parameters must be noted as either temporary for testing or permanent;
- Signature of the service technician in charge of the service;

The completed work shall be inspected by a member of the ACML operations team to ensure:

- Work meets the work order or Purchase order requirements
- Work area is left in a clean and acceptable state
- Work area is left in a safe condition.

2.10 EMERGENCY CODES

The following are Codes that may be announced over the Facilities Public Address (PA) system. When you hear the announcement of a Code over the PA system follow any instructions that may be given. There will be times in which only the Code and a location is given which is intended for action of the Facility Staff. In this case continue on with your work. If you have any concerns bring them to the attention of the Manager or Supervisor of the Operations Team.

| CODE | INCIDENT |
|-------------|---|
| Black | Bomb Threat |
| Blue | Cardiac Arrest |
| Brown | Hazardous Spill |
| Green | Evacuation |
| Grey | Loss of Essential Services / External Air Exclusion |
| Orange | Disaster / Mass Casualties |
| Red | Fire |
| Yellow | Missing Patient(s)/ Resident Abduction of Infant |
| White | Violent/Aggressive Situation |

SECTION 3: SIGN-OFF

3.1 LEGISLATIVE COMPLIANCE – HEALTH AND SAFETY

Prior to being awarded a Contract, Contractors must indicate in writing, if requested to by the Facility's ACML Representative, compliance with all legislative requirements and that the following are in place:

| Item | Required / NA | Complete | ACML Initials |
|---|---------------|----------|---------------|
| 1) A written safety policy posted and circulated to all employees | | | |
| 2) Proof of good standing in accordance with the WorkSafeBC. The information must include rate, class number and the company WCB number. The Contractor will provide copies of this information upon request, and at the very least, at the beginning and end of the Project. | | | |
| 3) A Joint Health and Safety Committee (if required by legislation) and/or an appropriately certified Safety Representative/Officer | | | |
| 4) A list of certified Joint Health and Safety Committee members (if required by legislation) | | | |
| 5) A schedule of regular site inspections and corresponding site reports for each inspection | | | |
| 6) A list of trained first aid providers (if required by legislation) and copies of their relevant certification | | | |
| 7) A schedule ensuring that all employees are trained in WHMIS requirements, spills response, and asbestos awareness | | | |
| 8) A logbook outlining that an equipment maintenance/inspection program for equipment has been implemented, enforced and documented | | | |
| 9) Protective equipment for employees and employees must be trained in its proper use and maintenance of protective equipment | | | |
| 10) Copies of Safety Data Sheets (SDS) for all products utilized | | | |
| 11) Adequate fire extinguishers will be provided by the Contractor and shall be kept on site for specific projects such as welding and cutting | | | |

3.2 LETTER OF UNDERSTANDING AND ACCEPTANCE

Prior to commencing any project on the Facility property, the Contractor must sign and date this page indicating that they have read and understand the contents of the required parts of this document, as checked in the below table, and accepts the liability and responsibility outlined herein and will comply with the terms and conditions outlined. The Contractor will also provide the required documents checked in the below table. By signing below, the Contractor confirms that there no restricted persons (as defined in Appendix 8) among his team to work on the Facility. A signed copy of this page must be kept readily available on the site for any contractor performing work at the facility

| Scope of Service | Item | Required / NA |
|------------------|---|---------------|
| | Documentation to be provided: | |
| | - Work Safe BC clearance certificate | |
| | - Certificate of Insurance (see Appendix 7 for details) | |
| | - Employee Criminal record check | |
| | - Health and Safety related documents (see section 3.1) | |
| | Sections of the Guidelines and Instructions for Contractors to be read and understood by the Contractor: | |
| | - Section 1 – Introduction (page 4) | |
| | - Section 2 – Orientation (page 5 – 18) | |
| | - Section 4.1 – Infection Control (page 23 – 36) | |
| | - Section 4.2 – Chemical Safety (page 38) | |
| | - Section 4.3 – Work Site Isolation (page 39) | |
| | - Section 4.4 – Welding and Cutting Equipment Procedures (page 40) | |
| | - Section 4.5 – Hot Works Permit (page 41-42) | |
| | - Section 4.6 – Operations of Vehicle on Facility Property (page 43) | |

Contractor Name: _____

Signature: _____

Company Name: _____

Date: _____

Phone Number _____

ACML Representative: _____

Signature: _____

SECTION 4: SUPPORTING DOCUMENTATION

4.1 INFECTION CONTROL

4.1.1 INTRODUCTION

The goal of this document is to provide an overview of the components in the Health Canada and CSA guidelines and offer a tool to assess risk, in order to prevent nosocomial infections associated with construction and renovation. The primary objectives are:

To control the level of dust generated to a minimum and
To protect patients from being exposed to potential disease-causing microorganisms.

4.1.2 POLICY

All workers at the Facility must use Routine Practices for the prevention of transmission of disease. These include hand hygiene upon entering and leaving a patient or treatment room. Additionally, Contractors, Subcontractors and their agents will ensure that staffs working on site at the Facility have met the requirements of the Public Facilities Act regarding surveillance protocols and health reviews. Works will self-screen and be symptom free prior to entering the Facility premises

If required to work in an active patient room/area, Contractors, subcontractors and their agents are required to check in at the nursing station prior to or upon entering the work area. The nursing staff will outline any additional precautions that must be taken when working in the room/area, in consultation with Infection Control.

Additional precautions are necessary to reduce risk of exposure and infection during construction, particularly from organisms spread in dust (airborne), water leaks (moulds) or stagnant water.

Contractors, Subcontractors and their agents must adhere to the most stringent standards, guidelines and/or practices as outlined in the following documents:

CSA Z317.13-12 December 2012 Infection Control during Construction, Renovation and Maintenance of Health Care Facilities

Health Canada Construction Related Nosocomial Infections in Patients in Health Care Facilities 2001

CSA Z317.10-F01(C2006) Handling of Waste Materials in Health Care Facilities and Veterinary Health Care Facilities

CCA 82 Mould Guidelines for the Canadian Construction Industry
Public Facilities Act

4.1.3 GENERAL

Read and be governed by the conditions of the Contract/Purchase Order, Supplemental General Conditions to the Contract, Division 1 of the Specifications (if applicable) and the above referenced documents.

All Contractors, Subcontractors and their agents are to be familiar with the above referenced documents. Prior to commencement of a project within the Facility and in conjunction with the Facility's ACML Representative and Infection Control Practitioner the Contractor will complete a risk assessment matrix. The Contractor shall utilize the Risk Assessment and Preventive Measures

Checklist in the completion of the matrix. The determination of risk will guide the need for barriers and other infection control measures and procedures to be in place during the project. The Facility's ACML Representative will communicate all findings of the assessment to the Contractor, who will implement all required precautions at no additional charge to the Facility. A copy of the completed and agreed upon matrix is to be provided to the Facility's ACML Representative and Infection Control Consultant along with a detailed description of the Infection Prevention and Control measures to be undertaken including but not limited to methods for dust containment and removal of construction debris.

The Contractor shall provide staff, Subcontractor, Suppliers, workers, own forces, or anyone for whom the Contractor may be responsible, with training on Infection Prevention and Control Procedures and Measures. Prior to commencement and during the course of the work, as required, the Contractor shall promptly provide the owner with written confirmation of such training by way of a certificate issued by a recognized company.

During the course of the Work, the Infection Control Consultant/Practitioner may require an additional risk assessment to be undertaken by the Contractor to ensure compliance related to the specifics of the Project.

The Facility's ACML Representative is to ensure that Contractors, Subcontractors and their agents are aware of the existence of this document and its contents.

The exact location, the type of construction activity, and the start and end dates of the construction work (where possible) is to be identified by the Contractor.

Infection Prevention and Control is to be notified, where appropriate, of meetings held by Contractors, in order to discuss new and existing concerns resulting from the project that may be pertinent to their respective areas, as the project progresses.

Patient populations that may be at risk are identified. Prior to each project, Infection Control and Occupational Health in conjunction with the Project Manager and the Contractor are to conduct a risk assessment of the activity to be performed along with the details of the project to determine the appropriate measures to follow, and to jointly determine a strategy.

Prevention procedures and measures to be undertaken when essential services (e.g., water, ventilation systems, electricity) are disrupted are provided by the Contractor.

The integrity of the Facility's exterior structure, spatial separations, ventilation, and water supplies

for any infection control problems are to be reviewed and assessed prior to the commencement of construction.

Prior to the commencement of construction traffic patterns for construction workers, construction activities, and supply delivery routes will be established to minimize risk to patients, staff, and visitors per the Facility's requirements and as indicated. Patient traffic should be redirected away from construction work sites.

Whenever possible, dedicated elevators will be made available for workers working in dust-generating activities. Otherwise, elevators used in conjunction with construction work shall be cleaned and disinfected following each usage.

The need for increased filter changes during construction is reviewed and determined prior to the commencement of construction.

The need to close down dampers temporarily to reduce circulation of contaminated air or fumes is assessed, in consultation with Project Manager, and implemented prior to the commencement of construction.

The Contractor will undertake all work required to ensure that air handling systems can provide the correct air exchange rates and pressure relationships in critical areas within and adjacent to the area of construction.

Disinfecting and cleaning requirements will be established at the initial stage of the Project.

During construction Infection Control Consultant/Practitioner will enhance surveillance as appropriate. Field review of the work will be conducted on a regular basis with the Contractor as necessary.

Breaches in Infection prevention measures that place staff, visitors and/or patients of the Facility at risk may result in "stop" construction order.

4.1.4 **IMMUNIZATION**

Personnel working within the Facility are at an increased risk of contracting vaccine-preventable diseases through their direct/indirect contact with patients. In an effort to reduce the risk of communicable and infectious disease, all Contractors must be immunized in accordance with WorkSafeBC and as recommended by Public Health Authorities prior to employment. This is to ensure the safety of employees, patients, and Facility staff.

POLICY

1. The following immunizations are currently **recommended** by BC Centre for Disease Control for all ACML employees and their Contractors working within a health care setting:
 - Tetanus/Diphtheria
 - Rubeola (Measles)
 - Mumps
 - Varicella (Chickenpox)
 - Rubella (German Measles)
 - Baseline Tb Skin Testing (as recommended by WH&S)
2. As per Northern Health's "Influenza Control Program Policy" all ACML employees and Contractors must be vaccinated annually against influenza or wear a surgical/procedure mask during influenza season when in a patient care area. During an influenza outbreak, this mask- wearing requirement is suspended and standard policies regarding exclusion and the use of anti-viral medications will apply. If employees do not obtain immunization annually, they may be excluded from work in the event of an influenza outbreak in the facility.
3. Proof of vaccination must be provided to the ACML Site Manager.
4. Any changes to a contractor employee's immunization status must be sent to the ACML Site Manager

4.1.5 ROUTINE PRACTICE

Contractors must follow “Routine Practices” when working in, the patient care environment or in close proximity to patients. These practices should include;

1. Following the directions of the patient care team,
2. Following the directions of the facility operations team
3. Using the proper personal protective equipment
4. Maintaining proper hand hygiene.
5. The following are “Routine Practices” to prevent contact with blood, body fluids, secretions, and extractions

Routine Practices are infection prevention and control practices designed to reduce the risk of blood and body fluid exposure to workers and to prevent and control contamination and transmission of microorganisms in all healthcare settings. Precautionary techniques taken to prevent the spread of infection require the maintenance of a clean, safe environment and regular use of Routine Practices supplemented where appropriate with the Transmission-based Precautions of Contact, Droplet, or Airborne.

It is the responsibility of Northern Health to provide the basic barrier supplies from the Central supplies/stores. These supplies are to be placed inside the isolation anterooms or outside Transmission Precautions rooms in carts.

POLICY

1. Contractors will be trained on the use of “Routine Practices”. This training will be conducted by a qualified Infection Control Practitioner.
2. Hand Hygiene shall be conducted as outlined in the “Hand Hygiene” policy. Hand hygiene can be performed by using soap and running warm water or by using alcohol-based hand run. Hands must be cleaned:
 - A) After any direct contact (skin to skin) with a patient or their environment and before contact with the next patient. The need for hand washing after casual contact unrelated to patient care should be judged on an individual basis.
 - B) Before and after contact is made with any patient or their immediate environment
 - C) After contact with blood and body fluids
 - D) After contact with equipment, fomites that are considered likely to be contaminated with blood, body fluids, secretions (e.g. bedpans, urinals, wound dressings).
 - E) Before putting on gloves and immediately after removing
 - F) When hands are visibly soiled, wash with soap and water
 - G) After personal use of toilet or wiping nose and before eating
3. The use of Personal Protective Equipment (PPE) will vary based on the risk assessment of staff interaction with the patient and the patient condition:

A) Gloves

- (1) Gloves are not a substitute for hand washing.
- (2) Clean, non-sterile gloves should be worn for direct contact with blood, body fluids and secretions
- (3) Gloves should be removed /changed after leaving patient rooms and/or the end of the task.
- (4) Hands should be cleaned with ABHR if not visibly soiled or washed with soap and water

B) Mask, Eye Protection, Face Shield

Are to be worn to protect mucous membranes of the eyes, nose and mouth during procedures where splatters or splashes of body fluids or blood are anticipated for example repairs to toilets or drain lines and cleaning up floods.

C) Gowns

Routine use of gowns is not recommended. Gowns are to be worn when splatters or splashes of body fluids to clothing is likely for example repairs to toilets or drain lines and cleaning up floods.

4. Contractors must follow the following Precautions when working within the patient care environment. A flowchart of the decision-making process can be found in "Appendix "6E-1". This flowchart should be used as reference, when in doubt contact the ACML Site Manager or Supervisor.

Contact Precautions

Contact Precautions include direct and indirect contact. Contact Precautions are required when Routine Precautions are not sufficient to control transmission.

Direct Contact occurs when transfer of microorganism result from direct physical contact between an infected or colonized individual and a susceptible host.

Indirect Contact involves the transfer of microorganisms to a susceptible host frequently by contaminated hands that are not washed between patients, or that have been in contact with a contaminated instrument or object in the patient's environment.

Precautionary Measures**1. Gloves**

- (a) Should be donned before entering the patient's room and removed before leaving the room.
- (b) Wash hands or apply Facility approved waterless hand antiseptic.

2. Gowns

- (a) Gowns should be worn when having direct contact with patient or

- patient's environment.
- (b) Gowns should be removed before leaving the room.

3. Hand washing

- (a) Wash hands after removing gown and gloves and before exiting patient's room.
- (b) Hands must be washed with soap and water or Facility approved waterless antiseptic before leaving the patient's room.

Droplet Precautions

Droplet transmission is a form of contact transmission. Droplet transmission refers to large droplets, 5 mm in diameter, generated from the respiratory tract of a patient during coughing or sneezing. These droplets are propelled a short distance (<1meter) through the air.

Some organisms transmitted by this route are very fragile, and do not survive in the environment of the patient or on hands. Other organism's expelled; especially respiratory viruses remain viable in droplets that settle on objects for a long period of time.

Precautionary Measures

1. Masks

- (a) The type of mask worn will depend on the activity to be performed. A Facility approved procedure mask is to be worn by all Facility Workers when entering the room.

2. Eye Protection (goggles, face shields)

- (a) Eye protection should be worn upon entering the room.

3. Gloves

- (a) Should be donned before entering the patient's room.
- (b) Gloves must be removed before leaving the room.
- (c) Wash hands or apply the Facility approved waterless antiseptic before leaving the room. The patient's washroom should not be used to wash hands.

4. Gowns (to be worn if contamination with secretions is likely, not required)

- (a) Gowns should be worn upon entering the room and discarded before leaving
- (b) Gowns are single use only.

Airborne Transmission

Airborne transmission refers to dissemination of microorganisms by aerosolization. Organisms are contained in droplet nuclei (airborne particles < 5m) that result from evaporation of large droplets, or in dust particles containing microbial debris, that remain suspended in the air for long periods of time. Such microorganisms are widely dispersed by air currents and inhaled by susceptible hosts. Controlling airborne transmission requires control of airflow through special ventilation systems.

There is evidence for airborne transmission from source patients with Mycobacterium Tuberculosis, Varicella zoster in an immunocompromised host, and measles (rubeola).

Precautionary Measures

1. Personal Protective Equipment (PPE)

A) Masks

- (1) High-efficiency submicron filtration masks for all who enter the patient's room.
- (2) The mask should filter particles one micron in size, and have a 95% filter efficiency, and provide a tight facial seal (less than 10% leak).
- (3) For N 95 masks, the mask must be fit tested before use.

B) Gloves & Gowns

- (1) To be worn as per routine practices.

4.1.6 HAND HYGIENE

Facility acquired infections are recognized as a serious problem affecting the quality of patient care and safety. These infections are spread mainly by cross-contamination and transmission of microorganisms through physical contact. Hand hygiene is the simplest, single most effective measure for preventing and reducing healthcare-associated infections.

1. Contractors must perform hand hygiene based on the following:
 - (a) BEFORE initial patient/patient environment contact (ix 6F-3)
 - (b) AFTER body fluid exposure risk
 - (c) AFTER patient/patient environment contact
2. Contractors must follow the techniques for performing hand hygiene

A) Technique for Using an Alcohol-based Hand Rub

The following procedure should be used for cleaning hands with ABHR (refer to Appendix 6F-2, “*Techniques for Performing Hand Hygiene*” for more information):

- (1) Ensure hands are visibly clean (if soiled, follow hand washing steps).
- (2) Remove hand and arm jewelry. Clothing or other items that impede frequent and effective hand hygiene should be removed. A simple and practical solution allowing effective hand hygiene is for health care providers to wear their rings around their neck on a chain as a pendant.
- (3) Apply one to two full pumps of product, or squirt a 35 mm-sized amount (about the size of a “loonie”), onto one palm.
- (4) Spread product over all surfaces of hands, concentrating on finger tips, between fingers, back of hands, and base of thumbs. These are the most commonly missed areas.
- (5) Rub hands until product is dry. This will take a minimum of 15 seconds if sufficient product is used. Hands must be fully dry *before touching the client/patient/resident* or the care environment/equipment for the alcohol-based hand rub to be effective and to eliminate the extremely rare risk of flammability in the presence of an oxygen-enriched environment.

B) Technique for Hand Washing

The following procedure should be used for hand washing;

- (1) Remove hand and arm jewelry. If a watch is worn, it must be worn above the wrist and fit snugly. Clothing or other items that impede frequent and effective hand hygiene should be removed or pushed back. A simple and practical solution allowing effective hand hygiene is for health care providers to wear their rings around their neck on a chain as a pendant.
- (2) Wet hands with warm (not hot) water. Hot water is hard on the hands, and will lead to dryness.
- (3) Apply liquid or foam soap. Do not use bar soap in health care settings as it may harbour bacteria that can then be spread to other users.

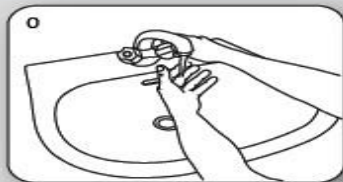
- (4) Vigorously lather all surfaces of hands for a minimum of 15 seconds. Removal of transient or acquired bacteria requires a minimum of 15 seconds of mechanical action. Pay particular attention to finger tips, between fingers, backs of hands and base of the thumbs. These are the most commonly missed areas.
 - (5) Using a rubbing motion, thoroughly rinse soap from hands. Residual soap can lead to dryness and cracking of skin.
 - (6) Dry hands thoroughly by blotting hands gently with a paper towel. Rubbing vigorously with paper towels can damage the skin.
 - (7) Turn off taps with paper towel, to avoid recontamination of the hands.
 - (8) If hand air dryers are used, hands-free taps are required.
 - (9) DO NOT use ABHR immediately after washing hands, as skin irritation will be increased.
 - (10) If running water is not immediately available, use moistened towelettes to remove the visible soil, followed by alcohol-based hand rub.
3. Hand Care is important of all members of the health care team including the ACML staff. Staff should:
 - (a) Recognize that intact skin is the body's first line of defense against bacteria; therefore, careful attention to hand care is an essential component of hand hygiene.
 - (b) Keep natural nails clean and short, they should not show past the end of the finger. False fingernails or chipped nail polish can harbor infections
 - (c) Be aware that ABHR has been shown to be less irritating to skin than soap and water
 - (d) Be encouraged to consult with Occupational Health for hand care concerns.

Hand Lotions:

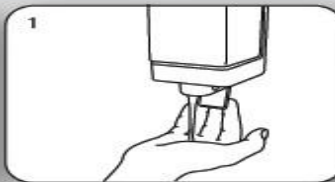
- Only Facility provided hand lotions should be used
 - Individual Hand Lotions are not recommended since studies have shown that individual hand lotions commonly grow bacteria.
4. The use of gloves does not replace the need for hand hygiene because gloves are not completely free of leaks, and tears/punctures can occur. Hands must be cleaned before donning gloves for an aseptic/clean procedure and after glove removal.
 5. Gloves must be removed immediately and discarded after the activity for which they were used and before exiting the environment of a patient.
 6. Gloves should not be washed or reused.
 7. Gloves should never be re-worn between clients/patients/residents.
 - (a) Wear gloves for as short a time as possible;
 - (b) Hands must be clean and dry before donning gloves; and
 - (c) Gloves should be intact and clean and dry inside.

APPENDIX 6F-1 HAND WASHING WITH SOAP

Handwashing Technique with Soap and Water



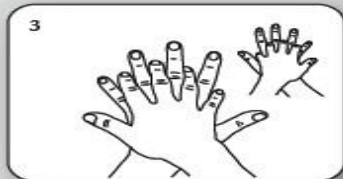
Wet hands with water



apply enough soap to cover
all hand surfaces



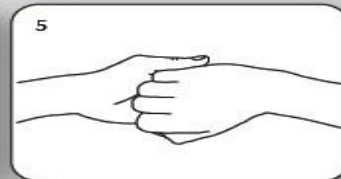
rub hands palm to palm



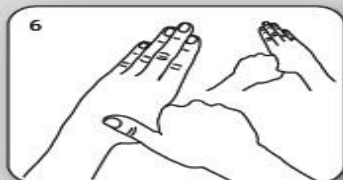
right palm over left dorsum
with interlaced fingers and
vice versa



palm to palm with fingers
interlaced



backs of fingers to opposing
palms with fingers interlocked



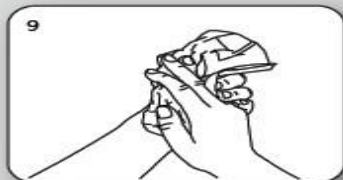
rotational rubbing of left
thumb clasped in right palm
and vice versa



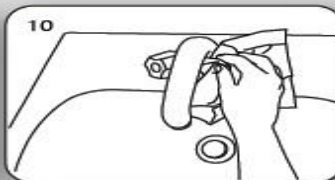
rotational rubbing, backwards
and forwards with clasped
fingers of right hand in left
palm and vice versa



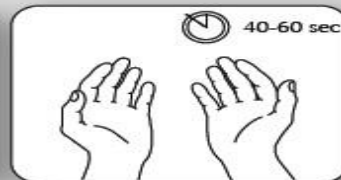
rinse hands with water



dry thoroughly with a single
use towel



use towel to turn off faucet



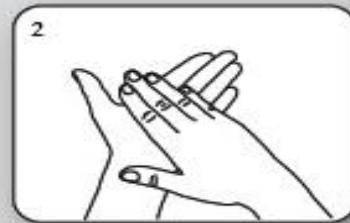
...and your hands are safe.

APPENDIX 6F-2 DECONTAMINATING HAND WITH ALCHOL-BASED HAND ANTISEPTIC

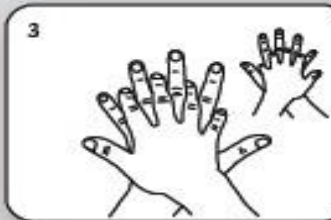
Hand Hygiene Technique with Alcohol-Based Formulation



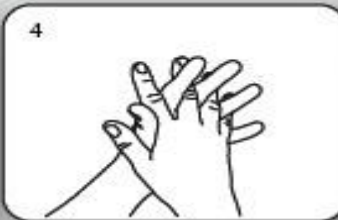
1a
Apply a palmful of the product in a cupped hand and cover all surfaces.



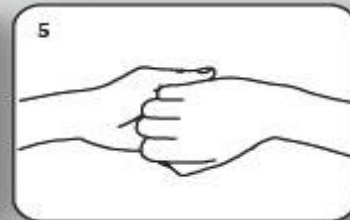
2
Rub hands palm to palm



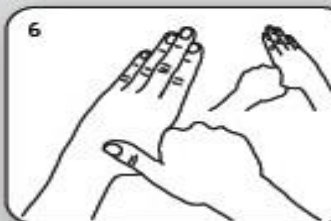
3
right palm over left dorsum with interlaced fingers and vice versa



4
palm to palm with fingers interlaced



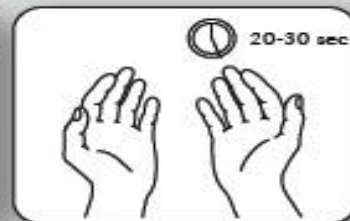
5
backs of fingers to opposing palms with fingers interlocked



6
rotational rubbing of left thumb clasped in right palm and vice versa



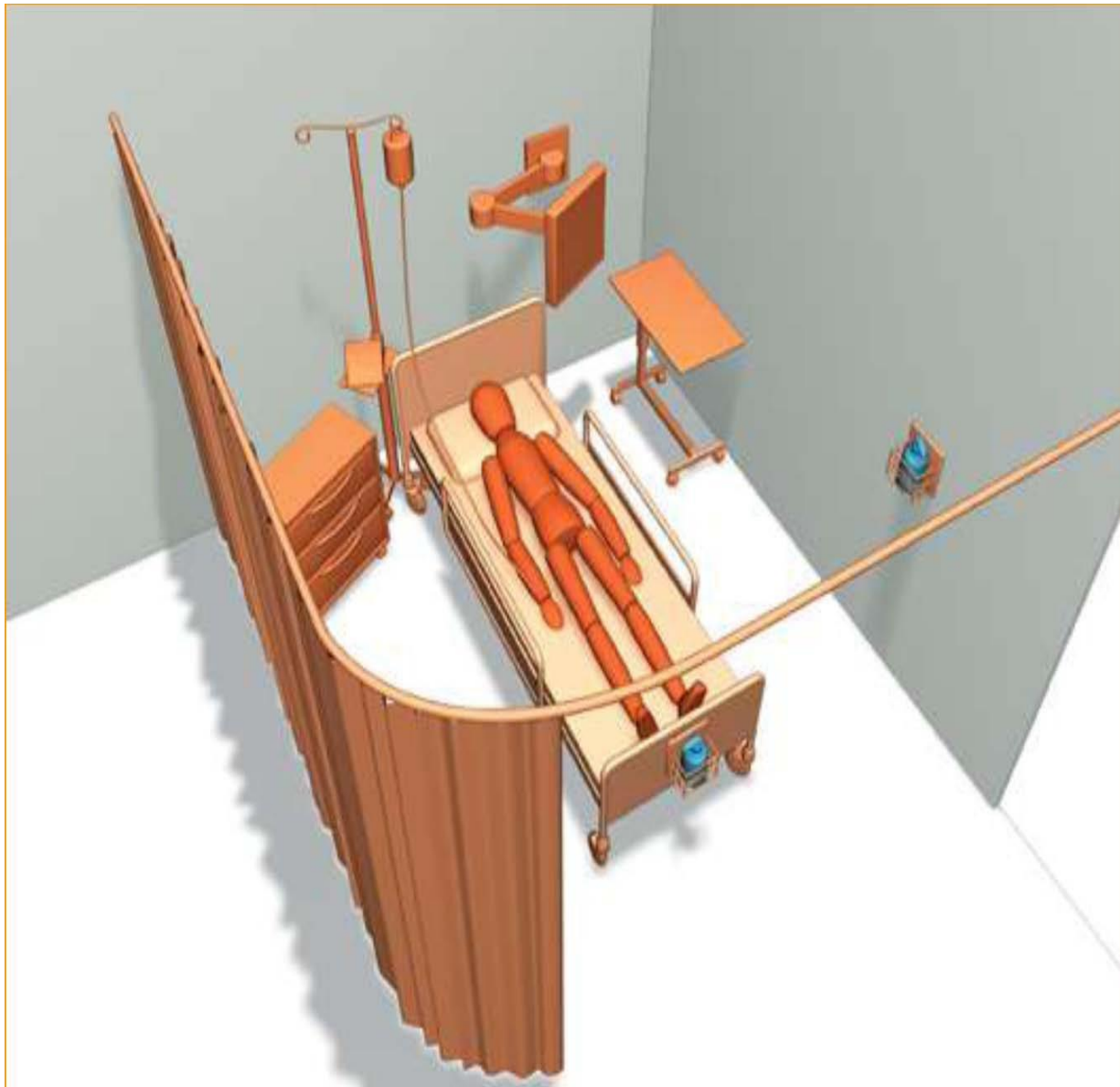
7
rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa



...once dry, your hands are safe.

APPENDIX 6F-3

PATIENTS ENVIRONMENTS



4.1.7 MINIMUM CONSTRUCTION REQUIREMENTS

The ACML Site Manager and/or Supervisor will determine what additional infection control mechanisms are required based upon ACML's internal Infection Control Policy I-03-03-P Dust Control. These requirements will be provided to the Contractors prior to pricing so that they may be included in the contractor's quote.

4.2 CHEMICAL SAFETY

Under the Occupational Health and Safety Regulation and related Regulations specific requirements, procedures and training must be carried out to ensure that workers work safely with chemicals. The Facility expects that these requirements, procedures and training will be carried out by all Contractors.

Before any job is started and for the project duration:

The Contractor must ensure that all necessary precautions are followed when working with or around any hazardous or designated substance including but not limited to personal protective equipment, signing, limiting entry, additional ventilation, etc.

The Contractor, Subcontractors and their agents shall be trained in the Workplace Hazardous Materials Information System ("WHMIS") and comply with WHMIS and be able to submit proof of training if requested by the Project Manager.

Appropriate written notice must be given to the Project Representative by the Contractor, with as much lead-time as possible to allow for temporary changes in the location of workers.

Copies of all Safety Data Sheets (SDS) for all products to be used on a project must be forwarded to the Occupational Health and Safety Department, (if a previous copy has been forwarded, send name of product). Include product and quantity, nature of work and precautions and procedures that will be followed. Contractor employees must review SDS of all products to be used on the project. SDS must be kept on site and readily available at all times. The Occupational Health and Safety Department must be notified and new SDS provided prior to any change in products being implemented.

The Facility may forward additional requirements, changes in procedures or other recommendations to the Contractor.

All chemical containers must be appropriately labelled in accordance with WHMIS Regulations. The Contractor must ensure that adequate ventilation is provided in the area of work for the type and quantity of products being utilized.

Contractor's staff names and emergency numbers must be submitted to the Facility's ACML Representative prior to starting any work.

Limitations, procedures and precautions outlined by SDSs and the Project Representative must be adhered to for both workers and occupants of the building (e.g. signage, charcoal fan filter, cordon off area, modify airflow where required, personal protective equipment, etc.). Where chemicals are used, spills kit should be readily available.

Chemical spills released into the environment must be reported immediately to appropriate government agencies and the Facility.

If it is not possible to safely use any substance or there is a doubt about SDS information, then the substance or product must not be used until the correct information is available, or an alternative can be found.

4.3 WORK SITE ISOLATION

Barricading, Limiting Access and Hoarding

It is the responsibility of the Contractor to provide appropriate barricading, fencing, hoarding, warning lights and signage in and around the work site as required by Code, Authorities Having Jurisdiction and the Facility. The location and extent of the work site isolation should be discussed with and approved by the manager of plant operations prior to the commencement of the work.

Barricades must be placed in such a manner as to prevent unauthorized personnel from entering the work site and potentially placing themselves in danger of injury.

No fire prevention equipment or fire exits/egress routes may be blocked without prior written approval from the Fire Marshal's Office and the Facility.

For construction projects, solid hoarding will be used in place of chain link fencing to keep pedestrians out of the construction areas.

Provide a combination lock on all access doors into and out of site hoarding.

Fire Alarm Bypasses

Fire alarm devices are to be protected during the course of construction. When required, due to the nature of the work being performed, the Contractor will arrange for a bypass on the fire alarm system. Bypasses shall be reinstated at the end of the shift. If due to the nature of the work or condition of the space it is not possible to reinstate the fire alarm system, the Contractor shall, at their expense, post a fire watch to the satisfaction of the Project Representative.

If in the course of the work, a false fire alarm is triggered, the Contractor will be charged \$2,000 per occurrence.

4.4 WELDING AND CUTTING EQUIPMENT PROCEDURES

When an operation requires the use of an open flame or there is the potential of hot sparks such as when work involves welding and/or cutting, a Hot Work Permit must be obtained from the Facility's ACML Representative prior to commencement of such work. The Permit (refer to Appendix B) is to be posted in the area of the work. When considering when to issue a Hot Works Permit, the Facility's ACML Representative may consider the following factors:

- Type and size of fire extinguisher required;
- Fire watchers if necessary;
- Shielding for arc welding;
- Combustible materials;
- Special job write-ups as may be needed;
- Possibility of toxic fumes;
- Ventilation needed;
- Wind direction, if relevant;
- Isolation of fire alarm system detection devices;
- Location of nearest fire alarm pull.

Prior to welding, the Fire Alarm System shall be bypassed and a fire watch must be maintained by the Contractor during and one-hour after completion of any welding or cutting operation.

Oxygen and acetylene bottles shall be stored in an upright position, secured to a stable support and not be left freestanding; the empty bottles shall be marked and separated from the full bottles. All bottles shall be stored per current regulations and away from any potentially hazardous situations, such as fire or areas where they may be exposed to mechanical damage. Compressed gas bottles shall not be stored in areas, which contain petroleum products. Any leaking compressed bottles shall be removed immediately from building structures and arrangements made to remove them from the project site as soon as possible. The fire alarm shall be pulled in case of leakage of flammable, explosive or other dangerous gases.

Contractors/Subcontractors must ensure that their workers and employees use the required specialized personal protective equipment required when working with welding or cutting equipment. They must also ensure that welding curtains are used where possible to protect others near the Facility property from welding arcs and flash.

The immediate area encompassing the site of operations will be hosed down with water both prior to and after the operations. The immediate area shall be properly ventilated to exhaust welding fumes.

A portable fire extinguisher of the "ABC" type approved by the Underwriters' Laboratories of Canada will be kept in close proximity to the site.

All combustible or inflammable materials within 40 feet (12.2 meters) of the site which can neither be hosed down with water nor moved away from the area shall be protected by a covering of non-combustible material at all times during the operations.

4.5 HOT WORKS PERMIT

Purpose

The purpose of this document is to provide minimum standards for the control of hot work on premises. Work involving welding or cutting torches is a very common source of fire in commercial and industrial occupancies. This permit system will help minimize the chance of these operations causing a fire.

Scope

This minimum standard applies to hot work in any area other than normally designated and protected maintenance areas or welding booths. It applies both inside and outside the Facility, and at new construction as well as existing operations. This is a minimum standard, applicable for all facilities and operations.

Responsibilities

Responsibility for compliance with these practices remains with building management for existing operations and with project management for new construction. These practices are minimum standards, and generally line up with fire prevention codes. Issuance of hot work permits must be to individuals, not to contractors or other groups as a whole.

Definitions

Hot Work: Any cutting, welding, soldering, sweating or other activity that involves a torch, open flame or other ignition source. Grinding is also considered hot work. Portable heating units such as gas fired salamanders, electric heaters, hot air guns and similar devices are also subject to this permitting function. Torch applied roofing is hot work, governed by this document.

Procedure

The Project Representative should be consulted regarding the work and other hazardous functions should be suspended in the area. Any fixed protection (sprinklers) must remain in full service during the work; if sprinklers are impaired, the hot work may be postponed.

Persons intending to perform hot work must be proficient in the activity, all aspects of safety and must prepare a work permit (attached). The permit must be reviewed and approved by the Plant Operations and Maintenance Manager/Supervisor or a similar, responsible person prior to the commencement of any work.

Acceptance by the Maintenance Manager/Supervisor implies only that conditions are acceptable for work to proceed and does not relieve the person(s) performing the work of the responsibility of maintaining a safe working area. If any changes in the work environment or area are observed by the person(s) performing the work, all hot work must cease until the site has been re-evaluated by the Maintenance Manager/Supervisor.

The person authorized to issue the permit must be familiar with the hazards of the area. The permit should be limited in time, and should be renewed by shift or daily. Only the person actually performing the work can be issued the permit.

The person authorized to issue the permit must check the area prior to issuing the permit. The area must be free of combustibles for at least 35 ft. (10 m) or local combustibles must be protected by heat shields such as welding screens and tarpaulins. Open spaces in walls and floors for the

same distance must be sealed, covered, or otherwise protected. Special consideration should be given to holes in floors and combustible walls. A fire watch must be posted, and extinguishers must be present. Fire watches should be aware of locations of pull stations and how to respond to small incidents. The fire watch must be trained in the use of the extinguisher.

The Contractor is responsible for the fire watch, extinguishers, and any necessary screens or tarpaulins.

The area must be checked at the end of the work, and should be inspected for at least one hour after the work to look for sparks, hot slag, or smoldering that may have been left behind by the work.

Cutting and welding is not to be permitted on any containers or pipelines that could contain flammable liquids, vapors or gases. Any such container must be reliably purged before the work. If there is any doubt, an inert gas purge should remain in place during the work. Hot work in confined spaces requires special attention, and may drive a common space into one regulated under confined space entry rules.

Area considerations should also include routing of employees or other persons who may accidentally make eye contact with the arc. Such incidental viewing may result in eye damage or temporary sight dysfunction that could result in a separate accident.

Gas cylinders used for hot work should be stored in a safe manner, preferably outside any building. Cylinders should be confined to a cart when in use, or otherwise restrained at all times. All hot work equipment such as cylinders, valves, hoses, nozzles, carts, extinguishers, etc. must be inspected prior to use, and should not be used if deficient.

Satisfactory Performance

Work is completed in accordance with the above conditions and the requirements of the permit.
Permits can only be issued by the designated Owner's Representative to requesting individual(s).
Permits are renewed by shift or by day.
No fires occur.

Unsatisfactory Performance

The area is not inspected by persons performing the work
Combustibles not removed, covered, or otherwise protected
Permit stays open for more than one shift
No extinguishers
Lack of a fire watch
No check of area after work
Work takes place in building with fixed protection impaired
Other conditions of the permit are omitted or violated
Signed permit not submitted at end of work

Required Records

Permits should be maintained on file for inspection at later dates. Up to one year's permits should be retained.

4.6 OPERATION OF VEHICLES ON FACILITY PROPERTY

The Contractor must provide a list of equipment requirements on site. Before entering the property, Site Manager must have this list and the appropriate arrangements made for access onto Facility grounds.

Contractor vehicles used on Facility property will not be overloaded, and passengers must ride within the cab (loading requirements are those of the Ministry of Transport or the City of Fort St John, whichever are more stringent). Riding upon running boards, fenders, hoods, scraper blades and buckets, or in boxes or other attachments is prohibited. Employees must not board or jump off moving vehicles.

Contractor vehicles must be left in designated areas and, when not in use, must not obstruct emergency vehicles or roadways.

Contractor vehicles must obey all traffic signs, speed limits and parking restrictions.

Vehicles with tracks should not be driven on pavement or sidewalks without suitable protection.

APPENDIX A1

FACILITY SERVICE DISRUPTION REQUEST

Note: The Plant Services Department requires a minimum of 14 days notice prior to the shutdown of Facility services.
 Contractor to confirm with the Plant Services staff that the Fire Alarm System is bypassed prior to starting the work in any area.

| | |
|---|---|
| CONTRACTOR | |
| Type & Description of Service Disruption: | |
| Area(s) to be affected by Disruption: | |
| Approximate Duration of Disruption: | |
| Contractor (Company's) Name: | |
| Contact Name: | Phone: () |
| Signature: | Date: |
| General Contractor's Signature: | Date: |
| Project Manager's Signature: | Date: |
| PLANT OPERATIONS AND MAINTENANCE | |
| Date Request Received/Reviewed: | |
| Approved Shutdown Date: | Time: From: To: |
| Date Affected Area(s) Notified: | Name & Date: |
| Plant Operations & Maintenance Manager Signature: | |

APPENDIX A2
HOT WORK PERMIT

Contractor/Operator is to complete the following and post a copy in the area of work.

Contractor/Operator: _____
Building: _____
Area / Floor: _____
Work Being Undertaken: _____
Date: _____
Time: _____

-
- ☐ Fire Extinguishers have been provided
 - ☐ The area has been inspected for combustible construction
 - ☐ Combustible material, within 35 feet (10 meters), has been removed or covered with a flame retardant tarp
 - ☐ All holes in walls, floors or roof openings have been sealed
 - ☐ I have explained safety requirements to other operators
 - ☐ I have advised the area/departments manager
 - ☐ Work has to be done here – cannot be done in a shop
 - ☐ A guard or fire watcher has been provided in the area and the floor below.
 - ☐ All equipment has been checked and is in good working condition.

Contractor to complete the following when finished.

- ☐ When work is terminated, inspect the area for 1 hour
- ☐ Inspect the floor below (if any) for 1 hour

I have checked the working area, adjacent areas and areas below (if any) for sparks, smoldering fires, smoke for at least 1 hour after work was completed. No unusual conditions were observed.

Contractor/Operator

Contractor to return completed permit to Manager/Supervisor Plant Operations & Maintenance upon completion of work.

Notes:

This permit:

Applies to cutting, welding, brazing, soldering, grinding, heated roofing materials work.
Does not apply to any of these operations when performed in areas designed specifically for them.
For example, does not apply to welding work in a welding shop and/or maintenance shop.
Does not apply to welding of tanks containing flammable liquids, gases, toxic materials. Special precautions are necessary for work in these.

Plant Operation and Maintenance Manager/Supervisor to complete the following:

Permit Expiration Date: _____ Time: _____

APPENDIX A2

Special Precautions: _____

Job Completed Date: _____ Time: _____

Area should be inspected every half hour for 8 hours after the work is discontinued.

Inspections Complete: _____

Area Secure: _____

Maintenance Manager/Supervisor: _____

APPENDIX A3

ROOF ACCESS PERMIT

DATE ISSUED: _____ EXPIRY DATE: _____

DESCRIPTION OF WORK: _____

SAFETY DEVICES REQUIRED (IF ANY): _____

INSTRUCTIONS:

1.No person shall enter or remain on any roof unless accompanied by at least one other person to act as a safety watch or be in radio contact with Plant Operations and Maintenance and/or Security. All work must be in compliance with the Health and Safety Guidelines for Low-Slope Roofing.

2. No person shall perform work at any point nearer than 3 meters to an unguarded roof-edge unless secured by an approved safety belt that when inspected at the time of use is found to be in good condition. No person shall work at roof edge where he must lean over to perform his work unless secured with an approved harness adequately secured to a fixed support and arranged so that the worker cannot fall vertically more than 1.5 meters. Safety belt or harness shall meet the criteria described in the Occupational Health and Safety Regulation.

Work may be performed without a safety belt on roofs when a parapet or suitable guard with a minimum height of 107cm. is in existence or is provided by the worker.

All work shall be performed in conformity with the Occupational Health and Safety Regulation for Industrial Establishments and/or for Construction Projects as well as any additional requirements of St. Josephs Health Care Centre.

All tools and equipment used in roof work must be in good condition before a Roof Access Permit shall be granted. While working on the roof all tools, materials and waste must be maintained in a secure manner so as not to pose a hazard to other workers or the area below.

Time and date of roof access shall be registered with the appropriate Plant Operations and Maintenance or Planning personnel. The same notification is required immediately at the time roof area is vacated.

APPENDIX A3**AGREEMENT**

All persons entering upon a roof shall conform to the above instructions, confirm they have received fall protection training (if working within 3 meters of the edge) and shall record below:

PRINT NAME

DATE

SIGNATURE

COMPANY NAME

APPROVED BY:

PRINT NAME

DATE

SIGNATURE

COMPANY NAME

Caution: Do not prop open doors and take caution when opening doors due to high winds that could cause the door to open unexpectedly as you egress the room.

APPENDIX A4

Information Practices Schedule- Personal Health Information

Collection, Use and Disclosure of Personal Health Information (PHI):

The Consultant/Contractor/Vendor agrees to receive PHI from the Facility in accordance with s. 17 or, in the case of health information network providers, s. 10(4) of the *Personal Health Information Protection Act, 2004* (British Columbia) and its related regulations, as part of the Consultant's provision of services to and on behalf of the Facility, and not on the Consultant's/Contractor's/Vendor's behalf or for the Consultant's/Contractor's/Vendor's own purposes.

The Consultant/Contractor/Vendor will only use as much PHI as is reasonably necessary to perform its obligations under the Agreement and will make PHI available only to those employees who require access in order to satisfy those obligations.

The Consultant/Contractor/Vendor will only use and disclose any PHI it receives from the Facility as is permitted or required under the Agreement or the laws of Canada and/or the province of British Columbia.

The Consultant/Contractor/Vendor will ensure that any of its agents or subcontractors to whom the Consultant/Contractor/Vendor provides the Facility PHI has agreed to the same restrictions and conditions that apply to the Consultant/Contractor/Vendor with respect to PHI.

The Consultant/Contractor/Vendor shall not disclose PHI, or any information, to any affiliated or unaffiliated third party without the prior written consent of the Facility.

The Consultant/Contractor/Vendor will maintain a log of access and disclosure of PHI by the Consultant/Contractor/Vendor and their Personnel and make such log(s) available to the Facility as and when requested.

Practices to Protect Personal Health Information:

The Consultant/Contractor/Vendor will employ appropriate safeguards to prevent theft, loss and unauthorized access, copying, modification, use, disclosure or disposal of PHI.

The Consultant/Contractor/Vendor will maintain privacy policies in accordance with Canadian and British Columbia laws and these policies will be made available for inspection on request.

The Consultant/Contractor/Vendor will educate its employees on privacy laws and policies and take reasonable steps to ensure employee compliance through staff training, confidentiality agreements and employee sanctions.

The Consultant/Contractor/Vendor will ensure that its employees, who are fired, resign or no longer require access to PHI from the Facility return all PHI to the Facility and can, thereafter, no longer access applications, hardware, software, network and facilities belonging to either the Consultant or the Facility.

The Consultant/Contractor/Vendor will revoke any user's access to PHI if security is breached and on the Facility's reasonable request.

At the termination of the Agreement, the Consultant/Contractor/Vendor will return or destroy all PHI received from, created or received by the Consultant/Contractor/Vendor on behalf of the Facility that the Consultant/Contractor/Vendor maintains custody of in any form and will retain no copies of PHI thereafter. If such return or destruction of PHI is not feasible, the Consultant/Contractor/Vendor will notify the Facility of this fact, extend the protections of the Agreement to all PHIS in your custody and will cease all further uses and disclosures.

Notification of and Communication with the Facility:

The Consultant/Contractor/Vendor will provide the Facility with the name of a contact person at the Consultant's/Contractor's/Vendor's organization responsible for the Consultant's/Contractor's/Vendor's privacy compliance and notify the Facility within 24 hours of any changes in the identity of the responsible person.

The Consultant's/Contractor's/Vendor's will provide notice to the Facility's Privacy Office if the nature of the Consultant's/Contractor's/Vendor's business and the services being provided to the Facility require that the Facility PHI must be transmitted or access be provided to any of the Consultant's Personnel or to any facility situated outside of British Columbia. When providing notice, please specify where outside of British Columbia the PHI will be transmitted or from where it will be accessed.

The Consultant/Contractor/Vendor will report to the Facility's Privacy Office at the Consultant's/Contractor's/Vendor's first reasonable opportunity, but in any event no more than 48 hours after the Consultant/Contractor/Vendor becomes aware of any use, disclosure, theft or unauthorized access of PHI by the Consultant/Contractor/Vendor or any of your agents or subcontractors to whom you provide the Facility PHI.

The Consultant/Contractor/Vendor will refer anyone trying to access, correct or complain about their PHI to the Facility's Privacy Office within 48 hours of receiving the complaint or request for access or correction.

The Consultant/Contractor/Vendor will, upon request, make PHI available to the Facility for amendment and incorporate any amendments into the Consultant's/Contractor's/Vendor's records of PHI. During the term of the Agreement, the Consultant/Contractor/Vendor may never deny the Facility access to its patients' PHI.

The Facility reserves the right to: inspect any equipment used or records maintained by the Consultant/Contractor/Vendor in connection with the provision of goods or services; question the Consultant's/Contractor's/Vendor's Personnel regarding their handling of PHI; and otherwise audit and electronically verifies compliance with these practices.

Additional Facility Rights:

Notwithstanding anything else contained in the Agreement, the Consultant/Contractor/Vendor authorizes, acknowledges and accepts termination without notice of the Agreement by the Facility in the event that the Facility determines the Consultant has violated any of these practices.

Information Practices Schedule survives the termination of the Agreement.

Information Practices Schedule. The Consultant/Contractor/Vendor acknowledges that any breach of these practices result in the Facility suffering irreparable harm.

APPENDIX A5

Employer's Duties under the Workers Compensation Act,

The following charts set out a summary of the duties of an Employer. While efforts have been made to ensure accuracy and completeness, the charts are intended for general guidance and assistance only. They do not constitute legal advice and do not replace the legislative provisions. In the event of any inconsistency between the charts and the *Occupational Health and Safety Regulation* and applicable regulations, the latter prevails. For the purpose of determining the precise duties of a constructor, reference should always be made to the official volumes of the *Occupational Health and Safety Regulation* and applicable regulations.

| Duty | Section of Act |
|---|----------------|
| Ensure the health and safety of all workers working for that employer, and any other workers present at a workplace at which that employer's work is being carried out, and comply with this Part, the regulations and any applicable | 115(1) |
| Remedy any workplace conditions that are hazardous to the health or safety of the employer's workers, | 115(1)a |
| Ensure that the employer's workers (i) are made aware of all known or reasonably foreseeable health or safety hazards to which they are likely to be exposed by their work, (ii) comply with this Part, the regulations and any applicable orders, and (iii) are made aware of their rights and duties under this Part and the regulations, | 115(1)b |
| establish occupational health and safety policies and programs in accordance with the regulations | 115(1)c |
| provide and maintain in good condition protective equipment, devices and clothing as required by regulation and ensure that these are used by the employer's workers, | 115(1)d |
| provide to the employer's workers the information, instruction, training and supervision necessary to ensure the health and safety of those workers in carrying out their work and to ensure the health and safety of other workers at the workplace | 115(1)e |
| make a copy of this Act and the regulations readily available for review by the employer's workers and, at each workplace where workers of the employer are regularly employed, post and keep posted a notice advising where the copy is available for review, | 115(1)f |
| consult and cooperate with the joint committees and worker health and safety representatives for workplaces of the employer, | 115(1)g |
| cooperate with the Board, officers of the Board and any other person carrying out a duty under this Part or the regulations. | 115(1)h |

Constructor's Duties under the Regulation for Construction Projects
 British Columbia Regulation 213/91

| Duty | Section of Regulation |
|--|-----------------------|
| Complete an approved registration form before beginning work at a project | 5 |
| Ensure that each employer on the project provides a completed approved registration form | 5 |
| Ensure that a copy of the employer's completed registration form is kept on the project while the employer is working on the project | |
| Where the nature of the project requires it, complete and file a Notice of Project (NOP) at the Ministry Office closest to the project generally before beginning work | 6 |
| Post the NOP in a conspicuous place on the Project | 6 |
| If NOP is not required but project includes work on a trench more than 1.2 meters deep into which a worker may enter, notify, by telephone or fax, the Ministry Office located nearest to the project before work begins | 7 |
| A constructor who submits a report under subsection 51 (1) of the Act (notice of death or injury) or gives a notice under section 52 or 53 of the Act (notice of accident, etc.) shall also provide, within 14 days after the occurrence, a professional engineer's written opinion stating the cause of the occurrence. | 12 |
| Post in a conspicuous place at the project, and keep posted while work is done, a notice setting out: 1. The constructor's name, and if the constructor carries on business in a different name, the business name 2. The address and telephone number of the constructor's head office or principle place of business in British Columbia 3. The address and phone number of the nearest office of the Ministry 4...Within 48 hours of selection for a project, the name, trade and employer of each H&S Rep or JHSC member | 13 |
| Appoint a supervisor for each project with 5 or more workers working at the same time | 14 |
| Establish written Emergency Procedures at a Project and ensure that they are followed in case of an emergency; Post them in a conspicuous place at the project; review them with JHSC or H&S Rep as applicable | 17 |
| Ensure that each worker has ready access to a telephone or other system of two-way communication system on the project in the event of an emergency | 18 |
| Keep records required by this regulation for at least one year after the project completion | 19 |
| The constructor shall keep the design of a horizontal life line system at the project while the system is in use. | 26.9(8) para 6 |
| Ensure that facilities (toilet, urinal and clean-up facilities) are provided or arranged at a project before the project is started and that each worker has reasonable access to such facilities. | 29(3) |
| If the location of the facilities is varied, the constructor shall document in writing the locations and reasons for the variance and provide the document to the JHSC, H&S Rep or workers as applicable or the workers if there is no JHSC or H&S Rep. | 29(9) |

| Duty | Section of Regulation |
|--|-----------------------|
| The constructor shall inform the workers of the location of the facilities & post such a location in a conspicuous place on the project if it is practical to do so | 29(10) |
| The constructor shall keep at the project for the duration of the project a record of the servicing, cleaning and sanitizing of the facilities and the variance document required under subsection 29(9) | 29(12) |
| If a temporary standpipe is installed in a building under construction, the constructor shall post at the project, or have available for review, a floor plan of the building indicating, <ul style="list-style-type: none"> (a) The location of the hose outlets on each floor; (b) The location of the point on the perimeter of each floor that is furthest from the hose outlet on that floor; and (c) The location of each exit on each floor. | 57(11) |
| Re temporary standpipe: The constructor shall give a copy of the floor plan to the fire department located nearest to the project. | 57(12) |
| The constructor shall keep the design drawings for formwork and false work and the statements from the person who carried out the inspection (Professional engineer or competent worker) of such works on the project while the formwork or the false work is in use. | 89(5) |
| The constructor shall keep the design drawings on the project while the formwork, false work or re-shoring is in use. | 92(2) |
| The constructor shall give notice to the Ministry office located nearest the project, in person, by telephone, by fax or by electronic means before the first multi-tiered load hoisting operation is started at a project | 103.1(10) |
| The constructor shall make available to an inspector upon request a copy of the certification by the professional engineer. Who would have verified and certified the results of a test on the structural components of a scaffold and the corresponding rated load of the scaffold. | 127(3) |
| The constructor shall keep at a project the design drawings and the written statement for a scaffold, while the scaffold is erected, for scaffolds designed by a professional engineer. | 130(5) |
| The constructor shall keep a copy of the design drawings and the required statement on a project while the suspended scaffold or suspended platform that is subject to the requirements of the section is on the Project | 139(7) |
| Before a multi-point suspended scaffold is erected, the constructor shall ensure that the professional engineer responsible for the structural integrity of the permanent building or structure from which the scaffold is suspended provides a written report approving the design loads imposed on the building or structure by the scaffold | 142.2 (14) |
| Before erecting or dismantling a multi-point suspended scaffold, the constructor shall give notice, in person, by telephone, by fax or by electronic means, to the Ministry office located nearest the project | 142.3 (1) |
| The constructor must keep a copy of the required professional engineer's report and design drawings, any written approvals of deviations from the design drawings (approved by a professional engineer) and the inspection report of a professional engineer in respect of a multi-point suspended scaffold | 142.4 |

| Duty | Section of Regulation |
|--|-----------------------|
| The constructor of a project where a multi-point suspended scaffold is used shall keep a written record of all inspections, tests, repairs, modifications and maintenance performed on the scaffold and make copies of the record available to an inspector upon request. | 142.8 (1) |
| Before beginning any hoisting operation involving a worker using a work platform, bucket, basket, load, hook, sling or similar device that is capable of moving and is supported by the cable to a crane or similar hoisting device, the constructor shall notify by telephone an inspector in the office of the Ministry of Labour nearest to the project | 153 (11) |
| The constructor shall keep all design drawings, test reports, written statements and certification documents required under this section with the crane at all times during the hoisting operation | 153 (14) |
| On request, the constructor shall provide an inspector with copies of any document described in subsection (14) | 153 (15) |
| The constructor shall keep at the project while a tower crane is erected a copy of the signed design drawings for its foundation, shoring and bracing and any written opinion about the drawings by a structural engineer. | 157(6) |
| The constructor shall keep the report of the non-destructive testing approved by the Canadian General Standards Board of the structural elements and components of a tower crane, at the project while the crane is erected | 158(3) |
| The constructor shall keep the report prepared by a professional engineer or competent worker designated by a professional engineer who had conducted a required inspection of a tower crane at a project while the crane is erected | 159(5) |
| The constructor shall ensure that the structural engineer responsible for the structural integrity of a building or structure reviews and approves in writing the design drawings and specifications for a derrick, stiff-leg derrick or similar hoisting device before it is installed. | 166(4) |
| The constructor shall keep a copy of the design drawings and specifications for a derrick, stiff-leg derrick or similar hoisting device and the report prepared under subsection (6) at a project while the derrick, stiff-leg derrick or similar hoisting device is on the project. | 166(7) |
| The constructor shall take precautions against hazards caused by helicopter rotor downwash. | 167(4) |
| A constructor shall, Establish and implement written measures and procedures adequate to ensure that no part of a vehicle or equipment or its load encroaches on the minimum distance permitted by subsection (2); and Make a copy of the written measures and procedures available to every employer on the project. | 188(4) |
| The constructor shall, ensure that written measures and procedures for complying with this section are established and implemented, so that workers are adequately protected from electrical shock and burn; and Make a copy of the written measures and procedures available to every employer on the project. | 191(4) |

| Duty | Section of Regulation |
|---|-----------------------|
| Before any worker enters the confined space or begins related work with respect to the confined space, the constructor shall prepare a co-ordination document to ensure that the duties imposed on employers by this Part are performed in a way that protects the health and safety of all workers who perform work in the confined space or related work with respect to the confined space. | 221.4(2) |
| The constructor shall provide a copy of the co-ordination document to each employer of workers who perform work in the same confined space or related work with respect to the same confined space; and to the project's joint health and safety committee or health and safety representative, if any. | 221.4(3) |
| The constructor shall provide a copy of the confined space program to the project's joint health and safety committee or health and safety representative, if any. | 221.5(4) |
| The constructor shall ensure that a copy of the program is available to, any other employer of workers who perform work to which the program relates; and Every worker who performs work to which the program relates, if the project has no joint health and safety committee or health and safety representative. | 221.5(5) |
| If there is a possibility of unauthorized entry into a confined space at a project, the constructor shall ensure that each entrance to the confined space, Is adequately secured against unauthorized entry; or Has been provided with adequate barricades, adequate warning signs regarding unauthorized entry, or both. | 221.15 |
| If an excavation may affect the stability of an adjacent building or structure, the constructor shall take precautions to prevent damage to the adjacent building or structure. | 229(1) |
| The constructor shall keep on the project a copy of every opinion given by a professional engineer, for the purpose of an excavation that is not a trench and is not made in Type 4 soil and with respect to which a professional engineer has given a written opinion that the walls of the excavation are sufficiently stable that no worker will be endangered if no support system is used, while the project is in progress. | 234(4) |
| The constructor shall keep the design drawings and specifications for a prefabricated, hydraulic or an engineered support system at a project while the system is on the project. | 236(7) |
| The constructor shall file with a Director two copies of the design drawings and specifications for an engineered support system before it is used on the project. | 236(8) |
| Before a support system is used for repairing underground pipe breaks, the constructor shall submit two copies of its design drawings and specifications to the office of the Ministry of Labour nearest to the project. | 237(3) |
| If a shaft is to be cut in sound rock, the constructor shall obtain a written opinion from a professional engineer as to whether the walls of the shaft need to be supported by rock bolts or wire mesh to prevent the spelling of loose rock. | 279(3) |

| Duty | Section of Regulation |
|---|-----------------------|
| The constructor shall submit to a Director duplicate copies of design drawings for the shoring and bracing before construction of the shoring and bracing is begun. | 280(4) |
| The constructor shall keep a copy of design drawings for the shoring and bracing at the project while the shoring and bracing are in use. | 280(5) |
| If a tunnel is to be cut in sound rock, the constructor shall obtain a written opinion from a professional engineer as to whether the sides and roof of the tunnel need to be supported by rock bolts or wire mesh to prevent the spelling of loose rock. | 307(2) |
| The constructor shall keep available for inspection at a project the design drawings for the primary supports. | 307(7) |
| No constructor or employer shall begin work at a project where a worker may be subjected to compressed air until the following requirements of this section are met: The employer of workers who may be subjected to compressed air at a project shall give a Director written notice of the intended use of compressed air on the project at least fourteen days before beginning work on the project Before work is begun in compressed air, the employer shall obtain written permission from a Director | 334(1) (2) (3) |
| Before work is begun in compressed air at a project, a constructor shall give written notice (containing the required information), To the local police department and the fire department and public Facility nearest to the project; and To a Director, together with the names and addresses of those to who notice is given under clause (a)? | 335(1) |
| The constructor at a project shall provide workers with the sturdy metal or plastic badge required for a worker who works in compressed air. Such a badge shall meet the requirements outlined in subsection 339(2) | 339(3) |
| A constructor shall supply at least one medical lock at a project where work in compressed air is done and shall maintain it ready for operation while work in compressed air is being done. | 356(1) |
| The constructor shall send to a Director before construction of an air lock begins a copy of the design drawings for the air lock. | 365(4) |
| The constructor shall keep at a project a copy of the design drawings for an air lock while the air lock is at the project. | 365(5) |

APPENDIX A6

CONTRACTOR NOTIFICATION FORM

Please be advised that Facility has identified the presence of asbestos containing materials within certain areas. An asbestos survey report showing the locations and types of asbestos present is available for review at the Facility by contacting the ACML Site Manager.

It is The Facility Policy that any disturbance of asbestos-containing materials be undertaken only by personnel who have received adequate training in handling asbestos materials.

DECLARATION BY CONTRACTOR

The Contractor shall follow the general instructions and work procedures as specified by the Facility Asbestos Management Program.

The Contractor shall ensure all employees and subcontractors have submitted asbestos training certificates and that all equipment and procedures are employed in accordance with applicable government regulations.

We hereby agree with the terms and conditions.

Contractor Name: _____

Date: _____

Contractor Representative: _____

Signature: _____

Permit Issued and Approved:

Manager: _____

Signature: _____

Property Name: _____

Date: _____

APPENDIX A7

INSURANCE REQUIREMENTS

The Contractor will take out, maintain in force and renew or will cause to be taken out, maintained and renewed:

A) Automobile liability insurance which will include the following terms:

- (1) Coverage in an amount of not less than \$2,000,000 inclusive per occurrence;
- (2) Coverage for Project Co, the Hard FM Provider, and all Sub- Contractors; and
- (3) include coverage for third party property damage and bodily injury (including accident benefits) arising out of the use of any automobile used in connection with the Project;

B) "all risks" insurance covering all construction equipment (including any scaffolding or hoarding) owned, leased or rented by the Contractor and any Sub-Contractor for use during Construction or for which any of them may be responsible which will include the following terms:

- (1) Coverage in an amount of not less than actual cash value of such equipment;
- (2) Coverage for the Contractor and all Sub-Contractors;
- (3) contain a waiver of subrogation against the Authority; and
- (4) A deductible not exceeding \$250,000 per occurrence;

C) Workers' compensation insurance in accordance with Schedule 2 (Design and Construction Protocols) to the Project Agreement

PERMITTING REQUIREMENTS***

The Contractor shall be responsible for the procurement of all permits, licenses, inspections, and certificates, which are necessary for the performance of the Work and customarily obtained by contractors in the jurisdiction of the Place of the Work unless stated otherwise. The contract price shall include the costs of these permits, licenses, inspection and certificates and their procurement.

*In instances where a CCDC contract document is being executed as part of the project, refer to the specific requirements for insurance and bonding requirements noted within the CCDC document.

** Per occurrence no aggregate limits

***In instances where a CCDC contract document is being executed as part of the project, refer to the specific requirements for permitting noted within the CCDC document.

APPENDIX 8

RESTRICTED PERSON

The contactor warrants by signing the Letter of Understanding and Acceptance in Section 2 that neither its company nor employees working on its behalf would be considered a "Restricted Person" as per the definition outlined below:

"Restricted Person" means any person who (or any member of a group of persons acting together, any one of which):

- (a) Has directly or indirectly, its principal or controlling office in a country that is subject to any economic or political sanctions imposed by Canada for reasons other than its trade or economic policies;
- (b) Has as its primary business the illegal manufacture, sale, distribution or promotion of narcotic substances or arms, or is or has been involved in terrorism;
- (c) In the case of an individual, he or she (or in the case of a legal entity, any of the members of the board of directors or its senior executive managers) has been sentenced to imprisonment or otherwise given a custodial sentence (other than a suspended sentence) for any criminal offence (other than minor traffic offences or misdemeanors) less than 5 years prior to the date at which the determination of whether the persons falls within this definition is being made;
- (d) Has as its primary business the acquisition of distressed assets or investments in companies or organizations which are believed to be insolvent or in a financial standstill situation or potentially insolvent;
- (e) Is subject to any material claim of the Northern Health Authority, ISL health or the province of British Columbia any proceedings (including regulatory proceedings) which have been concluded or are pending at the time at which the determination of whether the person fall within this definition is being made and which (*in respect of any such pending claim, if it were to be successful) would, in ISL Health's view, in either case, be reasonable likely to materially affect the ability of ACML to perform its obligations under this Hard FM Services Contract; or
- (f) has a material interest in the production of tobacco products;