

	020.906.010 Contractor Policy Both Sites
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PURPOSE AND SCOPE:

This policy is intended to provide guidelines for contractor performance on the property of Markham Stouffville Hospital (MSH) while performing projects and maintenance as per legislative requirements outlined in the *Occupational Health and Safety Act (OHSA)*.

Contractors will be given a copy of this document prior to commencing work.

POLICY STATEMENT(S):

The following will be adhered to by all contractors working at MSH. Although specific situations have been addressed herein, it is possible that circumstances may occur which are not covered by this policy. In such circumstance the OHSA of Ontario will be considered the minimum requirement.

- All contractors are required to comply with all applicable Federal, Provincial and Municipal Acts and Regulations including, but not limited to: Occupational Health and Safety Act, Workplace Safety and Insurance Act, the Canadian Environmental Protection Act (CEPA), and all Building and Canadian Standards Associate (CS) codes.
- All contractors are expected to be familiar with MSH's internal policies and procedures that may be applicable to the work being performed and the location of the work.
- All contractors must complete and return documentation of the Contractor Health and Safety Orientation (Appendix A) to the hospital's representative or Project Manager prior to start of work.
- The Contractor Health and Safety Orientation will be completed by all contractors within the hospital prior to the start of their work. To schedule the orientation contact:
 - Markham Site: Quality Assurance Associate of Corporate Services (ext. 7023)
 - Uxbridge Site: Supervisor, Support Services (ex. 5281)
- Non-compliance with this policy as well as other mandated policies, procedure, act or regulation is subject to actions, as may be provided for in the contract documents or purchase order that could lead to stop work orders, expenses, or other means to correct the deficient and as determined by the Project Manager.

PROCEDURE:

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Access to Work Sites

- All contractors must make prior arrangements to enter the work area before arriving at the hospital. These arrangements can be made through:
 - Markham Site: Manager, Energy & Infrastructure (ex. 7140)
 - Uxbridge Site: Supervisor, Support Services (ex. 5281)
- All contractors must sign in and out at Plant Maintenance/ Support Services in a book provided for this purpose on a daily basis.
- Before commencing work each day or part thereof, the Project Manager must be notified. The type of work will be described, duration, number of workers and any possible disturbances, noise, dust, obstructions, etc. The hospital's representative will introduce contractors to the Project Manager at the commencement of the job.

Confidentiality

- All contractors must sign a Protection of Confidential Information form prior to beginning work at the hospital.
 - Form to be provided during hospital orientation.

Identification

- Contractors will be provided with an identification (ID) badge, which will identify them as a contractor at the hospital. These badges must be returned after work is completed. Any badges not returned at the end of the job will be charged to the contractor by deduction from their invoice.
- Badges can be obtained through:
 - Markham Site: Security Supervisor (ex. 6301)
 - Uxbridge Site: Supervisor, Support Services
- ID badges must be worn at all times when on hospital property. Any contractor not wearing an ID badge will be asked to leave the hospital immediately by Security and/or hospital personnel.
- ID badges are non-transferable and must only be used by the person to whom it is issued to.

Keys/Swipe Cars

- All mechanical and electrical rooms are restricted for authorized personnel and should remain locked at all times
- Keys/swipe cards may be available at the discretion of the Security or Project Manager. A small key deposit may be required.
- Entrance to locked areas can be made by contacting the hospital's representative, Project Manager or Security during off hours, providing access has been granted by the Project Manager prior.
- A copy of all keys to the contractor's site, storage, offices and marshalling yards must be given to Security.

Parking

- Contractors may purchase monthly parking passes which will allow them to park at substantially reduced rates.

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- Contractors will respect emergency, restricted, and accessibility parking areas including fire routes or other posted no parking areas. Parking in any of these areas may result in the vehicle being ticketed and/or towed.
- Parking is not allowed anywhere on hospital property except in designated parking lots for any reason other than delivery or pick up of materials, tools and or equipment.
- Contractors are responsible for all parking fees.

Deliveries/Equipment and Material Storage/Staging Areas

- Arrangement must be made with the hospital's representative or Project Manager before any tools, equipment or materials are brought on site to determine acceptable storage and internal delivery routes to work area.
- All materials and equipment deliveries will be made to the receiving area, where every effort will be made to inform receiving staff of the impending delivery in an effort to minimize the effect on the loading dock.
- Work or material delivered on the site or premises to form part of the works will be considered the property of the hospital and will not be removed without the consent of the hospital, but the contractor will have the right to and will remove the surplus materials after work is complete.
- Use of the elevators will be arranged through the hospital's representative or Project Manager
- Where permission is granted to the contractor to use an elevator, the contractor will be responsible for providing protection to the cab and will be responsible for repairing any damage caused during the use of the elevator at the contractor's cost. The contractor will clear and surrender use of the elevator immediately during an emergency as determined by the hospital.
- MSH will provide the contractor with a designated outdoor staging area when required.

Tools, Equipment and Supplies

- Sharp tools and dangerous objects must not be left unattended. If lost, sharp tools and dangerous objects must be reported to the Project Manager immediately.
- All tools, equipment and materials must be properly labeled, secured and protected. The loss of any such materials will be the responsibility of the contractor. The hospital assumes no responsibility for lost or stolen equipment.
- Designated washroom facilities will be appointed by the hospital for use by all contractors.
- The onsite temporary washroom facilities will be cleaned daily at the contractor's expense.
- Contractors are to minimize traffic throughout occupied areas of the hospital. Travel occurring between entrances, public areas and the work area will occur via the most direct route – not through patient wards or sensitive areas.
- Noise, dust, and odors will be minimized to ensure occupants and patients in areas adjacent to the construction area are not disturbed. Corrective action to cease or limit disagreeable annoyances to the occupants and patient will be implemented immediately upon notification by the hospital.

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- Areas of the Uxbridge site have been identified as Asbestos-Containing Materials (ACM). For compliance to training, inspection, maintenance and removal, refer to internal policy titled *Asbestos Management*.
- The Owner's asbestos log is made available for contractor review at the commencement of the project.
- Remove all temporary construction aids at completion of project or as required and make good all new and existing work, construction, etc., damaged in the course of erecting and removing said temporary construction aids.

Property Protection

- The contractor will protect the work area, hospital staff, patients and visitors from any danger arising from the work being performed. Signs, barricades, barriers, etc. will be supplied, erected, maintained and removed, as required.
- Architectural, mechanical and electrical drawings indicate the approximate locations of services as far as these are known. The contractor and subcontractors will take all measures to verify actual location of service lines prior to start of work. Because the breaking or disrupting of various services may cause a "matter of life or death" situation in patients under the care of the hospital environment, notify the hospital immediately whenever any service line is broken or damaged. No signs, advertisements, or notices of any kind shall be placed on/in the building, fences, hoardings or any place on the site except as specifically directed in writing and approved by the hospital.
- Dust barriers will be required to prevent dust and dirt migrating from the work area. These barriers will be made up of heavy gauge poly curtains or gypsum wallboard on steel studs with continuous sealed top and bottom to be dust tight, and continuous taped joints. The contractor is responsible to provide, install and remove these barriers.
- Seal and cap all ductwork and grilles within the work site and adjacent to the work site so as to eliminate any migration of dust or airborne contaminants from the site to other work. Remove upon completion and clean up procedures.

Waste Management

- The job site must remain clean and tidy at all times. Only those materials required each day are to be brought to the job site.
- It is the responsibility of the contractor to remove all garbage and debris from the work site on a daily basis – or more often if required. Hospital containers and garbage bins may not be used unless written permission is obtained from the hospital's representative or Project Manager.
- A designated route for transport of debris, rubbish and demolished materials throughout the hospital will be determined in consultation with IPAC.
- Debris, rubbish and demolished materials are to be transported through the hospital in dust tight wheeled containers with dust tight lids or wrapped with heavy gauge poly.
- Materials which are to be removed in the existing building and are not called for to be reused or specifically called for in the specifications to be removed, and turned over to the hospital will become the property of the contractor and will be removed from the site. Where services are connected to such items, services will be removed and capped off except where required or reused when they shall be temporarily capped.

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- Special precautions, as prescribed by provincial and municipal authorities, will govern the removal and disposal of all printed circuit board (PCB) related material (specifically older fixture ballasts). Inform the Project Manager of any PCBs encountered. Follow all regulations in disposing or storing of same on site.
- Contractor will note that contaminated materials will not be re-installed; rubbish and all other debris will be removed from the hospital's property daily or placed in contractor's container.
- Provide onsite containers for collection of waste materials, and rubbish.
- Wet down dry materials and rubbish to lay dust and prevent blowing dust.
- Coordinate with the hospital for the removal of debris during the evening hours.
- Boards with protruding nails must not be left on the floor. In addition, bolts must be cut off at floor level to eliminate a possible tripping hazard.
- Contractors to broom clean site on a daily basis and as instructed by the hospital to minimize accumulation of debris and dust and provide pest control if required. Notify the Project Manager if pest control products are being used.
- Oily and waste solvent rags are a fire hazard and will be deposited in approved containers and removed from site daily.

Request for Utility Shutdown

- Contractors must request the scheduling of all construction related utility shutdowns through the Project Manager.
- MSH staff are always responsible for the disconnection or shut off of all valves, circuit breakers and smoke detectors for utility outages.
- Contractors will not shut down, tie into or disrupt any utility systems unless specifically directed to do so by the Project Manager.
- Contractors and sub-contractors will not bag, disconnect, or impede any smoke or heat detection systems.
- The utilities affected by this policy include but are not limited to all plumbing, fire sprinkler, gases, smoke detection, fire alarm, electrical, telephone, data, security, steam, heating, air conditioning, exhaust and conveying systems.
- The contractor's request for a utility shutdown must be performed in accordance with the following procedure:
 - 1) Contractor to identify the utility that needs to be shutdown, all areas of the building that will be affected by the shutdown, and any other associated utilities that may be affected.
 - 2) Obtain verification of this information from the Project Manager. The contractor/subcontractor should thoroughly research the shutdown to determine which valves or electrical panel boxes will be affected by the shutdown. The contractor should also determine the duration of time required for the shutdown prior to meeting with the Project Manager and Engineering. However, MSH Engineering is responsible for the final scheduling of the actual start time and duration of all construction and renovation related utility shutdowns. The

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- contractor and his subcontractors will perform all work necessary prior to the shutdown in order to minimize the duration of the shutdown.
- 3) Complete a Request for Shutdown Form (Appendix E) and submit it to the Project Manager. It must be submitted in writing or by email a minimum of seventy-two (72) hours prior to the requested time of the shutdown. The actual amount of notice time may vary, depending on the type of shutdown, the area affected by the shutdown, the scheduled activities of occupants in the area affected, and the current workload of MSH Engineering.
 - 4) Upon receipt of the Contractor's Request for Shutdown Form, the Project Manager will coordinate with Engineering and the building occupants to verify the actual start date and time of the shutdown. Depending on the complexity of the shutdown, a meeting may be scheduled with the Project Manager, the contractor and all appropriate subcontractors to coordinate the logistics of the shutdown.
 - 5) After the start time, duration and logistics of the shutdown have been verified; the Project Manager will create the appropriate shutdown notices.
 - 6) The contractor/subcontractor must be on site, have all preparations in place and be ready to begin the shutdown at least fifteen (15) minutes prior to the posted start time of the shutdown. This preparation includes having all of the equipment, supplies and manpower needed at the correct location to perform the work. Failure to do this can result in the shutdown being cancelled and re-scheduled for another time.
 - 7) When the contractor/subcontractor's work is completed, the contractor/subcontractor must notify the Project Manager so the system can be re-energized.
 - 8) The contractor/subcontractor that is responsible for the work must remain on-site until the system is fully re-energized and no leaks or other deficiencies have been detected.
 - 9) Sign the Shutdown Request Form complete space and return to the Project Manager for close out and filing.

Continuity of Existing Services

- The existing building must be kept in operation at all times and contractors will arrange the work of the project so that services to the existing buildings will not be unduly interrupted at any one time. The time for any interruption must be kept to a minimum and be arranged in writing with the hospital, minimum seventy-two (72) hours in advance.
- Existing services will not be worked on without first obtaining permission from the hospital's representative. Submit a procedure to follow for the work being performed.
- Any interruptions of the sprinkler system will be managed using the FM Global Red eTag permit system. Contact Manager, Plant Maintenance/ Support Services Management for the process.
- All drilling and other noisy operations must be arranged on a scheduled basis with the hospital prior to commencing work. Obtain an approved release form from the hospital.
- All shut downs of major mechanical valves and electrical breakers must be arranged on a scheduled basis with hospital prior to commencing work.
- Refer to internal policy titled *Lockout Tagout*.

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Hot Work

- Electric or gas welding will not take place within three meters of combustible materials, or in space occupied by persons, unless operated behind a shield of non-combustible materials. Maintain extinguishing equipment near all welding and cutting operations.
- No flammable liquids may be brought into the building unless they are stored in approved safety cans.
- No open flame or grinding type equipment which could cause sparks will be used in the battery areas unless temporary partitions have been erected to ensure ambient gases cannot reach flame or sparks.
- A *Contractor Hot Work Permit* (Appendix C) must be obtained from the hospital before any such work is started, at least 48 hours notification and all welding is to be done by certified welders.
- Purging must be done on any lines or containers which have been used for combustible materials and permission obtained from the hospital before any work is started.
- When arc welding is to be done in the vicinity of hospital employees/ students, approved area shields must be used. Shields will be supplied by the contractor.
- All welding work must have adequate ventilation for fumes and gases generated, and should not re-circulate into the building's ventilation system. Adequate ventilation can be obtained through natural or mechanical means or both.
- Gasoline powered engines are not permitted inside the building or operated where the exhaust fumes may enter the building or the ventilation system.
- Electrical supply lines for arc welding must be kept in good repair.
- No cutting, welding or drilling is to be done to the structural elements of the building or without the express written consent of the hospital. Appropriate fire extinguishers will be provided by the contractor within reach of welding operations at all times.
- A fire watch will be maintained for 3 hours after hot work. During the first hour the work site must be continuously checked and periodic checks will be done for the remainder of the time.
- Refer to Appendix B for *Safety Regulations and Welding Procedures*.

Compressed Gas

- The following rules will apply to compressed gas cylinders on hospital property:
 - Storage – all compressed gas cylinders must be stored in a ventilated area which is located away from traffic and free from falling materials. Full cylinders must be stored in a separate area from empty cylinders. In all cases, cylinders must be fastened securely in an upright position, the valves closed and safety caps in place, hand tightened.
 - Transportation – all cylinders being transported must be fastened securely in an upright position with the safety caps in place. No cylinder, full or empty, will be transported lying across the forks or lift trucks and shop trucks. Use dollies appropriate for transport.
 - Usage – during use, cylinders must be fastened securely in an upright position in an approved cart. In no case will cylinders be used in a lying down position. They will never be used as rollers or for any purpose other than to carry gas. Cylinders

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must be kept away from sparks, slag or excessive heat. Oil or grease should never come in contact with the bottles, lines or gauges.

- Contractors are responsible to use their own compressed gas cylinders and request for approval from Plant Maintenance for storage in appropriate areas of the hospital.
- Contractors will remove all compressed gas cylinders relevant to the work off hospital property when contract is completed.

Ladders, Scaffolds, and Hoisting

- The contractor is responsible to provide scaffolding and platforms. Each subcontractor may provide own scaffolding, ladders and platforms where it is normal practice to do so.
- Straight ladders must be free of damage. They must not be placed on boxes or placed in a doorway unless someone is stationed at the bottom. Use the appropriate type of ladder for the task.
- Ladders will be “tied off” when in use.
- Scaffolds must be in good condition and if equipped with wheels, the wheels must be locked when in use.
- Scaffolding will be supported independently of walls and will be erected and removed as required to avoid interference with other trades. Scaffolding over finished floors will be mounted on rubber wheels. All scaffolding, ladders, elevated work platforms and other temporary construction will be designed, constructed, erected and maintained to meet the requirements of the OHSA RSO 1990 and its applicable regulations (ex. Health Care, section 80-94).
- All tools and equipment required for the execution of the work will be CSA approved and provided by the contractor and/or subcontractors. The aforementioned items will be inspected for safety by the contractor and/or subcontractors prior to use.
- Suspended loads will not be left unattended, signs must be posted and loads must not be moved over the heads of anyone.
- When overhead work is in progress, the floor area should be roped off to prevent possible injury to anyone working or passing below.
- Contractor to provide watchmen to direct traffic and personnel when lifting materials overhead.

Emergency Codes

Code Red	Fire
Code Orange	External Disaster
Code Orange CBRN	External Disaster – Chemical Biological Radiological Nuclear
Code Yellow	Missing Patient
Code Yellow Amber	Missing Child/Infant
Code Green	Evacuation (hospital or area specific)
Code Blue	Cardiac Arrest
Code Pink	Infant/Paediatric Cardiac Arrest

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Code Purple	Hostage-Taking
Code White	Violent Person
Code Black	Bomb Threat
Code Grey	External Air Contamination/Infrastructure Failure
Code Silver	Active Shooter
Code 111	Short term assistance
Code Brown	Release of Hazardous Materials
Code Transfusion	Massive Hemorrhage Protocol

- To initiate an emergency code call:
 - Markham Site: 555
 - Uxbridge Site: 58

Emergency and Fire Prevention

- Contractors are responsible to provide their own fire-fighting equipment, which are to be maintained at all times and be readily accessible.
- While work is proceeding in existing hospital, existing fire hoses and fire extinguishers will be used as required. Contractor is responsible to recharge fire extinguishers if used and re-rack hoses.
- Contractor to provide temporary portable fire extinguishers throughout the work area as required and/or instructed.
- Ensure that if work being carried out can possibly start a fire that proper and suitable precautions are taken and fire extinguishers are provided by trades carrying out said work, before said work is started. Provide “fire watch” during welding operations, and for one hour after completion of the hot work and file a *Hot Work Permit* (Appendix C) with Plant Maintenance or the Project Manager at a minimum of 48 hours prior to start of work.
- While work is proceeding in the existing hospital, existing fire hoses and fire extinguishers will be used as required. Recharge fire extinguishers if used and re-rack hoses and inform the Project Manager of their use. Fire routes or personnel thoroughfares must not be obstructed.
- Lockable fire doors must not be wedged open or latches disengaged.
- Safety clearances are required before any cutting, welding, core drilling, open flame work or dust work is done.

In Case of Fire

In case of a fire or an emergency, the following procedures should be followed:

- R** Remove anyone in danger
- E** Ensure all doors are closed
- A** Activate the fire alarm (pull station)
- C** Call Telecommunications
 - Markham Site: Dial 555
 - Uxbridge Site: Dial 58 and announce “Code Red, location” three times
- T** Try to extinguish fire, if safe and trained to do so

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- When the fire alarm is activated:
 - An alarm will be heard.
 - All magnetic door holders will be released and fire separation doors will be closed.
 - Telecommunications will announce over the PA the location of the fire for “Code Red Area” (Markham Site).
 - All contractors and service persons hearing the fire alarm will stop work, listen for the location of the fire and await further instructions. Persons are requested to stay in the area until they are given further instructions or the fire alarm is cleared. Do not pass through fire doors.
 - If the fire or emergency becomes more critical, an evacuation (Code Green) may be requested in specific areas and overhead instructions on the area affected will be announced.
- If the area in which the contractor is working is to be evacuated, the contractor is responsible to turn off all equipment, activate the fire alarm as per hospital Code Red procedures, extinguish all flames, if safe to do so and exit the building via the closest building exit closing all doors behind. The Project Manager should be notified immediately.
- If the fire or emergency is cancelled, the bells will cease and an announcement will be made acknowledging the cancellation. Contractors may now continue their normal work and circulation in the hospital.

Temporary Fire Safety and Fire Alarm Actions

- While work is proceeding, the contractor will make certain that existing fire alarm systems and life safety systems (ex. smoke detectors, enunciators, bells, exit lights, etc.) are in proper operating condition at all times except when work is being done on said system. When work is not being done on said systems (ex. at evenings, weekends, etc.) said systems will be left in proper operating conditions by temporary or permanent means.
- If, during the progress of the work, it is necessary to take all or part of the existing fire alarm system out of service, prior to the final installation of the new fire alarm system, the contractor will provide an adequate fire watch and also advise the hospital's authorities of the condition at least forty eight (48) hours prior. All such shut downs and need for a fire watch will be kept to a minimum. The fire watch will consist of a person available to patrol the affected areas and initiate a proper fire drill should the need arise.
- For any occasion that the contractor work has set off a false fire alarm, costs that may be incurred as a result of non-compliance to this policy (ex. inadequate notification) are the responsibility of the contractor.

Safety

- The contractor will be responsible for ongoing safety inspections, implementing and enforcing instructions, and the assistance of the hospital's Joint Occupational Health and Safety Committee, if established and attendance of the Committee's meetings.
- The Supervisor of the project representing the contractor, will be responsible for his employees/students maintaining standard safety practices, as well as the specific safety

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rules listed below and additional instructions issued by the hospital's representative while working on the property of the hospital.

- The safe operating practices mentioned in this policy will be strictly adhered to by all contractors regardless of the nature of their specific duties. These practices will be explained to each new person by the contractor and reemphasized in day-to-day contact as required.
- The contractor will supply the Project Manager with a copy of their construction safety program.
- SDS sheets are to be available on site and readily accessible to the Project Manager at their request.
- Take all safety precautions and furnish and install where required, guards, fences, barriers, rails, lights, etc., necessary for the prevention of accidents and comply with all applicable laws and regulations with regard to safety. Remove guards, fences, etc., at completion of work or as required.
- The contractor will provide one first aid station, including an emergency eye wash station. The first aid station will be equipped with an approved first aid kit as per First Aid Ontario Regulation 1101 under the Workplace Safety and Insurance Board Act (WSIB). A person trained in first aid treatment will operate the station.
- Hospital emergency facilities are available on a twenty-four (24) hour basis. Report all accidents to the Project Manager and hospital's OHS Department.
- Contractors will be familiar with the Workplace Hazardous Material Information System (WHMIS) as per Ontario regulation which require the uniform labeling of all controlled products and accessibility to valid Safety Data Sheets (SDS) onsite for these products. The tendering contractor will ensure that all employees/students and subcontractors representing their firm who work with, or in proximity to, hazardous materials fully understand all potential hazards and have been thoroughly trained to deal with any emergencies.

Protective Equipment Procedure

- Everyone must wear approved hard hats and safety footwear at all times when on site.
- Goggles or appropriate eye protection will be worn where there is an exposure risk from chipping, sawing, grinding, cutting, welding, exposure to heavy dust, acids and other toxic liquids to the eyes.
- Face shields will be worn where full face protection is required in exposures similar to those listed above. Welding helmets will be worn by personnel doing welding.
- Flagmen vests will be worn by personnel flagging traffic. (Flagmen to be instructed in proper flagging procedures).
- Safety belts, fall arrest apparatus, etc., will be used by men working at heights above three (3) metres and only for those who have completed appropriate training.
- Padlocks and danger tags – where there is a danger of equipment being energized, the motor switch on all individual motor drives will be locked in the open position and de-energized to a zero state. The contractor will affix separate locks by trade, one lock per worker as a minimum; in addition, a danger tag will also be applied to the switch handle bearing a brief description of the work being done. The tag and lock will remain in place

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until the work has been completed. In the case where air, steam or liquid is the motivating power, the valves will be locked in the closed position. *Refer to internal policy 020.906.030 Lockout Tagout.*

- No employee/student will be allowed to work within the swinging radius of a suspended load.
- On all operations, crane operators will take signals from a designated signalman only. No load will be moved until the operator has received instructions from the designated signalman. Signalman will see that everyone is in the clear before signaling the crane operator and that boom swing clears building and power lines.
- All tarpaulins and coverings will be fire resistant.
- Maintain clear and safe emergency exit paths for personnel at all times.
- Abide by all recommendations made by OHS.
- Provide barricades or covers around openings such as ceiling, floors, elevators as required by applicable legislation and standards. Covers must be secured and constructed to meet structural requirements as per Building Code.
- Secure temporary covers over openings in floors with material suitable to support the weight of workmen. Do not use loose plywood to cover openings. Place notice signage as appropriate. Openings in the roof or floor must be guarded to prevent anyone from falling through or to prevent stock or scrap from dropping down.
- Only three-wire grounded equipment will be used for a 120 volt power supply. Plugs and cords will be in good repair.

Accident/Incident Reporting

- Any unplanned event, dangerous accident/incident, potential hazard or damage to MSH property/equipment that occurs as a result of construction/contractor activities must be reported immediately to the Project Manager.
- The contractor will complete a *Construction Incident Report* (Appendix H) and forward to the prime consultant and the Project Manager within forty-eight (48) hours of the incident occurrence.

Hospital Policies

Violence and Harassment Prevention

- MSH is committed to the principle of equal opportunity for all employees/students. Accordingly, the hospital is committed to providing a work environment where the dignity of the employees/students is respected and where everyone, including the surrounding communities can enjoy the freedom to carry out their duties free from violence and harassment, including sexual harassment.
- Sexual harassment is prohibited on the part of all those who have a contractual agreement or privileges with MSH.

Asbestos Management Program

AMP applies to all categories of property with the exception of vacant lands. AMP applies to all MSH staff as well as all service providers and contractors performing work in MSH facilities. Refer to internal policy titled *Asbestos Management*.

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- Persons must be dressed in clean and appropriate clothing – no shorts or cut-offs. Shirts to have sleeves.
- MSH is a smoke and vape free environment and as such smoking is not permitted anywhere on hospital property (refer to internal policy titled *Smoke and Vape Free Environment*).
- Contractors are not permitted to use, or be under the influence of alcohol, marijuana, or any illegal drugs while conducting work at MSH.
- Refer to internal policy titled *Video and Audio Recording and Photo Device Use*.

Contact Information

Markham Site

Position	Office Phone
Director, Facilities, Support Services and Food Services	7022
Manager, Energy & Infrastructure	7140
Manager Fire Safety, Security and Parking Operations	6301
Administrative Assistant, Plant Maintenance	6009
Receptionist, Support Services	7023
Main Switchboard, can reach all above	905-472-7000 Or Dial 0 in internal phones

Uxbridge Site

Position	Office Phone
Supervisor, Support Services	5281
Switchboard/Registration and Inpatient Unit, can reach all above	905-852-9771 ext. 5300

Record Keeping

- Any online Incident reports (i.e. iReport) will be recorded and filed in Occupational Health and Safety and/or Quality, Risk and Patient Relations.
- Investigation reports by the Project Manager will be kept on file in Plant Maintenance/Support Services.
- Contractors are responsible to maintain documentation internally.

DEFINITION(S):

Not applicable.

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REFERENCE(S):

Canadian Environmental Protection Act, 1999 (S.C. 1999, c.33)
 Occupational Health and Safety Act, R.S.O. 1990, c. O.1
 Workplace Safety and Insurance Act, 1997, S.O. 1997, c. 16, Sched. A

RELATED DOCUMENTS:

Asbestos Management
 Fragrance Reduced Workplace
 Lockout Tagout
 Smoke and Vape Free Environment
 Video and Audio Recording and Photo Device Use
 Workplace Violence Prevention

RESPONSIBILITY:

Required Endorsements	Sponsor	Approval Authority
Facilities and Support Services Infection Prevention and Control Joint Occupational Health and Safety Committees	Manager, Energy & Infrastructure	Director, Facilities and Support Services, Food Services

DOCUMENT HISTORY:

Type	Individual/Committee	Date	Outcome
Revise	Director, Plant Maintenance and Biomedical Services	01/04/2014 01/05/2015	Revised; Approved
Revise	Director, Facilities, Support Services and Food Services	01/05/2016	Revised; Approved
Review	Director, Facilities, Support Services and Food Services	01/06/2017	Reviewed; Approved
Revise	Director, Facilities, Support Services and Food Services	05/03/2018	Revised; Approved
Revise	Director, Facilities, Support Services and Food Services	01/06/2021	Major Revision; Approved

APPENDICES:

APPENDIX A: Contractor Health and Safety Orientation
 APPENDIX B: Safety Regulations & Welding Procedures
 APPENDIX C: Contractor Hot Work Permit
 APPENDIX D: Contractor Accident Checklist
 APPENDIX E: Request for Shutdown Form
 APPENDIX F: Fire Watch Procedures
 APPENDIX G: Fire Watch Log
 APPENDIX H: Construction Incident Report
 APPENDIX I: Emergency Procedures

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Appendix A – Contractor Health and Safety Orientation

Contractor Name: _____
 MSH Project Manager: _____
 Date Project to Begin: _____
 Date of Safety Orientation: _____
 Present/Attendees: _____
 MSH Staff Presenting: _____

Topics to be covered

Topic	Details	Covered		
		Yes	No	N/A
Confidentiality	<ul style="list-style-type: none"> Ensure all persons have signed “Protection of Confidential Information” form Review consequences of breaching confidentiality 			
ID Badges	<ul style="list-style-type: none"> ID badges must be worn at all times when on hospital property so Security and staff know who they are. Badges must be returned upon completion of required work. 			
Accidents	<ul style="list-style-type: none"> Contractor Accident Checklist has been developed and is attached (See Appendix D). Review list with contractor. 			
Code of Conduct / Behaviour	<ul style="list-style-type: none"> Review expectations of behaviour while at the hospital. Review Workplace Violence and Harassment Prevention policy 			
Emergency procedures	<ul style="list-style-type: none"> Ensure every worker has access to telephone for emergency purposes Must be posted on site Example is attached (See Appendix I) 			
Fire Routes	<ul style="list-style-type: none"> Must not be obstructed. Lockable fire doors not to be wedged open or latches disengaged. 			
Fire Extinguisher	<ul style="list-style-type: none"> Contractor must supply and maintain suitable extinguisher in an easily accessible location. 			
Flammable Liquids	<ul style="list-style-type: none"> Ensure MSH Fire Marshall aware that flammable liquid on site. Ensure stored and used appropriately. 			
Fire Alarm System & Life Support System	<ul style="list-style-type: none"> To be kept in operating condition. If necessary to take part or all of existing fire alarm system out of service, the contractor must advise MSH Project Leader at least 48 hours in advance and provide a fire watch until system is back operating. 			
Emergency Codes	<ul style="list-style-type: none"> All codes are announced over the Public Announcement system and are in effect until an “All Clear” is announced. 			
	<p>Call a code Markham site:</p> <ul style="list-style-type: none"> Preferred method would be on MSH phone & dial 555 – state emergency and location If MSH phone is not available, on cell phone dial 905-472-7373 then dial 555– state emergency and location 			

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Topic	Details	Covered		
		Yes	No	N/A
	Call a code Uxbridge site: <ul style="list-style-type: none"> ▪ Dial 58, Announce on-site Code and location (3 times) ▪ If MSH phone is not available, on cell phone dial 905-852-9771, ext. 5230 or press '0' and state emergency and location. 			
	Code Red – Fire Remove anyone in danger Ensure all doors are closed Activate the fire alarm Call Telecommunications (Dial 555 – Markham site; Dial 58 and announce “Code Red, <i>location</i> (3x)”– Uxbridge site) Try to extinguish fire, if safe and trained to do so <ul style="list-style-type: none"> ▪ Ensure all employee/student aware of their closest exit at all times and where to assembly. ▪ Ensure all employees/students aware of closest pull station and how to activate it. ▪ Upon hearing an alarm (slow alarm 30 strokes per minute) stop work, listen for location of fire and await further instruction. ▪ Stay in area and do not cross fire doors. ▪ Non-noisy work may continue while waiting further instruction or alarm is cleared/ cancelled. 			
	Code Orange – External Disaster <ul style="list-style-type: none"> ▪ To mobilize hospital resources in the event of a major external disaster. ▪ May continue work unless otherwise notified by MSH Project Manager. 			
	Code Orange CBRN – Chemical Biological Radiological or Nuclear Disaster <ul style="list-style-type: none"> ▪ To mobilize hospital resources in the event of these types of disaster to decontaminate patients ▪ May continue work unless otherwise notified by MSH Project Manager. 			
	Code Yellow – Missing Patient <ul style="list-style-type: none"> ▪ To initiate a coordinated hospital-wide search for a missing patient ▪ Be alert for persons who do not belong in your area and report it to Security at the Markham site and the PM at the Uxbridge site ▪ Evacucheck markers are activated until Code Yellow is cleared/end. ▪ May continue work unless otherwise notified by MSH Project Manager. 			

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		Yes	No	N/A
	<p>Code Yellow Amber - Missing Child or Infant</p> <ul style="list-style-type: none"> ▪ Initiate an immediate hospital-wide search for a missing or abducted child ▪ Do not disturb any rooms where Evacucheck markers are activated until Code Yellow Amber is cleared/end. ▪ Report any suspicious person or child wandering by self to Security at the Markham site or the PM at the Uxbridge site. ▪ May continue work unless otherwise notified by MSH Project Manager. 			
	<p>Code Green – Hospital Evacuation</p> <ul style="list-style-type: none"> ▪ If entire hospital needs to be evacuated, alarm bells will double in frequency (120 strokes per minute) followed by instructions on the PA. ▪ Stop work and listen for the instructions. Will announce if area specific and/or routes inaccessible. ▪ If you must evacuate, turn off all equipment, extinguish all flames and leave area and building immediately. ▪ Code Green Stat – immediate danger and everyone must leave. 			
	<p>Code Blue/Pink – Cardiac Arrest</p> <ul style="list-style-type: none"> ▪ Prompt notification of a cardiac arrest situation. ▪ Stay clear of area where code is called ▪ May continue work unless otherwise notified by MSH Project Manager. ▪ May call Code Blue if needed ▪ Code Pink – may hear it is for infant/paediatric patients 			
	<p>Code Purple – Hostage Taking</p> <ul style="list-style-type: none"> ▪ A hostage taking situation is happening in the hospital (silent code) ▪ Not announced overhead ▪ Do not enter the inner perimeters set by internal Code Purple team 			

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Topic	Details	Covered		
		Yes	No	N/A
	<p>Code Brown – Release of Hazardous Materials</p> <ul style="list-style-type: none"> ▪ Procedures that will allow staff to respond to an uncontrolled or unplanned release of potential hazardous material in any quantity. ▪ Ensure spills are dealt with efficiently and effectively to minimize or reduce any potential adverse effects on human health &/or the environment. ▪ If spill in area and you can handle it: remove anyone in danger, contain & restrict site, identify chemical & consult SDS for appropriate precautionary measures, ensure use appropriate spill kit, clean soil, dispose of waste properly, inform MSH Project Manager ASAP. ▪ If spill beyond your capabilities: Safely evacuate everyone and secure area, Prevent spread of vapours by closing doors Inform MSH Project Manager and use emergency procedures to call Code Brown Leave electrical equipment alone Locate SDS and available spill kit while awaiting arrival of Code Brown Spill Response team. ▪ Stay clear of area where code is called ▪ May continue work unless otherwise notified by MSH Project Manager. 			
	<p>Code White – Violent Person</p> <ul style="list-style-type: none"> ▪ Provide a timely, efficient and effective response to de-escalate the situation when an MSH staff, visitor or patient is acting out and poses a threat to self, others or the hospital. ▪ Stay clear of area where code is called ▪ May continue work unless otherwise notified by MSH Project Manager. ▪ At Uxbridge site, call 911 for all threatening persons ▪ May initiate a Code White if need it 			
	<p>Code Black – Bomb Threat</p> <ul style="list-style-type: none"> ▪ Safe, prompt hospital-wide response to a bomb threat ▪ If receive a bomb threat call 555 (Markham); 911 and announce it overhead – dial 58 (Uxbridge) ▪ Conduct thorough search of construction site area and report to Command Centre (you will hear overhead extension for centre). ▪ Once search is conducted may continue work unless otherwise notified by MSH Project Manager. 			
	<p>Code 111 – Short Term Assistance</p> <ul style="list-style-type: none"> ▪ Extra hospital staff needed for an immediate short-term critical situation ▪ May continue work unless otherwise notified by MSH Project Manager. 			

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Topic	Details	Covered		
		Yes	No	N/A
	<p>Code Grey – External Air Contamination/Infrastructure Failure</p> <ul style="list-style-type: none"> ▪ Alerts the hospital of an unscheduled/unplanned infrastructure loss or failure of substantial significance (e.g. flood, emergency generated power, water) and air contamination ▪ Hospital is under lockdown for air contamination and limited access to entrances ▪ Depending on failure, may need to shut off all activities until further notice; contact Project Manager for directions to continue work 			
	<p>Code Silver – Active Attacker</p> <ul style="list-style-type: none"> ▪ A active attacker situation is happening in the hospital (Do not enter the inner perimeters set by internal Code Silver team). 			
	<p>Code Transfusion – Massive Hemorrhage Protocol</p>			
Infection Prevention and Control	<p>All CSA standards and procedures must be followed .Copy of IPAC policy included in Orientation package.</p>			
	<p>Hand Hygiene Hand Hygiene must be performed on entry to the hospital and patient care areas including patient rooms, upon leaving patient care areas including patient rooms and the hospital; after using the washroom or blowing one's nose</p>			
	<p>Cough Etiquette Contractor staff are to cover their mouth and nose when coughing or sneezing. If a tissue isn't available cough/sneeze into an upper sleeve, NOT hands. Perform hand cleaning, either with soap and water, or using alcohol hand foam after contact with secretions or contaminated tissues</p>			
	<p>Contractor Staff Illness Contractor staff must not come to work if ill with new onset of fever, shortness of breath and/or cough, or vomiting or diarrhea. Contractor staff off ill due to a febrile respiratory illness may return to work upon improvement of their symptoms. Contractor staff off ill due to a gastrointestinal illness may return to work once they are diarrhea free or not vomiting for 48 hours</p>			
	<p>Entry into Isolation/Precaution Rooms Contractor staff must not enter the rooms of patients on isolation/precautions. Rooms are identified by signage indicating "Contact", "Droplet" or "Airborne Precautions</p>			
Smoking and Vaping	Prohibited anywhere on hospital property.			
PPE	<ul style="list-style-type: none"> ▪ Must wear PPE suitable and as required by regulations for the work being done. ▪ PPE must be in good condition and inspected daily before use. ▪ Employees/students must be trained on proper use of PPE. 			

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Topic	Details	Covered		
		Yes	No	N/A
Tools	<ul style="list-style-type: none"> ▪ CSA approved or equivalent, be in good repair and used in safe manner (i.e., what is intended for). ▪ Not to be left unattended in public areas of the hospital ▪ If lost items (e.g. sharp tools, dangerous items) contractor must report to Project Manager immediately 			
Equipment	<ul style="list-style-type: none"> ▪ Must be in good state of repair and meet all applicable government approvals. ▪ Must have appropriate rating and safety protection. ▪ Stored in safe manner. 			
WHMIS and TDG	All WHMIS and TDG products must be properly labeled—and employees/students trained on the program(s).			
SDS	<ul style="list-style-type: none"> ▪ Available and current to be provided to MSH Project Manager before product is brought on site. ▪ Contractor to have current SDS on construction site when using product. ▪ Upon request, must provide SDS to hospital's OHS 			
Required health & safety postings	<ul style="list-style-type: none"> ▪ Name, address & telephone number of constructor's head office ▪ Company health & safety policy ▪ WSIB "In case of Injury at Worker" First aid poster ▪ MLTSD Health and Safety at work poster ▪ OH&SA & Construction Regulations ▪ Emergency Procedures ▪ Valid certificate of first aider on duty ▪ Name, trade and employer of health & safety rep or members of JOHSC ▪ Address & phone number of nearest Ministry of Labour, Training and Skills Development ▪ Danger signs in hazardous areas ▪ Ministry of Labour, Training and Skills Development Notification form, if applicable ▪ Any Ministry of Labour, Training and Skills Development orders and reports 			
First aid equipment	<ul style="list-style-type: none"> ▪ WSIA 1st Aid Regulations 1101 must be met. ▪ First aid kit must be provided by contractor for use of their employees/students ▪ Must have a person trained in first aid (valid certificate is less than 3 years old) ▪ MSH has emergency first aid treatment available for contract employees/students via Occupational Health & Safety &/or Emergency Department. 			
Immunization	<ul style="list-style-type: none"> ▪ In order to comply with Regulation 965 of the Public Hospital Act, if the contractor is on the premises for 30 consecutive days or more and is working in close proximity to patients, the contractor shall submit a completed "Record of Immunity" for all its employees/students, agents and representatives. 			

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**APPENDIX B
Safety Regulations & Welding Procedures**

Before commencement of any welding, soldering or cutting in the hospital, the following precautions and procedures must be strictly adhered to:

1. Person(s) who use the equipment must be competent and have authorization to use the equipment.
2. The equipment to be used must first be checked to make sure it is in good and in safe operating condition.

When all of the following procedures and precautions have been taken, you may begin to weld, solder or cut.

1. Obtain an approved Contractor Hot Work Permit (see Appendix C) from Plant Maintenance / Support Services.
2. Check with Plant Maintenance / Support Services to verify smoke detectors, and fire alarms have been disconnected (request for shutdown must be requested 48 hours in advance), who will notify the Fire Department, Telecommunications and appropriate affected parties.
3. Before starting to weld, solder or cut, make certain there is no combustible material nearby or opening leading to combustible material, that flame, sparks, hot slag or hot metal might ignite.
4. Be sure to keep a clear space between cylinders and the work. This is important so that cylinders and regulators can always be reached quickly.
5. Never use acetylene at pressures above 15 LBS PER SQ. in. Using acetylene at pressures in excess of 15 LBS PER SQ. in. is a hazardous practice. To do so is contrary to insurance regulations and is prohibited by law in many places.
6. Never release acetylene into the air near other welding or cutting or sparks or flames. If it is necessary to release acetylene, release it out in the open, in a place where a mixture with air will not be ignited.
7. Always make sure hose is securely connected before using equipment. When using equipment, after making or remaking connections at the blowpipe and regulators, test for leakage.
8. Never hang a torch with its hose on regulators or cylinder valves. The weight of a torch and hose may strain or damage the regulator, or interfere with the quick closing of the cylinder valve.
9. Use special care when working in restricted or confined spaces (following Occupational Health & Safety Act, O.Reg 67/93).
10. Special clothing should be worn, preferably fireproof, but certainly wool, which is relatively resistant to sparks and hot slag.
11. Never do any welding, soldering or cutting on containers until they have been thoroughly cleaned and safeguarded.
12. Protect cylinders, hose, legs and feet when flame cutting. Do not cut material in such a position that will permit sparks, hot metal, or the severed section to fall on the cylinder, hose, legs or feet.
13. Avoid dropping stub ends of welding rods on floor. Put them in a suitable container. Carelessly dropped stub ends are a fire hazard, and also if stepped on, may cause a serious fall, resulting in serious injury. A suitable container partly filled with water and within easy reach is a good place in which to dispose of these short ends.

****Where welding, soldering or cutting must be done near combustible materials, special precautions should be taken to make certain that flame, sparks, hot slag or hot metal do not reach combustible material, and thus start a fire. It is especially important to take special precautions in the case of portable cutting operations. Cutting produces a greater quantity of sparks and hot slag than does*

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welding and locations where portable cutting equipment is used, must therefore, be thoroughly safeguarded against fire.

Additional Precautions for Safeguarding Against Fire:

- Never use welding, soldering or cutting torch where sparks or open flame of any kind would be a hazard. Flames are a hazard in any rooms containing flammable gas vapors, liquids or dust, or any material that ignites easily.
- Take welding, soldering or cutting work that can be moved to a location where there will be no possibility of setting fires. This must always be done when the metal to be welded, soldered or cut is in a place where open flames are prohibited. This practice may also be sensible in many other locations, even if open flames are allowed. If the work cannot be moved, combustible materials should be taken a safe distance away, if possible. If cutting is to be done this distance may be 30 to 40 feet or more.
- Floors should be swept before the torch is lighted. If flammable materials cannot be moved, use sheet metal guards, flame proof curtains, or similar protection to keep sparks close to the work you are doing.
- Have someone stand by to watch the sparks so that they can give warning if sparks get beyond the protective guards. It is not reasonable to expect whoever is doing the welding or cutting to watch the sparks, since his attention is on the work. In addition, the sparks cannot always be seen easily through goggles.
- Be ready to put out any fire promptly with fire extinguishers, pails of water, water hose, or sand. If there is a possibility that a smoldering fire may have been started, keep a worker at the scene of the work for at least half an hour after the job is completed. Have them look carefully for smoke or fire before leaving.
- Never forget that heavy cutting sparks sometimes fly 25 to 30 feet or more and hold their heat for several seconds after landing.

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APPENDIX C Contractor Hot Work Permit

****Application must be approved at a minimum of 48 hours by hospital Plant Maintenance/ Support Services prior to start of work****

Start Date: _____

Start Time: _____

End Date: _____

End Time: _____

Job Location:	<input type="checkbox"/> Markham Site <input type="checkbox"/> Uxbridge Site			
Description of Job:				
Check all that applies:	<input type="checkbox"/> Cutting	<input type="checkbox"/> Core Drilling	<input type="checkbox"/> Open Flame Work	
	<input type="checkbox"/> Welding	<input type="checkbox"/> Dust Work		
Company Name:			Requestors Name:	
Phone #:			Contact Cell #:	
Detailed Area of Work:				
Safety Regulations & Welding Procedures Reviewed (Appendix A)			YES	NO
Is there combustible material in the area or openings to combustible materials?			YES	NO
Is this area considered a restricted or confined space?			YES	NO
Patient occupancy?			YES	NO
Infection Prevention and Control notified at least 48 hours before work			YES	NO

Fire Safety (request for shutdown must be submitted 48 hrs in advance, if required):				
Sprinklers to be deactivated?		YES	NO	
Smoke detectors in area?		YES	NO	
Notification to Security & Fire Department (Plant Maintenance/ Support Services responsibility)		YES	NO	
Fire Extinguisher available?		YES	NO	
Is a spotter required?		YES	NO	

Approval (both signatures required):	
_____ Printed Name of Requestor	_____ Signature of Requestor
_____ Printed Name of Plant Maintenance/ Support Services	_____ Signature of Plant Maintenance/ Support Services

<p>Important Information</p> <p><i>It is the responsibility of the requestor to complete the work as described above with the timeframe requested. This is strictly enforced.</i></p> <p><i>Should the requestors be unable to complete the work within the timeframe requested, the requestor must return to the Plant Maintenance/ Support Services Department one (1) hour prior to completion time (as per above). All overtime incurred will be the responsibility of the contracted company.</i></p> <p>1- Copy posted at Job Site 1- Copy in Plant Maintenance/ Support Services</p>

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**APPENDIX D
Contractor Accident Checklist**

Non-Critical or Non-Fatal Injury

- Give first aid immediately
- Get the person to a physician or Emergency if necessary
- Notify the MSH Project Manager; _____ ext. _____ within 24 hours
- Complete and send *Form 7: Employer's Report of Injury/Disease* for WSIB within 3 days
- Where circumstances and severity warrants secure equipment to prevent further injury or damage; Secure the area to ensure that evidence is not disturbed before an investigation is completed.

Critical or Fatal Injury

Under the Occupational Health and Safety Act, a critical injury means an injury of serious nature that (a) places life in jeopardy; (b) produces unconsciousness; (c) results in substantial loss of blood; (d) involves the fracture of a leg or arm but not a finger or toe; (e) involves the amputations of a leg, arm, hand or foot but not finger or toe; (f) consist of burns to a major portion of the body; or (g) causes the loss of sight in an eye.

- Immediately get medical attention to injured employee/student
- Secure scene of accident, equipment, etc. and make sure no evidence is removed prior to completing an investigation and with the approval from the Ministry of Labour, Training and Skills Development
- Control scene to ensure additional incidents/accidents do not occur
- Identify source of evidence at the scene (people, equipment, materials, environment, and processes)
- Notify Ministry of Labour, Training and Skills Development as soon as possible by telephone. Call MLTSD Health and Safety Contact Centre 1-877-202-0008
- Notify the MSH Project Manager; _____ ext. _____ within 24 hours
- Notify Ministry of Labour, Training and Skills Development in writing within 48 hours
- Complete and send *Form 7: Employer's Report of Injury/Disease* for WSIB within 3 days
- Inform MSH Project Manager of MLTSD visits and provide copy of MLTSD report to MSH Project Manager

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**APPENDIX E
Request for Shutdown Form**

REQUEST FOR SHUTDOWN/BYPASS

Project Name: _____

Date Submitted: _____

Building(s) Affected: _____

Location(s) Affected: _____

REQUESTOR INFORMATION

Person Requesting Shutdown: _____

Company Name: _____

Phone: _____

Fax: _____

Cell Phone: _____

Email: _____

TYPE OF SHUTDOWN

- | | | |
|--|--|------------------------------------|
| <input type="checkbox"/> Water Domestic Cold | <input type="checkbox"/> HVAC Building Supply | <input type="checkbox"/> Sprinkler |
| <input type="checkbox"/> Water Domestic Hot | <input type="checkbox"/> HVAC Building Exhaust | <input type="checkbox"/> Steam |
| <input type="checkbox"/> Electrical | <input type="checkbox"/> Fire Alarm Bypass | |

Asbestos Log Review Completed

Other System Shutdowns: _____

Reason for Shutdown: _____

Known Building Impacts: _____

Shutdown Start Date: _____ Time: _____ AM PM

Shutdown End Date: _____ Time: _____ AM PM

Trade Person Performing Shutdown: _____

MSH Approval: _____

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APPENDIX F
Fire Watch Procedures



Markham Fire and Emergency Services Fire Watch Procedures

Date _____ Time _____

Building Name _____

Building Address _____

Nature of Problem _____

In the event of a fire alarm or sprinkler system failure, and/or maintenance repairs, the following procedures will be followed:

1. For shutdowns longer than **24 hours**, Markham Fire & Emergency Services must be given **notice in writing**.
2. All occupants must be notified by posting written notice that the fire alarm and/or sprinkler systems do not operate and if they suspect and/or see a fire, the occupants must notify Markham Fire & Emergency Services by calling 9-1-1 giving the address, location and type of fire. The occupant must contact the fire watch person, stating the emergency.
3. The fire watch person must contact Markham Fire & Emergency Services and the other occupants in the building when a fire emergency exists.
4. The fire watch person must meet Markham Fire & Emergency Services at the principal entrance with all available information.
5. **On an hourly basis**, all rooms (storage, mechanical, laundry, electrical, furnace, elevator room, stairwells, etc.) and each floor area must be visually inspected by the designated fire watch person, until the fire alarm and/or sprinkler system is functional.
6. A written record must be kept of the hourly fire watch, documentation shall be provided to Markham Fire & Emergency Services upon request.
7. Written fire watch instructions must be given to the fire watch person by the owner, or owner representative.
8. Markham Fire & Emergency Services must be notified when the fire alarm and/or sprinkler system is functional.

Owner/Occupant _____
(print) (sign)

On Site Phone Number _____

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**APPENDIX H
Construction Incident Report**

Markham Stouffville Hospital

PROJECT _____

CONSTRUCTION INCIDENT

REPORT # [_____]

Description of Incident:

**IMMEDIATE
ACTION &
CONTACTS**

Incident reported by:	_____	Time/Date:	_____
Redevelopment P.M. contacted by:	_____	Time/Date:	_____
Security contacted by:	_____	Time/Date:	_____
Facilities contacted by:	_____	Time/Date:	_____
Infection Control notified by:	_____	Time/Date:	_____
Immediate remedial action taken by:	_____	Time/Date:	_____
Consultants contacted by:	_____	Time/Date:	_____

Architectural inspection & report required?	YES	NO	Confirmed by:	_____
Structural inspection & report required?	YES	NO	Confirmed by:	_____
Mechanical inspection & report required?	YES	NO	Confirmed by:	_____
Electrical inspection & report required?	YES	NO	Confirmed by:	_____

Required reports received and distributed:	Architectural	[<input type="checkbox"/>]	Time/Date:	_____
	Structural	[<input type="checkbox"/>]	Time/Date:	_____
	Mechanical	[<input type="checkbox"/>]	Time/Date:	_____
	Electrical	[<input type="checkbox"/>]	Time/Date:	_____

Capital Planning and Infrastructure office notified and comments received

Proposed Remedial Action Summary

MSH Capital Planning Review & Acceptance

Remedial Action Carried Out

Signed off as complete by: _____ Time/Date: _____

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APPENDIX I:
Emergency Procedures

**EMERGENCY PROCEDURES FOR
CONTRACTORS** *(Markham Site)*

FIRE



POLICE



AMBULANCE



EMERGENCY NUMBERS

ON HOSPITAL PHONE, DIAL 555
STATE EMERGENCY AND LOCATION
AN APPROPRIATE CODE WILL BE ANNOUNCED BY
TELECOMMUNICATIONS

IF HOSPITAL PHONE IS NOT AVAILABLE,
USE CELL PHONE
DIAL 905-472-7373, EXT 555
STATE EMERGENCY AND LOCATION
AN APPROPRIATE CODE WILL BE ANNOUNCED BY
TELECOMMUNICATIONS

**EMERGENCY PROCEDURES FOR
CONTRACTORS** *(Uxbridge Site)*

FIRE



POLICE



AMBULANCE



EMERGENCY NUMBERS

**ON HOSPITAL PHONE, DIAL 58
ANNOUNCE EMERGENCY CODE AND
LOCATION**

**IF HOSPITAL PHONE IS NOT AVAILABLE,
USE CELL PHONE**

DIAL 905-852-9771, EXT. 5230 OR PRESS '0'

**STATE EMERGENCY AND LOCATION
AN APPROPRIATE CODE WILL BE ANNOUNCED BY
SWITCHBOARD/REGISTRATION AND INPATIENT UNIT**