

CONTRACTOR ORIENTATION MANUAL



Brockville
General Hospital

Brockville General Hospital

Is comprised of:

- ❖ Charles Street Site (Including McDougall building)
 - * Critical Care, Acute Care, Inpatient Mental Health, Diagnostic Testing, Surgical Services and Ambulatory Care.
- ❖ Front Avenue
 - * Outpatient Mental Health
- ❖ Garden Street Site
 - * Complex Continuing Care, Rehab, Palliative Care



CODE OF CONDUCT

Our Code of Conduct outlines the behaviours that we expect from all person within the Brockville General Hospital. Our Code of Conduct applies to any individual (patient, client, visitor, staff, physician, community partner, volunteer, contractor or student) who gives or receives service in this organization. Our Code of Conduct sets the parameters by which we treat each other, as well as those we serve. All employees, staff, and volunteers will uphold the core values of the Hospital and will sustain a community characterized by inclusiveness and civility.

Code of Conduct

1. We will maintain confidentiality.
2. We will be mindful of what is said, where it is said and the impact it has on others.
3. We will treat everyone in a professional manner that demonstrates respect, dignity, caring and compassion for each individual
4. We will communicate with everyone in a clear, timely, honest manner and demonstrate attentiveness through choosing the appropriate environment, responding and using a calm and helpful tone.
5. We will offer assistance to anyone within the building or on the hospital grounds who appears to be in need of help.
6. We will not tolerate discrimination in any form.
7. If we do not have the answer to a question or an issues, we will obtain the information as soon as possible.



Zero Tolerance Policy

Brockville General Hospital is
committed to a SAFE WORKING
ENVIRONMENT for our employees.
Abusive/aggressive behaviour and/or
coarse language WILL NOT BE
TOLERATED



Confidentiality



Breaching Confidentiality is against the law.

Any information you may see or hear within the hospital regarding patients and staff MUST be kept confidential.

Breaching confidentiality is against the law and may affect your company's contract with Brockville General Hospital

Reduced Scent Policy

- * Due to health concerns arising from exposure to scented products, BGH will work to reduce the use of scented products and to encourage all persons entering our facilities to be scent free.
- * The wearing of scented products (i.e. perfumes, aftershave, hairspray, personal care products etc.) is not permitted within the hospital
- * Low and / or non scented cleaning and building products will be used within the facility whenever possible.
- * Staff are to notify manager if they are sensitive to scented products.



Reduced Scent Policy



**Please do not wear or bring scented
personal products into the hospital.**

Health and Safety

- * Workers have 3 basic rights (OHSA):
 1. The right to know
 2. The right to participate
 3. The right to refuse unsafe work.

- * As per Reg. 213/91, s. 14 & 15, a supervisor shall be appointed for projects at which 5 or more workers are working at the same time.
 - Supervisors must be competent.
 - They shall supervise the work at all times either personally or by having an assistant, who is a competent person, to do so personally.
 - Supervisors are responsible for inspecting all machinery and equipment, perform weekly inspections at a minimum, recognize hazardous conditions on a project, etc.

- ❖ All constructors, general contractors, contractors are responsible for complying with the OHSA and regulations and provide competent supervisors and supervision of their workers and worksites.



Health and Safety

- * All contractors must comply with the Occupational Health and Safety Act and regulations.
- * Follow your company's policies and procedures and also adhere to any BGH specific policies should your activities affect hospital operation, staff, patients, visitors, etc.
- * Wear appropriate personal protective equipment (PPE) at all times as per the OHSA and regulations and as appropriate to the work being performed. For example, fall arrest, safety glasses, hard hat, safety boots, etc.
- * Report hazards to your supervisor. If hazards could affect BGH operation, staff, patients, visitors, etc. report to your BGH facility or project contact.





Health and Safety



- * Provide appropriate signage and site separation/ hoarding around your work area.
- * Ensure your work area is tidy and materials, equipment, and any storage is confined within your work area.



Documentation

- * Contractors are required to have written safety procedures in place, and these must be enforced.
- * All companies and workers must have appropriate and valid training certificates, licenses, and proof of training.
- * All contractors must have valid WSIB documentation, Notice of Project (if applicable), form 1000s, work permits, electrical permits, safety plans, etc.
- * All applicable items and documents must be posted and/ or available on site as per the OHSA and applicable regulations- this is the contractor's responsibility!



WHMIS & MSDS

- * All contractors must be trained in accordance of the Workplace Hazardous Materials Information Safety System (WHMIS) regulations.
- * Up to date/ valid Safety Data Sheets (SDS) must be provided before the products are brought into the building.
- * If the product is not a controlled product under WHMIS regulations but it regulated under other legislation (pesticides, petroleum products etc.) or perceived to be hazardous to health (strong odors), SDS must be provided prior to starting work.
- * The SDS must be provided to the facilities clerk.



Designated Substances

- * All contractors must report immediately to the Project Manager or Facilities Director/ Supervisor and the Health and Safety Coordinator any findings of designated substances they may come upon during their scope of work.

- * Examples of designated substances include:
 - Arsenic
 - Asbestos
 - Lead
 - Mercury
 - Silica
 - vinyl chloride.



Accident/ Incident Reports

- * Any occurrence requiring first aid, medical attention or damage to property must be reported to your facilities or project contact and the occupational health and safety department.
 - Please see next slide for Reporting Critical Injuries
- * This also requires a full investigation by the contracting company (and BGH) with a documented accident/ incident report. This report is to include the corrective action to be taken to prevent recurrence.
- * This documentation must be provided within 24 hours of the accident/incident.

Reporting Critical Injuries

Critically injured means an injury of a serious nature that,

- ▶ Places life in jeopardy
- ▶ Produces unconsciousness
- ▶ Results in a substantial loss of blood
- ▶ Involves the fracture of a leg or arm (not finger or toe)
- ▶ Involves the amputation of a leg, arm, hand or foot (not finger or toe)
- ▶ Consists of burns to a major portion of the body
- ▶ Causes loss of sight in an eye

- * A critical injury of anyone on hospital grounds must be immediately reported to the BGH facilities contact or your project manager. The facilities contact or project manager will then contact the Occupational Health and Safety department.
- * If the injury occurs between the hours of 1600 – 0800 or anytime on weekends or statutory holidays, Admin On-Call must be notified immediately. Contact switchboard at 613-345-5649, ext. 0 to report.



Energy Sources & Lockout/Tag out

- * It is expected that the contractor has written lock-out / tag-out procedures for all potential energy sources.
- * Prior to any drilling through a floor or roof slab or wall, verification must be made by the contractor, as to ensure that no wiring, piping, and/ or agent is in that area or in close proximity that may be affected.
- * For specific equipment it is expected that contractors review BGH Lockout/ Tag out procedures.
- * **There is to be no live work carried out on any energy source.**



Equipment

- * Contractors are expected to have their own tools and equipment.
- * Contractor is responsible inspections and for ensuring that all equipment, tools, etc. are in proper working order and in good condition.
- * Do not use facility technician, cleaners, or other contractors equipment. This includes: vacuum cleaners, mops, ladders, etc.
- ** Specific BGH equipment may have to be utilized depending on the scope and complexity of the work.



Housekeeping

- * Housekeeping: It is expected that each contractor will clean their work area after each work shift and at the completion of the project.
- * Waste removal: No construction waste is to be discarded in the building waste removal system unless otherwise discussed with facilities.
- * Storage: storage is limited within the buildings. Requests for storage will be dealt with on an individual basis.



Fire Alarms/ Heat Detectors

- * All work must take into consideration the possibility of setting off any of the Life Safety Systems. Any amount of dust, aerosol sprays, water vapour, and small amounts of smoke can set off the alarms.
- * All hot work (including any welding, soldering, grinding, etc.) will require a completed Hot Work Permit (available from the Facilities office) and requires a fire watch to be completed as per the Ontario Fire Code. The contractor is responsible for performing the fire watch.
- * Hot work may need to be done after regular hours. Special arrangements may be required depending on the location of work.
- * If unsure whether a hot work permit is required or whether work may cause a false alarm, please notify the Project Manager and the Facilities Manager.



Disruption in Services

- * Utility shutdowns are sometimes required in the course of the project.
- * All shutdowns require the completion of a Request for Utility Shutdown Permit. This may include (but is not limited to) steam, fire protection/alarm equipment, sprinklers, HVAC units, Security systems, domestic or heating water, IT infrastructure, or electrical power.
- * All questions regarding shutdowns should be addressed with the project manager and facilities manager.
- * It is inevitable that there will be a certain amount of noise created with any work. Due to the nature of the service we provide, our patients, visitors, and staff are sensitive to noise. It may be required that work be conducted after regular hours, or be pre-arranged.
- * Please be mindful of work causing vibration, as our services and operations may be affected. Ask your Facilities contact if you are unsure if your work will be disruptive. Special arrangements may need to be made.



Emergency Codes

Brockville General Hospital Emergency Codes

| Code | Incident | CSS | GSS | Elmgrove | Front Ave | McDougall |
|--------------|--------------------------|------|------|----------|-----------|-----------|
| Purple | Hostage Taking | 1333 | 1333 | 1333 | 911 | 911 |
| Grey | Air Exclusion Plan | 1333 | 1333 | 1333 | 911 | 911 |
| Blue | Cardiac Arrest | 1333 | 911 | 911 | 911 | 911 |
| Red | Fire | 1333 | 1333 | 1333 | 911 | 911 |
| Green | Evacuation (Precaution) | 1333 | 1333 | 1333 | N/A | N/A |
| Green - STAT | Evacuation (Crisis) | 1333 | 1333 | 1333 | 911 | 911 |
| Orange | External Disaster | 1333 | 1333 | 1333 | 1333 | 1333 |
| Yellow | Missing Patient | 1333 | 1333 | 1333 | 911 | 911 |
| White | Violent Person | 1333 | 1333 | 1333/911 | 911 | 911 |
| Black | Bomb Threat | 1333 | 1333 | 1333 | 911 | 911 |
| Brown | Internal Chemical Spill | 1333 | 1333 | 1333 | 911 | 911 |
| Amber | Missing Child | 1333 | 1333 | 1333 | 911 | 911 |
| Pink | Pediatric Cardiac Arrest | 1333 | 911 | 911 | 911 | 911 |

The
extension
number for
ANY
emergency
at BGH is x
1333

Code Purple – Hostage Taking

Your Responsibility –

Stay away from the area where the code is taking place.
Wait for further direction.

Code Blue – Cardiac/Respiratory Arrest

Your Responsibility –

Please move to the side of the hallway if staff need to go through the area you are working in to attend to the code. If you discover someone who is unresponsive, call for help and stay with the person.



Code Green – Precautionary Evacuation

Code Green Stat– Crisis Evacuation

Your Responsibility –

An evacuation will be announced for part or all of the facility. Please wait for directions.



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Code Orange – External Disaster

Your Responsibility –

Wait for further directions.



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Code Gray – Air Exclusion

Your Responsibility –

Stay in your work area until advised further. Do not leave the facility. Close any windows or doors leading to outside in your area.



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Code Amber – Missing Child

Your Responsibility –

An announcement will be made with the description of the missing child. If you see a child that matches the description in your area, immediately call x 1333.

During a code Amber you may be asked by BGH staff to open your luggage/bags; you may be asked to return to the manager responsible for your work



Code Yellow – Missing Patient

Your Responsibility –

An announcement will be made with the description of the missing patient. If you see a person that matches the description in your area, immediately call x 1333. Do not approach the individual yourself.



Code White – Violent Episode

Your Responsibility –

Stay away from the area where the code is taking place.
Wait for further directions.



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Code Black – Bomb Threat

Your Responsibility –

An announcement will be made. Please return to the manager responsible for your work and await further direction – an evacuation or “all clear” will be announced

Code Brown – Chemical Spill

Your Responsibility –

If you find a spill of an unidentified substance, please notify the manager responsible for your work immediately. Do not attempt to clean up the unknown substance without further direction



Code Pink – Pediatric Cardiac Arrest

Your Responsibility –

Please clear the area if staff need to get through it to attend the code. If you discover a child who is unresponsive – call for help and stay with the child



Code Red - Fire

Your Responsibility upon hearing the fire alarm:

GSS & CSS

- Stop working and search your area for any signs of smoke or fire
- Listen to overhead announcement for the location of the code red
- Remain in your area and stay vigilant. Continue to check for signs of smoke/ fire. Listen for further announcements/ alarms. Shut windows and doors in your area. Do not use the elevator.

FARC & McDougall

Call 911 and leave the building.



Discovering a Fire and Fire Alarm

Response upon discovering a fire/ smoke (GSS & CSS):

Initiate R.E.A.C.T. procedures

- **Remove** – Rescue anyone that is in immediate danger and remove people adjacent to and directly across from the hazard. Ensure all areas, including washrooms have been checked for anyone who may need assistance to be removed from danger.
- **Ensure containment** - Close all the doors and windows in and near to the fire affected area (if safe to do so). This is one of the most important things to do when responding to a fire as it minimizes the spread of smoke and oxygen available to the fire. Indicate that the room has been checked, through the use of an EVACUATED sticker or some other object. Never re-open the door to the room of fire origin.
- **Alarm** - Call out “CODE RED” and the location of the fire. Activate the nearest pull station immediately.
- **Call EXTENSION 1333**- Go to the nearest telephone or wall station and give details (your name, Code red, site, fire location < room number, department>)
- **Try to extinguish or evacuate** – If within your capability (small, manageable) extinguish the fire. If not, evacuate all persons to the next horizontal fire zone- BEYOND FIRE SEPARATION DOORS. If trying to extinguish the fire, be aware of the type of fire the extinguisher is designed to fight.

At McDougall and Front Ave call 911 and leave the building.

CSS 3rd floor Mental Health

3rd floor at CSS is Mental Health and is a locked unit- any work on that floor must be communicated to the facilities department and project manager.

Workers must go to the floor in pairs only. If you are alone, security can assist you.

Tools and other equipment are not allowed unattended on the floor. Take on the floor only what is required for the job.



General Information

- * Parking: Contractor parking is available at CSS- please report to the Facilities clerk for a badge and parking pass.
- * Contractors are required to have a BGH ID contractor badge when in the facilities. This badge must be visible at all times.
- * The cafeteria at CSS is open to contractors from 9 am to 1:30 pm Monday to Friday. Please ensure clean boots and work clothes when travelling through the facility.
- * Washrooms: There are a number of washrooms in the facility however, if there is a significant number of employees employed by the contractor the contractor may be required to provide a potable washroom.



Smoking is strictly prohibited outside of “Designated Smoking Areas”

Contractors should use staff designated areas

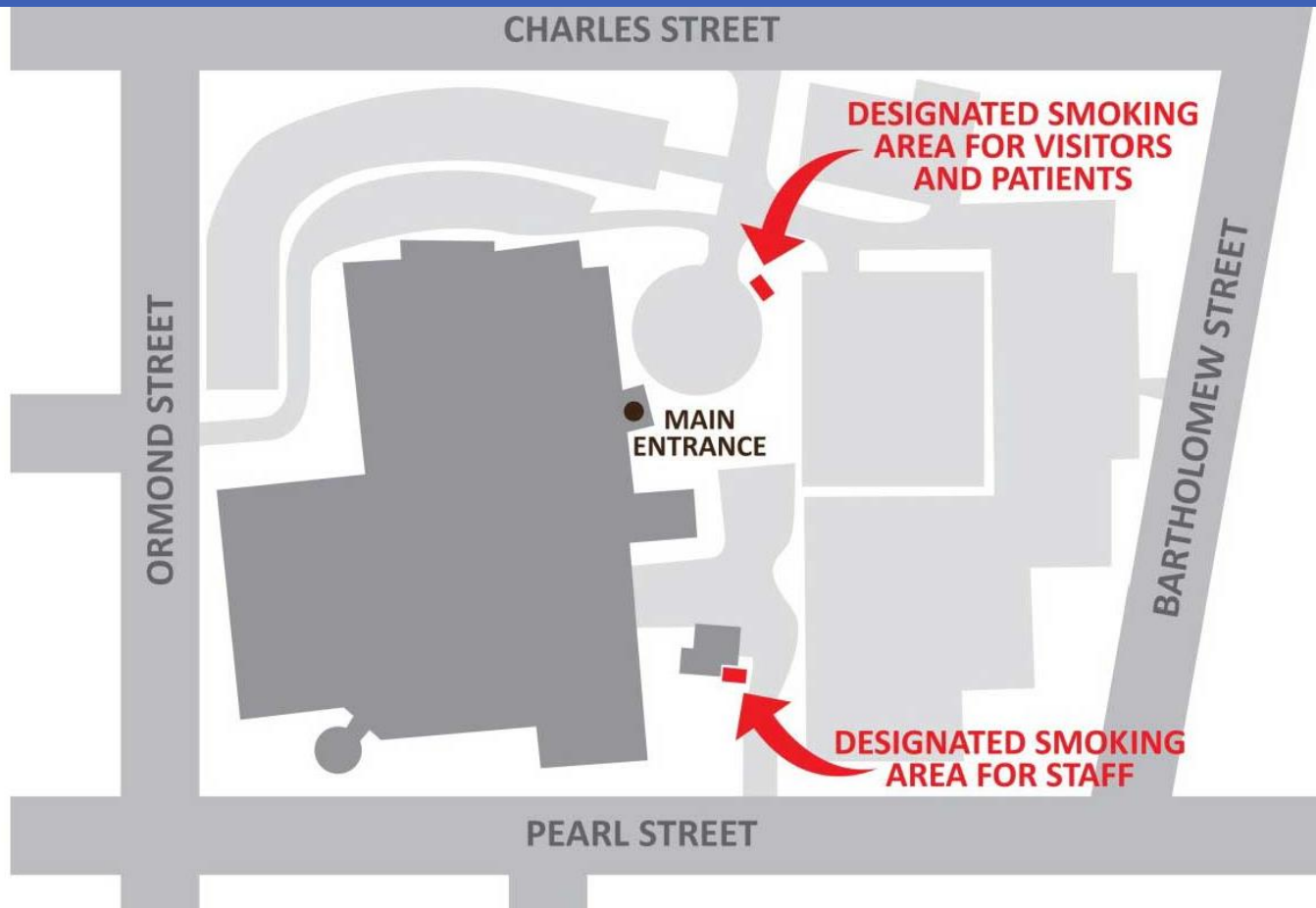
See maps on next slide



Garden Street Site



Charles Street Site



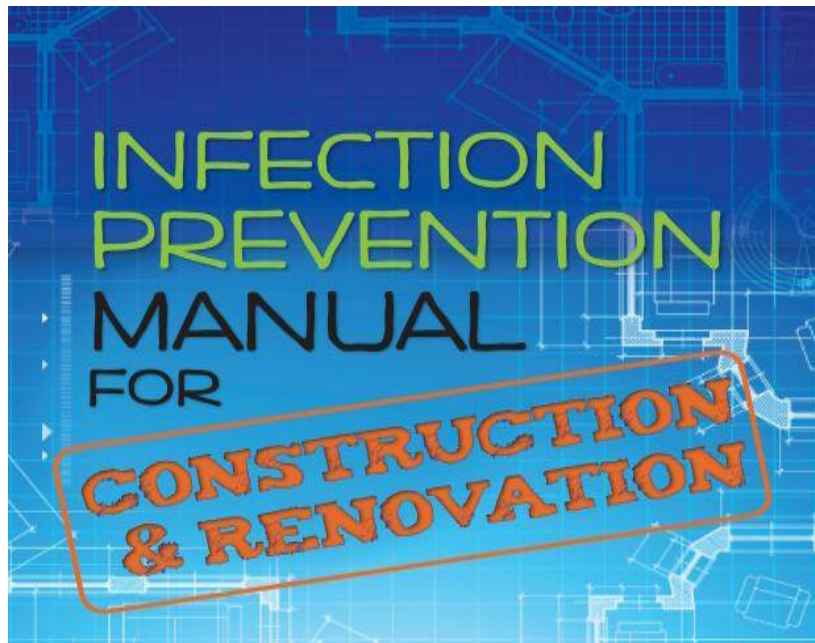
Communicable Disease Requirements

- * Set out by the Public Hospital's Act
- * You MUST NOT come to work if you have a potentially infectious illness
- * **FEVER, TEMPERATURE, CHILLS, SHAKES**
OR ANY OF THE THREE LISTED BELOW:
Nausea, vomiting, diarrhea, abdominal pain



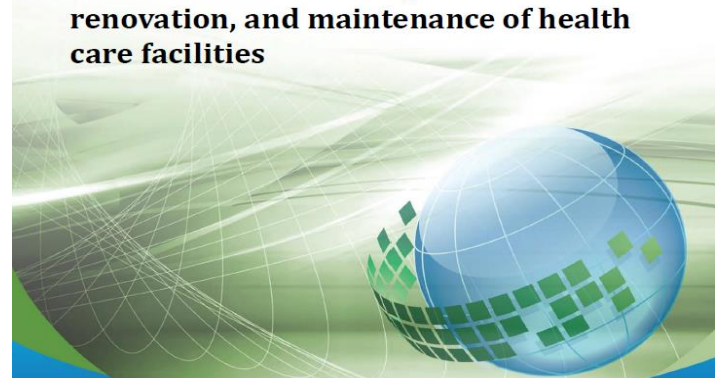
Construction Work: Understanding Infection Control in Healthcare

Following standards is critical in keeping
hospitalized patients safe.



CSA Z317.13-12

**Infection control during construction,
renovation, and maintenance of health
care facilities**



Construction-Related Infection Control

WHY ARE WE CONCERNED?

- Construction and extended maintenance projects in a hospital provide the greatest potential for introducing contaminants that can lead to hospital acquired infections
- Even relatively minor work has the potential to cause serious infections, if performed near susceptible patients



Why can Construction be a problem?

Many types of organisms can be present in construction related dust/debris.

- Bacteria, molds and fungi can be carried by:
 - Air currents
 - On clothing
 - Dispersed during construction activities

Is only internal construction work an issue?

- Both exterior and interior work in a healthcare facility could be problematic
- Activities that disrupt the flow of water or air

What is the cause for concern?

Construction/Renovation causes disturbances in infrastructure which generates dust particles.

- Organisms can travel in dust & water
- Organisms can cause infections or aggravate conditions
- Patients may be more susceptible to infections
- High mortality in immune compromised
- Can be difficult to treat

* When we have:

Immune compromised + construction=



This may equal very sick patients or possibly death

What does Immune Compromised mean?

Definition:

- * A person who has one or more defects in the body's normal defence mechanisms that predispose them to infections.

Examples:

- * Cancer
- * Diabetes
- * Age (elderly or very young)

Construction Activities that have caused infections in health care facilities

There are many examples of healthcare acquired infections (HAIs) due to construction/Renovation projects.

- Soil excavation
- HVAC systems – air intakes, exhaust grills that have not been covered, demolition of ducts, failure to maintain negative air and filters
- Open or improperly sealed windows near demolition work
- Construction dust that enters an elevator shaft
- Disturbance/removal of ceiling tiles
- Construction dust that contaminates supplies
- Carpeting that becomes contaminated

Primary Culprits for Illness Related to Construction

Most Common organisms that cause illnesses in health care related to construction:

- Legionella
- Aspergillus

Other organisms that have been implicated in illnesses caused by Construction activities in health care facilities:

- * Pseudomonas
- * Stachybotrys

Legionella

AKA: Legionnaire's Disease

- Bacteria
- Naturally occurring in water but also found in soil & dust
- An infection is caused by aspiration/inhalation
- Illness: Typically causes pneumonia/ respiratory failure
- Found in stagnant water, poorly maintained water systems/cooling towers

Legionnaire's Disease in Hospital Under Construction

- September 2002, Kitchener-Waterloo area
- 3 cases: 2 construction worker's and 1 patient
- Source of outbreak was never confirmed but believed to be related to construction work done on the roof of the hospital



Aspergillus

Aspergillus

- These organisms are fungi found in soil, water and decaying vegetation and can remain viable for months in dry locations.
- During construction and renovation activities spores can be dispersed on dust or dirt particles when floors, walls or ceiling are penetrated.
- Aspergillus spores are very small and settle very slowly, they can remain suspended in air for prolonged periods, therefore more likely to be inhaled or contaminate the environment.

Aspergillus Infections related to Construction

- 2001: Montreal Hospital, Quebec
- 2 patients died and many more ill
- Outbreak related to construction where dust entered the building's air ducts and was moved to different areas in the hospital



Mold

Mold

- Mold is a fungus (included in this group is Aspergillus)
- Mold spores are found everywhere
- The spores need to find water/moisture, cellulose material and the right temperature to grow
- Over 100,000 species of mold
- Can colonize on a wide variety of construction materials
- All patients in Healthcare are susceptible

If you find Mold?



- **Stop work** so that mold is not disturbed or dispersed
- Contact Infection Control & Facilities Manager
- If mold is to be removed it should be done by experts trained in approved mold removal procedures



Dust Generating Activities

There are many different types of dust generating activities.

- Demolition of existing walls and ceilings
- Removal of part or all of a ceiling
- Breaching of walls, ceilings or floor
- Removal of uncovered or partially covered debris from work area
- Construction of a new addition
- Major disturbance of soil
- Roof work
- Removing wallpaper



Breach of air/water system

Breach water system

- Sewer/Drain line cleaning
- Breaks in water lines with loss of pressure
- If water has been disturbed (i.e. work done to water system or water sitting unused during construction):



- Usually flushing the system for 5 minutes is sufficient
- However, in cases where high bacterial loads are known, super heating or chlorination may be required.

Breach air system

- Heating or cooling system duct work
- Changing HEPA filters



BEFORE CONSTRUCTION

Before Construction Begins

- An Infection Control Risk Assessment (ICRA) is completed
 - The ICRA is used to determine the potential risk of transmitting various biological agents in the facility. It addresses some key elements:
 - The type of construction taking place
 - The risk groups and area the work is being done in
- * A meeting with the contractor and Infection Prevention and control in advance is important to determine what preventive measures will be necessary for the project.

Infection Control Risk Assessment (ICRA)

- It reveals what level of preventative measures will be needed during the construction, renovation or repair work

| Patient Risk Group | Construction Project Type | | | |
|--------------------|---------------------------|--------|--------|--------|
| | TYPE A | TYPE B | TYPE C | TYPE D |
| LOW Risk Group | I | II | II | III/IV |
| MEDIUM Risk Group | I | II | III | IV |
| HIGH Risk Group | I | II | III/IV | IV |
| HIGHEST Risk Group | II | III/IV | III/IV | IV |

Construction Project Type

How extensive is the Construction/Renovation Project?

- * In order to determine which preventive measures are needed the scope of work must be defined by the contractor/constructor

Table 2: Construction Activities

| | |
|--------|--|
| Type A | Activities that do not generate dust or require cutting of walls or access to ceilings except for visual inspection. Minor plumbing work. |
| Type B | Small scale, short duration work that creates minimal airborne dust. |
| Type C | Work that generates a moderate to high level of dust or requires demolition or removal of fixed building components (such as countertops). Includes sanding of walls, removal of floor-coverings, ceiling tiles, minor duct work, etc. |
| Type D | Major demolition, construction and renovation projects. Major plumbing modifications. |

The Patient Risk Group is assessed and classified by Infection Prevention and Control

- * There are 4 population risk groups:
 - * Group 1 (Lowest risk) e.g. Office areas, physical plant workshops, etc.
 - * Group 2 (Medium risk) e.g. outpatient clinics (except oncology & surgery), waiting rooms, etc.
 - * Group 3 (Medium to high risk) e.g. ER, DI, Labor suites, general medical surgical wards, etc.
 - * Group 4 (Highest risk) e.g. ICU, OR, pharmacy, trauma rooms, Bronchoscopy, etc.



Preventive Measures

Overview of Preventive Measures

- Keep environment clean
- Clean with HEPA vacuum or wet mop if necessary
- Walk-off mats required, water-misting to keep dust down, seal unused areas, block/filter air vents
- Use hoarding (Plastic or drywall), maintain negative pressure to construction site, increase cleaning, workers wear coveralls or HEPA vacuum prior to leaving site
- NEVER remove hoarding until after project is complete and proper cleaning has taken place
- An ante room/cubical for access to construction site may be required
- Do a follow-up inspection following clean up

The level of Preventive Measures required is based on the ICRA

- * There are 4 levels of Preventive Measures
- * The higher the level the bigger the scope of the project and higher the risk to patients
- * The higher the risk the more control measures required



Other Control Measures

Infection Control and Traffic

- Try and keep construction traffic out of patient areas
- If possible, have a designated route of entry/exit



Infection Control and Clothing/Tools

- Ensure that either coveralls are worn or clothes are HEPA vacuumed before leaving dust generating construction sites
- Ensure all construction tools and equipment are either HEPA vacuumed or damp dusted prior to leaving the construction site



Infection Control Hoarding (Seams, Doors, Windows)

If using polyethylene as hoarding:

- * Ensure you use two layers of 0.15 mm (6 mil)
- * Ensure tightly fitting to both ceiling and floor
- * Check frequently to ensure that it has not been pulled down or areas are no longer tightly sealed

If using drywall as hoarding:

- * This is better than plastic
- * If possible, have a layer of plastic up as well
- * Ensure doors that access site are tight fitting and have sweep at bottom
- * Seal windows and unused doors with duct tape

Infection Control Ceiling Space

Remember:

- * Ensure hoarding goes to true ceiling and not just to the tiles



Infection Control

Debris and Walk off Mats

Debris:

- Ensure debris is removed in a covered container, debris is misted down and damp sponge outside of container before removing from work site
- Ensure that debris is not allowed to accumulate
- Frequent cleaning is required → wet mop and/or vacuum
- Water-mist work surfaces while cutting
- Use drop sheets to control dust



Walk off Mats:

- Ensure they are maintained in such a way that they trap and contain debris
- May need frequent replacing/cleaning
- Always have at exit of construction sites
- Place one inside and one outside exits



Infection Control Vents

Sealing all vents is very important.

- Ensure all vents are covered in construction/renovation areas (debris could be pulled into them)
- Disconnecting ventilation in work site from HVAC system is better (Needed in Preventive Measures 4)



What is the Contractor's role from an IC perspective?

Contractor's must:

- Supply, erect and maintain the quality of all barriers
- Maintain the construction site ventilation system
- Keep dust generation at the construction site within acceptable limits
- Be responsible for housekeeping at the site
- Be responsible for the actions of your workers and subs

Infection Control will:

- * Perform an initial inspection to ensure preventive measure required prior to construction are in place
- * Perform random inspections to ensure negative pressure readings are accurate and being logged, check for issues
- * Perform a final inspection prior to removal of preventive measures to ensure adequate cleaning has taken place



Important IC points to remember

What can be done to reduce the disease transmission potential during construction?

- * Follow infection containment standards
- * Training
- * Dust control
- * Working after hours
- * Remove refuse daily in covered containers
- * Daily cleaning of construction site



Infection Control References

- Canadian Standards Association Z317.13-12. Infection Control During Construction, Renovation and Maintenance of Health Care Facilities, 2012.
- Health Canada CCDR (Canadian Communicable Disease Report). Construction-related Nosocomial Infections in Patients in Health Care Facilities. Decreasing the risk of Aspergillus, Legionella and other infections, 2001.



Acknowledgement

- * The General Contractor is required to communicate the contents of this manual to all of their workers and sub contractors prior to any workers or sub contractors starting work on hospital grounds.
- * If you have questions about any of the information in this document, please ASK your facility contact or project manager.
- * This orientation must be acknowledged by all contractors and an acknowledgement document must be signed by all workers.



Acknowledgement of Rules and Expectations for Working with BGH

I acknowledge that I have read and understood the Brockville General Hospital Contractor Orientation Manual and the rules and expectations outlined within this document.

Worker Name

Date