
TECHNICAL HANDBOOK FOR
ENVIRONMENTAL HEALTH AND ENGINEERING
VOLUME III - HEALTH CARE FACILITIES DESIGN AND CONSTRUCTION
PART 24 - CONSTRUCTION GUIDELINES

CHAPTER 24-9 INTERIM LIFE SAFETY MEASURES

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24-9.1 PURPOSE

To define use, applicability, and implementation of interim life safety measures (ILSM) to compensate for existing major life safety deficiencies, hazards created by construction operations, and/or failure of life safety systems at Indian Health Service (IHS) installations.

24-9.2 BACKGROUND

A. Occasionally an installation will identify or generate during its operation one or more life safety deficiencies that critically diminish, for significant periods of time, the life safety features built into a building(s). Until such time the deficiency is corrected, it is necessary to take action to compensate for the diminished occupant's life safety. The ILSM are a series of administrative actions required to be taken to temporarily compensate for hazards posed by life safety deficiencies. The intent is to provide a level of life safety comparable to that described in the National Fire Protection Association Life Safety Code (NFPA 101); Chapter 1 through Chapter 7, Chapter 31, and its respective occupancy chapters.

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The ILSM may be required for the following reasons:

- (1) Existing major life safety deficiencies which have been identified in the Facilities Engineering Deficiency System (FEDS) but have not yet been corrected by a construction project such as dead end corridors, etc.;
 - (2) Major temporary hazards created during the construction project such as limiting egress, temporary shut down of a life safety system, etc.; and
 - (3) Temporary or permanent major failure of a life safety system such as failure of the fire alarm system, etc.
- B. The implementation of an ILSM plan is required in or adjacent to all areas and buildings which are affected by the life safety deficiency.

24-9.3 INTERIM LIFE SAFETY MEASURES (ILSM) PLAN CRITERIA

- A. An evaluation for the need to implement ILSM is mandatory. Such documentation for the need to implement ILSM must be made each time a major deficiency is identified.
- B. An ILSM plan will consist of specific measures to compensate for the diminished life safety requirements during the period the deficiencies exist at the installation. The implementation of ILSM will be continuously enforced throughout the duration of the construction project, system failure, existence of the diminished life safety feature or complete correction of the existing hazardous condition.
- C. The requirements mandated by the ILSM plan will apply to all facility patients, temporary and/or permanent staff including medical staff, construction project staff, temporary or permanent volunteers, and visitors.
- D. The frequencies of inspecting, testing, monitoring, evaluating, and training will be determined on a case by case basis and will be determined as part of the ILSM plan before implementation.
- E. The installation Safety Committee through its Safety Officer may elect at times to implement safety measures to protect building occupants from hazards created by a construction project. In such instances the installation Safety Officer must coordinate such actions with the individual responsible for managing the

design and construction of the project. This is to assure that the recommended ILSM does not inconvenience the construction contractor which could result in a contractor's claim on the construction project.

- F. The Authority Having Jurisdiction (AHJ) in the IHS is Engineering Services (ES) Dallas and/or Seattle. The ES shall be used as the source of guidance at the IHS Area office and installation level.

24-9.4 CRITERIA FOR IMPLEMENTATION

- A. The ILSM plan will be implemented during major construction and/or renovation project, or when life safety design features are reduced significantly, or while building service equipment system or component are inoperative, resulting in a major reduction of life safety. The ILSM plan may be also implemented in the event existing conditions pose hazards that conflict with the requirements of the NFPA 101 Life Safety Code.
- B. The life safety deficiencies of each facility building should be reviewed and assessed according to the degree that a particular deficiency affects an installation's overall fire safety features.
- (1) The life safety deficiencies can be categorized as follows:
- a. Level I - A deficiency or series of deficiencies that indicate a lack of proper maintenance of building components that play a role in the unit concept;
 - b. Level II - A deficiency or series of deficiencies involving one or more unit concepts that may threaten life, and its scope of deficiency is significant in a limited area; and
 - c. Level III - A deficiency or deficiencies indicating pervasive violation of one or more of the unit concepts, and its scope of deficiency is such that correction of the deficiencies will take significant periods of time.
- (2) The installation must institute and maintain ILSM until all Level III deficiencies and certain Level II deficiencies are fully corrected. If the deficiencies fall in Level I deficiencies, there is no need to implement ILSM. However, this requires that the reviewer critically evaluate the true

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severity of each deficiency and make reasonable judgements as to the impact on life safety.

- (3) The Joint Commission on Accreditation of Healthcare Organization (JCAHO) uses the following criteria to determine the level of deficiencies:
- a. Do the deficiencies involve basic design or building structure problems?
 - b. Are the deficiencies pervasive throughout the building?
 - c. Do the deficiencies pose a life-threatening condition in the event of fire?
- C. The criteria to evaluate construction deficiencies and to determine when and to what extent one or more measures are applicable or are appropriate for a particular construction project, phase of construction, or deficiency may include but not be limited to construction activities that:
- (1) Alter or compromise the integrity of exit access, exit or exit discharge features;
 - (2) Significantly compromise the integrity of the building's compartmentation features such as fire barriers, smoke barriers, floor slabs, corridor walls, etc.;
 - (3) Impair the building's fire alarm, fire detection or fire suppression systems;
 - (4) Involve temporary sources of ignition such as cutting, welding, and plumbers torch operations; and
 - (5) Involve the presence of large quantities of combustible materials and debris.
- D. An ILSM plan may consist some or all of the following actions:
- (1) Ensuring exits free and unobstructed egress. In such instances facility personnel shall receive training if alternate exits are designated.
 - (2) Ensuring free and unobstructed access to the emergency room by emergency devices from the outside and from within the

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facility.

- (3) Ensuring fire alarm, detection, and suppression systems are not critically impaired. A temporary equivalent system such as allowed by the Fire Safety Evaluation System will be provided when a fire protection system is critically impaired, and will be inspected and tested on a monthly basis.
- (4) Ensuring temporary construction partitions are smoke tight and built of non-combustible materials to prevent the development or spread of fire.
- (5) Providing additional fire-fighting equipment and user training for facility personnel including construction project personnel.
- (6) Strictly prohibiting smoking in or adjacent to all construction areas.
- (7) Developing and enforcing storage, housekeeping, and debris removal practices that reduce the flammable and combustible fire load of the building to the lowest level necessary for daily operations.
- (8) Conducting more than the minimum required fire drills per shift per quarter in an affected building or area affected by the critical life safety deficiency.
- (9) Increasing hazard surveillance of buildings, grounds, and equipment affected by the life safety deficiency with special attention to construction areas, field offices and storage, and activities such as excavations, etc.
- (10) Training of facility personnel when structural or compartmentation features of fire safety are critically compromised.
- (11) Conducting organizational wide safety education programs to ensure awareness of any life safety code deficiencies, construction hazards, and ILSM.

24-9.5 PROCEDURES

- A. Each major life safety deficiency which has been identified in the FEDS data base, temporary hazards created by construction project, or temporary or permanent failure of a life safety system will be evaluated for the need by the installation Safety Officer to implement ILSM.
- B. The implementation of an ILSM plan due to a construction project must begin before the start of project design development, and be continuously enforced through the project completion. The evaluation of deficiencies created as a result of construction project will be conducted before the final construction document submission.
- C. The buildings or areas under construction must maintain exit routes for everyone occupying the area including those who use the exit from other areas within the building, and construction workers in the affected area.
- D. The evaluations due to a construction project will be coordinated by the IHS personnel responsible for the project design and construction. The installation Facilities Manager will be responsible for coordinating all other instances.
- E. If an evaluation determines that an ILSM plan is necessary, a written plan for implementation must be developed. The plan must contain sufficient details to allow a third party to understand and implement the requirements. The IHS personnel responsible for conducting the evaluation process must select the applicable life safety measures that must be implemented to compensate for the diminished life safety.
- F. The installation Facilities Manager responsible for coordinating the ILSM must assure that any applicable consequences involving a construction project are clearly shown on the contract drawings and in the specifications so the construction contractor is aware of the ILSM plan. The installation Facilities Manager should also coordinate with the construction contractor's project manager the ILSM plan. Some actions may involve the contractor's

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workers such as welding, etc., and additional fire extinguishers and temporary partitions may be required before such activities begin.

G. The installation Safety Officer will enforce ILSM at the facility installation. A written authority by the Engineering Services (ES) Contracting Officer will be given to the installation Safety Officer to act accordingly during life threatening situations. Any violations must be brought to the attention of the Safety Officer and ES Project Officer first. The ES Project Officer will coordinate the Delegation of Authority letter. This letter will be handed to the installation Safety Officer at the pre-construction conference. The following requirements are to be included on the contract documents:

- (1) Alternate exit routes - The installation Safety Officer will furnish training to facility staff and volunteers if alternative exits routes are required. The means of egress will be inspected daily by the installation Safety Officer during a walk-thru with the contractor.
- (2) Emergency room access - The contractor will ensure free and unobstructed access to this area if required, by emergency devices from the outside and from within the hospital. This area will be inspected daily by the installation Safety Officer during a walk-thru with the contractor.
- (3) Fire alarm, detection, or suppression system - A temporary but equivalent system must be provided if the existing system is critically impaired. This temporary system must be in place and functional before construction starts. The temporary system(s) will be inspected and tested monthly by the contractor in the presence of the installation Safety Officer.
- (4) Temporary construction partitions - These partitions if required shall be solid in nature, securely attached, and sealed at the floor and structure above.
- (5) Renovations of existing buildings - Phased construction must be developed to minimize disruption of existing patient services and/or operation of the facility. This phasing is essential to ensure a safe environment in all occupied patient care areas. This phasing will include assurance for clean airflow, emergency procedures, criteria and procedure for interruption of protection, written notifications of

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interruptions and temporary shut-downs of utilities, and communication authority. The renovated areas shall be isolated from the occupied areas during phased construction using airtight barriers and exhaust airflow, and it shall be sufficient to maintain negative air pressure in the construction zone.

- (6) Additional fire fighting equipment and user training for construction workers - These fire fighting equipment and training manual if required, will be provided by the contractor. Additional fire fighting equipment and user training for others will be furnished by the installation Safety Officer.
- (7) Smoking will be strictly prohibited in or adjacent to all construction project areas - The installation Safety Officer will furnish the contractor a copy of the installation smoking policy at the pre-construction conference.
- (8) Daily walk-thru to observe storage, housekeeping, and debris removal practices - The installation Safety Officer will conduct a daily walk-thru and any observed deficiencies and/or life threatening deficiencies will be brought to the immediate attention of the contractor. A written follow-up letter will be given to ES Project Officer.
- (9) Fire drills in a construction area - If conducting fire drills in a construction area affects a contractor's operation it will be outlined in the contract documents, to make the contractor aware of the requirement for his/her forces to respond during a fire drill. The installation Safety Officer will conduct the fire drills.
- (10) Daily walk-thru to increase hazard surveillance of buildings, grounds, and equipment affected by the life safety deficiency (if applicable) - The installation Safety Officer will conduct a daily walk-thru these areas with special attention to construction areas, storage and field offices, and construction activities. Any observed deficiencies and/or any observed life threatening deficiencies will be brought to the immediate attention of the contractor. A written follow-up letter will be given to the ES Project Officer.
- (11) Facility personnel training - The installation Safety Officer will train facility personnel when structural or

compartmentation features of fire safety are critically compromised. The installation Safety Officer will conduct the training if applicable.

- (12) Safety education programs - The installation Safety Officer will conduct organizational wide safety education programs to ensure awareness of any life safety code deficiencies, construction hazards, and these ILSM.

24-9.6 RESPONSIBILITIES

A. ENGINEERING SERVICES (ES)

- (1) ES Dallas and/or Seattle staff will determine whether ILSM are required during the design and construction phase of projects delegated to their office.
- (2) ES Project Officer in charge of project(s) will be responsible for coordinating the need for an ILSM plan. The ILSM evaluation may be conducted by ES staff or representative(s) of the contracted Architect/Engineer design firm.
- (3) ES Project Officers will prepare a written letter documenting evaluations. This letter will be prepared for signature of the Director of Engineering Services. The letter will be forwarded to the appropriate installation Safety Committee through the Area Facilities Engineer, and the installation Facilities Manager for implementation by the installation Safety Officer.
- (4) ES Project officer will assure that any ILSM action is included in the contract documents.

B. AREA FACILITIES ENGINEER (AFE)

- (1) AFE will coordinate the evaluation for the need to implement ILSM for construction projects delegated to the Area office.
- (2) AFE will prepare the letter documenting evaluations conducted at the Area office level. This letter will be prepared for signature of the Area Facilities Engineer. The letter will be forwarded to the appropriate installation Safety Committee through the installation Facilities Manager for implementation by the installation Safety Officer.

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C. INSTALLATION SAFETY OFFICER (ISO)

- (1) ISO will consult with ES Dallas and/or Seattle staff as appropriate.
- (2) ISO will coordinate with the installation Facilities Manager and/or the Infection Control Officer or Nurse regarding any actions that require their input.
- (3) ISO will institute actions associated with inspecting, monitoring, and/or training that are required as a result of the ILSM plan.
- (4) ISO will enforce the ILSM plan at the installation.
- (5) ISO will conduct evaluations for local construction projects, and/or failure and interruption of life safety systems. Also, will implement all ILSM actions including any delegated work by ES staff.
- (6) ISO will prepare letters documenting evaluations at the installation level and to forward these letters to the installation Safety Committee through the Facilities Manager.
- (7) ISO will conduct training required as a result of the ILSM plan.
- (8) ISO will conduct inspections of means of egress in construction areas during a daily walk-thru.
- (9) ISO will inspect, if applicable, the emergency area on a daily basis and during a walk-thru.
- (10) ISO will assure that if the fire alarm, detection, and/or suppression systems fails or is temporarily disconnected an equivalent FSES temporary system must be in place and functional. These temporary systems will be inspected and tested on a monthly basis by the contractor, if applicable, in the presence of the installation Safety Officer.
- (11) ISO will inspect, if applicable, temporary construction partitions.
- (12) ISO will review construction drawings during the design development phase to assure minimizing disruption of

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existing patient services.

- (13) ISO will assure that renovation areas, if applicable, are isolated from the occupied areas during construction using airtight barriers and exhaust airflow sufficient to maintain negative air pressure in the construction zone.
- (14) ISO will provide, if applicable, additional fire-fighting equipment and user training for facility staff workers.
- (15) ISO will enforce no smoking policy in or adjacent to all construction areas.
- (16) ISO will develop and enforce storage, housekeeping, and debris removal practices that reduce the flammable and combustible fire load of the building to the lowest level necessary for daily operations.
- (17) ISO will conduct fire drills in the building(s) or area(s) affected by the critical life safety deficiency.
- (18) ISO will increase hazard surveillance of buildings, grounds, and equipment affected by the life safety deficiency.

D. INSTALLATION FACILITIES MANAGER (IFM)

- (1) IFM will evaluate the annual Facilities Engineering Program Plan (FEPP) project submission to determine if any ILSM evaluations will be necessary, and will consult with the Area Facilities Engineer as necessary.
- (2) IFM will assist the installation Safety Officer in the implementation of an ILSM plan.
- (3) IFM will be designated as an 'Alternate' to the installation Safety Officer for ILSM purposes.
- (4) IFM will assist the installation Safety Officer in the evaluation of life safety code deficiencies existing at the installation and to determine the need for implementation of an ILSM plan.
- (5) IFM will support any action decided between the AHJ and the installation Safety Officer that require maintenance action.

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- (6) IFM will assist in associated inspecting, monitoring, and/or training that is required as a result of the ILSM plan.

24-9.7 DOCUMENTATION

The evaluations will be documented using a letter format. Appendices A and B may be used as a screening out process.

The letters documenting the ILSM evaluations shall contain at a minimum:

- (1) Installation name where the project is located,
- (2) Project title, IHS project number, and ES contract number,
- (3) Building number(s) where the life safety measures are required,
- (4) Name and title of the individual conducting the ILSM evaluation,
- (5) If ILSM are required, they shall be specifically identified in such a manner that a third party at the installation will know exactly what needs to be accomplished and if frequency is required, how often it needs to be implemented (i.e., additional fire drills).

24-9.8 REFERENCES

- A. JCAHO Accreditation Manual for Hospital, Environment of Care (EC) Standards, EC.2.4.2.
- B. 1994 Edition of the National Fire Protection Association (NFPA), Life Safety Code, NFPA 101.
- C. 1996-97 American Institute of Architects Guidelines for Design and Construction of Hospital and Health Care Facilities.
- D. 1995 Plant Technology and Safety Management Handbook, Managing the Environment of Care, Life Safety Management/Fire Safety Deficiencies.

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APPENDIX A
INTERIM LIFE SAFETY MEASURES PLAN
PRELIMINARY ASSESSMENT

Area Name	Current Date:
Project Title::	Project and Contract Number :

Description of Project, Situation, and Condition being evaluated:
Departments and/or buildings that will be, or are affected by Project, Situation, or Condition:
Time frame during which Project, Situation, or Condition exists or will exist (give dates):
Life Safety features which are affected by Project, Situation, or Condition (list below) 1. 2. 3. 4.
Is there potential for any of these conditions to impact the life safety of patients, visitors, or staff? Yes/No _____ If No, explain why not? _____ _____ _____ _____

Based on these findings, does this project, situation, or condition warrant the implementation of ILSM? Yes/No _____

Signature of Individual Completing form

Date

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APPENDIX B
INTERIM LIFE SAFETY MEASURES PLAN
IDENTIFIED LIFE SAFETY DEFICIENCIES

Project Title: _____ Project and Contract Number: _____

		STATUS		
		YES	NO	N/A
1.	Have alternative exits been designated as a result of the project, condition, or situation? Yes/No ____ Specify Locations:			
2.	Are exit routes inspected daily to ensure they are free and unobstructed? [Complete attachment C to document monitor inspections] Yes/No ____			
3.	Has training been provided to personnel on the alternative exits [Use attachment G to document training] ?Yes/No ____			
4.	Does the project, condition, or situation interfere with the accessibility to and from the emergency room by emergency forces, the public, and/or staff? Yes/No ____ If Yes Specify How [Complete attachment D to document monitoring]			
5.	Does the project, condition, or situation impair the existing fire alarm, detection, and/or suppression system in any way? Yes/No ____ If Yes Specify how:			
6.	Has a temporary, yet equivalent, system been provided? Yes/No ____ If Yes Specify type:			
7. Document the dates of the inspection and testing of the temporary system (must be done monthly): _____ _____				
8.	Has temporary construction partitions been constructed that are smoke tight and are of noncombustible or limited combustible material? Yes/No ____ If Yes Specify Construction material and locations:			

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			STATUS		
			YES	NO	N/A
9.	Has additional fire-fighting equipment been provided? If Yes Specify type, number, and locations:	Yes/No ____			
10.	Has training on the use of fire-fighting equipment been provided? [Complete attachment G to document training]	Yes/No ____			
11.	Has smoking been prohibited in and adjacent to the project?	Yes/No ____			
12.	Are storage, housekeeping, and debris removal practices monitored to reduce the combustible and flammable fire load? [Complete attachment E to document monitoring]	Yes/No ____			
13..	Are a minimum of two drills per quarter per shift currently being conducted?	Yes/No ____			
14. List the dates of drills conducted:					

QUARTERS [List Months Covered in Spaces Below]	SHIFTS		
	FIRST	SECOND	THIRD

9.	Has hazard surveillance been increased to monitor buildings, grounds, and equipment with special attention given to excavations, construction areas, construction storage, and field offices? [Complete attachment F to document monitoring]	Yes/No ____			
10.	Have personnel been trained when structural and compartmentation features of fire protection are				

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	compromised? Yes/No ____ [Complete attachment G to document training]			
11.	Are organization wide safety education programs being conducted to ensure awareness of any LSC deficiency, construction hazard and these ILSM measures? Yes/No ____ [Complete attachment G to document training]			

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APPENDIX C
INTERIM LIFE SAFETY MEASURES PLAN
MONITORING OF FIRE EXITS

Project Title: _____ Project and Contract Number: _____

Free and unobstructed routes of egress from construction and adjacent areas. If a problem is identified, it should be listed below and the corrective action taken should be recorded.

DATE													
STATUS: Check if OK X if Problem													

DATE	PROBLEM IDENTIFIED	CORRECTIVE ACTION TAKEN

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APPENDIX D
INTERIM LIFE SAFETY MEASURES PLAN
MONITORING OF ACCESS TO THE EMERGENCY ROOM

Project Title: _____ Project and Contract Number: _____

Free and unobstructed access to the department. If a problem is identified, it should be listed below and the corrective action taken should be recorded.

DATE														
STATUS: Check if OK X if Problem														

DATE	PROBLEM IDENTIFIED	CORRECTIVE ACTION TAKEN

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APPENDIX E
INTERIM LIFE SAFETY MEASURES PLAN
MONITORING OF STORAGE, HOUSEKEEPING AND DEBRIS REMOVAL

Project Title: _____ Project and Contract Number: _____

Reduction of the flammable and combustible fire load to the lowest level possible for daily operations.
 If a problem is identified, it should be listed below and the corrective action taken should be recorded.

DATE														
STATUS: Check if OK X if Problem														

DATE	PROBLEM IDENTIFIED	CORRECTIVE ACTION TAKEN

APPENDIX F
INTERIM LIFE SAFETY MEASURES PLAN
MONITORING FOR OTHER HAZARDS

Project Title: _____ Project and Contract Number: _____

Monitoring buildings, grounds and equipment with special attention given to excavations, construction areas, construction storage, and field offices. If a problem is identified, it should be listed below and the corrective action taken should be recorded.

DATE														
STATUS: Check if OK X if Problem														

DATE	PROBLEM IDENTIFIED	CORRECTIVE ACTION TAKEN

APPENDIX G
INTERIM LIFE SAFETY MEASURES PLAN
TRAINING LOG

Project Title: _____ Project and Contract Number: _____

DATE	TRAINING SESSION TITLE	DEPARTMENT/SERVICE	NO.