

### Sioux Falls VHA Risk Assessment

Meeting Date: 4/22/24

**Project #** 438-22-900 **PCRA#** 438-22-900

**Project Title:** Replace Boiler Plant

**Area of Construction:** Outside. North of water tower and east of laundry

**Estimated Start Date:** 12/1/2025

**Estimate Completion:** 06/01/2028

**Project Coordinator and Phone number:** N/A

**Contractor/Supervisor and Phone Number:** N/A

**Scope of work:** Building a new boiler plant north of the existing boiler plant and east of laundry. Building will be stand alone and will not have any patient areas.

**Affected Adjacent Areas**

Area	Service(s)/Type(s) of Area(s) (e.g., OR, Unit/Ward, Sterile Processing, Administrative, etc)*	Point of Contact (POC)	POC Contact Information	Construction plan communicated to POC?
Activity Area**	Outside			
Area Above	N/A			
Area Below	N/A			
Adjacent Area 1	N/A			
Adjacent Area 2	N/A			
Adjacent Area 3	N/A			
Adjacent Area 4	N/A			

\* There may be more than one Service/type of area for each row. List all. The information entered on this table must be used in the ICRA if required.  
\*\* List the area(s) in which the construction/renovation/maintenance activity will occur.

**\*ALL INFORMATION ABOVE THIS LINE TO BE COMPLETED BY COR TO SCHEDULE MEETING\***

To be completed during Risk Assessment:  
Is a PCRA Permit posted and current?  
Yes  Yes-PCRA pages and permit do not apply, no new signatures needed  
No  No-Complete PCRA form, signatures required  
N/A  N/A-No construction work, PCRA form not needed

Is an ILSM review required?  
Yes  Yes-Complete ILSM, obtain signatures\* and required training  
No  No-ILSM pages do not apply

Is ICRA current?  
Yes  Yes-ICRA pages and permit do not apply, no signatures required  
No  No-Complete ICRA form, signatures required\*  
If class III or IV, post new ICRA permit

\*COR to ensure signatures obtained and permits are posted prior start of work

**Project Title:** Replace Boiler Plant

**Person(s) Participating in the Assessment:**

Name	Position
Isaac Anderson	Project Coordinator-COR
Traci Costello	Safety
Nancy Parr	Infection Control
Connie Skinner	Patient Safety
TBD	Contractor
Rochelle Boone	Department Engineering
Walter Van Den Oever	Logistics
Lance Niewenhuis	engineering

Notes from Assessment:

Meeting Date: 4/22/24

VHA Preconstruction Risk Assessment Template

**NOTE:** This VHA PCRA template pertains specifically to non-infection-related safety for Construction, Renovation, and Maintenance activities. It must be used in conjunction with the VHA Infection Control Risk Assessment (ICRA) for the activity, if required, which specifically addresses infection risks outside the scope of this PCRA.

**PERMIT:** See the last page of this document for a fillable permit form to be used for posting at the activity site.

**Activity Location:** Outside. North of water tower and east of laundry

**Activity Name, Number, and/or Brief Description:** Building a new boiler plant north of the existing boiler plant and east of laundry. Building will be stand alone and will not have any patient areas.

**Table 1 - Construction, Renovation, and/or Maintenance Activity Type and Control Measures**

**NOTE:** If any of the bulleted criteria in a higher activity type pertains to the work that will be done (even if the other criteria are in a lower type), use the higher activity type for the VHA PCRA.

Controls defined in Table 1 for the activity must be in place before the activity begins and maintained until work is completed and the area is activated. Control measures for each activity must also include the control measures in the preceding row(s).

As the activity progresses, a full re-evaluation of remaining activity type and risk is required prior to changing the level of control measures.

Activity Type determined from Table 1: Large Scale

Activity Type and Description	Control Measures
<b>Inspection/Upkeep generally defined as follows:</b> <ul style="list-style-type: none"> <li>Work can be completed in a single shift, not to exceed 10 hours.</li> <li>Patients, employees and/or visitors may be in the area depending on the activity.</li> <li>Work that does not create dust or debris.</li> <li>Work that does not create vapors or fumes.</li> <li>Removal of ceiling tile or access to mechanical or electrical chase for visual inspection that will not impair fire safety systems and are limited to 1 tile per 50 square feet with limited exposure time (not to exceed an hour for each tile) within the shift.</li> <li>Minor interior updates (e.g., replacing floor or ceiling tiles, carpentry work to include hanging signage, and painting with hand tools) that do not create vibration or noise.</li> <li>Limited building system maintenance that does not require Lock Out Tag Out (LOTO) such as plumbing on potable systems limited to faucet replacement, steam trap replacement, etc. and electrical work such as replacement of bulbs, receptacles, or switches.</li> </ul>	<ol style="list-style-type: none"> <li>Immediately replace any ceiling tile, close access panels, etc., upon completion of work.</li> <li>Site visits of construction area are required weekly by member of multi-disciplinary team. Site visits will be documented on standard checklist.</li> <li>Site specific safety plan, task hazard analysis, and hazard communication required to be provided by the contractor and approved where a contact is in place. For internal work the shop involved must work with Safety to ensure proper precautions are in place.</li> <li>Must address identified hazards and controls that will be implemented to ensure minimal impact to patients, employees, contractors and facility.</li> <li>Communication and coordination plan for all affected areas</li> </ol>

VHA-PCRA-2023-1.0

**Small-scale Construction, Renovation and general maintenance/repair work, generally defined as follows:**

- Prolonged work that may take longer than a single shift but not exceeding six months.
- Patients and employees are not to be in the area until activity is completed.
- Work that creates some noise and vibration due to power tool use.
- Selective demolition/removal of preexisting floor covering, casework, lay-in ceiling, or other architectural elements that may
  - disturb asbestos, lead or silica
  - create the potential for falling objects
  - create vibration and/or noise in excess of 90 dB(A) in surrounding areas
  - cause penetrations in fire or smoke barrier
- Plumbing work such as the installation of new sinks, showers and toilets and associated plumbing that requires utility outages or work on the steam system that may require:
  - LOTO
  - The use of compressed gas cylinders
- Electrical work such as installation of conduit and wire for lighting, receptacles and switches for an area, the installation of conduit and wire for new devices such as terminal units, fans etc. Electrical work such as installation of cabling/wiring/conduit for a single device, installation of new device such as a light fixture that require LOTO.
- Air Handler and/or fan shutdown/startup and HVAC work such as replacement of a single diffuser, single terminal unit, a single device and the installation of ductwork, diffusers, and terminal units for an area that may require:
  - Work on ladders
  - Rigging, hoisting or lifting of equipment or materials overhead
- Modification of existing fire alarm and suppression systems requiring system outages and ILSMs or obstruction of exits and or impact on corridors.
- Architectural, structural, or any other work that may cause vapors or fumes such as:
  - Roofing work
  - Flooring work
  - Painting or other large-scale use of such substances.

**Large-scale construction, renovation, or maintenance generally defined as follows:**

- Work exceeding 6 months in duration.
- Patients and employees are not to be in the area until activity is completed.
- Excavation or heavy equipment use taking place
  - Dig safe required utility location
  - Trench safety
  - Dust control plan
  - Equipment exhaust, Noise, Vibration
- Confined space entry required (permit required or not)
- Requires crane work
  - General crane work
  - Lift over buildings
- Includes elevated work

VHA-PCRA-2023-1.0

**All control measures in the row above and the following:**

- Hazard communication chemical inventory required to be provided by the contractor and approved.
- Where construction, Renovation and maintenance are done in an accredited facility, and ILSM assessment is required to be done and ILSMs put into place in accordance with TJC LS.01.02.01 and the local facility policy including Fire watch if necessary. Staff is trained and the ILSM is verified regularly
- Hot Work or burn permits in place and staff trained
- LOTO procedures in place and staff trained on their use
- Site visits will be reviewed using the criteria in standardized guide.
- Daily inspections of the site are to be conducted by the General Contractor or shop supervisor and documented on their daily log.

**All control measures in the two rows above and the following Activity Hazard Analyses and Control Plans (check all that apply):**

- Excavation safety plan in place
- Dust control plan in place
- Pollution prevention plan in place
- Dig safe paper work in place
- Crane lift plan in place 
  - Crane placement
  - Crane swing
  - Crane load evaluation
- Fall protection plan in place and staff trained
- Confined entry plan in place and staff trained

VHA-PCRA-2023-1.0

work involving noise, vibration or exit obstruction) and meet with POC to coordinate execution of work in a way that mitigates the impact (e.g., move affected party temporarily).

Area	Service(s)/Type(s) of Area(s) (e.g., OR, Unit/Ward, Sterile Processing, Administrative, etc)*	Point of Contact (POC)	POC Contact Information	Construction plan communicated to POC?
Activity Area**	Outside			
Area Above	N/A			
Area Below	N/A			
Adjacent Area 1	N/A			
Adjacent Area 2	N/A			
Adjacent Area 3	N/A			
Adjacent Area 4	N/A			

\* There may be more than one Service/type of area for each row. List all. The information entered on this table must be used in the ICRA if required.  
\*\* List the area(s) in which the construction/renovation/maintenance activity will occur.

Are the adjacent areas:  
Vacant  Non-continuously occupied areas   
Continuously occupied

List of activities that may impact adjacent occupied areas and required controls.

VHA-PCRA-2023-1.0

### Pre-Construction Risk Assessment (PCRA) Permit

This page must be posted at the entrance to the project area, or other designated area

Unique permit number: 438-22-900	Location and brief description of construction/renovation/maintenance: Outside. North of water tower and east of laundry. Building a new boiler plant north of the existing boiler plant and east of laundry. Building will be stand alone and will not have any patient areas.
COR: ISAAC ANDERSON	Project start date: 12/1/2025
Contact phone number: N/A	Completion date: 06/01/2028
Contractor/Lead shop supervisor: N/A	Permit expiration date: 06/01/2028

Activity Type: Large Scale  
Inspection/Upkeep, Small-scale, or Large-scale

**Activity Type**  Large Scale

**Inspection/Upkeep**

**Small-scale**

**Large-scale**

**Control measures to be in place for the duration of the activity (Check the box for the Activity Type to indicate the Control Measures)**

- Immediately replace any ceiling tile, close access panels, etc., upon completion of work.
- Site visits of construction area are required weekly by member of multi-disciplinary team. Site visits will be documented on standard checklist.
- Site specific safety plan, task hazard analysis, and hazard communication required to be provided by the contractor and approved.
- Must address identified hazards and controls that will be implemented to ensure minimal impact patients, employees, contractors and facility.
- Communication and coordination plan for all affected areas

**All control measures in the row above and the following:**

- Hazard communication chemical inventory required to be provided by the contractor and approved.
- ILSMs in place and staff trained on situation
- Hot Work or burn permits in place and staff trained
- LOTO procedures in place and staff trained on their use
- Site visits will be reviewed using the criteria in standardized guide.
- Daily inspections of the site are to be conducted by the General Contractor and documented on their daily log.

**All control measures in both rows above and the following Activity Hazard Analyses and Control Plans as applicable (check all that apply):**

- Excavation safety plan in place
- Dust control plan in place
- Pollution prevention plan in place
- Dig safe paperwork in place
- Crane lift plan in place 
  - Crane placement
  - Crane swing
  - Crane load evaluation
- Fall protection plan in place and staff trained
- Confined entry plan in place and staff trained

**Additional requirements:**

Is an Infection Control Risk Assessment (ICRA) required for the Activity? Yes  No

Infection Prevention and Control signature: NANCY PARR (Digitally signed by NANCY PARR Date: 2024.04.24 07:07:38 -0500)

COR signature: ISAAC ANDERSON (Digitally signed by ISAAC ANDERSON Date: 2024.04.26 09:11:38 -0500) Date: 04/26/2024

Contractor or lead shop signature: TROY MERGEN (Digitally signed by TROY MERGEN Date: 2024.04.26 10:16:52 -0500) Date: 4/26/2024

\*The location of all Activity Hazard Analyses and Control Plans (excavation, dust, pollution, etc.) as applicable shall be identified on this permit and shall be made available to all workers on the job.

VHA-PCRA-2023-1.0

ADDENDUM 1 08-09-2024	<b>CONSULTANT</b>	<b>ARCHITECT/ENGINEER OF RECORD</b>  Architecture   Engineering   Design-Build 9000 Weisses Place, Louisville, KY 40222 www.paradigmusa.com	<b>STAMP</b> 	<b>Office of Construction and Facilities Management</b> U.S. Department of Veterans Affairs	<b>Drawing Title</b> PCRA, ICRA, & ILSM FORMS <b>Approved:</b> Project Director	<b>Phase</b> 100% CONSTRUCTION DOCUMENTS	<b>Project Title</b> SIOUX FALLS BOILER PLANT	<b>Project Number</b> 438-22-900 <b>Building Number</b> 12 <b>Drawing Number</b> G1107	
						<b>Location</b> VAMC-Sioux Falls: 2501 W 22nd St, Sioux Falls, SD 57105	<b>Issue Date</b> 09-12-2024	<b>Checked</b> <input type="checkbox"/>	<b>Drawn</b> EB

ILSM: 438-22-900 Attachment A  
**Initial Life Safety Risk Assessment Tool**

Building: \_\_\_\_\_ Floor: \_\_\_\_\_ Date: \_\_\_\_\_  
 Specific Location: Outside. North of water tower and east of laundry

**Brief Description of Deficiency**

Identify the Severity of the Occurrence	Identify the Impact of the Deficiency
<input type="checkbox"/> Category 1 (1) Deficiency likely to cause major injury or death	<input type="checkbox"/> Facility Wide (1) Impacts the entire facility
<input type="checkbox"/> Category 2 (2) Deficiency likely to cause minor injury	<input type="checkbox"/> Multiple Units/Floors (2) Impacts multiple smoke compartments
<input type="checkbox"/> Category 3 (3) Deficiency not likely to cause injury	<input type="checkbox"/> Local/Single Unit (3) Impacts a single smoke compartment or area
<input type="checkbox"/> Category 4 (4) Deficiency likely has minimal impact to safety	<input type="checkbox"/> Short Duration (4) Correction can be performed during shift identified

**Plot the Severity of the Occurrence and the Impact of the Deficiency to determine Risk Tolerance Score:**

Risk Tolerance	Severity of Occurrence			
	Category 1 (1) Deficiency likely to cause major injury or death	Category 2 (2) Deficiency likely to cause minor injury	Category 3 (3) Deficiency not likely to cause injury	Category 4 (4) Deficiency likely has minimal impact to safety
Facility Wide (1) Impacts the entire facility	<input type="checkbox"/> HIGH Needs Specific Remediation Actions	<input type="checkbox"/> HIGH Needs Specific Remediation Actions	<input type="checkbox"/> MEDIUM Needs Remedial Action	<input type="checkbox"/> LOW No ILSM Required
Multiple Units / Floors (2) Impacts multiple smoke compartments	<input type="checkbox"/> HIGH Needs Specific Remediation Actions	<input type="checkbox"/> HIGH Needs Specific Remediation Actions	<input type="checkbox"/> MEDIUM Needs Remedial Action	<input type="checkbox"/> LOW No ILSM Required
Local/Single Unit (3) Impacts a single smoke compartment or area	<input type="checkbox"/> HIGH Needs Specific Remediation Actions	<input type="checkbox"/> MEDIUM Needs Remedial Action	<input type="checkbox"/> MEDIUM Needs Remedial Action	<input type="checkbox"/> LOW No ILSM Required
Short Duration (4) Correction can be performed during shift identified	<input type="checkbox"/> No ILSM Required			

Completed by: \_\_\_\_\_ Signature: \_\_\_\_\_

Risk Tolerance Score:  HIGH  MEDIUM  LOW  No ILSM Required

Full ILSM Assessment Required:  YES  NO

*\*If YES is marked above, complete a Full Interim Life Safety Measures Assessment (Attachment B)*

ILSM: 438-22-900 Attachment B  
**Full Interim Life Safety Measures Assessment**

Building: \_\_\_\_\_ Floor: \_\_\_\_\_ Date: 4/26/2024  
 Specific Location: Outside. North of water tower and east of laundry

Assessment for Life Safety Code Deficiency  Assessment for Renovation Project

**Complete this Assessment FIRST to determine if Interim Life Safety Measures required to mitigate the risk posed by the Life Safety deficiency.**

	YES	NO
a. Lacking a code complying smoke barrier.		
b. Fire exit stairs discharge improperly.		
c. Excessive travel distance to an approved exit.		
d. Lack of two remote exits.		
e. Nonconforming building construction type.		
f. Improperly protected vertical openings.		
g. Large penetrations in fire barriers.		
h. Hazardous areas not properly protected.		
i. Fire (smoke damper(s) not operating properly or are inaccessible for inspection		
j. Blocking of an approved exit.		
k. Rerouting of traffic to emergency room.		
l. Renovation on an occupied floor.		
m. Replacing fire alarm system (out of service)		
n. Installing sprinkler system (out of service)		
o. Disconnecting alarm devices.		
p. Other Life Safety Deficiency not identified above		

**Description of Other Life Safety Deficiency not identified above:**

Are ILSM required?  YES  NO  
 (NOTE: ILSM are required if any question above is marked YES.)

Use the Interim Life Safety Measures Decision Matrix (Attachment C) to determine necessary mitigating activities to be implemented.

Project/ILSM # (if applicable): 438-22-900

ILSM: 438-22-900 Attachment C  
**Interim Life Safety Measures Decision Matrix**

Existing Significant Life Safety Code Deficiencies or Conditions as a Result of Construction or Maintenance	1. Post alternative exit signage	2. Inspect egress daily in affected area but equivalent fire alarm / detection system / detection equipment	3. Provide additional firefighting equipment	4. Provide temporary construction surveillance	5. Increase hazard surveillance	6. Control combustible loading	7. Control additional equipment training	8. Conduct additional quarterly fire drills in affected areas	9. Inspect / test temporary fire systems on a monthly basis**	10. Train personnel in affected areas	11. Train those who work in the hospital to compensate for impaired structural fire safety features	12. Train those who work in the hospital to compensate for impaired structural fire safety features
a. Lacking a code complying smoke barrier.												
b. Fire exit stairs discharge improperly.												
c. Excessive travel distance to an approved exit.		X										
d. Lack of two remote exits.												
e. Nonconforming building construction type.			X		X	X	X					
f. Improperly protected vertical openings.					X	X						
g. Large penetrations in fire barriers.					X	X						
h. Hazardous areas not properly protected.			X		X	X						
i. Fire (smoke damper(s) not operating properly or inaccessible to inspection					X	X						
j. Blocking of an approved exit.	X	X										
k. Rerouting of traffic to emergency room.	X	X										
l. Renovation on an occupied floor.				X	X	X	X					
m. Replacing fire alarm system (out of service)												
n. Installing sprinkler system (out of service)												
o. Disconnecting alarm devices.								X				
p. Other Life Safety Deficiency not identified above*												

\*For Other Life Safety Deficiency not identified above, determine the ILSM to be implemented and mark them in the appropriate box(es) above.  
 \*\* If it is deemed necessary to install temporary fire alarm or detection systems for any of the deficiencies above, mark it in the matrix as an additional requirement.

This form provides guidance for ILSM to be implemented, however, based on the project scope and/or life safety code deficiency, the ILSM to be implemented may be expanded or reduced from what this table says. The final ILSM to be implemented will be identified in Attachment D ILSM to be implemented.

ILSMFY: 438-22-900 Attachment D  
**ILSM to be Implemented**

Based on the review of the ILSM Decision Matrix (Attachment B), please, list the ILSM to be implemented to maintain a safe environment during the lifespan of the Life Safety Code deficiency.

Place an X for applicable ILSM	ILSM to be Implemented	Responsible party
<input type="checkbox"/>	1. Post alternative exit signage	
<input type="checkbox"/>	2. Inspect egress daily in affected area	
<input type="checkbox"/>	3. Provide temporary but equivalent fire alarm / detection system	
<input type="checkbox"/>	4. Provide additional firefighting equipment	
<input type="checkbox"/>	5. Provide temporary construction partitions	
<input type="checkbox"/>	6. Increase hazard surveillance	
<input type="checkbox"/>	7. Control combustible loading	
<input type="checkbox"/>	8. Provide additional firefighting equipment training	
<input type="checkbox"/>	9. Conduct additional quarterly fire drills per shift per quarter in affected areas	
<input type="checkbox"/>	10. Inspect / test temporary fire systems on a monthly basis	
<input type="checkbox"/>	11. Train personnel in affected areas	
<input type="checkbox"/>	12. Train those who work in the hospital to compensate for impaired structural or compartmental fire safety features	

1. \_\_\_\_\_  
Engineering Services

2. \_\_\_\_\_  
Safety Representative

3. \_\_\_\_\_  
Department Manager

4. \_\_\_\_\_

Sioux Falls VHA Infection Control Risk Assessment for Construction, Renovation and Maintenance

**Table 1 - Construction, Renovation, and/or Maintenance Activity Category**

NOTE: If any of the bulleted criteria in a higher activity category pertains to the work that will be done (even if the other criteria are in a lower category), use the higher activity category for the VHA ICRA.

Activity Category determined from Table 1 (A, B, C, or D):

<b>Category A</b>	<b>Inspection and/or facility upkeep generally defined as follows:</b> <ul style="list-style-type: none"> <li>Work can be completed in a single shift, not to exceed 10 hours.</li> <li>Patients and/or employees may be in the area depending on the activity.</li> <li>Work that does not create dust or debris.</li> <li>Removal of ceiling tile or access to mechanical or electrical chase for visual inspection limited to 1 tile per 50 square feet with limited exposure time (not to exceed an hour for each tile) within the shift.</li> <li>Minor interior updates (e.g., replacing floor or ceiling tiles, carpentry work to include hanging signage, and painting without sanding) that do not create dust or debris.</li> <li>Limited building system maintenance such as plumbing on potable systems limited to faucet replacement etc. and electrical work such as replacement of bulbs, receptacles, or switches.</li> </ul>
<b>Category B</b>	<b>General maintenance and repair work generally defined as follows:</b> <ul style="list-style-type: none"> <li>Prolonged inspection and work that may take longer than a single shift but not exceeding a week.</li> <li>Patients and employees are not to be in the area until activity is completed.</li> <li>Work that creates minimal dust and debris.</li> <li>Interior finish or surface repairs, updates, or modifications such as repair of firewalls and barriers, and new flooring that produces minimal dust and debris. Controlled sanding activities (e.g., wet or dry sanding) that produce minimal dust and debris.</li> <li>Plumbing work such as installation or replacement of a single fixture or piping for a single fixture. Any work on sanitary plumbing including snaking of drains.</li> <li>Electrical work such as installation of cabling/wiring/conduit for a single device, installation of new device such as a light fixture that produces minimal dust and debris.</li> <li>Air Handler and/or fan shutdown/startup and HVAC work such as replacement of a single diffuser, single terminal unit or a single device that produces minimal dust and debris.</li> </ul>
<b>Category C</b>	<b>Small-scale construction, renovation, or maintenance generally defined as follows:</b> <ul style="list-style-type: none"> <li>Work requiring longer than a single week to complete but not exceeding 6 months.</li> <li>Patients and employees are not to be in the area until activity is completed.</li> <li>Demolition/removal of preexisting floor covering, casework, lay-in ceiling, or other architectural elements.</li> <li>Demolition/removal of more than 32 ft<sup>2</sup> of drywall/framing, hard ceilings, and doors/framing and minimal infrastructure such as electrical circuits and branch piping.</li> <li>Installation of new walls, ceilings and doors including framing, drywall/plaster and associated work.</li> <li>Plumbing work such as the installation of new sinks, showers and toilets and associated plumbing.</li> <li>Shut down of sections of potable water systems.</li> </ul>

VHA-ICRA-2023-1.0 Page 1 of 7

Sioux Falls VHA Infection Control Risk Assessment for Construction, Renovation and Maintenance

<b>Category D</b>	<ul style="list-style-type: none"> <li>Electrical work such as installation of conduit and wire for lighting, receptacles and switches for an area, the installation of conduit and wire for new devices such as terminal units, fans etc.</li> <li>Modification of existing fire alarm and suppression systems.</li> <li>Mechanical work such as the installation of ductwork, diffusers, and terminal units for an area.</li> </ul>
<b>Category D</b>	<b>Large-scale construction, renovation, or maintenance generally defined as follows:</b> <ul style="list-style-type: none"> <li>Work exceeding 6 months in duration.</li> <li>Patients and employees are not to be in the area until activity is completed.</li> <li>Large-scale demolition of building components and infrastructure including removal of multiple doors, walls, framing, ceilings, flooring, piping, electrical and HVAC.</li> <li>The installation building components such as new walls, ceilings and doors including framing, drywall and associated plaster work.</li> <li>Plumbing work such as the installation of:               <ul style="list-style-type: none"> <li>new medical gas systems,</li> <li>steam/heating hot water, condensate systems,</li> <li>multiple sinks, showers and toilets including associated plumbing.</li> </ul> </li> <li>Shutdown of potable water, steam/heating hot water, condensate, and medical gas systems.</li> <li>Electrical work such as installation of electrical feeders, distribution panels, conduit and wire for lighting, receptacles and switches for an area, the installation of conduit and wire for new devices such as terminal units, fans etc.</li> <li>Installation of fire alarm and suppression systems.</li> <li>Electrical shutdown of multiple panels.</li> <li>Mechanical work such as the installation of air handling equipment, associated ductwork, diffusers, heat exchangers, terminal units and controls.</li> </ul>

VHA-ICRA-2023-1.0 Page 2 of 7

Sioux Falls VHA Infection Control Risk Assessment for Construction, Renovation and Maintenance

**Table 2 - Affected Area Assessment**

Identify the areas and associated patients that will be affected by the construction/renovation/maintenance activity (see the Figure for a visual representation of adjacent affected areas).

Figure: Isometric drawing of affected area assessment

Area	Service(s)/Type(s) of Area(s) (e.g., OR, Unit/Ward, Sterile Processing, Administrative, etc.)*	Point of Contact (POC)	POC Contact Information
Activity Area**	Outside		
Area Above	N/A		
Area Below	N/A		
Adjacent Area 1	N/A		
Adjacent Area 2	N/A		
Adjacent Area 3	N/A		
Adjacent Area 4	N/A		

\* There may be more than one Service/type of area for each row. List all.  
 \*\* List the area(s) in which the construction/renovation/maintenance activity will occur. NOTE: When the Activity Category is B, C, or D, the control measures are determined by the Patient Risk in the adjacent affected areas.

VHA-ICRA-2023-1.0 Page 3 of 7

ADDENDUM 1	08-09-2024	CONSULTANT	ARCHITECT/ENGINEER OF RECORD	STAMP	Office of Construction and Facilities Management	Drawing Title PCRA, ICRA, & ILSM FORMS	Phase 100% CONSTRUCTION DOCUMENTS	Project Title SIOUX FALLS BOILER PLANT	Project Number 438-22-900
			<b>paradigm</b> Architecture   Engineering   Design-Build 9000 Weissex Place, Louisville, KY 40222 www.paradigmusa.com		U.S. Department of Veterans Affairs	Approved: Project Director	FULLY SPRINKLERED	Location VAMC-Sioux Falls: 2501 W 22nd St, Sioux Falls, SD 57105	Building Number 12
								Issue Date 09-12-2024	Checked EB
									Drawing Number G1108