



Construction Handbook Guide

Proposed Use of the Healthcare Construction Handbook

The Healthcare Construction Handbook is intended to support the existing construction process by providing consistent operational expectations for contractors and vendors working in active healthcare environments.

The handbook is not a replacement for project-specific planning, organizational policies, PCRA's, ICRA's, or ILSM's. Instead, it serves as a common foundation that introduces healthcare construction concepts early and reinforces them throughout the life of the project.

Phase 1: Pre-Bid – Establish Awareness

The handbook is included with the bid documents and referenced during the pre-bid meeting. The goal during this phase is awareness. Contractors gain an understanding that healthcare construction differs from traditional construction and that work will occur within an occupied environment where patient care continues uninterrupted.

Topics introduced include:

- Infection prevention considerations
- Interim life safety concepts
- Utility shutdown expectations
- Professional conduct requirements
- Security and access controls
- Environment of Care Impacts
- Coordination expectations

This phase helps contractors develop more informed schedules, staffing plans, and pricing assumptions before submitting a proposal.

Phase 2: Contract Award – Establish Expectations

Following award, the handbook becomes part of the project onboarding process.

At this stage, the handbook establishes baseline expectations for all contractors and subcontractors assigned to the project. It provides a consistent reference point for healthcare-specific operational requirements.

The intent is to ensure all parties begin the project with a common understanding of the environment in which they will be working.

Phase 3: Pre-Construction Conference – Transition to Practice

The Pre-Construction Conference is where the handbook transitions from orientation to project-specific application.

General concepts presented in the handbook are translated into operational controls tailored to the project.

Activities during this phase may include:

- Completion of the PCRA
- Completion of the ICRA
- Determination of required ILSMs
- Review of utility shutdown procedures
- Identification of affected departments
- Establishment of communication and escalation pathways
- Review of phasing plans
- Review of access routes and staging areas
- Distribution of project-specific instructions and contact information

The objective is to identify and mitigate risks before construction activities begin.

Phase 4: Construction – Maintain Operational Controls

During active construction, the handbook serves as a field reference reinforcing the expectations established during orientation and pre-construction planning.

Operational controls identified during the PCRA, ICRA, and ILSM processes are implemented and maintained throughout the project.

Examples include:

- Barrier management
- Pressure monitoring
- Daily inspections and rounding
- Utility coordination
- Fire watch activities
- Housekeeping practices
- Department notifications
- Escalation of changing conditions

The emphasis shifts from planning to execution.

Phase 5: Coordination and Communication – Sustain Situational Awareness

Construction activities occur within a dynamic healthcare environment.

Daily huddles, coordination meetings, and field communication help ensure stakeholders remain informed as conditions evolve.

Questions addressed may include:

- What work is occurring today?
- Have project conditions changed?
- Are barriers and controls functioning as intended?
- Have required notifications occurred?
- Are additional mitigation measures needed?

The goal is to identify potential issues early and prevent unintended impacts to patient care.

Phase 6: Closeout – Return the Space to Operations

The final phase focuses on safely transitioning the completed project back to normal operations.

Activities may include:

- Above-ceiling inspections
- Final life safety inspections
- Verification of system performance
- Removal of temporary controls
- Documentation turnover
- Delivery of as-built drawings and O&M manuals
- Release of the space for occupancy and use

The project is not complete until the environment is ready to safely support patient care.

Summary

The Healthcare Construction Handbook is intended to support the project lifecycle by providing:

- Early awareness during bidding
- Consistent expectations following award
- Project-specific application during pre-construction
- Reinforcement during active construction
- Continued communication throughout execution
- Structured transition back to operations at closeout

The handbook establishes a common operational foundation while allowing project-specific controls to be developed based on the risks associated with each individual project.