



ALASKA NATIVE MEDICAL CENTER



CONTRACTOR/VENDOR/SUPPLIER COMPLIANCE PACKET ORIENTATION MANUAL

**Alaska Native Medical Center
4315 Diplomacy Drive
Anchorage, AK 99508
(907) 563-2662 USA**

Administrative Office Telephone: (907) 729-1994
Administrative Office Fax: (907) 729-1984

OTHER CONTACT NUMBERS

To Report a Fire of Emergency call-----911 or "1111" in house
ANMC Operator-----0
ANMC Hospital Security-----729-2915
SCF Security-----729-5700
ANMC Maintenance Foreman-----729-2823
ANMC Director of Hospital Engineering-----729-3662
ANMC Occupational Health-----729-4471
ANMC Infection Control-----729-2921
SCF Employee Health/Infection Control-----729-5455
ANMC Safety Officer-----729-2911
SCF Safety Officer-----729-5153
ANMC Biomedical Department-----729-2570
ANMC-Hospital Materials Management Office-----729-1482
ANMC-PCC Materials Management Office-----729-4925

Register at MATERIALS MANAGEMENT OFFICE LOCATIONS to obtain a badge

Contractors performing work in the Hospital report to:
Materials Management Office, Main Hospital, Lower Level
4315 Diplomacy Drive 729-1482 7:00am-4:00pm Monday-Friday

Contractors performing work in the Primary Care Building report to:
Southcentral Foundation Corporate Office
4501 Diplomacy Drive 729-5700 8:00am-5:00pm Monday-Friday

Alaska Native Medical Center ANMC

Mission

The Alaska Native Medical Center shall fulfill the mission and vision of the Alaska Native Tribal Health Consortium and Southcentral Foundation by working together with the Native community to achieve wellness by providing the highest quality health services for all Alaska Natives.

Alaska Native Tribal Health Consortium

Mission

Providing the highest quality health services in partnership with our people and the Alaska Tribal Health System.

Vision

Alaska Natives are the healthiest people in the world.

Southcentral Foundation

Mission

Working together with the Native Community to achieve wellness through health and related services.

Vision

A Native Community that enjoys physical, mental, emotional and spiritual wellness.

ANMC HOSPITAL PROFILE

Highest Quality Health Services

As an acute, specialty, primary and behavioral healthcare provider, Alaska Native Medical Center (ANMC) provides comprehensive medical services to Alaska Native and American Indian people living within the state. The Center includes a 150-bed hospital, a full-range of medical specialties, primary care services, labs and covered parking.

The hospital also works in close partnership with rural health facilities statewide to support a broad range of health care and related services. As a statewide referral center, ANMC provides the Quyana House for patients and their escorts from surrounding areas, a 56-room, 108-bed facility. The Quyana House provides housing, travel services and Medicaid authorizations.

Together the **Alaska Native Tribal Health Consortium** and **Southcentral Foundation** jointly own and manage ANMC. These parent organizations have established a Joint Operating Board to ensure unified operation of health services provided by the Medical Center.



Working in an operational hospital is unlike working in any other type of facility. While we understand that you're here to work in our facility, first priority is the health and safety of our patients/customers, staff and visitors. For those construction contractors one of the most challenging aspects is working in close proximity to patients while not disrupting their care. In all cases, patient care activities have the highest priority. Every aspect of your work at our facility, including your conduct on the job, has the potential to affect our operations, so it is vital that we work together to do all we can to minimize disruption to our patient care services.

ANMC promotes a safe and healthy work environment. Unsafe conditions and unsafe acts can result in property damage or injuries to patients, visitors, employees, volunteers, or contract personnel. Today, medical facilities operate in a competitive market and under strict rules and regulations from the Joint Commission, and other regulation from organization that oversee safety and other issues. Compliance with OSHA, EPA, NFPA, the Joint Commission, and other regulations provides a minimum degree of safety. The Joint Commission is the agency that surveys the hospital and awards accreditation. In the hospital and outpatient setting, there are additional concerns for security, infection control, and life safety, which require extra awareness and caution.

The precautions that must be observed on our campus apply to all Contractors, Consultants, Vendors, and Supplier' and their employees who are performing work here. For the remainder of this document, the term "Contractor" will represent this entire group of contract employees.

- ❖ Prior to work in the building, Contractor staff are to be fully familiar and comply with ANMC safety policies and practices. Since ANMC employees and Contractors must interact with each other, Contractors must understand ANMC policies and regulatory protocols along with State and Federal Regulations.
- ❖ Contractor staff who work in the building for more than two (2) weeks a year are required to complete a Contractor Compliance Training program conducted or overseen by the respective Materials Management Departments.
- ❖ Contractor staff working in the building more than two weeks (2) a year are required to have "ANMC Contractor Orientation Post test" completed, submitted, and filed in the respective Materials Management Department. Note: For those contractors that work for Facilities Engineering, paperwork is filed in the Maintenance Department.
- ❖ Annually, Contractors are required to review the Contractor Compliance Packet and resubmit a ANMC Contractor Orientation Post Test, to ensure that everyone remembers these ANMC safety standards, and to be alerted to any changes or new information. If you have any questions, contact the respective Materials Management office or your sponsor for the most current documents or information.

GENERAL ORIENTATION INFORMATION

Tobacco

It is the policy of ANTHC & SCF to provide a tobacco free environment. Tobacco use in any form is prohibited on and within all parking lots, buildings, facilities, vehicles, and property whether owned, leased, controlled, or used. There are NO designated smoking areas on the campus. This shall include all privately owned vehicles when located on such property and owned or operated vehicles of both organizations wherever located. Please ensure that all contract personnel have reviewed this policy prior to working on ANMC campus.

Safety

In case of an accident or injury, report to your sponsor or the nearest Department Manager, Supervisor or Designee. Some important hospital safety information is that electrical shock or fire may result from unsafe use of electrical machinery. Signs of circuit overload are blowing of fuses and dimming of lights. Water is a conductor of electricity and, therefore, shock may result. It is never appropriate to put out an electrical fire with water.

Security

All Hospital workers will be properly identified according to policy. All contractors are required to wear ANMC issued identification badges at all times while on the premises. Weapons are prohibited on the grounds or within the building, even with a license. Exception is granted to law enforcement officers

Workplace Violence

ANMC has a zero tolerance for any implied or actual violence in the workplace.

Sexual Harassment

ANMC has a zero tolerance for any implied or actual sexual harassment in the workplace. Language or behavior by an individual interpreted as harassment or rudeness towards another individual will not be tolerated.

Security Assistance

As part of ANMC's ongoing effort to provide a safe, secure working and patient care environment, it is vital that all suspicious activity, crimes and criminal activity be reported to the appropriate security staff. For the hospital please contact Hospital Security at 729-2915. Contact SCF Security for the Primary Care Center at 729-5700. You may also Dial "0" for the operator or "9-911".

Parking

Refer to page 3 of this manual to see designated parking areas. Temporary parking for the loading and unloading of supplies is available in the rear loading dock of the main hospital for work to be performed in the hospital.

Alcohol and Drug Use

While on ANMC premises and while performing work activities and/or conducting business-related activities off ANMC premises, and while in an on-call or call-back status, no employee or member of the workforce may:

- ❖ use, possess, manufacture, dispense, distribute, transport, buy, sell, or be under the influence of alcohol or illegal drugs; or
- ❖ take prescribed drugs or over-the-counter drugs that impair an employee's ability to perform the essential functions of the job safely and effectively without endangering patients or other individuals in the workplace.

Biomedical Field Engineers

Biomedical Field Engineers are to register at Materials Management. For work performed on equipment contractors must check in with Biomed department. prior to commencement of work and check out with Biomed upon completion of work during normal working hours of 7:00am to 5:30pm Monday - Friday. For after hours please leave a message on work performed by calling 729-2570.

Confidentiality

Patients have an expectation of privacy from staff, visitors, and other on-site workers. While working at ANMC, Contractor personnel may be exposed to protected health information, including patient information or proprietary organization information.

- ❖ Contractors are required by HIPPA to follow privacy practices, and to protect the confidentiality of the information. Contractors can reference their Project Manager or sponsor/coordinator on privacy practices.
- ❖ Contractors are expected to keep all information either seen or heard confidential while working at ANMC. The identity of patients at ANMC or their medical condition, and strategic or operation plans of the Hospital are to be held in the strictest confidence. If a Contractor inadvertently learns of private patient matters, they are not to discuss them with anyone inside or outside of the facility. It is not ok for Contractor staff to ask about the condition of a friend who is a patient they happen across in the hospital.

Dress Code

When on the ANMC Campus or other owned or operated facilities, Contractor personnel should dress in a manner appropriate to their profession, excluding tank tops, shorts, or clothing with vulgar pictures or verbiage. Work clothing should be kept clean, and free of rips and tears. Appropriate work shoes should be worn; gym shoes or sneakers are not acceptable. Contractors represent themselves and their company, and want to make sure that they are invited back to handle future projects. They also represent ANMC, and therefore are expected to act and look like a professional.

Eating

Eating is not permitted on the job site. Designated break areas are available for Contractors to use during breaks or lunch hours.

Elevators

Contractor use of elevators for personnel and to move materials into and remove waste from the building will be strictly controlled. The elevators shall be protected and kept clean daily. Damage to the elevators, especially the doors and safety shoes, shall be assessed to the Contractor. Oversized materials and those exceeding the elevators' weight limits shall be craned or hoisted up onto the roofs or the floors. ANMC Project Manager or sponsor will identify the appropriate elevator(s) to be used.

Equipment for Demonstration/Trial

All equipment brought onto the accredited campus must be Federal Drug Administration (FDA) approved; and approved for the intended use. ANMC assumes no responsibility for the demonstration equipment and acceptance of the equipment for trail or test does not constitute an endorsement of the product by any staff member working at ANMC. Safety inspection by the ANMC Bio-Medical Department must be completed and a special ANMC property decal must be affixed on receipt of item before issuance to the requestor. The appropriate Materials Management Office will contact and coordinate with the department and the contractor/vendor/supplier in obtaining the equipment for evaluation. Refer to ANMC Policy # 806-02A.

Housekeeping

- ❖ Contractors shall use carts, trashcans, or bins with covers or lids to remove all debris and rubbish from the work areas.
- ❖ The haul routes shall be kept clean daily and all carts, bins, vehicles etc. shall be removed during ANMC's normal hours of operation.
- ❖ If you are removing and/or disposing tagged equipment during renovation, you must inform your ANMC Project Manager.

Orientation/Re-Orientation

All Contractors must receive an orientation at the start of work at the Hospital or in the Primary Care Center and again on an annual basis. They must demonstrate that they are knowledgeable of appropriate Hospital policies and procedures.

INFECTION PREVENTION AND CONTROL

Hand Hygiene

Hand hygiene is the use of hospital-approved soap and water or alcohol based hand sanitizers to clean hands. IF using soap and water, once you have placed soap on the palm of your hand you must rub your hands together briskly until a lather has been achieved and continue rubbing your hands together for 15 to 30 seconds. You can then rinse your hands thoroughly under warm running water. Dry your hands with a paper towel. Get another dry paper towel and turn off faucet. If you are using the alcohol based hand sanitizer, you must rub your hands together until they are dry.

Personal Protective Equipment (PPE)

Follow posted Infection Control Precaution signage. PPE is the utilization of gloves, cover gowns, face/eye shields, head and shoe covers. If any of these items are used, they must be discarded in the nearest trash receptacle, unless there is obvious blood or body fluids on them. If this occurs, they must be discarded in a red bio-waste container.

Standard Precautions

Standard Precautions is the use of PPEs whenever there is the risk of being exposed to blood or body fluids. These precautions are to be used on all patients, regardless of their condition or status.

Standard precautions must be used at all times when rendering care to a patient, regardless of health, illness or disease status. These standards must also be used whenever the probability of the exposed to blood, body fluids, or other potentially infectious materials (OPIM) is high. Standard precautions include:

- ❖ Gloves whenever the likelihood of expose to blood, body fluid or OPIM is high. They should be changed in between patients and when care is going to be provided on another part of the patient's body, i.e., oral suctioning then performing Foley catheter care.
- ❖ Masks and/or protective eyewear to protect mucous membranes of the mouth, nose and eyes from any splashes or airborne organisms.
- ❖ Cover gown to protect the healthcare worker's clothes from any splashes from blood, body fluids or OPIM.
- ❖ Hand hygiene with hospital approved alcohol hand sanitizer and/or soap and water immediately after removing gloves, in between patients, after using the bathroom.
- ❖ Needles and sharp instruments should be immediately placed in an appropriate sharps disposal contained once used. *Never* recap or bend needles or other sharp instruments.

Transmission Based Isolation

Transmission based isolation falls into one of the three categories: airborne, contact, droplet. Each of these categories has a color coded sign that is placed on the door to the patient's room. Please note that each type of transmission based isolation precautions requires specific PPEs to be worn. The front of the isolation cards has pictures of what is needed. For example, contact precautions require the use of a cover gown and gloves. Refer to Infection Control webpage on the ANMC intranet.

Exposure Control Plan

This plan is designed to protect our healthcare workers from the potential for exposure to blood or other potentially infectious materials that can cause an infection in the worker or death from a blood borne infection. This plan includes information on the types of PPEs that are to be worn; what your role is, and your supervisor, in the event of an exposure; and actions to take in the event of an exposure. Please refer to the Infection Control webpage on the ANMC intranet, your ANMC Project Manager or sponsor can provide you with a copy.

ENVIRONMENT OF CARE AND FIRE SAFETY

Emergency Response

The Emergency Response phone number within the hospital is 1111". Use this number to report a fire. In the event of a fire alarm, all Contractors shall stop work, listen and follow directions given in the overhead announcements. In the event of an emergency in a clinical department, Contractors are to follow the instruction of the Clinical Department Manager. Contractors shall have an emergency evacuation plan, and ensure that all staff and sub-Contractors know where to meet outside the facility and will have an accurate head count of persons working on site. Even though an audible alarm has not been triggered there may be a developing fire.

ANMC has identified emergency codes that you are required to know. When one of these codes is announced, stay clear of the area and respond accordingly.

Overhead page:

***Code Red** – Fire (Contractors are expected to participate in fire drills)

Code Blue – Medical Emergency Adult

Code White – Medical Emergency Pediatric

Code Pink- Infant Abduction

Code Purple- Child Abduction

Code Yellow– Bomb Threat

Code Gray – Combative Person

Code Silver – Person with a Weapon/Hostage Situation

Code Orange - Hazardous Material Incident

Code Triage Internal – Internal Disaster (i.e. Utilities Failure)

Code Triage External – External Disaster (i.e. Earthquake)

*Contractors need to know what to do in the case of a fire:

R - Rescue anyone in immediate danger

A - Alarm – pull firebox AND dial "1111"

C - Confine, close doors, windows and chutes

E - Extinguish if small fire, if necessary evacuate

There are other existing Response Activations that may be called overhead and are listed below:

Trauma Team

Trauma Alert

Pediatric Trauma Team

Pediatric Trauma Alert

Rapid Response Team

Seriously ill Person in Quynana House

Seriously ill person outside the ER

Fire Drills

Contractor personnel are to participate in jobsite fire drills as directed by ANMC Facilities Department and/or Security Department. As a general rule, do not use elevators when there is a fire.

Maintenance/Facilities & Construction

Contractors

The ANMC Project Manager is your sponsor and is the assigned point of contact for all communication between the Contractor and ANMC. Update your ANMC Project Manager regularly of your progress or changes in pre-established plans. This kind of communication strengthens the bond between the Contractor and the hospital, and ensures that there are no surprises for any of the parties as the project unfolds. Construction activities do not take precedent over patient care activities when on a tight deadline.

Coordination Requirements

The Contractor will be required to participate in a Pre-Construction Conference in coordination with the ANMC Project Manager, in such form and content and at such time as determined by ANMC before the project begins. During this conference, a Pre-Construction Risk Assessment will be completed, to determine the scope of the project and to communicate with other departments that may be involved in or impacted by the project.

Given the uniqueness of medical facilities, the Pre-Construction Risk Assessment will cover such issues as:

- Work schedule
- Layout of the work area
- Engineering plans and diagrams
- Alternate fire safety paths
- Utilities found in the area
- Planned disruptions
- Needed Interim Life Safety Measures
- Applicable local & state regulations
- Infection Control issues

Periodic on-site meetings chaired by ANMC's Project Manager will be held at regular intervals. Attendance is required by the Contractor. The Contractor's representative at these meetings shall be thoroughly familiar with the project. The Contractor must bring Logs of Submittals, RFPs, Contractor Proposals and RFIs to each meeting. These will be compared to confirm the status of outstanding items, late responses, etc. Special meetings will be scheduled as required to address issues that are not resolved during the weekly on site meetings. The Contractor shall keep one "Project Binder," a bound copy of pertinent information, on the job site until project completion. The Project Binder will keep such documents as:

- Emergency Contacts
- Daily ILSM/ICRA Forms
- Roster of Approved Personnel
- MOA permits and others as appropriate
- IC Permits
- Disruption Notices
- Fire Drill Report
- Safety Program Meeting Minutes
- Contractor Compliance Training

Safety Requirements

The Contractor shall abide by all ANMC safety requirements to include the Joint Commission Life Safety Measures, NFPA 101 Life Safety Code, and all worker safety regulations to include the OSHA Occupational Safety and Health Standards for the Construction Industry. Specifically:

- ❖ Contractors are required to have their own Safety Plan, enforce it, and have a current copy on file with the ANMC Project Manager prior to the start of work. It is the responsibility of each Contractor employee to become familiar with, and follow the program established by his/her company. In addition to their own Safety Plan, Contractors are also required to follow ANMC's Safety Program.
- ❖ Contractors are required to orient their employees on their first day on the job-site, before beginning work. At a minimum, the orientation must include the following: safety rules, ANMC Contractor policies and procedures, personal protective equipment, location of fire extinguisher, evacuation route, emergency response procedures, and badge-in location and procedures.
- ❖ No equipment shall be operated unless the operator has received proper training on that equipment and certification obtained, if applicable.
- ❖ Hard hats and protective eyewear are required to be worn in all designated construction areas by all Contractor or hospital personnel. There will be no exceptions. Hearing protection is required when excessive noise is present.
- ❖ Any work on the medical gas system must be done by suitably trained and certified staff under the supervision of qualified Plant Operations personnel. The Contractor is responsible for electrically locking out any equipment being worked on according to standard practice procedures.
- ❖ Contractors and subcontractor staff shall be fully competent, licensed, and certified for any tasks assigned while working for ANMC.
- ❖ All Contractors shall immediately take necessary action to correct any unsafe actions or conditions and, if applicable, report them to the ANMC Project manager.

Expectation of Contractors

While Contractors are working within ANMC or associated sites they represent their sponsor or ANMC Project Manager, and therefore are expected to act professionally in what they do and say. Our employees, visitors and patients are extremely important customers and require the utmost courtesy and consideration when working with and around them. Through your work you become an important part of our team.

Special Coordination Requirements

Working in an Occupied Space

- ❖ ANMC departments and tenants will typically occupy the space within the existing building and structures adjoining the work during the entire period of construction, renovation, or maintenance, and will be utilizing the space for their normal operations.

- ❖ The Contractor will cooperate with ANMC departments and tenants to minimize conflicts, and to facilitate the hospital's operations. The Contractor must obtain permission from both the ANMC Project Manager and the Department Manager or Charge Nurse prior to working in any area. Contractors may be required to observe special precautions including wearing personal protective equipment, and special clothing, ceiling tile enclosure, or cleaning of equipment prior to or after entering the area. Contractors need to observe all of the Infection Control procedures outlined in the ANMC Infection Control Policies and Procedures, particularly in clinical areas.

Disruption Coordination

- ❖ Disruption Requests shall be submitted on the official form, as provided by the Facilities Department.
- ❖ Disruptions include but are not limited to: Closing corridors, closing exits, altering occupied spaces, shutting down plant utilities or portions of plant utilities (fire sprinkler, medical gases, supply fans, electrical power or lighting, etc.), removal of smoke detectors to accommodate reconstruction, excessive noise or smells, or any activity that may require ANMC to alter activities within occupied areas. Any work ANMC deems disruptive is subject to disruption coordination.
- ❖ Disruptions shall not occur unless and until they are requested three (3) weekdays (Monday through Friday) in advance of the activity and shall not be started without formal, prior written approval by ANMC. Disruptions will be entered on the disruption log maintained at ANMC's plant Control Room by ANMC's Project Manager. The Contractor will be responsible for verifying that the planned disruption has been approved and recorded on the log prior to starting the disruption. Disruptions submitted for approval but not logged will not be allowed until ANMC's Project Manager records the disruption on the log. The ANMC Project Manager has the authority to approve or cancel the scheduled disruption.

Disruptions

The work that requires special coordination includes but is not limited to the following:

Noise All noise and vibration generating operations, which are disruptive to the facility's operations, shall be subject to scheduling approval by the ANMC Project Manager. Equipment shall be muffled for quiet operation not to exceed 50 Db at a distance of 20 feet from the source, unless otherwise approved. Work stoppages due to excessive noise or vibration or both during normal working hours shall not be deemed grounds for time extension.

Smell The Contractor shall specifically coordinate, and avoid wherever possible, work activities which generate odors or fumes which will be detectable outside of the Construction Work areas. If this work activity is unavoidable, it shall be subject to disruption scheduling approval. The Contractor shall make all necessary provisions to prevent equipment exhaust emissions from entering the building supply air

systems, to include placing scrubbers on the equipment, to a level to the satisfaction of ANMC. The Contractor shall make all necessary provisions to directly exhaust welding and other generated fumes to the outside of the building, to include locating ducted exhaust fans at the interior welding sites. Work stoppages due to improperly exhausted equipment shall not be deemed grounds for time extension.

Dust The Contractor shall maintain dust-free environments in the occupied spaces in compliance with all requirements identified in the Infection Control policies. Contractors shall maintain Infection Control measures throughout construction.

Vibration Vibrations that result from construction projects can disrupt patient care. In addition, vibrations could significantly impact delicate and expensive medical equipment, including scanners and x-ray machines.

Infection Control Requirements for Projects

Infection Control is an extremely important part of the construction, renovation, and maintenance process for patient, staff and visitor safety. Infection Control issues are important to all of our Contractor staff, including Architects and Engineers. Prior to the start of any construction work, the Contractor is required to participate in an Infection Control Risk Assessment with a member of Infection Control Department. Upon completion of the risk assessment an Infection Control permit will be issued by ANMC if the risk category is III or IV. If the job site is classified as an Infection Control Class III or Class IV, the permit must be posted at the job site. The Contractor is required to post and comply with all requirements of the Infection Control permit. The precautions required during the project will be clearly delineated during the permitting process and will be reviewed by Infection Control and the ANMC Project Manager to assure that standards are followed.

Infection Control measures are to be inspected daily by the Contractor on the approved daily inspection form and weekly (more often if needed) by Infection Control. Daily reports are to be maintained at the project site. If appropriate, weekly Infection Control rounds will be sent to the appropriate ANMC Project Manager. Infection Control representatives have the authority to stop work until required Infection Control measures are satisfactory. Such stoppages are not grounds for cost or schedule impacts.

When negative pressure is required, it shall be monitored via a differential pressure gauge and documented at the start and end of each shift on a daily inspection form. The negative air machine must be in operation 24 hours a day.

Monitoring Items for Infection Control

- Demonstrated compliance with traffic patterns. Ensure a safe route is identified for removal of construction debris from site
- Demonstrated compliance with cover clothing by the workers. If personal protective equipment (PPE) is worn (mask, hat, scrubs or white coverall, gloves,

gown), leave dirty PPE in the work area

- All workers should wash their hands often, especially before eating and when leaving the work area
- Sticky (tacky) walk-off mats are to be placed on each side of an exit / entrance door and should remain tacky (remove top sheet often)
- Walls between areas are sealed off to prevent passage of dust during construction or demolition
- All return ducts will be capped/shut off and sealed with media filters prior to start of work
- All doors, air ducts and openings, leaving or entering the space, will be taped and sealed- regardless if a negative air machine is in use. Barricades will be sealed with minimal penetrations - doors closed and gasketed/sealed with duct tape
- All shut downs of water/air in an area will be identified and documented to ensure all of the Facilities team and Contractors know and understand the procedures
- Ceiling tiles are not allowed open for longer than inspection without an enclosure or control-cube being used to contain dust. Adjacent ceilings must be kept intact
- Negative air machines with HEPA filtration (HOG) are operational where indicated
- No water leakage seen
- No signs of pests

Housekeeping

Waterborne infections can also become a problem in hospital job sites. The Contractor shall control the discharge of fluids such that adjacent and lower floor areas are not impacted. The Contractor shall have the means and methods in place to handle spills or leaks. In the event of a leak or spill, report the issue to Infection Control immediately.

Contractors are expected to practice work techniques that minimize the spread of dust within the hospital. Many of our patients are extremely vulnerable to infections induced or caused by molds and spores carried by the spread of dust. It is the responsibility of each Contractor to ensure that their employees and sub-contractors use good work practices to minimize dust contamination. Job sites are to be cleaned daily by the Contractor to minimize the spread of dust and construction debris. No dust should be seen outside of the barricade and floors must be clean near entrances. Dust containment techniques include:

- Covering of carts
- Negative pressure in construction site
- Constructing barriers
- Minimizing traffic
- Wearing PPE (Personal Protective Equipment)

Life Safety Requirements

Interim Life Safety Measures

Interim Life Safety Measures are referred to as ILSM. In the event that a construction or remodel project compromises one or more life safety code requirements, an equivalent or an additional Life Safety equivalency must be provided. Hospital Accreditation requires that ILSM be implemented on all projects and that everything is documented appropriately. Prior to the start of any construction work, the Contractor is required to participate in an Interim Life Safety Measures (ISLM) risk assessment with a member of the respective ANMC Facilities Department(s). The Contractor and/or sub shall maintain documentation that they have maintained equivalent interim life safety systems in place throughout their work. ISLMs are to be inspected daily on the approved daily inspection form. Daily reports are to be maintained at the project site in the project binder and made available to ANMC upon request. These daily inspection forms are to be kept on site for a minimum of 30 days. Any deficiency noted during the inspection must be corrected immediately and any action taken must be documented on the inspection sheet, prior to leaving the site for that shift.

No exceptions to this requirement.

Major Components of Life Safety

Smoke/Fire Barriers and Doors

Hospitals are constructed to prevent the spread of smoke and fires with alarms system components and compartments. Without such protection, hospital staff could not keep patients safe without leaving the building. Drawings indicating the location and the rating of fire and smoke partitions are available in Plant Operations.

- ❖ Contractors must ensure all temporary partitions are smoke tight and built of noncombustible materials and otherwise work to ensure full compliance with life safety, infection control and fire requirements of the building. Visqueen is **not** a limited combustible material. Barriers that replace or take the place of existing rated smoke and/or fire separations shall be of the same rated construction. Construct and maintain temporary, non-combustible, fire resistant, smoke tight partitions to separate the construction area from occupied areas of the hospital as required by the project and building officials.
- ❖ Existing smoke and fire doors must not be propped-open or held-shut by any method. Nothing is to interfere with their ability to be self-closing and maintain a positive latch.
- ❖ If pre-existing holes are found in fire/smoke partitions, the Contractor must bring them to the attention of the ANMC Project Manager BEFORE beginning work. All walls within the area of work will be brought up to current code prior to the start of any work to ensure the containment of smoke or fire within the area.
- ❖ All penetrations in fire and smoke barriers must be caulked with UL approved fire stop systems. ANMC has a list of approved UL rated systems for fire barriers. All fire barrier penetrations or shafts shall be secured daily to ensure that in the case of fire, smoke or flame will not travel upwards or into adjacent areas

- ❖ When indicated by the Director of Facilities or designee, the Contractor shall provide necessary interim measures to ensure life safety and fire safety including but not limited to instituting fire watches, additional training to the Contractor or sub Contractor staff, additional fire drills, providing additional fire fighting equipment and other related measures.
- ❖ The Fire Barrier Management Program administered and overseen by the respective Facilities Department provides that all non-compliant Contractors will be held responsible for work on fire barriers not meeting standards.

Ceiling Tiles

- ❖ Ceiling tiles are a barrier to smoke/fire in all areas of the building, and offer protection to occupants. Ceiling tiles may be removed to investigate the area for pipes, conduit, etc. Each Contractor must replace removed ceiling tiles when the work is complete in construction areas, and daily in occupied Hospital areas. On projects requiring large areas of ceiling tile to be removed, the ceilings may remain open for a limited amount of time. The Contractor shall notify the ANMC Project Manager as to the length of time the ceiling tiles will be removed, and other ILSM/Infection Control measures must be utilized.

Blocked Egress

- ❖ The Contractor shall maintain free and safe passage in all occupied and construction areas at all times. At no time during normal working hours shall the Contractor disrupt or block traffic to and from occupied areas on the ANMC Campus, including the elevators, and entrances to the Facility, without providing alternate means of access and/or passage acceptable to ANMC. Fire egress pathways, exits, and fire lanes shall be kept open and accessible at all times. Contractors must provide and maintain access to emergency department / services for fire, police and other emergency responders.
- ❖ Areas of work will be strictly maintained and cleaned daily to prevent the buildup of debris or any other materials that could cause combustion or contribute to injury. This includes stockpiling of materials for use on the job and combustible storage in maintenance areas.
- ❖ Contractors will not block or leave doors open, nor will storage of tool carts or supplies be allowed for any amount of time in stairwells, egress corridors or mechanical areas.

Fire Detection Deactivation Coordination

Over 50% of all hospital fires are the direct result of construction projects. Of all the various industries in America, hospitals have worked perhaps the hardest to reduce fires. ANMC places a high priority on safety and mandates compliance with all Fire and Life Safety codes. The Contractor shall make all necessary provisions to protect all individuals from injury and the building from damage caused by, but not limited to, fire, sparks or molten material resulting from the welding process or its by products.

- ❖ Any welding, metal cutting, floor seam welding or other activities with the potential of setting off smoke detectors will not be allowed until the area

- smoke detectors are disarmed. Smoke detector numbers must be identified on the log by the Contractor for the duty operator to disarm any area. The Contractor will be responsible for requesting that smoke detectors be disarmed for their work.
- ❖ The Contractor will request deactivation of the fire detection system devices at the plant Control Room by filling out the first portion of the fire alarm deactivation log for each detector. The Contractor is responsible for verifying that the duty operator recorded the fire detection system devices as requested on the log prior to working in that area.
 - ❖ The individual who requested detector deactivation will be responsible for requesting on the log that the detectors or flow switches be reactivated. All detectors or flow switches will be reactivated upon leaving the area for the day. No area or sprinkler system will be allowed to remain disarmed while unoccupied.

Hot Work Permit Program

The Contractor will comply with ANMC's Cutting/Burning procedures administered by the respective Facilities Department. The Contractor must provide procedures and notification to minimize risk of fire for any "HOT" work, including grinding or any other open flame.

- ❖ Prior to beginning Hot Work, the Contractor must obtain a Hot Work permit from the plant Control Room. Hot Work permits are only valid for **ONE DAY** and must be posted at the hot work site. When Hot Work is completed, it must be signed off on the permit and a copy filed with the Control Room.
- ❖ The Contractor must also initialize a fire watch. "Fire watch" must extend for 30 minutes after the Hot Work is completed. When required, the Security Department may be available to provide additional fire surveillance.
- ❖ Fire extinguishers must be present for any Hot Work
- ❖ Combustible materials must be removed or stored appropriately.

Sprinkler Red Tag Program

Any draining of fire sprinklers or exterior water lines will not be allowed until all flow switches for the sprinkler system are deactivated. Flow switch numbers are available from the hospital control room or respective facilities department for deactivation of a sprinkler system. The Contractor will be responsible for requesting that flow switches be deactivated for their work.

- ❖ All sprinkler work requires a RED TAG permit.
- ❖ NO sprinkler work may occur in the same location where Hot Work is taking place.
- ❖ Provide a placard describing the location of the sprinkler system valve for the area, the closest pull station, phone number to dial in the event of fire or emergency. If in the hospital dial "1111" for fire (dial 911 when working outside of the hospital).
- ❖ When workday is complete, all disabled fire devices will be put back into service and verified by the hospital control room or respective facilities department prior to leaving the work site, NO EXCEPTIONS.

Fire Extinguishers

The Contractor is responsible for maintaining equipment and personnel to prevent fires.

- ❖ Contractor work areas must have a commercial grade fire extinguisher located at all exits of the construction project. Extinguisher must be rated 4-A: 60-B: C (10 lbs.) or more.
- ❖ The extinguisher must be checked monthly and documented on the attached inspection tag to ensure it has not been used, no clogging exists within the nozzle, the needle is in the green, and the safety tie wrap on the pin is still in place.

False Fire Alarms

False fire alarms are very disruptive for patients, visitors and staff. For any fire alarms activated due to the Contractor not following the procedure outlined herein and that result in the Anchorage Fire Department's dispatch, the Contractor will be charged AFD dispatch fees (\$500.00 per dispatch).

General Site Safety

Construction Personal Protective Equipment

The Contractor is responsible for providing the appropriate personal protective equipment (PPE) for hazardous conditions encountered, and for training employees in the proper use and maintenance of PPE. Some examples of PPE include the following:

- Hard Hats
- Hearing Protection
- Safety Eyewear
- Gloves
- Safety Shoes
- Safety Belts, Lifelines, & Lanyards
- Respiratory Protection

Hazardous Materials

In accordance with OSHA's Hazard Communication Standard, each Contractor is required to submit to the ANMC Project Manager a list of hazardous materials that will be used and a copy of all material safety data sheets (MSDS) for those materials.

- ❖ The Contractor is responsible for notifying all of its employees and employees of sub-contractors of their right to know about hazardous materials at the project site and related areas.
- ❖ The Contractor is required to provide the appropriate Personal Protective Equipment (PPE) on the jobsite for their employees.
- ❖ ANMC maintains a hazardous chemical inventory and material safety data sheets for chemicals used, handled, or stored by ANMC employees within their work area. Contractors and their employees may inspect this information at any time.
- ❖ All chemical containers must be labeled to identify the chemical contained and appropriate hazard information on MSDS sheets.

- ❖ Flammable paint or any flammable materials will be kept in a secure flammable cabinet. This includes any oily or solvent used rags.
- ❖ In the event of spill or release of a hazardous material, contact the operator by dialing "1111" on any house phone immediately.

Medical & Compressed Gas

Contractors working on a construction or renovation project must work with the ANMC Project Manager and the respective Facilities Department to shut off medical gas.

- ❖ Contractors must verify the medical gas line to be shut off is not in use for patient care. **Only hospital staff may turn off medical gas that is in use by patients.** In the event of fire, the clinical staff will take this responsibility.
- ❖ Contact the Clinical Staff in the area if the zone valves need to be shut off.
- ❖ Contractors bringing bottled compressed gases (i.e., for equipment) on campus must notify the ANMC Project Manager as these may pose an additional risk to occupants in the area.
- ❖ Compressed gasses must be properly secured at all times.

Lock out/Tag Out

The hospital has implemented a Lock-out/Tag-out program in accordance with OSHA regulations. All Contractors performing work on or around machinery or energized equipment necessitating the use of Lock-out/Tag-out may use their own Lock-Out/Tag-Out procedure, must comply with the ANMC's procedures.

Standards of Conduct

Badges

All Contractors and sub-contractors are expected to wear the ANMC issued identification badge while working at the Hospital or Primary Care Center at all times and in all areas.

- ❖ If a Contractor employee will be assigned to a project at ANMC for an extended period, two or more weeks cumulatively, a Permanent Vendor Badge may be required for the duration of the assignment. Consult with your ANMC Project Manager or sponsor. For contractors that work for Hospital Facilities check in at the hospital control room.
- ❖ If a Contractor will be onsite for a period less than two weeks, they will be issued a ANMC Authorized Vendor Pass (temporary identification badge) daily from the respective Materials Management Department. Contractors will be required to leave their personal identification (such as a driver's license) in exchange for the ANMC Authorized Vendor Pass. Badges must be returned to the respective Materials Management Department at the completion of each work day.
- ❖ Badges must be returned to ANMC at the completion of an assignment. The Contractor will be responsible for their return. At the closeout of the project, ANMC will provide the Contractor a list of badges not yet returned. Final payment will not be made until all badges are returned or they are paid for.

- ❖ As an incentive to get Permanent Vendor Badges returned, replacement costs of unreturned badges will be charged to the Contractor at a rate of \$500 per badge.

Crew Location for projects

- ❖ Contractors and their staff that have been issued a Permanent Vendor Badge will be required to "sign in" every time they arrive onsite and every time they leave the premises. Regular audits will be conducted. Contractors and their staff that have been issued a ANMC Authorized Vendor Pass from the respective Materials Management Department will be required to sign in on the log, identify the location they will be working in, and the sponsor name or Project Manager they will be working for.
- ❖ The Contractor shall be responsible for ensuring each subcontractor employee sign in and sign out on the log. The Contractor is responsible for ensuring all locations of crews are logged in.
- ❖ The ANMC Security Officer or ANMC Boiler Operator may request a security check on any crew that has not signed out. Prior to working in patient care areas, the Project Manager and the Charge Nurse or Department Manager must be notified.
- ❖ If the Contractor requires the use of any ANMC keys, he/she will be required to (coordinate with their sponsor) and document on a key log. Key(s) are to be returned at the end of each work day. The Contractor must have a Permanent Vendor Badge to be allowed to sign out key(s). If the Contractor leaves the campus for a short time, they must return the ANMC key(s) before they leave. Whenever possible, locks in construction areas will be switched out to a construction master cylinder. Contractors not returning their key may be assessed the total cost of replacing all cores, etc. which may exceed \$12,000.
- ❖ Continued failure to assure compliance with the sign in and crew location procedure described herein will reflect poorly on any periodic evaluation of performance of the Contractor.

Loaning or Borrowing Tools

It is the policy and practice of the Facilities Department not to loan tools or materials to Contractors doing work at ANMC. Contractors are expected to be prepared to perform work at ANMC by bringing the required tools and material.

Stop Work

The ANMC Project Manager, ANMC Maintenance Manager, ANMC Safety Officer, ANMC Infection Control staff has the right to stop any work being done if it poses a Life Safety threat or poses a serious Infection Control threat to the building or its occupants.

Coordination of Sub-Contractors

The Contractor is responsible for the conduct of sub-contractor personnel as if they were its own. Assure that sub-contractors are familiar with the Contract Documents, including but not limited to the Administrative Specifications.

- ❖ Contractor shall assume that any deviation from the Contract Documents by subcontractors will be the responsibility of the Contractor to recognize and correct.

Coordination with other Contractors

ANMC reserves the right to perform work related to the Project with its own forces and to award separate contracts in connection with other portions of the Project or other work on the Project site.

- ❖ The Contractor shall cooperate with ANMC and any separate Contractor to achieve the expeditious and economical completion of the Project consistent with the interests of ANMC.

Jobsite Signage

Signage to be posted at each work site to be done in a neat and legible fashion and is subject to approval by ANMC. Documents to be posted are to include, but are not limited to:

- Permits as appropriate
- Infection Control permit
- Safety signs/notices
- Emergency and after hours contact information
- List of authorized personnel
- Disruption notices
- Exiting plans

Contractor Use of Premises

- ❖ All work to be performed outside of a designated construction work area shall be scheduled and coordinated. Additional partitions shall be constructed where necessary in order to maintain separation between the construction and occupied areas.
- ❖ Do not use parking spaces designated for visitor, patient, physician, handicap or employee use for construction operations or Contractor and sub-contractor personnel parking. Use only areas designated formally by your ANMC Project Manager.
- ❖ Parking for vehicles beyond the areas arranged with ANMC will be the responsibility of the Contractor. This includes the possibility of bussing personnel to the project site from an off site location.
- ❖ Comply with Municipality of Anchorage noise practices. Comply with requirements for "noise sensitive zones".
- ❖ Contractor shall be responsible for verifying that building load carrying capacities are not exceeded while transporting materials through the building.

Storage of Tools

Construction staging and storage shall be limited to within the designated construction areas. No additional staging or storage area is available on site. When not on the job, Contractors are required to store equipment and materials properly so as not to create a hazardous situation for passerby. Contractors are required to lock up or be in direct control of their tools at all times. This may

mean adding a locking mechanism to the cart in order to secure tools when Contractors are away from their cart. Contractors will ensure that the area of construction is secured at the end of each shift to prevent entry of unauthorized personnel after hours.

Policies and Other Manuals

Hospital and Departmental Policies/Procedures and guidelines, as well as the Infection Control Procedures and Disaster Manual are found on-line and/or in every Hospital Department/Unit (you may request a copy of any of these policies to review by asking your sponsor or Materials Management Department at the hospital or the Security Office at the Southcentral Foundation Corporate Office).

ALASKA NATIVE MEDICAL CENTER CONTRACTOR/VENDOR/SUPPLIER ORIENTATION

1. Parking for Contractor/vendor/supplier is designated (see page 3 for parking map).
2. Report to respective Materials Management Office to obtain ANMC Authorized Vendor Identification Badge and clearance to enter the Hospital or if you are a contractor for Facility Engineering Department to Maintenance Department.
3. Normal Contractor/Vendor/Supplier hours:

MATERIALS MANAGEMENT OFFICE LOCATIONS to Register & Badging

Contractors performing work in the Hospital report to:

Materials Management Office, Main Hospital, Lower Level

4315 Diplomacy Drive 729-1482 7:00am-4:00pm Monday-Friday

Contractors performing work in the Primary Care Building report to:

Southcentral Foundation Corporate Office

4501 Diplomacy Drive 729-5700 8:00am-5:00pm Monday-Friday

4. After hours visits are to be coordinated through the respective office or department and the respective Hospital department requesting your services. Check in with Security who will need to be informed of the dates, times, locations and person(s) allowed in the Hospital after hours.
 - a. For Hospital Facility Engineering contractors please check in with Hospital Maintenance Control Room.
5. Contractor/Vendor/Supplier(s) that are in the Hospital Operating Room is only allowed in the surgical suite while providing support to the surgeon.
6. Contractor/Vendor/Supplier(s) cannot make agreements with staff or providers without talking to the department manager.
7. Contractor/Vendor/Supplier(s) that violate the rules may be prohibited from entering building.

Any questions concerning other details can be directed to hospital Materials Management Office for the hospital or Southcentral Foundation Corporate Office for the PCC building.

ANMC

SUMMARY FOR CONTRACTOR/VENDOR/SUPPLIER ORIENTATION

1. **REGISTRY:** For every visit each contractor/vendor/suppliers must complete a registry form located in the respective Materials Management Department at the hospital for the hospital visits, hospital facility contractors with hospital Maintenance Department or the Southcentral Foundation Corporate Office for the Primary Care Clinic visits.
2. **CONFIDENTIALITY:** All contractors/vendor/suppliers must sign a confidentiality agreement prior to working at ANMC.
3. **CONTRACTOR/VENDOR IDENTIFICATION:** Contractor/vendor/supplier staff that work in the building(s) on the accredited campus are required to have "ANMC issued badge". All contractors/vendors must sign in at respective building check in stations noted on the face page of this manual to receive an identification badge and clearance to enter the Hospital and/or outpatient work areas and must sign out and return the identification badge before leaving the premises.
4. **ENTERING/LEAVING HOSPITAL AFTER HOURS:** All contractors/vendor/suppliers must enter through Security at the Emergency Room entrance at the hospital from 4:00pm to 7:00am; and receive/retrieve an identification badge. Exit must be from Security with return of badge. No exceptions are made.
5. **PRODUCT PRESENTATIONS/EQUIPMENT TRIALS:** New products to be introduced by a vendor/supplier for ANMC use must be screened and evaluated by the respective Materials Management Department. The vendor/supplier must deliver all samples for evaluation to Materials Management for appropriate distribution. (Exceptions: Food Services and Pharmacy Products. However, even these vendor/suppliers must report to Materials Management and obtain badge identification prior to entering the Hospital work areas).
 - a. Prior to coming to the campus scheduled appointments are completed.
 - b. Visiting patient care areas unless authorized is prohibited.
 - c. No drug samples are authorized to be left with any member of the staff.
 - d. Promotional literature or advertisement is not permitted. Only health care professionals specifically requesting materials will be allowed.
 - e. Distribution of patient education literature is not permitted. Vendor provided patient education literature must be routed through Hospital Education Department for approval, cataloging, and distribution.
 - f. Meetings in public areas, elevators or public corridors are prohibited.
 - g. If a meeting room is required the appropriate department manager must arrange for the meeting room.
 - h. No equipment or supply items will be brought into or left in the facility until the Statement of Agreement form has been completed and/or a safety inspection by the ANMC Biomedical Department is completed and a special ANMC property decal is affixed before approval for use of the equipment.
 - i. ANMC is a tobacco free environment. Tobacco use in any form is prohibited on and within all parking lots, buildings, facilities, vehicles, and property.

- j. Any infraction of the ANMC vendor policy or procedures can result in the loss of visitation privileges or other action, as deemed necessary.

- 6. **ORIENTATION/REORIENTATION:** Contractor/vendor/supplier staff who work more than two (2) weeks a year are required to have completed an annual orientation.

Complete the attached test and return it to the respective offices of hospital materials management or Southcentral Foundation Corporate office for PCC building. Return attached test if you are a contractor for hospital Facility Engineering Department to hospital Maintenance Department. Alaska Native Medical Center appreciates you as a Contractor and your efforts and professionalism to help ensure a safe and healthy work environment for all.

ANMC CONTRACTOR/VENDOR/SUPPLIER ORIENTATION ASSESSMENT INSTRUCTIONS

Every contractor who will be at ANMC must complete the attached Contractor Orientation Post Test. After completing the test, the respective Materials Management Department staff or if you are a contractor for Facility Engineering Department staff will review the answers with you using the Orientation Compliance Packet to correct any misunderstandings.

The assessment will be signed and dated and will be kept on file in the respective office of hospital materials management, Southcentral Foundation Corporate Office for PCC clinic or Hospital Facilities Engineering (Maintenance) if you are a hospital Facility Engineering contractor.

Thank you for your cooperation in ensuring that ANMC meets the respective compliance requirements for our hospital.

NAME _____

FY2010

Contractor Orientation Post Test

Score _____

Please fill in the circle for each correct answer.

1.	The three types of Isolation or Transmission based Precautions are Airborne, Contact and Droplet?	<input type="radio"/> T	<input type="radio"/> F
2.	An overhead page of “Code Red” means a suspected kidnapping?	<input type="radio"/> T	<input type="radio"/> F
3.	I may review the Exposure Control Plan at any time?	<input type="radio"/> T	<input type="radio"/> F
4.	Architects, Engineers and contractors don’t need to consider Infection Control issues?	<input type="radio"/> T	<input type="radio"/> F
5.	Shock can be a major danger from electrical machinery?	<input type="radio"/> T	<input type="radio"/> F
6.	Signs of circuit overload are blowing of fuses and dimming of lights?	<input type="radio"/> T	<input type="radio"/> F
7.	Water is a conductor of electricity?	<input type="radio"/> T	<input type="radio"/> F
8.	It is ok to leave ceiling tiles out of place if you will be working in the area again tomorrow?	<input type="radio"/> T	<input type="radio"/> F
9.	It is OK to put out an electrical fire with water?	<input type="radio"/> T	<input type="radio"/> F
10.	Contractors are required to provide appropriate PPE on the jobsite for their employees?	<input type="radio"/> T	<input type="radio"/> F
11.	ILSM stands for Interim Life Safety Measures?	<input type="radio"/> T	<input type="radio"/> F
12.	Waterborne infections are not a problem in hospital job sites?	<input type="radio"/> T	<input type="radio"/> F
13.	All companies need to have their own Safety Plan and enforce it, as well as following ANMC Safety Plan?	<input type="radio"/> T	<input type="radio"/> F
14.	Construction activities take precedent over patient care activities when you are on a tight deadline?	<input type="radio"/> T	<input type="radio"/> F
15.	The agency that surveys hospital and awards accreditation is the Joint Commission?	<input type="radio"/> T	<input type="radio"/> F
16.	In case of fire, RACE stands for Rescue, sound the Alarm, Confine the fire and Extinguish the fire?	<input type="radio"/> T	<input type="radio"/> F
17.	As a general rule, I can use an elevator when there is a fire?	<input type="radio"/> T	<input type="radio"/> F
18.	In the hospital, dial “1111” to report a fire?	<input type="radio"/> T	<input type="radio"/> F
19.	Ceiling tiles are not part of the smoke barriers in corridors?	<input type="radio"/> T	<input type="radio"/> F

20.	If the audible alarm is not sounding, there is not fire?	<input type="radio"/> T	<input type="radio"/> F
21.	The purpose of the Exposure Control Plan is to protect the healthcare worker, prevent the healthcare worker from infection and prevent healthcare worker deaths from blood borne infection?	<input type="radio"/> T	<input type="radio"/> F
22.	Two important sources of information about the chemicals with which I will work are Product Label and the Material Safety Data Sheet (MSDS)?	<input type="radio"/> T	<input type="radio"/> F
23.	I have the right to see and copy Material Safety Data Sheets *MSDS) or other information that exists for chemicals or substances used in the workplace or to which employees or other workers may be exposed?	<input type="radio"/> T	<input type="radio"/> F
24.	I must wear proper ANMC issued identification while on the medical campus?	<input type="radio"/> T	<input type="radio"/> F
25.	I may request a copy of any Hospital policy/procedure or guideline to review?	<input type="radio"/> T	<input type="radio"/> F
26.	Biomedical Maintenance vendors must report to the Materials Management Department before going to work?	<input type="radio"/> T	<input type="radio"/> F
27.	It is ok for contractor staff to stop and ask about the condition of any friend they happen upon in the hospital as a patient?	<input type="radio"/> T	<input type="radio"/> F
28.	Contractors are free to borrow ANMC tools and equipment whenever needed when they are on site?	<input type="radio"/> T	<input type="radio"/> F
29.	It is ok for contract workers to smoke in their vehicles on the medical campus?	<input type="radio"/> T	<input type="radio"/> F
30.	Prior to working in a patient care area, you must first notify the department manager or charge nurse and our ANMC project Manager?	<input type="radio"/> T	<input type="radio"/> F
31.	While in the Operating Room I am to be only in the surgical suite where I am providing support to the surgeon?	<input type="radio"/> T	<input type="radio"/> F
32.	I can make agreements with staff or physicians, without talking to the sponsor or department manager?	<input type="radio"/> T	<input type="radio"/> F
33.	Equipment or medical supply type brought in for display, demonstration, or trial must report to the Materials Management Department?	<input type="radio"/> T	<input type="radio"/> F
34.	I may park anywhere on the medical campus?	<input type="radio"/> T	<input type="radio"/> F
35.	I must not engage in or imply any violence while at the hospital?	<input type="radio"/> T	<input type="radio"/> F

By signing below I am agreeing that I have received the Alaska Native Medical Center Vendor/Contractor Orientation Compliance Packet and I have read and understand the contents.

Printed Name: _____

Signature: _____ DATE _____

Company: _____

**CONFIDENTIALITY AGREEMENT FOR WORKFORCE MEMBERS WHO ARE
CONTRACTORS, VENDORS OR SUPPLIERS**

I understand that I require information to perform my duties at the Alaska Native Medical Center entity by which I am engaged or for which I am performing services at "ANMC". This information may include, but is not limited to, information on patients, employees, students, other workforce members, donors, research, and financial and business operations. Some of this information is made confidential by law such as protected health information (PHI) under the federal Health Insurance Portability and Accountability Act (HIPAA) or by ANMC policies. Confidential information may be in any form, e.g., written, electronic, oral, overheard or observed.

I also understand that access to all confidential information is granted on a need-to-know basis. A need-to-know is defined as information access that is required in order to perform my work.

I will not disclose confidential information to patients, friends, relatives, co-workers or anyone else except as permitted by ANMC policies and applicable law and as required to perform my work as a contractor, vendor or supplier for ANMC.

I will protect the confidentiality of all confidential information, including PHI, while at ANMC and after I leave ANMC. All confidential information remains the property of ANMC and may not be removed or kept by me when I leave ANMC except as permitted by ANMC policies or specific agreements or arrangements applicable to my work as a contractor, vendor or supplier for ANMC.

If I violate this agreement, I may be subject to adverse action up to and including termination of my ability to work at or on behalf of ANMC. In addition, under applicable law, I may be subject to criminal or civil penalties.

I have read and understand the above and agree to be bound by it.

Name: _____ Company: _____

Signature: _____ Date: _____