

	ASCALESI H.P. - I.N.T. I.R.C.C.S. "G. Pascale Foundation" 31 of Egiziaca Forcella Street, 80139 Napoli	Health and Safety Management	
	INFORMATION DOCUMENT ON SPECIFIC RISKS AND PREVENTION AND EMERGENCY MEASURES		Rev 01 Pag 1 of 79

INTERFERENCES and RISKS ASSESSMENT DOCUMENT

Information document on the specific workplace hazards in the environments and structures of the Ascalesi H.P. Tumor Institute of Naples G. Pascale Foundation adopted prevention and emergency measures

**Aimed at contractors, workers and non-employee workers operating in the premises owned by the G. Pascale INT Foundation
(pursuant to art. 26 paragraph 1 b) Legislative Decree 81/08 as amended)**

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INTRODUCTION

The objective of this document is **to provide information on the specific risks present in the operating environments of the Ascalesi H.P. IRCCS Tumor Institute of Naples - G. Pascale Foundation** (hereinafter referred to as the Institute) and their impact on the personnel assigned to activities entrusted to a contract or work contract within the Institute (e.g. maintenance, cleaning, etc.). **It therefore collects the main safety indications prepared by the Institute in application of art. 26 of Legislative Decree 81/08.**

It is clear that, for the pursuit of the best safety conditions in the work entrusted to non-employee personnel within the Institute, the activation of an information flow between the various subjects involved is of primary importance: Employer, **Client**, Employer work of the **Contractor Company**, Manager / s of the structures involved in the works / contract, Administrative or technical structure responsible for managing the contract, Health Department, Prevention and Protection Service.

The aforementioned obligation does not extend to the specific risks inherent in the activity of contractors or individual self-employed workers, as established in c. 3 of art. 26 of Legislative Decree 81/08; however, it was considered useful to also report some indications relating to specific risks inherent in activities typically entrusted to contractors within the Institute: these indications, the result of the experience gained on the subject within the Institute, are intended exclusively which suggestions - not exhaustive of all the possible risks inherent in these activities - addressed to the employers of contractors or self-employed workers.

There is talk of interference in the circumstance in which there is a "risky contact" between the customer's staff and that of the contractor or between the staff of different companies operating in the same company headquarters with different contracts. Risks from interference can therefore be generated by:

- overlapping of several activities carried out by operators of different contractors;
- presence of risks from the customer's own work in the places where the contractor is expected to operate, additional to those specific to the contracted activity;
- placing the contractor's work in the customer's workplace;
- particular methods of execution specifically requested by the client that involve additional risks compared to those specific to the contracted activity

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Pursuant to **Legislative Decree 81/08 and subsequent amendments and of Resolution no. 3 of 5 March 2008** (Official Gazette no. 64 of 15.03.2008) issued by the **Authority for the Supervision of public contracts for works, services and supplies** - "Safety in the execution of contracts relating to services and supplies. Preparation of the single risk assessment document (DUVRI) and determination of security costs" - the drafting of the DUVRI is not envisaged in the event that the contract consists of:

- mere supply of materials or equipment without installation or works and services whose duration does not exceed two days, provided that these do not involve risks deriving from the presence of carcinogens, biological agents, explosive atmospheres or the presence of particular risks (referred to in 'annex XI of Legislative Decree 81/08);
- services for which execution within the Contracting Authority is not envisaged, meaning by «Internal» all the premises / places made available by the same for the performance of the service, even if not the seat of its offices;
- services of an intellectual nature, even if performed at the contracting authority;
- contracts falling within the scope of Title IV of Legislative Decree 81/08 and subsequent amendments, for which it is necessary to draw up the Safety and Coordination Plan, the analysis of interfering risks and the estimate of the related costs are contained in the Safety Plan and Coordination and, therefore, in this case it does not appear necessary to draft the DUVRI.

SINGLE INTERFERENCES RISK ASSESSMENT DOCUMENT (DUVRI)

- For each contracted contract for the supply of goods and services that includes interfering activities, the Client Institute will process the DUVRI which indicates the measures adopted to eliminate the risk factors determined by the interference between concurrent activities carried out in the same working environment.
This document, drawn up pursuant to Article 26 of Legislative Decree 81/08 is shared with the Contractor and is attached to the contract or work contract.
- For all other cases not included in the previous point, which provide, in any case, the presence of interfering risks, this document is deemed to comply with the provisions of Article 26 paragraph 3 of Legislative Decree 81/08. In this case, it will be the Institute's responsibility to make available to non-employee external operators (in any capacity present in the company) the necessary devices to protect them from any risks associated with the activities carried out in the Institute.
- For works involving the opening of temporary or mobile construction sites, falling within the field of application of Title IV of Legislative Decree 81/08, reference is made to the provisions of the same Decree, therefore including the preventive study of the aspects related to safety in the design phase, at the expense of the figures provided, and compliance with the same legislation in the execution phase. In any case, the assessment of any critical aspects for safety (ex. "Interference"), with particular reference to the interface areas between the construction site and the normal activities of the structure.

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Contracting companies or individual self-employed workers, in communicating the specific risks **associated with their activity**, must promptly and formally submit (to the Employer and the SPP) any proposals for integration to the DUVRI, where they believe they can better guarantee work safety, based on their own experience. In no case can any additions justify changes or adjustments to safety costs.

**PREPARATION OF DOCUMENTS RELATING TO WORK SAFETY
by the contractor / self-employed worker**

For each contract, the contractor is required to prepare the safety documentation that describes the objective of the contract, the working phases and the expected times, the machines and/or equipment required, the materials, the workers employed and the working techniques. This documentation is used in order to highlight the technical and organizational measures to be implemented for the purpose of preventing and protecting their workers from occupational risks but also for the protection of third parties, whose presence could determine a negative interaction with the activities carried out.

The name of the manager or local contact person for the contract must be highlighted by the contractor employer.

This documentation is a binding element in relation to the activities to be carried out, the identification of responsibilities and the assumption of commitments relating to the protection of the health of all operators involved in carrying out the work.

The contracting company, before the start of activities, must declare to the Institute in writing that he has read and informed his workers about the contents of this document.

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1 GENERAL COORDINATION PROCEDURE

This document, drawn up by the Prevention and Protection Service (SPP), is delivered by the Institute to the Legal Representative of the Contracting Company (or self-employed workers), pursuant to art. 26 of Legislative Decree 81/08 and subsequent amendments, in order to promote cooperation and coordination between the parties regarding the protection of health and safety in the workplace, and to indicate the measures adopted for the elimination of interference.

The organizational structures in charge of compliance with the regulatory obligations covered by this document are the following:

- **Technical Structures:** CS Building, Plant Design and Maintenance (hereinafter referred to as TS) for all maintenance interventions both on plants and structures and on equipment;
- **the CS Management of Goods and Services** (hereinafter referred to as MGS) for the supply of goods and services;
- **the Health Department** for clinical activities.

It is therefore recommended, for any reference, doubt or need on the subject in question, to always refer to the figures indicated.

Annex I contains the names and contact details of the RSPP, the Qualified Expert and all other consultants and / or internal professionals authorized to provide information on safety.

Where it was not possible to eliminate the interference through organizational measures, or other measures borne by the Institute, the costs borne by the contractor are assessed separately.1.1

1.1 RESPONSIBLE PERSONS FOR COORDINATION

The operational figures responsible for coordinating activities in order to avoid interference are:

- ❖ **The operator of the external company.**
- ❖ **The internal contact person of the Institute for the specific activity.**
- ❖ **The Head of the Structure of the Institute in which the activity takes place.**

For the purposes of this document, the Head of the Structure means, unless otherwise specified.

The figure of the Manager as identified above coincides, in most cases, with that of the Manager or Supervisor; for the sole purpose of coordinating the activities of external personnel, the function of Manager may, for the above, also be carried out by other professional figures, as this responsibility is limited to reporting to external personnel the presence of risk factors that each worker is required to know.

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By **internal contact person** we mean the employee of an Institute Structure appointed by the Manager to follow a specific activity that requires the presence of external staff.
 For maintenance activities, the internal contact person is always a TS employee; for the supply of goods and services, an employee of the CS Goods and Services Management / Research Administrative.
 The Operator of the external company must always be recognizable by an identification tag and must comply with the instructions and provisions of the Contact Person.

1.2 METHOD OF COORDINATION AND PERIODICITY OF MEETINGS

The coordination between the figures referred to in paragraph 1.1. happens:

- Through the preparation of rules and indications, at the time of drafting and formulating the contract.
- By submitting this document for information on its own risks and internal organizational methods.
- Through what is expressly provided in the DUVRI, when the activities are considered to interfere with those of the client institution.

For the development of particular organizational interventions, specific meetings are planned, which may consist of:

- Periodic meetings to assess the quality of the service and / or to verify any problems relating to safety.
- Meetings convened in the event of problems arising (ex. Accidents, modifications or changes in the course of work, damage of various origins and management of related emergencies, etc.).
- Communications regarding organizational and managerial changes to the workplace or emergency plans.

1.3 TYPES OF RELATIONSHIP BETWEEN CUSTOMER INSTITUTE AND CONTRACTING COMPANIES

- external firms with the occasional presence of operators
- external firms with the continuous presence of operators
- external firms for the opening of temporary construction sites
- professionals, health care or otherwise

In all the cases mentioned above and always at the same time as the start of the work to be carried out, the Operators of the contracting company must notify the Head of the Structure; where the intervention is carried out, directly or through the Contact Person, about the presence of external operators and the activity to be carried out, also to acquire any specific additional information useful for the correct and safe performance of the work assigned.

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1.3.1 External firms with the occasional presence of their own operators

In the case of companies that carry out their business at the "one-off" Institute:

- the operator goes to the Institute and requests the presence of the contact person who contacted him;
- the Contact Person, prior to the start of the work, carries out a joint inspection in the work area and illustrates any procedures or problems related to safety in the area of interest, as well as the procedures to be observed to eliminate the **risk of interference** with operators of other firms;
- during the execution of the work, the Contact Person, as far as he is concerned, checks compliance with the general or specific safety standards in relation to their applicability in the case in question;
- at the end of the intervention, a joint check is carried out to verify **the correct and exhaustive performance of the work**, the restoration of the pre-existing conditions and the absence of elements that could constitute a danger for operators and patients.

1.3.2 External companies with the continuous presence of their own operators

In the case of companies with a continuous presence of their own personnel working at the facility (e.g. cleaning company, catering, etc.), in addition to this Document, it is necessary to refer to the tender specifications, which necessarily includes the description of the types of work carried out.

A "Coordinator" responsible for coordination with the client institute, or with other contractors in order to eliminate any interference, is usually identified among the operators of the contractor.

The aforementioned "Coordinators", whose name must be formalized to the Structures referred to in paragraph 1.1 and to the Prevention and Protection Service, must:

- check that all the operators they are responsible for wear the identification tag;
- refer to the SPP for health and safety issues;
- for particular works (eg structural or plant modifications, etc.), at the end of the intervention, carry out, together with a representative of the TS, an inspection to verify the correct and exhaustive performance of the works and the complete restoration of the initial conditions, or that no elements have been introduced that could constitute a danger for workers and patients. Any anomalous situations encountered must be formally reported to the competent figures (Director of the Structure, TS, HSM);
- draw up and deliver to the Structures referred to in paragraph 1.1 any documentation of the interventions carried out.

1.3.3 Temporary construction sites

For works involving the opening of temporary or mobile construction sites, falling within the scope of Title IV of Legislative Decree 81/08, reference is made to the provisions of the same Decree, including therefore the preventive study of the aspects related to safety in design phase, at the expense of the figures provided, and compliance with the same legislation in the execution phase.

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The HSM must be promptly informed about the opening of construction sites, in order to be able to assess any critical aspects for safety (eg "interference"), with particular reference to the interface areas between the construction site and the normal activities of the structure.

1.3.4 Professionals operating at the structure

For external staff employed in healthcare activities, risk assessments and procedures already in place for the Institute's internal staff are applied, subject to special procedures provided for by any external company providing such staff.

The demonstration of operation and after-sales assistance related to the supply of devices and / or equipment, apart from cases comparable to mere intellectual performance, must take place in the manner established in this document.

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2 INFORMATION ON SPECIFIC WORKING RISKS AND RELATED PREVENTION AND PROTECTION MEASURES

present in the premises and facilities of the Institute

2.1 DESCRIPTION OF THE WORKING ACTIVITY

The Institute of Tumors of Naples - G. Pascale Foundation is a scientific hospitalization and treatment institute (IRCCS) and, as such, pursuant to Article 1 paragraph 1 of Legislative Decree 288/2003, is defined as a national importance, endowed with autonomy and legal personality under public law, which, according to standards of excellence, pursues mainly clinical and translational research purposes, together with hospitalization and highly specialized care services. It is configured as a monothematic IRCCS, that is aimed exclusively at the study and treatment of tumors.

The G. Pascale Foundation was arranged with R.D. n. 2303 on 19 October 1933. On 14 March 1934 work began on the construction of the first building. On 11 April 1940 there was the first recognition of a Scientific Institute (IRCCS), which in the following years has always found confirmation. By decree of the Provincial Doctor n. 8984 of 4.5.1963 the Institute was classified as a "Specialized Hospital" of category I. Founder and first president of the Institute was Senator Giovanni Pascale, full professor of General Surgery at the University of Naples, dean of the Faculty of Medicine, president of the Italian Society of Surgery, and first president of the Italian League for the Fight against Cancer. The Institute has the aim of promoting and implementing biomedical research aimed at advancing applicative knowledge in the oncology field, to help identify new and suitable directions in the field of prevention, diagnosis and treatment of tumor pathologies. The research conducted at the Institute focuses on the neoplasms most frequently observed in Southern Italy, such as breast carcinoma, primary liver cancer, gastrointestinal tract carcinomas, melanomas, thyroid tumors, lymphomas, AIDS-associated tumors.

In compliance with Ministerial Decree 70/2015 as regards the Ascalesi Presidium, a structure under the ASL Napoli 1, the requalification of the same as an intermediate hospital-territory unit with a strong oncological vocation has been envisaged, in functional connection with the IRCCS Pascale. Therefore, following Decree n.77 of 28.12.2017 of the Commissioner ad Acta for the re-entry plan, the annexation of the "Ascalesi" Hospital of the ASL Napoli 1 to the IRCCS National Cancer Institute Pascale Foundation was approved and the creation of the Mediterranean Oncology Center.

The hospital settlement, located in the Municipality of Naples at n. 31 of Egiziaca in Forcella Street, is made up more precisely of a real estate unit, distinct from the Real Estate Registry of that Municipality with the following heading: Sheet No. 7 Parcel 101 Sub 6 - category B / 2 - Cadastral income 95,851.24. The consistency of the property as indicated in the Real Estate Survey of the Revenue Agency of 25.06.2016 is equal to 44189 m³, land area 13610 square meters, is composed of three blocks called A, B, and C with 8 staggered levels, all heated, connected by five internal stairs. The roofs are totally flat with a practicable terrace.

The property is located in the area of high historical interest located between the Pendino and San Lorenzo neighborhoods, close to Duomo Street and between Spaccanapoli and Corso Umberto I. The structure is well connected by Line 2 and Line 1 of the Naples underground and there are also normal buses, both urban and extra-urban.

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Block A – Building Era 1600



Block B – Building Era 1960-70



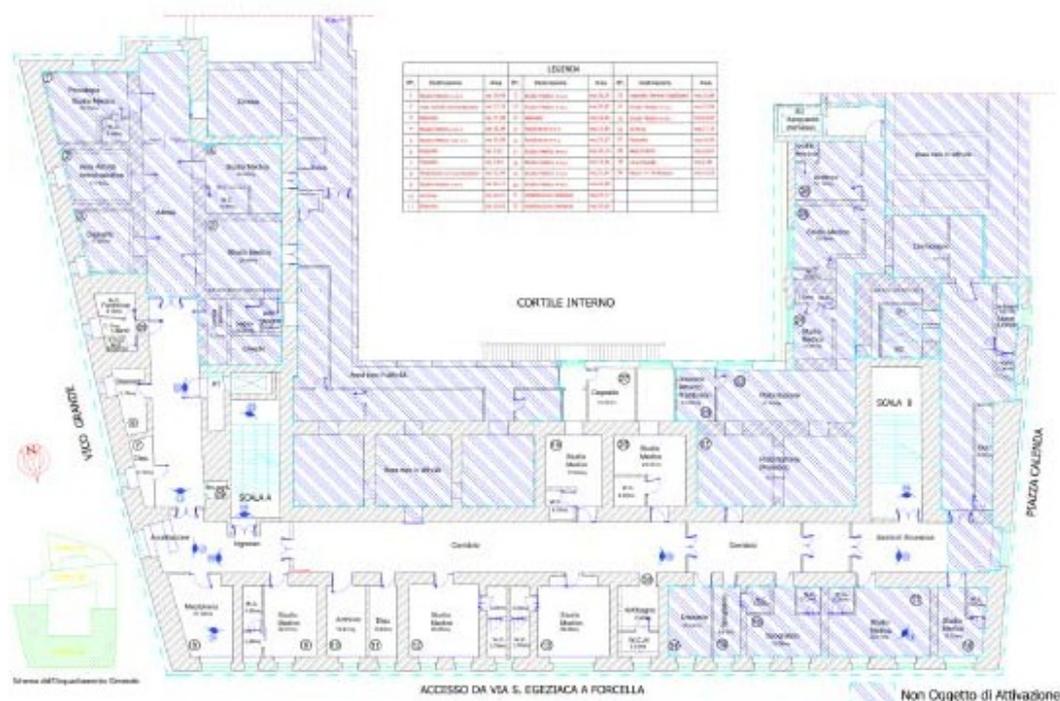
Block C – Building Era 1960-70

The building has mainly a load-bearing masonry structure and is composed of three corps called A, B, and C, characterized by up to 8 levels, all equipped with outdated and poorly maintained systems. The roofs are totally flat with a practicable terrace and used for the positioning of mechanical systems (AHU and refrigeration units).

Corp	Floor	Area
Corp A	Ground floor	1.279,77
Corp A	Mezzanine	1.498,20
Corp A	Mezzanine	1.472,50
Corp A	Second floor	2.341,47
Corp A	Third floor	1.969,76
Corp A	Fourth floor	1.994,05
Corp A	Fifth floor	2.019,35
Corp A	Sixth floor	1.674,29
Corp B	Ground floor	1.933,40
Corp B	First floor	1.351,40
Corp B	Second floor	1.196,80
Corp B	Third floor	1.386,20
Corp B	Fourth floor	970,65
Corp B	Fifth floor	1.178,60
Corp B	Sixth floor	534,40
Corp C	Ground floor	478,40
Corp C	First floor	587,30
Corp C	Second floor	602,30
Corp C	Third floor	584,20
Corp C	Fourth floor	573,10
Total mq		25.626,1

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On 18.05.2020, in order to follow up the regional will regarding the creation of the Mediterranean Oncology Center, the Institute activated the second floor of the H.P. The block of Oncology Outpatients ascended.



The spaces have been divided as follows:

- doctors' offices, of adequate size, suitable for ensuring respect for privacy, each with a washbasin with non-manual taps and an attached toilet. The surfaces of the studios will be resistant to washing and disinfection, smooth with a rounded connection to the floor, also monolithic and resistant to chemical and physical agents, non-slip.
- 1 medicine shop with an adjoining reception desk.
- distinctly assigned storage rooms for dirty, clean material, cleaning material, storage for use materials, rehabilitation tools.
- public services, the first with 2 toilets across the street and the second with a toilet for the disabled.

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2.2 BIOLOGICAL AGENTS EXPOSITION

The risk from biological agents related to health care, due to the progressive enlargement and differentiation of the places of care, associated with the high invasiveness of care practices that can also be carried out in non-hospital environments, is to be presumed to be a ubiquitous risk in the health sector.

The risk of infection by pathogens is however a well-known phenomenon and essentially attributable to three modalities:

1. nosocomial proper (from the environment to the patients or cross between patients);
2. occupational (from infected patient to operator);
3. from infected operator to patient.

2.2.1 Potential biohazard activity

The dangerous aspects of the P.O.'s activities which, if the foreseen procedures and what is reported in this document are not followed, may involve a particular biohazard are the following:

- presence in almost all environments of potentially infected hospital waste, which is appropriately collected in special containers;
- possibility, even if unintentional and therefore occasional, of the presence on the ground or in the baskets of potentially infected syringes, or of medication findings (cotton, gauze, similar materials) or remedies used sanitary, or traces of potentially infected organic material that the operations of diagnosis, therapy, treatment of patients - or the conditions of the patients themselves or the patients themselves - may have unintentionally dispersed in the environments, on the surfaces, on the furnishings. As regards extremely rare events - and the control of INT operators in this regard is continuous - it is considered appropriate that any user / external operator / guest be aware of them;
- Also in environments intended for Laboratory and Surgery Samples are handled materials potentially infected organic materials, tissue samples, blood, urine, faeces, liquids taken from patients or laboratory animals, etc. All these materials may be accidentally found in traces, on benches, floors, equipment, as well as furniture and objects in the laboratory. As regards extremely rare events - and the control of the Institute's operators in this regard is continuous - it is considered appropriate for any user / external operator / guest to be aware of them;

2.2.2 Biohazard warning signs

The areas and containers in which materials can be found in which the presence of pathogens is ascertained or very likely are identified by specific signs.

Access to these areas and / or handling of containers is reserved for specifically trained and authorized personnel.

The biohazard symbol which may or may not be accompanied by indicative writings is the following.

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2.2.3 Biohazard prevention measures

This Document intends to define brief recommendations useful for containing infections based on the scientific information available



2.2.3.1 Universal precautions

First of all, it is necessary to constantly and correctly wash hands. Barrier measures must be taken to prevent exposure to accidental contact with blood and other bodily fluids:

- use of Personal Protective Equipment (PPE) such as gloves, gowns, overcoats, masks, goggles or visors;
- use and correct disposal of needles and cutting edges;
- decontamination of surfaces soiled by potentially infected biological materials. The barrier measures, examined above:
- must be adopted by all operators whose activity involves contact with users within the health facility;
- must be applied to all people who access the facility (hospitalization) as the history and diagnostic tests do not allow to identify with certainty the presence or absence of transmissible pathogens in the guests and therefore all must be considered potentially infected;
- must be applied routinely when carrying out care and therapeutic activities and when handling aids, tools or equipment that can cause accidental contact with blood or other biological material.

2.2.3.2 Hand washing

The hands of healthcare workers are the main vehicle for the transfer of pathogens from one patient to another and from the patient to themselves. Hand washing is the most effective way to limit this transmission and must take place:

- before starting work;
- before putting on the gloves and after taking them off;
- before and after care procedures;
- between one client and another;
- in case of biological or chemical contamination even if only suspected. (in the last two cases an antiseptic soap is recommended).

For further details, see the provisions of the Hand Hygiene Procedure.

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2.2.3.3 Hands care

- nails must be neat, short, clean and without polish;
- the skin of the hands must be kept intact, also resorting to the use of barrier creams;
- during work you must not wear rings, bracelets, watches. For further details, see the provisions of the Hand Hygiene Procedure.

2.2.3.4 Rules of conduct in case of contamination of hands

- washing with water and liquid soap in dispenser for 30 seconds, followed by antiseptic of the hands with suitable disinfectant products;
 - washing with antiseptic in a soapy detergent solution for 2 minutes.
- For further details, see the provisions of the Hand Hygiene Procedure.

2.2.3.5 Barrier measures

Gloves

- they must always be worn in case of possible contact with biological material, in the operations of cleaning, waste collection, bed making and collection of dirty linen;
- before and after using the gloves, the operator must wash their hands with soap and water;
- when passing from one patient to another, gloves must be changed and the operator must wash his hands before putting on a new pair;
- operators must not touch eyes, skin and mucous membranes, surrounding objects or other people (excluding the patient) with gloved hands;
- so that the use of gloves does not itself become a vehicle for the dissemination of pathogens, it is necessary to use them exclusively in the operations in which their use is required, the gloves in question must be discarded after use.

Protective clothing

- the garment must be intact, clean and of adequate size;
- specific procedures must be developed that establish methods and times of use and the management of the garment after use (sanitization);
- the user must personally verify the integrity and cleanliness of the garment and suitability of the sizes; must ask for the change of the garment if it is soiled;
- disposable garments (non-woven fabric overlays) must be used to be used in operational situations that require greater exposure to biohazard.

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Face and respiratory protection

- goggles, visors or screens are recommended when operations may expose eyes, mouth and airways to splashes of biological material;
- in specific cases it may also be necessary to protect the respiratory tract with suitable respiratory protective devices. The use of surgical masks (which are not PPE) is subject to specific assessment by the Facility Manager (who, in case of doubt or need, may consult the Competent Doctor and the SPP). For further details, please refer to the provisions of the PPE Handbook.

2.2.4 Associated risks to the use of sanitary instruments

2.2.4.1 Needles and sharps

- pointed, sharp and cutting tools must be considered dangerous, so they must be handled with care to avoid accidental injuries;
- all operators must take the necessary measures to prevent accidents caused by cutting edges (eg scalpel blades, forceps, scissors, razors, glassware, etc.) and needles;
- many injuries occur due to the incorrect elimination of needles: remember in this regard that it is FORBIDDEN to re-cap the needles; the syringes must be disposed of whole in the special yellow container;
- needles and cutting edges after use must be eliminated ONLY and EXCLUSIVELY in the special resistant, rigid, waterproof containers, with hermetic final closure;
- disposal containers must be kept within reach during work operations in order not to postpone the disposal of needles or sharps and dispose of them at the same time as use.

2.2.4.2 Cleanings of tools and equipment

The washing operations of the instruments are particularly at risk and except in extreme cases in which it is not possible to avoid handling it is advisable to wash with mechanical means.

In no case the operators of the Companies must perform sanitization or decontamination of the laboratory equipment for carrying out examinations, safety cabins, of the laboratory instrumentation, work surfaces or of other surfaces on which there are biological samples, if not explicitly authorized by the Laboratory Manager

2.2.5 Particular risks

2.2.5.1 Tuberculous infection risk

Patients in health facilities are part of the groups at risk for tuberculous infection (Guidelines for the control of tuberculous disease issued by the State-Regions conference on the proposal of the Ministry of Health - Provv. 17/12/98 - Suppl. OJ 18/02 / 99 no. 40). At the H.P. patients diagnosed with TB are not treated, any cases ascertained after admission are immediately transferred to other facilities.

For the above, the Facility is classified as low risk for TB.

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2.2.6 Precautions against biohazard in cleaning and sanitizing operations

As a general assessment of biohazard in non-sanitary service and support activities in a hospital environment, it can be said that, during the cleaning of the environments (or maintenance activities in general), the possibility of biological contamination is usually very low.

In fact, first of all, a contagion, in general, can occur when there is direct contact with the patient and in the execution of care procedures that are the exclusive responsibility of the assistance staff.

Furthermore, the guarantee of adequate safety conditions for the personnel of external companies operating within the assistance centers is ensured by the application of the essential safety precautions commonly adopted in every healthcare environment, the application of which is controlled by the **responsible person** in charge of structure.

More specifically, each **manager** (see paragraph 1.1) must favor the performance of the activities of the operators of external companies by avoiding their accidental exposure to biological agents, ensuring that:

- the assistance personnel observe the application of universal precautions for the handling and disposal of potentially infected waste in the manner and on schedule (correct disposal of needles and sharp in rigid containers);
- there is a systematic check of the adequacy and observance of the correct procedures in use in the ward as regards the handling of biological samples;
- information is systematically provided to the staff of the contracting firms about any exposure risks, especially with regard to patients subjected to precautionary isolation measures; in this regard, information must be provided on the methods of transmission of infectious agents and on the precautionary measures to be adopted (any need and the type of protective device to be used, procedures that can potentially expose you to the risk of contagion during the normal course of cleaning).
- In this regard, it should be noted that the Institute does not ordinarily admit patients suffering from infectious diseases; any finding of these involves the transfer of the patient to appropriate facilities to ensure proper care; the patient is temporarily placed in isolation: after the transfer of the patient, the room is suitably ventilated (windows open for at least 20 minutes) and the conditions that require the use of PPE cease to exist.

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The personnel assigned to ordinary, extraordinary cleaning or maintenance operations in general must always observe the following:

- before starting any ordinary, extraordinary or maintenance cleaning operations in general, you must contact the Manager or Contact Person to request information on any specific risks or on the need to adopt particular prevention measures;
- must wear suitable work uniform, complete with non-slip footwear, possibly water-repellent and closed completely or at least in the front part; it is advisable to avoid the use of slippers or clogs, which do not guarantee complete coverage of the forefoot or which do not guarantee correct fit during work. The use of open footwear can cause injury as a result trauma due to accidental hits in points such as the wheels of the beds, the edges of the doors, etc.;
- must, before the normal cleaning operations, wear gloves (domestic type), to be replaced according to the rooms to which they are dedicated (possibly differentiated by color: 1 pair for hospitalization areas, 1 pair for bathrooms). All operators must be duly informed on the correct maintenance procedure for the gloves supplied (cleaning after use, evaluation of wear, etc.)
- must wear, whenever the department manager reports it, protective aids such as overcoats and masks suitable for the type of work, made available by the contractor,
- in some departments, the staff of the cleaning company may be required to wear masks and shoes and overcoats before entering the hospital rooms. This request is for the protection of hospitalized patients and usually does not involve any exposure to infectious risk of staff
- if the protection of the respiratory tract is necessary to prevent exposure to infectious agents, the personnel must be equipped by the company with respiratory protection devices suitable for the purpose and must be suitably informed about their correct use and maintenance.

2.2.7 Precautions against biohazard in the handling and storage of hospital waste

Absolutely avoid:

- to put the hands in baskets or bags for waste collection;
- to collect needles or other items without taking the necessary precautions, if necessary notify the assistance staff who will arrange for the correct disposal;
- to manipulate appliances or devices in contact with the patient.

Linen and bedding reported as potentially infected should be sent for disinfection and washing treatment.

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The personnel assigned to the handling and transport to the storage place of hospital waste containers not similar to urban waste, may be, as a result of incorrect handling procedures, potentially exposed to the risk of biological contamination, due to puncture, cut or accidental contact with material biological content in the waste.

In order to avoid this possibility, it is necessary that the workers involved in waste handling are properly informed, by their respective employer, of the nature of the materials they have to transport.

It is absolutely forbidden:

- open the containers and insert your hands, or overturn them with the risk of spillage of the contained material;
- handle the containers without wearing suitable protective gloves provided by the employer; the use of protective gloves is also recommended for cleaning the trolleys used for transport;
- touch visibly dirty or damp containers with bare hands; in this case report the inconvenience to the department managers so that the container can be replaced safely.

It is recommended to use a work uniform to be worn during the collection and storage of hospital waste not similar to urban waste and suitable non-slip footwear, to prevent accidents from falling or slipping.

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2.2.8 Precautions against biohazard associated with the linen service

The risk of exposure to biological agents for wash-hire service personnel is very limited.

In the literature there are no reported cases of infectious pathologies affecting the personnel assigned to this service, although there are risks of accidental contact with biological material following accidental puncture caused by devices mistakenly disposed of in the linen.

The instructions given to the departments in order to unequivocally identify the laundry soiled with biological material or fluids, reduces the risk of coming into contact with these substances.

To avoid any accidents from exposure to biological material, it is recommended that all personnel working in this service.

- avoid opening bags containing laundry identified as potentially infected;
- avoid or reduce the manual sorting of linen and in any case, during all machine loading and handling operations, it is mandatory to wear suitable cut-resistant protective gloves, in order to avoid the risk of accidental puncture with sharp edges erroneously contained in the linen;
- wear protective gloves when removing any mattresses and / or cushions and provide for the disinfection in autoclave of all visibly stained bedding (even if the stains are small);
- wear a suitable FFP1 mask when removing bed linens in order to avoid repeated exposure to dust and latex that are released into the environment during the maneuver;
- wear suitable vinyl gloves during the reupholstery operations.

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2.2.9 Precaution against the biohazard associated with maintenance and technological services

Generally, it should be noted that, without prejudice to compliance with the basic hygiene rules, the risk of contracting infectious pathologies in hospitals is not higher than the same activities carried out in other environments for the staff, internal or external, operating in this sector. of work.

Therefore, for these personnel the possibility of contracting pathologies of infectious origin in the workplace is to be considered extremely low.

- In case of maintenance interventions, it is recommended to contact the department staff in advance, to acquire information regarding any precautionary measures to be adopted.
- It is recommended, especially for interventions concerning the maintenance of bathrooms and / or toilets, the use of protective rubber gloves and boots, and any other barrier means to prevent contact with sewage or dirty water.
- In biohazard environments and in any case during work, it is forbidden to consume food and drinks, smoke or apply cosmetics as these operations can favor the incorporation of pathogens.

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2.3 DANGEROUS SUBSTANCES

2.3.1 Generality

In all hospital sectors, chemical substances are in use, albeit in limited quantities and for limited uses. Among the first measures suitable for the prevention of incongruous exposure are:

- adequate reporting of risks related to the use of chemical substances, with particular regard to the presence of adequate labeling on all containers,
- the presence of the Safety Data Sheets (SDS) of the substances used
- correct information for operators who use said substances.

In hospital wards and services, the most common chemical substances are DETERGENTS and DISINFECTANTS.

2.3.2 Chemical risk signage

Previous signage



CORROSIVE



TOXIC



IRRITATING

Current signage

There is no, or rather it is not applicable, in particular in hospitals, a generic signal of chemical risk. Chemical risk indicators may, but not always, be present on the containers of laboratory reagents; the main signs are the following:

CORROSIVE



TOXIC



IRRITATING



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In all cases it is recommended to be careful in handling or using preparations which, if present, carry the following risk phrases on the label:

- H350: can cause cancer
- H350i: May cause cancer by inhalation.
- H351: suspected of causing cancer
- H340: can cause genetic alterations
- H341: suspected of causing genetic alterations
- H360: may damage fertility or the unborn child
- H361: suspected of damaging fertility or the unborn child

It should be noted that the drugs do not carry these risk phrases, as reporting on pharmaceutical substances is not mandatory.

It should be noted that no chemical and / or carcinogenic and mutagenic substances are used and / or stored.

2.3.3 Anesthetic Gases

From the inspections carried out it was possible to find that there is no use of anesthetic gases, therefore the detailed assessment was not carried out.

The only activity that upon activation could involve the use of anesthetic gases (such as nitrous oxide and halogenated gases) is the surgical activity in the operating room.

When the surgical activity is put into operation in the operating room, a program of periodic environmental monitoring of anesthetic gases will be set up as already provided for in the Mariano Semmola Street office.

In any case, during all phases of possible use of gas, the presence of unauthorized personnel must not occur.

2.3.4 Antiplastic Chemoterapy

From the inspections carried out it was possible to find that there is no use of antiplastic chemotherapeutic agents therefore the detailed evaluation was not carried out.

There is no provision for the use of staff from the cleaning company or other external companies to contain any spills of chemical substances. Only after reclamation, an operation that is carried out by qualified personnel aware of the risks associated with the handling of substances and preparations, is it possible to request the intervention of the cleaners for the final restoration of the premises.

2.3.5 Latex and related risk

The Institute uses latex "artifacts" such as disposable gloves and medical surgical aids, therefore no area of the structure can be defined as "Latex-free", ie totally free of traces of latex: traces of product are in fact possible on surfaces or in airborne form.

For those who are commonly not sensitive to latex, the risk is to be considered practically nil.

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Conversely, those who have had allergies to latex in the past, or who suspect such allergy or who have doubts about it, must contact their Employer and Competent Doctor before entering the premises.

2.3.6 Compressed gases and cylinders

They are not in use at the H.P. Compressed gas ascalesi except for those contained (oxygen) in the emergency trolley.

It should be noted the presence of an external deposit of compressed gases better specified in the technical report drawn up by the Technical Service and the SPP.

In general, therefore, the risk for the safety of operators can be classified in the LOW level.

Strict compliance with the general behavioral measures sets out in the appropriate paragraph of this document, together with compliance with the behavioral principles of workers, contained in particular in article 20 of Legislative Decree 81/08, are such as to minimize the incidence of this risk factor for the personnel of external companies and / or non-medical personnel called to operate in the areas where the same risk is present.

The only risk, however, associated only with the use of cylinders, remains that strictly accidental due to impact and fall of the cylinder itself (see par. 2.9.2.3.).

2.3.7 Chemical risk prevention measures

It is absolutely forbidden to manipulate, move, open containers of chemical substances that may be present in healthcare environments in which companies are required to operate without justified reason and without explicit authorization from the department manager. It is also absolutely forbidden to use, even temporarily and for the sole use of a single process, used containers of food liquids to store detergents, thinners, chemicals or in any case inedible products. As regards the chemical substances that may still be present in the environments, attention is drawn to the fact that they - under the responsibility of the department managers - are closed in containers labeled according to the law and any possible problem or accidental contact with them must be reported immediately to the head of the department himself, who will suggest the appropriate measures. The introduction of hazardous materials and / or equipment (for example, flammable gas cylinders, chemicals, etc.) must be authorized in advance by the figures referred to in point 1.1.

In environments with chemical risk and in any case during work, it is forbidden to consume food and drinks, smoke or apply cosmetics, as these operations can favor the incorporation of any dispersed chemicals.

Exposure to chemical agents, as regards the staff of contracting companies, and in particular for the staff of companies engaged in cleaning and handling of waste or maintenance, can be considered limited to exposure to substances (detergents / disinfectants, solvents, etc.) used to carry out their activities. In order to ensure the safety in the use of these substances, external companies must request the safety data sheets of each product used, and provide information to their employees (and if necessary also to any third parties present, to avoid risky interference), regarding the dangers and risks associated with the use / manipulation / correct use of the substances themselves and suitable PPE

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If to carry out the processing, the Contractor introduces and / or uses chemicals, it is mandatory:

- provide the Institute with the safety data sheets of the chemicals used;
- read the safety data sheets that accompany the products, wear the personal protective equipment specified therein, follow the safety advice indicated on the labels and in the data sheets, and in particular avoid the dispersion of substances into the environment (atmosphere, earth or water) dangerous for man and / or the environment, as reported in point 12 of the safety data sheets of the products used regarding ecological information pursuant to Legislative Decree 52/97;
- never use unlabeled containers and if you find their presence, do not open and handle the contents;
- do not mix incompatible substances;
- remove the waste (debris, packaging, parts of machinery, etc.) deriving from the execution of the contracted activities and, more precisely, arrange for the collection, storage and final disposal which pursuant to Legislative Decree no. 152 of 2006, is the exclusive responsibility of the company for the management of special waste.

2.3.8 Chemical risk assessment

Punctual risk assessment for the Ascalesi H.P. points out that there are no workers exposed to chemical and / or carcinogenic substances / agents, therefore, the detailed assessment will not be carried out, which will be prepared, in the manner listed above, in the event of the opening of new Units where exposure to such substances.

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2.4 ELECTRICAL SYSTEM AND EQUIPMENTS

The main damage to health due to the electrical risk consists of painful shocks, deep burns (electrical and thermal), irregular heart rhythms, up to respiratory arrest and death.

Exposure can occur due to lack of maintenance of any electrical equipment, or due to careless use or lack of knowledge of the equipment and / or its controls. Atmospheres enriched with oxygen and water can contribute to making conditions riskier.

2.4.1 Implants

The operation of all the implants of the Institute must always be guaranteed as the criticality on any of the facilities can have consequences on patient safety.

This chapter provides information on the safety aspects of the systems, starting with the electrical system, in order to avoid risks for workers and patients.

2.4.2 Electrical systems

In these locals there are:

- electro-medical equipment;
- household appliances or similar appliances.

Much of the electrical system, and therefore many of the equipment present, are powered, in the absence of external mains supply, by an independent electrical source (Generator Set - UPS).

As regards the evaluation of the equipment used at the P.O. Ascalesi, please refer to ANNEX 1- Inventory data collection sheets relating to the biomedical equipment installed in the Radiology, Central Operating Block, Intensive Care and Radiotherapy, part of the report drawn up by the PREVENTION AND PROTECTION SERVICE and by the SC DESIGN AND MAINTENANCE OF BUILDINGS AND PLANTS following Resolution of the General Manager n.414 of 08 May 2018.

2.4.3 Dispositions to prevent electrical risk

- Any intervention on the Institute's systems must be authorized in advance by the ST. Never carry out interventions and / or repairs on electrical systems or equipment if you do not have the specific knowledge and technical skills required by current legislation: tampering with a system or component makes them lose the manufacturer's warranty as well as an electrical system or equipment defined as safe can become dangerous following an incorrect intervention or repair.
- In order to ensure adequate containment of the electrical risk, the personnel using electrical systems and equipment must pay particular attention to ensure that they are in good condition, fully functional and not damaged. To avoid the risks associated with the use of broken or damaged equipment, its conservation status shall be periodically checked: any situation deemed unsuitable must be promptly reported to their superiors and to the TS, who will activate the necessary checks and interventions.

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The use of deteriorated electrical components (conductors with damaged insulation, broken enclosures, approximate electrical connections, broken sockets and plugs, etc.) considerably increases the risk of electrical contacts. Therefore, it is forbidden to use uninsulated cables or equipment and lines or circuits whose sectioning of the live parts does not allow direct or safe control of the sectioned parts.

- The connection of electrical appliances to the hospital network, for whatever reason, should be preceded by a check of the same by the staff responsible for checking the electromedical equipment (SS Sanitary Technologies), to ensure compliance with the safety standards in force and compatibility with hospital power supply. Therefore, the use of devices that have not been previously authorized should be avoided and, above all, the connection to the electrical network of devices for the personal use of patients must be checked and minimized.
- Contracting companies that use electric tools or machinery to carry out their activities must only use equipment that complies with the regulations in force on the subject, and must ensure their proper maintenance.
- Do not use electrical components that do not comply with the standards: all the safety of a system ends when electrical users (eg plugs, adapters, multiple sockets, extensions, portable lamps, etc.) that do not comply with the standards are used. All plug sockets used must be protected against direct contact, equipped with a cable retaining device, which can only be disassembled using a tool (eg screwdriver) and must not allow single-pole insertion of the plug
- Do not use electrical components or machines for purposes not intended by the manufacturer: in these cases, improper use of the component can generate electrical or mechanical risk situations, not foreseen at the time of its construction.
- For everything related to the power supply of electrical equipment, companies must acquire the necessary information from the TS and strictly adhere to the instructions provided by the same.
- Particular attention should be paid to the possible use of electrical equipment or tools near medical gas supply points due to the increased risk of fire and / or explosion; in these cases, it is always necessary to ensure that there are no dispersions or dangerous situations, by asking the manager of the department / service in which one operates for information. Similarly, unsuitable electrical equipment must not be used in conditions of increased electrical risk (e.g. with wet hands, on wet floors or in damp environments)
- Do not carry out cleaning operations on electric machines with nebulized liquid detergents or with damp cloths, before having disconnected the power plug
- Do not leave electrical equipment (cables, extensions, drills, etc.) abandoned on transit routes: in addition to causing hindrance and the risk of tripping and falling, they can be subjected to mechanical stresses not foreseen by the manufacturer with consequent risk situations

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In all areas, the methods of access **must be agreed** with the Institute contact person.

The company staff must not interact in any way with the medical devices and implants present in the premises of the Institute except for those for which they are authorized.

In the case of specific hazards related to an environment and / or a particular activity carried out within it, compliance with the protection measures adopted and that of the safety signs present is mandatory.

The staff of the Institute is trained in the use of equipment and complies with safety procedures.

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2.5 PHYSICAL AGENTS

For the following physical agents, given the absence of sources, no indication is deemed necessary pursuant to Article 181, paragraph 3 of the Consolidated Law:

- infrasound
- ultrasound
- hyperbaric atmospheres

2.5.1 IONIZING RADIATIONS

2.5.1.1 Generality

Ionizing radiation is generated by x-ray machines or radioactive sources.

X-ray machines pose a risk from ionizing radiation only when they are connected to the electrical network and are used in handwriting and / or scopy mode by delivering an X-ray beam.

The spelling modality assumes an emission duration, at each "click", of a few tenths of a second, the scopy modality presupposes a continuous emission which in total can be of the order of several minutes. **The risk of irradiation** is associated with these modes of exposure.

The radioactive sources, on the other hand, maintain their danger until complete decay; the time required for decay is characteristic of each radioactive substance and in many cases can be particularly long. Radioactive sources, therefore, must always be adequately contained.

In particular, the "unsealed" sources present a danger not only of external radiation but also of internal radiation due to possible contamination, while the "sealed" sources are dangerous only for external radiation, in the same way as an X-ray machine. An "unsealed" source is dangerous both because it radiates externally and because it can be incorporated through ingestion, inhalation, skin contact and continue to radiate critical tissues from within from very short distances. In this case there is a **risk of internal contamination**. The use of ionizing radiation takes place under the supervision of the Qualified Expert, who is the professional in charge of risk assessment and definition of protection rules and safety procedures. Medical surveillance is carried out by the Authorized Doctor or in specific cases by the Competent Doctor responsible for the medical surveillance of exposed workers. Authorized doctors and qualified experts must be registered in special lists of names kept by the Central Medical Labor Inspectorate.

2.5.1.2 Areas of use of ionizing radiations

In Radiotherapy n. 1 Linear accelerator ONCOR Impression plus Siemens, n. 1 Linear accelerator ONCOR Primus Mid Energy 6MV Siemens, 1 TC Somatom Eotion Siemens.

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2.5.1.3 Risk signage from ionizing radiation

The following signs can be found at the Institute:



Risk of irradiation

Outside the diagnostic rooms, the symbol is placed on the door and on a fixed white light signal (attention, electrically powered radiological equipment) and a flashing red light (attention, RX delivery in progress, access prohibited) The risk exists, during the radiant emission (flashing red light), by opening the screen door that delimits the diagnostics. The sign, posted on the door of a room, can be accompanied by one of the following notices:

- **controlled area:** it means that the stay in the area indicated for the work carried out in a calendar year may lead to exceeding the limits established for workers; this applies during the delivery of the rays and access is forbidden to non-specifically authorized personnel.
- **supervised area:** means that the stay in the area indicated for the work carried out in a calendar year may result in exceeding the limits established for the population; in these areas during the delivery of the rays, it is not allowed to linger after finishing one's work.

Pregnant women cannot carry out activities in classified areas.

All controlled and supervised areas have regulated access and in these areas the radiation protection standards listed in Annex II (Access Regulations and Radiation Protection Procedures for Contractors) must be observed.

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2.5.1.4 Rules for reducing the risk from ionizing radiation

The following paragraph shows the radiation protection standards and access procedures for interventions within the Nuclear Medicine area and the radiological area. In particular, for rooms in which X-ray machines are present, the following should be noted:

- during the delivery of the rays, all unnecessary activities must be suspended and unnecessary personnel must move away at the safe distance indicated by the medical radiology technician present or, in his absence, by the doctor who performs the delivery
- in any case, the radiation protection regulations posted on the premises must be observed.

If you need to enter a laboratory or a deposit of radioactive substances, make sure (by asking the department managers for information) whether or not you need to wear personal protective equipment. However, the incidence of this risk factor on the staff of external companies operating in areas classified as at risk can reasonably be considered insignificant as:

- in the hospital all the radiation protection measures are already currently applied to safeguard, not only health personnel but also and mainly, patients and visitors, measures which therefore also protect any personnel from external companies and / or non-health personnel in any case called to operate in areas at risk;
- during the performance of the activities of external companies within the healthcare environments, no type of healthcare and in particular radiological activities must be in progress;
- for special cases in which access by external companies and / or non-medical personnel in the areas at risk will be required, the Department Manager will communicate the precautions against the risk of exposure to ionizing radiation, agreeing on times and methods

of the intervention, during the preliminary contacts at the start of the works (see next paragraph - radiological protection procedures for companies operating in controlled and supervised areas).

2.5.1.5 Radiation protection procedures for the workers of external companies

The following points are the access regulations and radiation protection procedures for workers of external companies drawn up by the Qualified Expert:

- 1) Regulations for access to the Controlled Area
- 2) Radiation protection procedure for workers of contractors operating in controlled or supervised areas for maintenance and / or calibration activities;
- 3) Radiation protection procedure for cleaning company workers operating in controlled or supervised areas of the functional area of nuclear medicine pursuant to Legislative Decree 230/95 and subsequent amendments

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1. RULES FOR ACCESS IN CONTROLLED AREA

Access to the Controlled Areas, both for all workers and members of the public, must always be authorized by the Head of the Functional Area where the Controlled Area is located, after consulting the Qualified Expert.

- Access to the Nuclear Medicine Functional Area, which also includes the Cyclotron, Radiochemistry and Radiometabolic Therapy rooms, must always be accessible only via intercom and / or special badges.
- Badges can be issued, by the Manager himself, only to personnel authorized to access the Department.
- Can access to the Department:
 - 1) Personnel serving at the Pascale Institute specifically authorized and possibly classified by the Qualified Expert;
 - 2) The staff who cleans according to established procedures;
 - 3) The personnel of the contractors *who must operate* in Controlled or Supervised Areas where radionuclides or radiological equipment are in operation (following the appropriate procedures established in the DUVRI);
 - 4) The staff of contractors *who must NOT operate* in Controlled or Supervised Areas where there are radionuclides or radiological equipment in operation;
 - 5) The staff of the Pascale Institute and / or visitors who do not have to access the controlled and / or supervised areas.
- The personnel of the Contracting Companies who must access the controlled and / or supervised areas where there are radionuclides or radiological equipment in operation, must always be accompanied by a person in charge of the Functional Area where the Controlled Area is located. The person in charge assists the staff of the Contracting Companies to ensure compliance with the internal radiation protection rules of the Functional Area.
- During the activities carried out by the employees of the cleaning company, there must always be a person in charge to whom the cleaning company staff must refer for any problems.
- The staff of the Pascale Institute and / or visitors who do not have to access the controlled and / or supervised areas, must always be accompanied by a worker from the Functional Area who assists their correct stationing in premises where there is no risk connected to ionizing radiation (Director's office, Reporting Room, Medical Offices, Secretariat, ...).
- Additional workers or members of the population will be able to access the Controlled Area only after the Head of the Functional Area has obtained the written consent of the Qualified Expert.

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- The person in charge of the Functional Area must allow the personnel who must operate in Controlled or Supervised Areas where there are radionuclides or radiological equipment in operation only after verifying that the aforementioned staff is equipped with the direct reading electronic dosimeter issued by Health Physics.
- The persons in charge and workers of the contractor company are required to comply with the *radiation protection procedure for workers of contractors operating in controlled or supervised areas pursuant to Legislative Decree 230/95 and subsequent amendments for maintenance and / or calibration activities.*
- The persons in charge and workers of the cleaning company are required to comply with the *radiation protection procedure for the workers of the cleaning company operating in controlled or supervised areas of the functional area of Nuclear Medicine pursuant to Legislative Decree 230/95 and subsequent amendments.*
- Anyone who notices a fire must contact the telephone number 350 to alert the heads of service and verbally notify the TSRM coordinator.
- The TSRM coordinator must promptly make emergency procedures operational in the event of a fire in the Functional Area.
- Anyone within the functional area must follow in detail the instructions that will be provided by the evacuation coordinator, including the immediate evacuation order, in relation to the emergency procedures present in the Functional Area.

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2. RADIO PROTECTION PROCEDURE FOR THE WORKERS OF CONTRACTING COMPANIES OPERATING IN CONTROLLED OR SURVEILLED AREAS IN ACCORDANCE WITH LEGISLATIVE DECREE 230/95 AND SMI FOR MAINTENANCE AND / OR CALIBRATION ACTIVITIES

This procedure arises from the need of the Employer of the Pascale Institute to fulfill the radiological protection obligations of the Technicians of the Contracting Companies of the Maintenance Service and / or Calibration of the radiogenic sources installed and operating at the Pascale Foundation, and, more in general, paid by the workers of the Maintenance Companies who carry out their work in a Controlled or Supervised area at the Pascale Foundation.

This procedure applies only in cases where the workers of the Contracting Companies, for the performance of their activities, *have the absolute need to operate in Controlled or Supervised Areas where there are radionuclides or radiological equipment in operation.*

Each Director of the Functional Areas of Nuclear Medicine, Radiotherapy, Radiodiagnostics and Health Physics must ensure compliance with the provisions of the IRAD (Interfering Risk Assessment Document), drawn up by the Pascale Institute and each Contracting Company.

Each Director of the Functional Areas of Nuclear Medicine, Radiotherapy, Radiodiagnostics and Health Physics must ensure compliance with the provisions of the radiation protection coordination document drawn up by the Qualified Experts of the Pascale Institute and the Qualified Expert of the Contracting Company.

The Health Physics Operating Unit is responsible for managing direct reading electronic dosimeters.

The Health Physics Operating Unit is responsible for providing direct reading electronic dosimeters to the workers of the contracting companies for the activities that they must carry out in Controlled or Supervised Areas where radionuclides or radiological equipment are in operation. If the contractor's staff is classified pursuant to Legislative Decree 230/95, the delivery of the direct reading electronic dosimeter will take place after the person in charge has received a copy of the medical suitability of the worker himself pursuant to Legislative Decree 230/95.

Each Director of the Functional Areas of Nuclear Medicine, Radiotherapy and Radiodiagnostics must first communicate to the Director of the Health Physics Operating Unit the day, time and expected duration of the maintenance intervention that must be carried out by the workers of the Contracting Companies in the areas Controlled or supervised by the Pascale Foundation.

Each Director of the Functional Areas of Nuclear Medicine, Radiotherapy and Radiodiagnostics must identify an adequate number of Supervisors of the respective Functional Area who must be present during the activities carried out by the workers of the Contractors.

The persons in charge identified must be officially appointed by the Director of the Functional Areas of Nuclear Medicine, Radiotherapy and Radiodiagnostics and accept the assignment in writing.

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The Directors of the Functional Areas of Nuclear Medicine, Radiotherapy and Radiodiagnostics must ensure that at least one person in charge per Functional Area is present during the activities of the workers of the Contractors.

The Director of the Health Physics Operating Unit must identify an adequate number of Supervisors who have the task of equipping the personnel of the Contracting Companies with suitable electronic dosimeters with direct reading before the aforementioned personnel operate in Controlled or Supervised Areas where radionuclides or radiological equipment in operation.

At the end of the intervention, the Contractor's worker must return the electronic dosimeter to the Head of Health Physics who transcribes the reading indicated by the electronic dosimeter on a special Register set up by the Director of the Health Physics Operating Unit. The Register must include: date, contractor company, contractor company worker, person in charge of health physics, effective dose read on the electronic dosimeter worn by the worker of the contractor company, signature of the person in charge and signature, for inspection, of the worker of the contractor company.

Each page of the Register must be signed by the Head of the Health Physics Operating Unit for inspection. The Register must be kept by the Director of the Health Physics Operating Unit. On a monthly basis a copy of the pages of the Register used must be sent to the Qualified Experts and to the RSPP for the appropriate assessments of competence.

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3. RADIATION PROTECTION PROCEDURE FOR CLEANING COMPANY WORKERS OPERATING IN CONTROLLED OR SURVEILLED AREAS OF THE FUNCTIONAL AREA OF NUCLEAR MEDICINE PURSUANT TO LEGISLATIVE DECREE 230/95 AND SMI

This procedure arises from the need of the Employer of the Pascale Institute to fulfill the obligations of radiation protection for the workers of the Cleaning Companies who carry out their work in a Controlled or Supervised Area at the C.S. of Nuclear Medicine and Metabolic Therapy of the Pascale Foundation.

The Director of the C.S. of Nuclear Medicine and Metabolic Therapy must ensure compliance with the provisions of the IRAD (Interfering Risk Assessment Document), drawn up by the Pascale Institute and the Cleaning Company.

The workers of the cleaning company must comply with the Internal Radiation Protection Regulations posted in the premises where there is a radiological risk, in particular in the "Controlled Areas" and therefore easily accessible by them.

The list of names of the staff of the Cleaning Companies who can work at the C.S of Nuclear Medicine and Metabolic Therapy is identified in the personnel, previously classified, equipped with specific PPE, trained and informed on specific risks, pursuant to art. 61, paragraph 3-e of Legislative Decree no. 230/95 and subsequent amendments.

Additional staff of the Cleaning Company that may possibly be used for activities involving the risk of exposure to ionizing radiation in Classified Areas, pursuant to art. 82 of Legislative Decree no. 230/95 and subsequent amendments he will also have to follow a specific training course and comply with the Internal Radiation Protection Regulations.

The staff of the cleaning company operating at the C.S of Nuclear Medicine and Metabolic Therapy must be subjected to Physical and Medical Radiation Protection Surveillance by the Company itself and all the formalities relating to the "coordination" referred to in Articles must also be guaranteed. 63 and / or art. 65 of Legislative Decree no. 230/95 and subsequent amendments.

The Cleaning Company is required to communicate, in advance, its intention to change the list of Cleaning Staff belonging to the C.S. of Nuclear Medicine and Metabolic Therapy.

The staff of the Cleaning Company operating at the C.S. of Nuclear Medicine and Metabolic Therapy is not used for cleaning technological equipment such as hoods, cells and technical material.

The Director of the C.S. of Nuclear Medicine and Metabolic Therapy must identify an adequate number of Supervisors who must be present during the activities carried out by the workers of the Cleaning Company.

The persons in charge identified must be officially appointed by the Director C.S. of Nuclear Medicine and Metabolic Therapy and accept the assignment in writing.

The Director C.S. of Nuclear Medicine and Metabolic Therapy must ensure that at least one person in charge is present during the activities of the workers of the cleaning company.

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Access to the premises by the staff of the Cleaning Company must always take place with the authorization of the person in charge of radiation protection.

In the presence of any contamination, the person in charge, following the internal radiation protection rules, must ensure that any contamination is eliminated before allowing the cleaning company worker to access the affected area.

The staff of the Cleaning Company, while carrying out activities within the C.S. of Nuclear Medicine and Metabolic Therapy, must wear the specific PPE made available to them. These PPE must be used exclusively in the aforementioned facility.

The staff of the cleaning company is equipped with:

- Washable clogs supplied to each worker;
- Disposable TNT uniforms, of the type used in the operating room for visitor staff;
- Overshoes of the waterproof PPE type, of the type for supply in chemotherapy;
- Gloves, of the type used for the administration of radiopharmaceuticals to be worn over the gloves generally used for Cleaning;
- Disposable gloves (in compliance with the technical standard (UNI EN 241));
- Disposable uniforms (in compliance with the technical standard (UNI EN 1073)).

All the equipment used for cleaning must be used exclusively in these premises and disposed of by Nuclear Medicine staff according to the waste management protocol of the departments themselves.

The rags and cloths for cleaning patients' warm toilets should only be used for cleaning such rooms. Exclusive rags and cloths must also be used for hospital rooms and hot waiting rooms.

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2.5.2 ARTIFICIAL OPTICAL RADIATIONS

Germicidal lamps and transilluminators for gel plates that generate UV radiation are usually present in the laboratories.

Germicidal lamps are also installed on biological hoods in laboratories (including the one for handling chemotherapy) and are turned on only when the hood is properly closed (the hood glass is able to absorb the radiation).

The transilluminators can only be switched on if there is no personnel present in the surrounding radiation space (2 m), unless they are wearing the appropriate Personal Protective Equipment (mask). The UV sources of the analytical equipment are normally protected by screens that make the radiation inaccessible. In the course of maintenance or adjustment, however, the beam may become accessible.

Class 3B and Class 4 laser equipment can be dangerous in case of direct beam exposure or even scattered radiation.

Apparatus of this type can also be present in the research laboratories associated with analytical instrumentation identified with the signs described below, also in this case the beam is accessible only in the case of particular maintenance interventions reserved for the assigned personnel.

There are no workers exposed to artificial optical radiation therefore no detailed assessment will be made, which will be prepared, in the manner listed above, in the case of the opening of new units where exposure to artificial optical radiation can be assumed.

2.5.3 ELECTROMAGNETIC FIELDS

Electrical maintenance workers can be exposed to magnetic induction fields generated by electrical installations with higher current draw.

Using as reference values those reported in Directive 2004/40 / EC, subsequently extended to 2012 by Directive 2008/46 / EC, considering the installed electrical power, magnetic induction field levels close to the action values may be present at most in the main electrical substation, in the position of the hands when the general low voltage switches are operated, where the circulating current can reach or exceed 1000 A.

For reasons related to electrical safety, these switches automatically open in case of failure without the intervention of personnel or, in the event of maintenance being required, they are opened manually after disconnecting the main utilities served, then in low load conditions, in order to not to generate opening overcurrents potentially harmful to the plants themselves. Staff exposure is therefore extremely unlikely. Portable radiofrequency and microwave telecommunication systems, including wireless computer networks, generate electromagnetic fields well below the action values. In the P.O. there are no equipment for the R.M.N., therefore, the risk to be assessed is limited to the presence of:

- 50 Hz electrical networks;
- Equipment for Magnetotherapy and Marconitherapy;
- Electromedical equipment (electrosurgical unit).

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According to the definition of Article 2, paragraph 1, letter f), of Law 36/2001, the framework law on protection from electromagnetic fields, worker exposure is "any type of exposure of workers who, due to their specific work activity, are exposed to electric, magnetic and electromagnetic fields".

Exposures of a professional nature are therefore those strictly correlated and necessary for the purposes of the production process.

The risk is determined by quantifying the electromagnetic fields emitted by the equipment; the risk is considered unacceptable when these fields exceed the limits envisaged by the considered standard. The risk assessment can use the "justification" method when the exposure condition does not involve appreciable health risks.

For the purposes of this definition, exposures below the reference levels for the population referred to in Directive 2013/35 / EU on electromagnetic fields are considered to pose no risk to health. In line with this definition, those listed in Table 1 elaborated starting from the draft standard CENELEC EN 50499 are justifiable exhibition conditions. As regards the presence of electrical distribution networks, computers and IT and office equipment, non-wireless communication equipment and networks, electromedical equipment not for applications with electromagnetic or current fields, it is possible to use the principle of "justification" as expressly referred to in the above table.

For these activities it is not considered necessary to carry out instrumental measurements of the electromagnetic fields emitted by the equipment, considering that the levels are lower than those provided for by Directive 2013/35 / EU on electromagnetic fields by Legislative Decree 81/2008.

2.5.3.1 Electromagnetic fields signage



The signal indicates the presence of an electromagnetic field (frequency other than zero). The values of these fields in the Institute are in any case below the action values considered safe by international legislation. The sign indicates the presence of the magnetic stimulator or, in the electrical cabin or particular equipment, the presence of conductors in which high currents pass.

2.5.3.2 Rules of conduct

The intervention on any MR equipment or system, where present, must be, as always, coordinated with the Technical Structures, if necessary, with the Expert Responsible.

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2.5.4 MICROCLIMATE AND VENTILATION

Situations of thermal non-comfort can arise in particular during maintenance interventions; in case of construction site activities that foresee the decommissioning, even partial, of the systems in the summer season, appropriate measures must be studied to reduce the temperature in the work area.

Subject to these clarifications, the risk associated with the microclimate at the H.P. Ascalesi is to be considered LOW.

2.5.5 NOISE

Based on the findings of the inspection carried out, at the moment there are no employees who fall within the scope of the law as there are no workstations where the lower action value of 80 dB (A) can be exceeded and that therefore, they can potentially expose the operators who occupy them to noise.

2.5.6 VIBRATIONS

Based on the inspection findings carried out, there is no evidence of operations involving repetitive movements of the upper limbs with particular reference to the shoulder - arm - hand system, such as to constitute a risk for the employees concerned.

2.6 EXPLOSIVE ATMOSPHERES

In no work area is the formation of explosive mixtures possible in accordance with Title XI of the T.U. as:

- the use of flammable substances is limited to low concentrations; please note that it is forbidden to accumulate flammable agents as a "backup" under the hoods of the laboratories and that any use of ether for the sedation of laboratory animals must take place under a glass bell, using the minimum necessary quantity;
- in the event of an oxygen leak, the procedures set out in the Emergency Plan apply.

Please note that the use of gas appliances, as per Presidential Decree 15/11/96 no. 61, is not subject to the provisions of the U.T..The formation of explosive mixtures from powders is not possible in any work area. Maintenance interventions using the oxyacetylene torch must be carried out only after ensuring the ventilation of the premises and removing combustible materials.

At the end of the work, the cylinders must be stored in the site area in a suitable and protected place.

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2.7 MANUAL HANDLING OF LOADS

2.7.1 Handling of loads

The manual handling of loads by unstructured external personnel mainly concerns the activities of:

- pulling-pushing of the laundry trolleys (wash-hire service);
- pushed towing of cleaning trolleys, portorage and waste collection (cleaning service) The personnel in charge must be adequately trained on the correct methods of handling loads and subjected to health surveillance.

2.7.2 Handling of patienta

It is known that lifting / handling of weights with incorrect modalities, the assumption and maintenance of incongruous or incorrect postures, can determine the onset of painful episodes more often localized in the lumbar spine or in any case of musculoskeletal disorders. Training and information for workers in this context is fundamental on topics such as:

- correct use of aids (lifters and minor aids)
- knowledge of patient transfer / lifting procedures in relation to disability • criteria for choosing aids according to the patient's disability

The activities currently in place do not aid patients, therefore, when required, a specific assessment will be made with the MAPO method for the units involved.

2.8 VIDEOTERMINAL EQUIPMENTS

Pursuant to Art. 174 paragraph 3 of the U.T. the workstations must comply with the requirements of Annex XXXIV; this requirement applies regardless of the time of use of the workstation and the employment relationship with the Institute. Please note that pursuant to point f) of Annex XXXIV the prolonged use of laptops requires the supply of suitable accessories to make the workstation compliant with standards (mouse, keyboard, screen, etc.).

There is no VDT staff present for more than 20 hours a week.

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2.9 SECURITY RISK

2.9.1 FIRE RISK

The Legislator, in the Decree of 10 March 1998 on Emergency Management, classified Hospitals as "High Risk of Fire" Structures. Therefore, the risk of fire in the Institute is to be considered high. Today the Ministerial Decree of March 19, 2015 is applied in health facilities. Update of the technical fire prevention regulation for the design, construction and operation of public and private health facilities as per the decree of September 18, 2002. (15A02307) (UG General Series no.70 of 25-3-2015)

Rules of conduct

Each worker must carefully read the fire prevention and protection devices (e.g. fire extinguishers, hydrants, alarm buttons, etc.) and the specific rules of conduct (e.g. directions, plans with escape routes and meeting places) of the place in which he is called to operate.

In order to contain the risk of fire, the emergency routes and exits must be left free of any type of material; the fire-fighting devices must be correctly located and in good condition: any situation deemed unsuitable must be promptly reported to the TS for the necessary checks.

External companies, contractors and other non-employee operators are therefore invited to observe the provisions of Ministerial Decree 10/3/98 and, in particular, all possible organizational and management measures such as:

- respect for order and cleanliness;
- compliance with the smoking ban in all facilities
- checks on security measures with the preparation of internal regulations on the measures to be observed,
- information and training of workers

Paragraph 3.1 shows the emergency measures in case of fire.

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2.9.2 FALL, IMPACT AND COLLISION RISK

Risks of collision, fall and impact can occur in all internal and external areas of the Institute and in the common paths due to the presence of means of transport or other means or people (operators of contractors, workers, patients and visitors of the Institute) present in the company areas

2.9.2.1 External viability

The access of vehicles and people to the external spaces of the buildings involves the risk of injury related to the simultaneous possibility of transit or parking of other people or the passage of vehicles or equipment (forklifts, motor vehicles, trucks, electric or manual pallet trucks, etc.). Therefore, there may be risks of:

- investment of people with vehicles
- falling loads on people passing by during material loading and unloading operations
- slipping and falling (especially if it rains)
- tripping or impact due to materials present

The lower lighting in the evening is an aggravating condition of the risk.

Preventive measures

Circulation in the external viability of the Institute must be carried out strictly observing the rules of road traffic and horizontal and vertical signs; the speed must be limited (at walking pace or at most 10 km / h); in any case, it is absolutely forbidden to stop at emergency exits, fire hydrants, fire extinguishers, attacks on motor pumps, paths for the disabled.

The access of vehicles with significant dimensions (over 35 quintals) must be coordinated with the Technical Structures. In case of necessary access of special or particularly bulky vehicles (eg mobile cranes, truck mixers, etc.) the presence of additional personnel of the Company must be provided for assistance in maneuvers in order to prevent accidents.

In the reversing maneuvers, in addition to the horn, another procedure must be envisaged that limits the risk of an accident (presence of another operator of the Company to assist in the maneuvers and / or camera with screen in the cabin and / or proximity sensors or other)

Stopping, loading / unloading activities must take place according to methods agreed with the Client Institute.

In the case of the simultaneous presence of several vehicles, each operator will wait for his turn according to the order of arrival without interfering with unloading activities during the completion phase and without hindering the viability of medical and / or private vehicles

There is an obligation to turn off the engines in the unloading areas

The operations of loading and unloading goods using a forklift truck or crane must be carried out with additional personnel on the ground who check that the operations take place without interference with people passing through the site; if a longer duration of the operations is foreseen, the loading and unloading area must be delimited with mobile barriers.

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Materials and equipment must not be deposited, even temporarily, along the transit routes or in the entrance courtyards; in case of impossibility to operate otherwise, they must be adequately reported

Avoid access to outdoor areas in the evening and at night; in case of need to work in areas with poor natural or artificial lighting, it is necessary to use portable lamps.

Pay particular attention during the transit in the external areas in the winter season and always in case of rain

2.9.2.2 Internal viability

The access of people to the internal premises of the buildings involves risks from: - hitting people with materials transported along transit routes, especially corridors, and in lifts - falling of people due to stumbling or impact due to materials temporarily deposited along the transit routes

The transport of materials in the lifts, given the absence of dedicated hoists, may involve the risk of people being run over during the ride of the cabin; furthermore, there is a risk of pinching the upper limbs when materials of considerable width are introduced in relation to the width of the cabin door. Access to the elevators may present a difference in height that can cause tripping or real trauma from handling loads.

In the internal corridors of the Institute, heavy and bulky manual trolleys (medication, meals, etc.), stretchers, beds, wheelchairs with patients, self-propelled equipment for cleaning floors, etc. can pass through. Another dangerous condition may be the opening of the doors of some rooms towards the transit area in the corridors.

The floors of some rooms can be slippery: in this sense, the simultaneous and widespread presence of the staff of the cleaning company constitutes a danger, especially when the floors are washed or electrical appliances are used for cleaning (due to the presence of electrical cables on the floor).

Despite the continuous commitment to improvement, sometimes in the premises there may still be electrical and telephone cables and multiple sockets which can cause tripping.

In some rooms there are narrow passages (width less than 70 cm) with the risk of hitting the edges, especially in technical rooms where the presence of pipes, valves, etc., constitutes a condition of increased danger.

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PREVENTIVE MEASURES

- Given the always possible presence of patients, visitors and staff of the Institute, the transport of equipment and materials along the internal paths of the Institute must always be done with great caution, without prejudice to the safety of people and without causing damage to the structure.
- In case of transport of bulky equipment in transit areas, the date, time and route to follow from the unloading area to the delivery point must be defined in advance with the Health Management and with the Heads of the Structures involved in order to limit interference.
- In case of use of lifts for the transport of bulky and / or heavy equipment, it is necessary to check in advance the capacity, never carry out the transport in the simultaneous presence of people (not going up if other people are present and preventing them from going up during the ride) and always keep the load still against the cabin wall during travel, carrying out the operation with two people. It is always necessary to pay attention to the difference in height between the cabin and the landing; bulky material must be pushed without putting your hands into the gap with the cabin and must be handled by two people.
- In case of passage or parking in technical rooms, it is necessary to pay the utmost attention to the presence of obstacles with the risk of tripping and falling or impact. It is absolutely mandatory to wear a helmet and safety shoes; at least two people must always be present, one of which has a mobile phone or radio to report emergencies.
- Materials and equipment must not be deposited, even temporarily, along the transit routes; in case of impossibility to operate otherwise, they must be adequately reported.
- Avoid working at the same time as the cleaning company operators; the latter are obliged to have slipped hazard signs on both access sides when the floor is wet.
- The operators of the institute are made aware to exercise caution and attention in the internal handling of trolleys, stretchers, beds, wheelchairs or other mobile equipment.

2.9.2.3 Risk of injury from portable medical gas cylinders

The presence of medical gas cylinders (oxygen etc) taken by the wards constitutes a risk of injury, with the possibility of explosion, if the cylinder is hit and falls to the ground.

Under normal conditions, the cylinders are anchored to the wall with chains (or stably wheeled); this risk, on the other hand, occurs especially when the cylinders are transported on patient beds or wheelchairs.

Preventive measures

- The cylinders must be firmly anchored away from transit areas or along escape routes.
- The transport of the cylinders must take place exclusively using the special trolley; in the case of transport with the patient, only on a stretcher or wheelchair equipped with a cylinder holder accessory.
- Do not touch medical gas cylinders.
- If the presence of cylinders hinders the work, ask the department manager to move them.
- The cylinders equipped with a protective cap must keep it mounted when the pressure reducer is not applied; protect the reducer and the flow meter from mechanical actions.
- Keep the cylinders away from electrical equipment or components of electrical systems (minimum distance = 1.5 m), flammable substances or combustible material, sources of heat or sunlight.

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2.9.3 BURNS RISK

This risk is present in the kitchens, thermal power plant and sterilization rooms, due to the presence of steam and hot water and can be achieved both by contact with hot materials, pipes and valves, and by the operators being hit by jets of high-pressure fluids. temperature following breakage of valves, equipment or other technical devices (e.g. condensate drains)

Preventive measures

- Use specific PPE (protective gloves against thermal aggression; protective clothing against heat)

2.9.4 ELECTRIC SHOCK RISK

This risk for those who use electrical equipment to be connected to fixed electrical system sockets, albeit very low and almost irrelevant, must be considered in the case of obsolete electrical panels or sockets with unprotected pockets or for improper use.

The electrical systems are all protected against indirect contacts by a differential switch and earthing system.

Preventive measures

- Any electrical intervention must be carried out by qualified external companies on mandate of the Technical Structure: never carry out interventions or repairs on electrical systems or machines if you do not have specific knowledge or the professional characteristics required by current legislation.
- Never use deteriorated systems (sockets disconnected from the wall or unsuitable for using the equipment).
- Contact the Technical Facilities of the Institute for the deactivation of the electrical systems supplying the premises subject to the intervention.
- In the event of demolition works or works that may affect or interfere with the systems, it is necessary to inquire in advance about the presence of live conductors.
- Pay particular attention to inserting and disconnecting plugs in sockets with unprotected recesses.
- Always report situations of obvious danger (sockets disconnected from the wall, open electrical panels, etc.).

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2.9.5 PHYSICAL SAFETY: RISK OF AGGRESSION

The risk is not particularly significant (given the absence of the Emergency Department or a Psychiatry Service), but it is still present in all rooms where there is simultaneous public access

Preventive measures

- Avoid situations, languages and / or behaviors that can be misrepresented by patients and / or carers.
- Do not abandon or leave tools, utensils, lighters, dangerous substances or anything else unattended that may be improperly used.

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3 EMERGENCY MEASURES FOR COMPANIES AND SELF-EMPLOYED WORKERS

3.1 FIRE / EVACUATION

Behavior of any worker in any case operating within the hospital

Circumstance	Actions
ALWAYS	<p>Each worker must carefully read the fire prevention and protection devices (fire extinguishers, hydrants, alarm buttons, etc.) and the specific rules of conduct (indications, plans with escape routes and meeting places) of the place where he is called to operate.</p>
IF YOU DISCOVER A PRINCIPLE OF FIRE	<p>Any worker who becomes aware of a start of fire or a danger in general is required to intervene immediately in the following way:</p> <ul style="list-style-type: none"> • contact the Fire Fighters by telephone at no. 115 communicating the place and type of event; • if it is a fire principle and the worker has been trained, intervene using the nearest fire extinguisher;
IF YOU ARE INVOLVED IN AN EMERGENCY	<p>Follow the instructions of the emergency management staff (department employees, first aid team, emergency teams, Fire Brigade);</p> <p>if requested:</p> <ul style="list-style-type: none"> • provide help in moving and evacuating patients; • help keep calm, do not rush, do not scream, avoid panic situations; <p>in the other case:</p> <ul style="list-style-type: none"> • exit following the signs of the emergency exits and go to the collection point indicated in the plan posted on the walls of the place where you are and wait for instructions; <p>it is forbidden to return to the emergency rooms until an all-clear notification is received.</p>

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3.2 BIOLOGICAL RISK: ACCIDENTAL CONTACT WITH CONTAMINATED MATERIAL

In the event of an accident involving contamination:

- immediately notify their manager and the local manager or contact person of the Institute.
- Determine in detail:
- The place where the accident occurred and how it happened

Immediate measures:

A) Percutaneous lesions in case of puncture with needles or wound with instruments contaminated with biological material

1. to cause bleeding of the lesion by squeezing the same;
2. wash the wound for 10 minutes with soap and water and disinfect (eg with iodine solution or 5% chlorine compounds - ask the ward staff)

B) Contamination of mucous membranes

1. rinse thoroughly with running water for 10-15 minutes, without rubbing, avoiding the use of solutions, detergents or disinfectants; only in case of contamination of the oral mucosa can it be rinsed with water and 5% chlorine-based solutions.

C) Contamination of damaged skin

1. wash the affected area with plenty of running water and disinfect (eg with iodine solution or 5% chlorine compounds - ask the department staff)

After these measures:

- immediately notify your manager and the manager of the department / service in which you work;
- note in detail the place where the accident occurred and the manner of occurrence, in the event of a puncture or cut during the activity related to waste management, also highlight the Structure, the point of accumulation and the type of material causing the injury
- Forward the collected data to your RSPP and to the Health Department and the Institute's HSMM
- follow the instructions of your manager for the possible initiation of post-exposure assessment prophylaxis (please note that in the event of exposure to a patient at risk of HIV, chemoprophylaxis must be undertaken within 1-4 hours).
- Present the INAIL certificate to the company you belong .

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3.3 CHEMICAL RISK: ACCIDENTAL SPILLING OF CHEMICAL SUBSTANCES, PREPARATIONS OR WASTE

- open the windows and close the doors to the premises, alerting those present of the danger
- immediately notify the manager of the department / service in which you work and your manager; if no one is present in the premises where the spreading took place, report the event to the Health Department to activate the procedures provided for the remediation
- if present in the room, cover the spread with inert material (sand or synthetic adsorbents); never use paper or rags
- it is forbidden to pick up this material with your hands

ATTENTION

Should accidental exposure to these occur during one's activity with dangerous chemicals (inhalation of vapors, contact with hands or other parts of the body, splashes in the eyes), adopt the procedures set out in the safety plan or, in case of unavailability of this, consult the person in charge of the area and / or the staff present and follow the instructions below:

- **In case of inhalation of vapors**
 - Immediately remove the operator from the polluted area
 - Promote the breathing of clean air
 - If necessary, consult a doctor (first aid)
- **In case of contact with parts of the body:**
 - Wash the exposed part with plenty of water
 - Remove contaminated clothing
 - In case of skin lesions, consult a doctor (first aid)
- **In case of contact with eyes**
 - Wash your eyes with plenty of running water
 - or consult a doctor (first aid)

N.B. When the environmental or health emergency ceases and normality has been restored, it is appropriate to report the incident to the Health Department and to the Health and Safety Management

Punctual risk assessment for the H.P. Ascalesi points out that there are no workers exposed to chemical and / or carcinogenic substances / agents, therefore, the detailed assessment will not be carried out, which will be prepared, in the manner listed above, in the event of the opening of new Units where exposure to such substances.

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4. CONDUCT MEASURES AND PRECAUTIONS TO BE TAKEN DURING THE PERFORMANCE OF WORKS OR SERVICES AT THE INSTITUTE

4.1 GENERAL CONDUCT MEASURES

The inevitable presence of a high number of risk factors, typical of every healthcare facility, which is a heterogeneous context where a fair number of very different activities can coexist, with the consequent problems of protecting the health and safety of the operators present, makes impossible to establish specific criteria and procedures for all possible situations.

However, it is considered appropriate to recall a series of general indications to which all external operators responsible for carrying out any type of work activity within the structures and areas of the Institute must comply:

It should be noted that cases in which operators of a company find themselves operating together with other external companies (eg construction sites) cannot be excluded. For this purpose, **before starting work, the two companies must provide for mutual coordination** in accordance with current regulations, with particular reference to Article 26 of Legislative Decree 81/08, **in order to avoid dangerous interference** (therefore to be agreed directly, to their load, with the other companies involved, at the moment, on site).

In any case, the Contractor's staff in order to access and operate in the buildings and areas belonging to the Institute must:

- compulsorily wear work clothes
- be identifiable by name, by affixing the company identification card to the work garment: compliance with the provisions of Article 26, paragraph 8, of Legislative Decree 81/08 is recommended: all external operators must be equipped with special identification card, with the obligation to display this card. No model card is established; however, the following are required: photograph, personal details of the worker and indication of the company / employer;
- agree on the timing (days and hours of access to the Client's premises) with the company references provided when signing the contract in order to avoid any interference with the activities of the Institute and / or third-party companies;
- view the rapid evacuation plans in case of emergency affixed near the places where the work will be carried out and must physically view the escape routes before the start of the activities to be awarded;
- access the areas of the Institute by scrupulously following the dictates communicated to him in order to avoid any interference with pedestrian and / or emergency routes;
- before the start of the works, all the necessary prevention and protection measures must be arranged and implemented aimed at protecting the safety of workers at work (provisional works, boundaries, fences, signs, personal protective equipment, etc.) both for its own risks and those specifically identified by the Client for the purpose of eliminating interfering risks; therefore, before starting work, if necessary, the work area must be fenced or in any case clearly and visibly delimited (using barriers, signs, two-colored tapes, etc.), whether it is excavation or underlying work that takes place in positions high, or when there is the possibility of causing damage to people who are passing in the vicinity and these must be kept at a safe distance
- Carry out one's role and maneuvers in safety without causing damage to people or things.

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- store the work material in the place indicated at the time of the award: the storage of products and / or equipment in places not identified and not authorized by the Client is not allowed and, above all, it is forbidden to clutter up the escape routes and emergency exits and / or abandoning materials and equipment that may constitute a potential source of danger in transit and work places (unless this is done with proper authorization and in safe conditions) or in a balanced position unstable (if this is indispensable, its presence must be duly reported);
- promptly remove containers, boxes, crates, baskets, rollers, empty pallets and waste
- safe handling of material and, if necessary, with the help of suitable trolleys or Supervisor's aids;
- in case of interventions on systems and / or equipment and / or machinery, always consult the technical instruction booklets and / or the technical representatives of the Institute before starting the work and make sure that the machine / system downtime cannot be prejudicial to the physical safety of staff, patients and visitors and does not affect the organization of the individual sectors of the Client. If machine / system downtime is necessary, the intervention must be scheduled with the Institute's technical and health representatives;
- comply with the prohibitions and limitations of safety signs, following the indications given by the appropriate specific monitoring signs (flammable storage, protected area, biological contamination, suspended loads danger, etc.) whether these are placed inside or placed outside the Institute structures: the signs, signs, rules or procedures issued by the personnel assigned to the purpose or displayed and adopted by the Institute must be strictly observed;
- it is mandatory to use the appropriate Personal Protective Equipment (PPE) provided by your Employer for each individual process, as well as to use machines, tools and tools that comply with current legislation;
- always use machines, tools and tools that comply with current laws;
- request the intervention of the contact person of the Client Institute, in case of anomalies found in the work environment and before proceeding with interventions in places with the presence of specific risks;
- immediately report any deficiencies in safety devices or the existence of dangerous conditions (working directly, in case of urgency and within the scope of their competences and possibilities, for the elimination of said deficiencies or dangers).
- in cases where it is necessary to remove power from parts of the electrical system subject to repair or overhaul work, or to interrupt the distribution of water, gas, etc. it is necessary to agree in advance times and methods with the staff of the Technical Structure;
- the custody of the equipment and materials necessary for the execution of the works within our offices is completely at the responsibility and risk of the contractor who will then have to provide for the related duties;
- it is necessary to transmit to the Institute any changes concerning safety not previously agreed;

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- for alarm and / or emergency situations in general (eg fire, explosion, flooding) and in the event of evacuation, it is mandatory to strictly follow all the procedures (fire prevention, evacuation and first aid) given by the personnel of the Institute present and , in any case, leave the work area if necessary, following the appropriate emergency routes adequately prepared and signaled, without causing panic, not before having turned off appliances and tools, closed gas cylinders in use, etc .;
- scrupulously follow the instructions on the use of mobile phones. For this purpose and in case of doubts or lack of reports on the matter, request authorization from the staff of the Institute;

Please note that it is strictly **forbidden**:

1. to act on the work in progress;
2. access the premises with limited access to authorized personnel unless specifically authorized by the person in charge of the structure with a specific authorization which indicates the prevention and protection measures;
3. remove or tamper in any way with the safety devices and / or protections installed on systems or machines or make changes, of any kind, to machines and systems owned by the Institute without prior authorization
4. carry out, on their own initiative, maneuvers and operations that are not within their competence and which may therefore also compromise the safety of other people, on machines, equipment, systems or other owned by the Institute without prior authorization;
5. carry out welding work, use open flames or smoke in places with a risk of fire or explosion and in all other places where a specific prohibition is in force. For this purpose and in case of doubts or lack of reports on the matter, it is necessary to request authorization from the staff of the Institute; it is considered appropriate to emphasize that, in accordance with the laws in force, it is strictly forbidden to smoke in ALL the closed spaces of the Institute. In the case of welding works or the use of open flames, prior written authorization must be requested from time to time from the contact person of the Institute;
6. clutter up pedestrian or driveways, corridors, escape routes, stairs, doors, emergency exits, etc. with materials of any nature;
7. perform any operation on moving parts (cleaning, lubrication, repairs, adjustments, etc.);
8. access, without specific authorization, inside electrical substations or other places where there are live electrical systems or equipment, valves, pressure vessels (cylinders), gas systems etc.;
9. access or remain in places other than those in which one must carry out one's work;
10. make changes of any kind to the Institute's machines and systems without prior authorization.
11. use, in the workplace, garments or clothing which, in relation to the nature of the operations to be carried out, could constitute a danger for the wearer;

Furthermore, we inform you that:

- The toilets that can be used by the Contractor's staff are those reserved for users, appropriately marked and easily identifiable;
- A telephone is available in the operating units and in the individual work sectors for both emergency and corporate communications, subject to the permission of the Institute staff; for the use of mobile phones, it is necessary to strictly adhere to the relevant instructions. For this purpose and in case of doubt or lack of specific reports, request authorization from the staff of the Institute;

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- For technical problems, the technical operators of the client company are available. Ask the staff on site;
- Within the premises of the Client Institute, the emergency exits must not be obstructed;
- It is absolutely forbidden to smoke and / or use open flames inside the premises of the Institute and near the accesses, as regulated by specific signs;
- It is forbidden to throw butts, cigarettes and flammable material near the areas of the Institute;
- It is forbidden for any worker of the Institute and the Contractor to take alcohol or drugs in any quantity during working hours or to go to the Institute's premises under the influence of alcohol or drugs.

4.2 RESPECT FOR THE USERS

The staff of contractors, contractors and other non-employee operators are required to follow rules of behavior and respect for users. They must keep confidential what they know, during the performance of the service, about patients and the organization and activities carried out by the institution.

In the event of impediments of various kinds to the normal performance of work, it is necessary to refer to the managers or supervisors of the area to report the problems encountered.

4.3 MAIN PRECAUTIONS TO BE TAKEN AGAINST INTERFERING RISKS

4.3.1 MAIN PRECAUTIONS TO PROTECT YOUR HEALTH AND SAFETY

It is always necessary to inquire in advance about the risks present in the place where one goes to lend one's work; if the activity to be carried out, according to the criteria and detailed indications in the existing contract, involves potential access to all premises and areas of the Institute, the existence of a particular risk within one of the aforementioned premises or areas, will be reported in advance by a person in charge of the structure or his representative. In case of need, detailed information will also be provided on the type of protection to be adopted, or appropriate PPE.

It is recommended to immediately report to the Institute any injury to its employees as part of the work carried out within the premises and spaces of the same; In the event of an accident (e.g. accidental contamination with biological liquids or chemical substances, etc., which occurred at the Institute), the operator of the Company is recommended to report the incident immediately to the staff of the Facility where the accident occurred, so that undertaken the necessary interventions, remediation and / or prevention actions; then, subsequently, notify or notify the Company's Prevention and Protection Service and the Institute's Health Department about it.

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4.3.1.1 Precautions against biohazard

The intrinsic characteristics of the types of work carried out at the facility, despite the continuous prevention and protection activity, cannot exclude a potential risk of exposure to biological risk. Non-medical external personnel are therefore advised not to approach and not touch containers, syringes, bottles, etc. without authorization. and to promptly report any accidental contact or problem to the staff of the Institute present on site;

- Always notify Executives and Supervisors of the workplace of their access
- Make sure of the need to use specific PPE that will be provided by the Institute (unless otherwise provided for in the contract) and / or to observe special procedures for access
- Avoid touching objects and tools of which you do not know the use and in any case without the authorization of the managers and supervisors of the department / service
- During work interventions, avoid coming into contact with unexpected places, activities, people, in order not to constitute a hindrance or danger for them; pay particular attention to the execution of the instructions relating to fire prevention (see specific section of this document)
- Apply the rules of hygiene, avoiding putting your hands to your eyes or mouth, eating and smoking.
- It is a good idea to wear specific gloves during work operations, wash your hands after performing the surgery, cover any scratches or skin lesions with plasters or dressings
- Do not touch the yellow sanitary containers (infected or potentially infected waste)

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4.3.1.2 Precautions against chemical risk

- Always notify Executives and Supervisors of the workplace of their access
- Make sure of the need to use specific PPE that will be provided by the Institute (unless otherwise provided for in the contract) and / or to observe special procedures for access
- Avoid touching objects and tools of which you do not know the use and in any case without the authorization of the managers and supervisors of the department / service
- During work interventions avoid coming into contact with unexpected places, activities, people, in order not to constitute an obstacle or danger for them; pay particular attention to the execution of the instructions relating to fire prevention (see specific section of this document)
- Apply the rules of hygiene, avoiding putting your hands to your eyes or mouth, eating and smoking.
- It is a good idea to wear specific gloves during work operations, wash your hands after performing the surgery, cover any scratches or skin lesions with plasters or dressings
- Do not touch bottles and containers in departments and laboratories
- Refrain from carrying out dangerous operations near containers containing chemical substances and in any case within the institute's laboratories
- It is forbidden to use products and chemicals present in the departments of the Institute
- If the work to be performed involves contact with dangerous substances, it is mandatory to wear the PPE provided by your Health and Safety Management.

4.3.1.3 Obligation to wear personal protective equipment

All operators of external companies, contractors and other non-employee operators, are required, during their stay at the Institute, to use the personal protective equipment defined in the respective safety plans; in some cases, specific PPE may be indicated for access to particular environments: in this case, these will be provided by the client institution.

It is possible to view the document relating to all PPE adopted in the Institute at the Prevention and Protection Service.

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4.3.2 MAIN PRECAUTIONS TO SAFEGUARD THE HEALTH AND SAFETY OF PATIENTS, USERS AND INSTITUTE STAFF

During the execution of works or supplies, it is possible to carry out:

- Risk of damage due to the production or dispersion of dust (also as a result of capture and diffusion by the ventilation systems): the danger is connected with demolition works, drilling walls, removal of false ceilings, furnishings or other material, brushing, etc. in premises with the presence of immunosuppressed and / or allergic patients;
- Discomfort due to the production of noise: the danger is connected with the use of pneumatic hammers, breakers, small generators, hammers, chisels and operations to unload rubble;
- Risk of damage due to inadvertent service interruption of the electrical system, by insertion of high-power electrical equipment (which can cause the disconnection of the current due to overload) or by inadvertent interception of live cables during demolition or drilling of walls;
- Risk of damage due to unintentional interruption of service to technological systems (medical gas, water and heat): during demolition of walls or installation, the piping supplying hot / cold water (with possible flooding) or medical gas (oxygen, nitrous oxide and medical air);
- Risk of damage due to falling material during warehouse loading operations.

4.3.2.1 Precautions to adopt in case of works

It refers to compliance with the legislation regarding safety standards on construction sites: the drafting of the POS, which must always be sent to the Building Design and Maintenance Structure, the drafting of the PSC, in the cases and terms provided for by the decree, as well as, always where applicable, the PIMUS for the use, installation and dismantling of scaffolding, etc.

In general, the construction sites for maintenance and restructuring interventions within the departments must guarantee:

- the clear delimitation of construction site areas with prohibition of access to patients, visitors and in any case to unauthorized personnel;
- the greatest possible separation between clinical and construction site activities, with particular reference to the introduction of dust, noise and vibrations.

Particular attention must be paid to the presence of the air intakes of the ventilation systems outside the building.

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4.3.2.1.1 Height works

Operators carrying out work at height (i.e. with the risk of falling) must ensure compliance with the law and the envisaged operating procedures and be equipped with suitable individual and collective fall protection systems where required. This being a specific risk inherent in the activity carried out by an external company at our structure, must be subject to preventive and protective interventions by the company itself.

Access to coverage areas outside of the appropriate protections (railings, balustrades, etc.) is allowed only to employees who must carry out the required authorized interventions and only if equipped with appropriate Individual and Collective Fall Protection Devices, in compliance with current regulations.

4.3.2.1.2 Construction works that do not involve the drafting of PSC

It is necessary to take the following precautions in the case of construction works that do not involve the drafting of a specific PSC ("internal" room renovations, technological updates that involve the fixed installation of machinery and / or systems):

- Adopt all the precautions provided for in Annex II: (Guidelines for the protection from the production and dispersion of dust during the works and for the prevention of Aspergylus infections)
- during the works, if necessary, the shutdown / disconnection of the air conditioning systems, fire detection, medical gases etc, must be planned with the Technical Structure and the ducts must be suitably protected;
- the intervention area must be completely isolated and circumscribed with barriers that extend from the floor to the ceiling, also including any false ceiling;
- the sealing of windows and / or other possible communication routes between the work area and the neighboring sanitary areas must be guaranteed; any holes in the walls made during the works must be repaired within the same day or temporarily sealed;
- the inlet vents of the air handling systems serving the neighboring sanitary blocks must be protected by installing additional metal grids and prefilters and scheduling more frequent maintenance;
- special signs must be provided for visitors and staff so that the passage takes place away from the work areas;
- special signs must also be prepared for the paths of workers in order to guarantee in any case a buffer zone to preserve in particular the access areas to health buildings and in any case so as not to cross areas with patients, limiting the opening as much as possible and closing of the doors with the relative displacement of air and dust;
- if possible, after assessing the places where the Hirer's activity must be carried out, a filter area must be prepared where the technicians, leaving the work area, can be subjected to dust extraction and shoe cleaning or in any case they can wear protective clothing and over-footwears to avoid polluting areas where patients are present;
- precise areas dedicated to the storage of the equipment used must be identified;

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- the schedules and timing of the works must be established with precision and communicated to the managers and / or referents of the health activities;
- the resulting material (rubble, electrical material, etc.) must be removed immediately following a well-defined path, avoiding the dispersion of dust, in closed containers or bags;
- the work area must be properly cleaned every day.

4.3.2.1.3 Obligation to contain environmental pollution

The underwriter is obliged to comply with all the rules and precautions that avoid environmental pollution of any kind:

- obligation to contain dust (see document in Annex II: Guidelines for the protection from the production and dispersion of dust during the works and for the prevention of Aspergylus infections)
- Exhausted materials or materials to be sent to landfills must be placed inside containers; for example, in the case of replacement of filters, when they are transported, to avoid unnecessary contamination in other areas, they must be contained in sealed bags or bags on which the material code is highlighted

4.3.2.1.4 Connection to the network and / or work on the electrical system

If it is necessary to use the Institute's electricity network, agreements must be made in advance with the technical staff of the Institute in charge and competent. The electrical equipment in the wards must always be connected to the service sockets (and never to those of the bed head) Equipment with a power of less than 2 Kw can be independently connected; for the others, and in any case always in case of doubt, contact the Technical Department.

In any case, it is mandatory to always contact the Technical Structure in advance in case you have to carry out operations that may involve the automatic activation of the switches for overload protection (insertion and start-up of high-power electrical equipment) or differential (presence of water or high humidity caused from the operations performed) in wards where there are potentially patients connected to vital equipment. In any case, the deactivation / interception and disconnection of the electrical power supply of the systems, which supply the premises subject to the interventions, must be carried out with the assistance and consultation of the Institute's internal staff. Given the possibility of ongoing sanitary activities, it may not be possible to globally deactivate all electrical systems, so it is likely that in the areas affected by the works there are live conductors; consequently, the Contractor's technicians must take all necessary precautions, especially when and if demolition operations must be carried out; during these processes, the Contractor must be equipped with appropriate protection devices as well as equipment suitable for detecting live cables even under traces. In the event of cables being intercepted, the internal technical staff must be notified immediately.

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4.3.2.1.5 Wall drilling operations

The Institute is not always able to indicate the presence of pipes or electrical systems embedded in masonry.

Before proceeding with the execution of holes in the walls it is therefore necessary:

- agree on the intervention with the Technical Structures;
- ascertain, before drilling, the presence of any pipes or electrical systems recessed using appropriate instrumentation.
- that the company has its own instrumentation which it guarantees the quality;

4.3.2.1.6 Works on thermo-hydraulic systems, medical gases and air treatment

During the operations of demolition, equipment installation, plant reconstruction based on the technical specifications for the introduction of new technologies, it may be possible to accidentally intercept the hot / cold water pipes and medical gas supply pipes (oxygen, medical air, nitrous oxide) and vacuum.

In case of leakage of liquid or gaseous fluids, after having ventilated the rooms, it will be necessary:

- upstream dissect the pipes or plug the leak, for example by crushing the ends of the copper pipes;
- immediately inform the operators of the Technical Sector in order to limit the consequences and inefficiencies;
- in the event of oxygen or nitrous oxide leaks, ventilate the areas concerned and take the measures indicated in the safety data sheets

The workers, before the demolition and / or installation operations must use suitable equipment to identify underground metal pipes.

In the event of an accident or emergency situation, the necessary precautionary measures must be taken (plugging leaks, extinguishing fires, deactivating and removing electrical equipment if possible, etc.) before reaching the exit closest to the works. The use of flammable or combustible substances, if provided for and authorized, must be limited to the indispensable minimum and operators must be made aware of the related risks and precautions to be taken; operators must be equipped with fire extinguishers in a number and type appropriate to the type of substance used; the contracting company must in any case comply with the rules set out in Ministerial Decree 10/3/98.

Any particularities and information on electrical risks, gas leaks, fire and related safeguards will be provided by the referring structure for the contract.

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4.3.2.1.7 Noise limitation obligation / vibration

The Contractor must contain noise emissions within the limits compatible with health care activities; therefore he must use machinery and equipment that comply with the regulations for the control of noise emissions in force at the time of carrying out the work. In the case of noisy work, he assumes the burden of circumscribing the rooms by means of paneling and shielding, closing doors and / or the adoption of suitable measures to limit the propagation of sound waves in the rooms used for healthcare activities; The upgrading and maintenance of equipment and any building works must be conducted in ways that provide for the least impact in terms of vibrations; if it is unavoidable to use vehicles or equipment that cause significant vibrations, the contractor must agree with the staff of the Institute alternative strategies such as the deferral of work with respect to health activities or the transfer and / or reduction of the surrounding health activities for the entire duration of the works

4.3.2.1.8 Waste management

It is the Contractor's obligation to contain the environmental impact of waste from processing, demolition and supplies of materials (packaging, etc.).

4.3.2.1.9 Obligation to contain the fire risk

In the case of maintenance and renovation works, external companies must take into consideration the following issues (DM 10/3/98) related to the execution of the works:

- accumulation of combustible materials
- obstruction of escape routes
- lock on opening of fire-resistant doors

At the beginning of the working day, it must be ensured that the exodus of people from the workplace is guaranteed; at the end of the work day, a check must be made to ensure that the fire prevention measures have been implemented and that the work equipment, flammable and combustible substances are secured and that there are no conditions for a fire to start.

Particular attention must be paid to places where hot work is carried out (welding or use of open flames): a preventive inspection must be carried out to ensure that any combustible material has been removed or adequately protected against heat and sparks, portable fire extinguishers must be positioned and, at the end of the activity, it is necessary to make sure that there are no residues of burning materials and / or embers.

Flammable substances must be stored in a safe and ventilated place; when they are used, smoking and the use of open flames must be prohibited.

Unused gas cylinders cannot be stored inside the workplace

Particular precautions must be taken in maintenance work on electrical systems and on those for the supply of fuel gas.

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4.3.2.2 Precautions to be taken in case of material delivery operations

Companies that supply the Institute with materials and products of various kinds must comply with the following provisions to prevent the risk of material falling during unloading, transport and storage:

- the pallet used for material loading operations must comply with current safety regulations and applicable technical standards (see ISPM - 15 "Regulation of wood packaging material in international trade - EPAL)
- the pallets must be handled with a forklift or transpallet
- the dimensions of the European pallets are: length 120 cm; width 80 cm; height 15 cm.
- The type of pallet (dried epal, storage, semi-heavy, light, etc.) must be commensurate with the capacity of the transported load; the use of used pallets is allowed only if they are in good storage conditions
- the pallet must keep the entire load raised from the ground by at least 15 cm
- when assembling the pallet, the method that guarantees the best stability and strength must be used. The packages should be stacked on top of each other, because this is what gives the pallet the maximum strength.
- Pay the utmost attention to loading packages of different sizes, because often the discrepancy may not allow the correct stability of the load on the pallet, with consequent movement during transport, loading and storage operations and the risk of the material falling with possible damage to the present (operators, employees and passing people)
- The delivery / collection paths of materials etc must be agreed in advance and must take place at times when the presence of users is minimal

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5 CONCLUSIONS

The Institute requires you to strictly comply with the following requests:

- comply with the obligations specifically provided for by current legislation on health and safety at work;
- comply with current environmental regulations as far as applicable.

and to guarantee:

- a correct behavior of the staff by replacing those who do not observe their duties;
- the execution of works with capital, machines and equipment owned and in compliance with current safety standards and good practice standards;
- to regularly fulfill the obligations for social security and insurance (INAIL, INPS, etc.)

In general, the workers of the contracting firms, in carrying out their duties, must:

- proceed with care when handling materials
- maintain a limited speed when traveling with operational vehicles
- increase the visibility and identification of vehicles (eg with headlights on or flashing lights)
- separate risk areas with barriers or similar
- use, where possible, acoustic or visual signals
- respect the road signs displayed

The Institute requires you to comply with all the provisions set out in this Document.

The contractor must undertake to implement the provisions set out as well as to provide the staff assigned to the interventions provided for in the contract, precise instructions, instructions and adequate information / training for safe access to the various environments and sectors of activity of the Institute.

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Annex II

1 INTRODUCTION

A lot of dust can be produced during the building renovation and construction activities in health facilities; this can also be contaminated by a ubiquitous fungus, *Aspergillus spp*, which has been isolated from unfiltered air, ventilation systems, horizontal surfaces, food and ornamental plants.

Nosocomial aspergillosis is an increasingly recognized cause of serious diseases and mortality in patients with a high degree of immunocompromise, such as cancer patients.

Therefore, before starting construction works, the probability that patients or healthcare workers will be exposed to dust, even possibly containing a high load of *Aspergillus spp* spores, must be assessed during the works, with the consequent need to develop a plan to prevent such exposures.

2 PURPOSE

The purpose of these Guidelines is to:

- Minimize the production of dust from renovation or construction activities in progress in the Institute and prevent its spread in areas where there are health workers and / or patients, with particular regard to those at the highest risk.
- Provide precise technical - preventive indications to be included in the tender specifications relating to the performance of services or works that may produce dust.
- Identify functions and responsibilities relating to the surveillance and verification of the correct application of these Guidelines.

3 FIELD OF APPLICATION

These Guidelines should be included in:

- Works contract specifications, within which they represent binding requirements
- Drafting of coordination plans in the design and / or execution phase, within which they represent binding requirements

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They must be used as:

- technical - operational reference for the personnel involved in carrying out the work
- evaluation reference on the work of the contractors in the Institute
- organizational / management policy for the Department Managers involved

4 WORKS CLASSIFICATION

Hospital construction works can be classified into:

- **works outside the structure:** these are essentially construction works for new pavilions or elevations, as part of specific expansion projects; they are mostly working of great magnitude and duration
- **work inside the structure:** that is, restructuring interventions involving inpatient departments or services of the hospital structure.

An evaluation scale of the possibility of producing powders by a construction site can be intuitively constructed on the basis of the extent and duration of the works themselves, assuming that as these parameters increase, the possibility for patients and healthcare professionals of the risk of exposure also increases. powder; Obviously, further indicators of the risk of exposure are the execution of these works in active departments or services (with the simultaneous presence of operators and users) or inactive and the possibility or not of having access to the site from the outside.

The greatest risk would materialize for:

- demolition and / or renovation of an entire inactive department
- demolition work carried out in active departments or involving internal areas with a high flow of patient transit, when the demolition involves a large area or when the duration of the work exceeds two days
- jobs of any size and duration that involve higher risk departments (Intensive Care, Operating Block, hospitalizations, DH chemotherapy, etc.)
- work involving the shutdown of aeraulic systems
- decoration / painting works involving the smoothing / peeling of surfaces > 10 m²

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5 PREVENTIVE MEASURES

They essentially consist of measures for:

- reduce the production of dust on construction sites
- contain the dispersion of dust from construction sites
- reduce the exposure of patients and operators to construction site dust

5.1 MEASURES TO REDUCE DUST PRODUCTION ON SITE

They are borne by the operators of the companies and concern any type of work producing dust in any construction site, both external and internal to the structure, in active and inactive departments:

1. The surfaces of the areas intended for demolition or any other work that produces dust must be moistened during the activities; similarly, all the aggregates to be removed must be thoroughly wetted, without prejudice to precautions for possible risks deriving from the presence of liquid;
2. the rubble must be removed at the end of each working day, using the hospital routes only when there is no other viable alternative,
3. in the case of works involving break-in or wall drilling, it is advisable to maintain a negative pressure using suction systems with expulsion of the site air outside (with the use of HEPA filters if the works are located in departments with several high risk),

5.2 MEASURES TO CONTAIN THE DISPERSION OF DUST FROM CONSTRUCTION SITES

These measures are also borne by the operators of the companies and vary according to the type of work depending on whether the construction site is external or internal to the structure, and in the latter case, in active or inactive departments.

5.2.1 Rules of conduct for workers

- The personnel working on construction sites outside the structure cannot have access, in work clothes, to the internal areas of the health facility used by users or health personnel (bars, newsagents, etc.).

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- The personnel working on the construction **sites inside** the structure must limit as much as possible access to the internal areas of the health facility used by users or health personnel (bars, newsagents, etc.) in work clothes, especially if clearly contaminated (use disposable hoods) ; said staff must be clearly recognizable by users and health workers by wearing clothing and identification tags that allow the identification of the company they depend on.
- For works that take place within active departments, an access to the activity area must be identified, where possible, using the path as separate as possible from the areas of greatest transit of patients and staff; if the passage of workers must take place through the department, it is necessary that transit times and methods are agreed with the Head of the department (e.g. to agree on the passage of materials and workers at defined times, also limiting the movement of patients in the department during activities to higher dust production); workers must always wear disposable overshoes and hoods (provided by the department) before entering or leaving the work area. For the transport of debris or other material, it is necessary to limit the use of internal routes, especially if these are common with users and health personnel.

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5.2.2 Measures for external construction sites

As a rule, these are works of great size and duration.

- The construction site areas must be delimited with adequate dust containment systems, with non-flammable and airtight material, both on the ground (up to a height of 2 meters) and also along any scaffolding and scaffolding, where a lot of dust is produced.
- Any external chutes for discharging the aggregates must be closed, perfectly sealed at the junction points between the elements; the collection on the ground of the discharges must take place in a sealed cage or in any other system that guarantees as much as possible the containment of dust.
- Thorough cleaning of the construction site area must be carried out at the end of each working day, removing all debris and other residues after having thoroughly moistened them
- If the works are carried out near water tanks or cooling towers, these must be adequately protected and the water quality of the systems must be checked if necessary.
- If the work is carried out near the external AHU outlets of aeraulic systems, it is necessary to periodically check the state of contamination and, if necessary, provide for the external cleaning of the air intakes and replacement of the filters.

5.2.3 Measures for internal construction sites

5.2.3.1 Measures for lagger internal construction sites

- The internal construction site area must be sealed with maximum tightness systems for dust, especially if the premises are completely insulated, as occurs in the case of a renovation of an entire department.
- In the entrance / exit areas from the construction site, sheets / carpets must be placed to always be kept moist; they must be vacuumed daily or when visibly dirty with vacuum cleaners equipped with HEPA filters. In high-risk departments it is mandatory to set up a real antechamber to the site area.

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- The access path to the construction site must be as separate as possible from the areas with the greatest transit of users and health personnel.
- The windows and doors of the construction site area must be kept closed at least during the execution of the activities with the greatest production of dust.
- The passage points of the plumbing and electrical systems and the vents of the ventilation system in the site area must be sealed.
- Give preference to the preparation of external scaffolding or winches for handling the material. In case of removal of the rubble can only be done using the internal paths, those at least risk for patients must be identified, allocating lifts for the exclusive use of the site (and indicating the provisional intended use with clearly visible signs on the doors of the 'lift) and only if this is not possible, it will be possible to allow the transit of hermetically sealed trolleys, subject to agreement on the time (before or after the one of greater intensity of the health activity) and on the routes, which must be as short as possible and subjected to continuous and immediate cleaning.
- If the work is carried out near external AHU outlets of aeraulic systems, it is necessary to ensure the implementation of barriers with maximum tightness around the site, periodically check the state of contamination, clean the external air intakes and replace the filters and possibly check the air quality of the system served.

5.2.3.2 Measures for smaller internal construction sites

This typology includes a whole series of works for which, as a rule, a real construction site is not prepared, but there is however the need to implement precise measures to contain the dust produced:

- Isolate the area as much as possible from the department;
- In the areas of entry / exit from the construction site, sheets / carpets must be placed to always be kept moist, if even impromptu activities are carried out burglary or wall drilling, it is mandatory to use dust extraction systems (equipped with HEPA filters evacuation to the outside if the works are located in higher risk departments) during the working phase;
- When works that have resulted in areas of burglary or demolition of walls are not finished at the end of the day, it is necessary to wet these areas with a disinfectant solution (10% chlorine solution) and cover them with waterproof sheets to be removed the next day, at the resumption activities).

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5.3 MEASURES TO REDUCE THE EXPOSURE OF PATIENTS TO DUST ON SITE

These measures are instead the responsibility of the health care personnel who will have to implement them during the execution of the work; obviously the measures to be implemented will vary according to the clinical characteristics of the patients, the location of the works with respect to the hospitalizations and with respect to the routes usually used by users and health workers and the structural characteristics (presence of filter, possibility of creating "buffer" areas , possible alternative accesses etc).

In general, the recommendations to be implemented are:

- Identify patients at risk and appropriate preventive measures before starting work;
- Constantly evaluate during the execution of the works the type of patients at highest risk (first of all the immuno-compromised), taking care to move them away from the areas adjacent to the works, especially during the phases of maximum dust production, or by wearing a suitable airway protection device to those who must necessarily pass near the site area;
- Stop patients from staying in the areas adjacent to the construction site
- Systematically inspect dust protection barriers and report any deficiencies in containe.

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Annex III



The building has mainly a load-bearing masonry structure and is composed of three corps called A, B, and C, characterized by up to 8 levels, all equipped with outdated and poorly maintained systems. The roofs are totally flat with a practicable terrace and used for the positioning of mechanical systems (AHU and refrigeration units).

Corp	Floor	Superficie
Corp A	Ground floor	1.279,77
Corp A	Mezzanine	1.498,20
Corp A	Mezzanine	1.472,50
Corp A	Second floor	2.341,47
Corp A	Third floor	1.969,76
Corp A	Fourth floor	1.994,05
Corp A	Fifth floor	2.019,35
Corp A	Sixth floor	1.674,29
Corp B	Ground floor	1.933,40
Corp B	First floor	1.351,40
Corp B	Second floor	1.196,80
Corp B	Third floor	1.386,20
Corp B	Fourth floor	970,65
Corp B	Fifth floor	1.178,60
Corp B	Sixth floor	534,40
Corp C	Ground floor	478,40
Corp C	First floor	587,30
Corp C	Second floor	602,30
Corp C	Third floor	584,20
Corp C	Fourth floor	573,10
		Total mq 25.626,1

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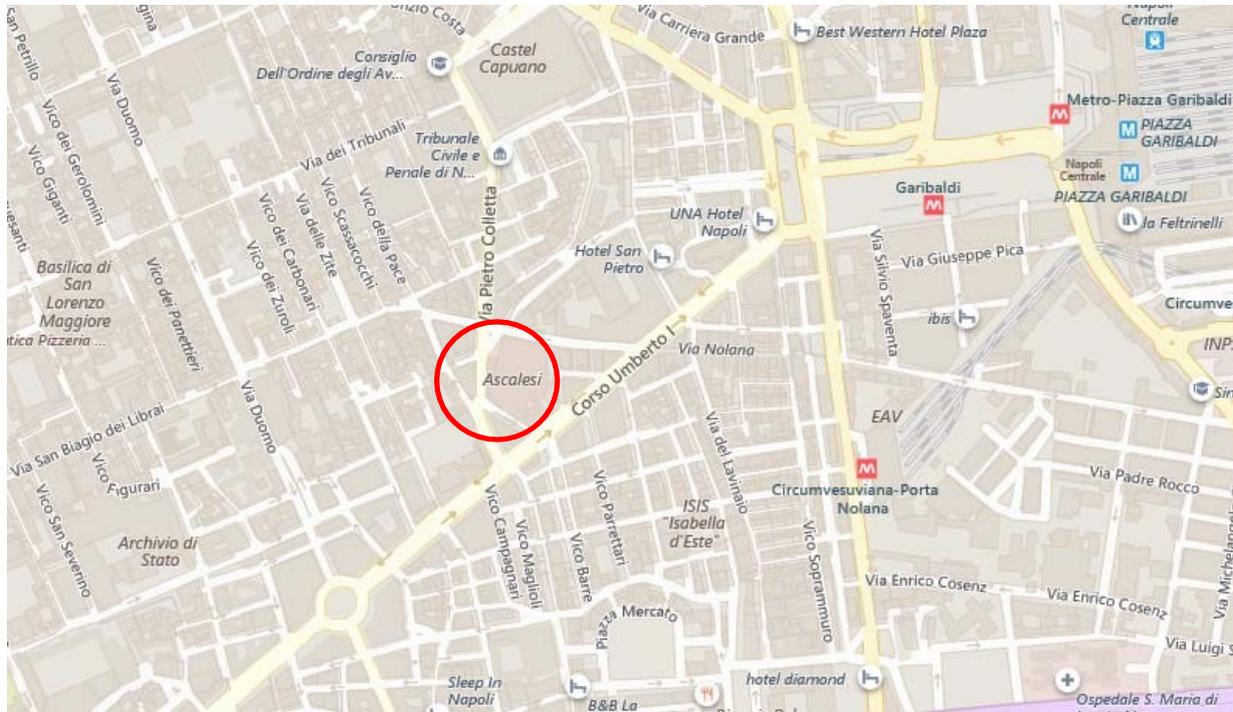
On 18.05.2020, in order to follow up the regional will regarding the creation of the Mediterranean Oncology Center, the Institute activated the second floor of the H.P. The block of Oncology Outpatients ascended.



The spaces have been divided as follows:

- doctors' offices, of adequate size, suitable for ensuring respect for privacy, each with a washbasin with non-manual taps and an attached toilet. The surfaces of the studios will be resistant to washing and disinfection, smooth with a rounded connection to the floor, also monolithic and resistant to chemical and physical agents, non-slip.
- 1 medicine shop with an adjoining reception desk.
- distinctly assigned storage rooms for dirty, clean material, cleaning material, storage for use materials, rehabilitation tools.
- public services, the first with 2 toilets across the street and the second with a toilet for the disabled.

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The property is located in the area of high historical interest located between the Pendino and San Lorenzo neighborhoods, close to Duomo Street and between Spaccanapoli and Corso Umberto I. The structure is well connected by Line 2 and Line 1 of the Naples underground and there are also normal buses, both urban and extra-urban.



Excerpt of Naples Underground Line 1 Route



Excerpt of Naples Underground Line 2 Route

