# The Infection Preventionist’s Role on a Construction Project

### THE DIRECT ANSWER

The infection preventionist (IP) is the clinical authority on the ICRA team: they assess patient risk , determine the Class of Precautions , approve the infection control permit before work begins, verify barriers and controls are in place, monitor compliance through the project, educate clinical staff on construction risks, and conduct surveillance for healthcare-associated infections (especially aspergillosis and Legionella) during and after construction. No one else on the team carries the patient-risk lens — that's the IP's job.

## ACROSS THE PROJECT LIFECYCLE

- Planning: risk assessment, class determination, permit conditions, relocation recommendations.
- Pre-construction: walkthrough verification — barriers complete, HVAC isolated, negative pressure holding. No verification, no work.
- Active construction: routine inspections, monitoring data review, breach response, staff education.
- Closeout: terminal cleaning verification, air and water system recommissioning checks, post-project surveillance for delayed infections.

## AUTHORITY MATTERS

- The IP must have stop-work authority for infection control breaches — a breached barrier or lost negative pressure with vulnerable patients nearby can't wait for the next committee meeting. That authority should be written into the ICRA permit, not assumed.

## FIELD QUESTION

**What does the infection preventionist do during construction?**

Assesses patient risk, sets the precaution class, approves the permit, verifies controls, monitors compliance, educates staff, and surveils for construction-related infections.

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Caution: codes, editions, and targets vary by facility and authority having jurisdiction (AHJ). Figures marked as common practice are facility targets, not code requirements. Confirm against your AHJ and the current code text before acting.