


HEALTH AND SAFETY INFORMATION PRE-TENDER



Chimney Demolition
University Hospital Kerry
Tralee,
Co. Kerry

On behalf of
Health Service Executive

Report Number
38747

Occupational Hygiene & Safety Services Ltd OHMS Plan UHK Chimney Demolition	Page: 2 of 12 Issue No: 1 Issue Date: 30/3/2026 Revised: 30/3/2026 Authorised By: David Bollard	
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1 PURPOSE OF THIS DOCUMENT

This Project-Specific Health & Safety Information is issued to tendering contractors to provide information on known hazards, site constraints, and critical risks associated with the proposed chimney demolition works at University Hospital Kerry.

This document is intended to support tenderers in developing:

- Demolition methodologies - Temporary works designs
- Infection control strategies
- Construction stage safety management proposals

This document does not remove or reduce the Contractor's obligations under health and safety legislation.

2 PROJECT OVERVIEW

Project: Chimney Demolition and Alteration Works
Location: University Hospital Kerry
Client: Health Service Executive (HSE)

Scope of Works Includes:

- Full demolition of chimney structure
- Structural dismantling operations
- Crane lifting operations
- Removal and disposal of demolition materials and asbestos

The works are to be undertaken within a live acute hospital environment.

3 ROLES AND RESPONSIBILITIES

The successful contractor will be appointed as:

- Designer
- Project Supervisor Design Process (PSDP)
- Project Supervisor Construction Stage (PSCS)

The Contractor shall be fully responsible for:

- All design (including demolition methodology and temporary works)
- Design risk assessment and coordination
- Undertaking an asbestos demolition survey
- Construction stage safety management
- Compliance with the Safety, Health and Welfare at Work (Construction) Regulations 2013 as amended.

4 SITE CONSTRAINTS AND ENVIRONMENT

- Live 24/7 hospital operations
- Working hours - 6am – 6pm (Daylight hours only), 7 days a week.
- Proximity to sensitive clinical areas
- Ambulance and emergency access routes must be maintained at all times
- Work Permits and site restrictions during lifting/demolition to be coordinated with the Maintenance Department.
- Traffic Management Plan - Site compound locations. (Attached)
- Aspergillus Risk Assessment. (Attached)
- Existing site services (Attached) (**Note:** Contractor responsible to survey site services in advance of carrying out any works).
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- High sensitivity to noise, vibration, and dust

5 KEY HEALTH & SAFETY RISKS

5.1 DEMOLITION RISKS

- Structural instability
- Uncontrolled collapse
- Falling debris
- Working at height
- Heavy components



5.2 LIFTING OPERATIONS

- Crane operations in a confined hospital environment
- Lifting over of occupied areas

5.3 PUBLIC AND STAFF INTERFACE

- Interaction with hospital staff, patients, and visitors
- Traffic management risks around the kitchen and ambulance bay

5.4 ENVIRONMENTAL RISKS

- Dust generation
- Noise and vibration impacts

6 CRITICAL RISK: NOSOCOMIAL INFECTION

6.1 OVERVIEW

Demolition works present a significant risk of airborne contamination, which may lead to hospital-acquired infections.

6.2 ASPERGILLUS RISK

Aspergillus spores may become airborne during demolition activities and pose a serious risk to immunocompromised patients.

High-risk groups include:

- ICU patients
- Oncology patients
- Respiratory patients

7 INFECTION CONTROL REQUIREMENTS

Tenderers shall demonstrate how the following controls will be implemented:

7.1 DUST SUPPRESSION

- Continuous suppression during demolition
- Avoidance of dry demolition methods

7.2 CONTAINMENT MEASURES

- Physical barriers and segregation
- Controlled work zones

7.3 AIR QUALITY CONTROL

- Dust screens and sheeting
- Use of HEPA filtration where required

7.4 MONITORING

- Dust monitoring systems
- Monitoring for Aspergillus
- Visual inspection protocols

7.5 WASTE MANAGEMENT

- Covered skips
- Immediate removal of waste

7.6 CLEANING

- Regular cleaning of access routes and surrounding areas



8 HOSPITAL-SPECIFIC REQUIREMENTS

8.1 INFECTION CONTROL RISK ASSESSMENT (ICRA)

The Contractor shall develop a project-specific ICRA in consultation with the Hospital Infection Prevention & Control Team.

8.2 COMMUNICATION

- Daily coordination with hospital representatives
- Immediate reporting of incidents

8.3 PERMITS

- Permit-to-work system required for all high-risk activities

9 DISCLAIMER AND LIMITATION OF RESPONSIBILITY

This document is provided for information purposes only and identifies known and foreseeable risks based on information available at the time of issue.

The Contracting Authority:

- Makes no representation or warranty as to the completeness or accuracy of the information
- Accepts no liability for any omissions or inaccuracies

The Contractor, as Designer, PSDP and PSCS, shall:

- Undertake full design responsibility for the Works
- Carry out all necessary surveys, inspections, and risk assessments
- Develop and implement all required control measures
- Ensure compliance with all statutory obligations

Nothing in this document shall be construed as:

- Transferring design responsibility to the Contracting Authority
- Approving or endorsing any proposed method or design

The Contractor shall not rely solely on this document and must satisfy themselves as to all risks associated with the Works.

10 CONCLUSION

This project involves high-risk demolition work in a live hospital environment, where the tolerance for uncontrolled hazards is extremely low. In particular, the potential for airborne contaminants (including silica dust, soot, and fungal spores such as *Aspergillus*) to affect vulnerable patient populations elevates this project to a higher risk category than standard demolition work.

Accordingly, tenderers shall treat the management of airborne contamination and infection control as a primary driver of design and execution, not a secondary control measure.

The Works pose a credible risk of generating respirable dusts and bioaerosols that could harm patients, staff, visitors, and operatives.

The proximity of sensitive hospital functions (e.g., ICU, oncology, respiratory care) requires a precautionary, conservative approach to risk management.

Uncontrolled release of dust or contaminants may result in immediate cessation of works and intervention by the Contracting Authority and Hospital Infection Prevention & Control Team.

Given the Contractor's appointment as Designer, PSDP and PSCS, the Contractor shall:

- Develop a fully integrated design that eliminates or reduces risks so far as is reasonably practicable, including demolition sequencing, temporary works and containment strategy.
- Prepare and implement a project-specific Infection Control Risk Assessment (ICRA) aligned with hospital requirements.
- Demonstrate, through method statements and design submissions, how airborne contamination will be prevented from migrating beyond the work zone.
- Coordinate all design risk management activities and communicate residual risks through the Safety and Health Plan and Safety File.
- Implement and continuously review construction-stage controls, including monitoring, inspection, and audit.

This document is provided for information purposes only and sets out known risks and required performance outcomes associated with the Works.

The Contractor shall be solely responsible for the design, planning and execution of the Works, including the development and implementation of all necessary safe systems of work.

The hazards and risks identified in this document are not intended to be exhaustive and shall not relieve the Contractor of any of its obligations under the Contract or at law. The Contractor shall be deemed to have satisfied itself as to all risks, contingencies and other circumstances which may affect the execution of the Works.



Without limitation, the Contractor shall be responsible for identifying all hazards and assessing all risks arising from its proposed design, methodologies, sequencing and work activities, and for implementing appropriate control measures in accordance with all applicable statutory requirements, codes of practice and industry standards.