



# **Advanced Healthcare Construction ICRA Training Course**

4 – 8 April 2027  
Langkawi

## Advanced Healthcare Construction ICRA Training Course

**Ref:** 1481\_209349 **Date:** 4 – 8 April 2027 **Location:** Langkawi **Fees:** 6000 Euro

### Overview

Advanced Healthcare Construction ICRA Training Course is a one-week advanced course for infection prevention staff, healthcare facilities managers, project managers, engineers, safety officers, and clinical leaders. Participants build a Healthcare Project ICRA Control File while applying healthcare construction infection control risk assessment, patient risk group classification, construction activity classification, ICRA permit controls, negative pressure barrier monitoring, and project infection control closeout. Agile Leaders Training Center presents a project-specific approach to infection risk during construction, renovation, repair, demolition, and maintenance.

### Who Should Attend

- Infection prevention personnel assigned to healthcare projects
- Facilities, engineering, and maintenance managers
- Healthcare construction and renovation project managers
- Safety, quality, and risk management officers
- Clinical leaders protecting high-risk patient areas

The course assumes practical familiarity with healthcare facilities or infection prevention. It does not grant certification, replace engineering design, provide clinical treatment advice, or confer regulatory authorization.

### Departments and Industries

The course supports teams coordinating infection safeguards around physical work in occupied or commissioning healthcare environments.

- Hospitals and specialist healthcare facilities
- Ambulatory and day-care facilities
- Healthcare engineering and facilities management
- Construction, renovation, and maintenance contractors
- Infection prevention, safety, quality, and risk functions

### Learning Objectives

By the end of this course, participants will be able to:



- Define the project scope and infection hazards before work begins
- Classify construction activities and patient risk groups
- Select precautions through an ICRA decision matrix
- Prepare permits, barriers, routes, and contingency controls
- Monitor pressure, dust, moisture, traffic, and control exceptions
- Verify terminal cleaning, commissioning, and safe closeout

## **Course Agenda**

### **Day 1: Project Scope and Infection Risk Context**

- Healthcare Project Infection Hazard Profile
- Construction, Renovation, Repair, and Maintenance Scope Map
- Patient Vulnerability and Adjacent Area Review
- ICRA Team Roles and Decision Rights Matrix
- Pre-Project Walk-Through Evidence Register

### **Day 2: ICRA Classification and Precaution Selection**

- Construction Activity Type Classification Tool
- Patient Risk Group Classification Worksheet
- ICRA Precaution Matrix Application
- Work-Zone and Exposure Pathway Map
- ICRA Permit and Approval Record

### **Day 3: Barriers, Airflow, Water, and Movement Controls**

- Barrier and Anteroom Integrity Checklist
- Negative Pressure Barrier Monitoring Log
- Dust, Moisture, and Water Intrusion Control Plan
- Worker, Patient, Material, and Debris Route Plan
- HVAC and Utility Interruption Contingency Sheet

### **Day 4: Field Monitoring and Exception Management**

- Daily ICRA Site Inspection Form
- Pressure and Particulate Observation Record
- Contractor Briefing and Competency Confirmation
- Control Failure Escalation and Stop-Work Chart
- Corrective Action and Reinspection Tracker



## **Day 5: Verification, Handover, and Closeout**

- Suggested Exercise: Project Scope and Risk Classification
- Suggested Exercise: ICRA Permit and Precaution Selection
- Suggested Exercise: Barrier and Route Inspection
- Suggested Exercise: Exception and Contingency Decisions
- Capstone Exercise: Healthcare Project ICRA Control File

## **Practical Exercises**

The course uses suggested activities with fictional hospital renovation, maintenance, demolition, and commissioning scenarios.

- Suggested activity: classify a work package and the patient populations around it.
- Suggested activity: select precautions and complete an ICRA permit with accountable owners.
- Suggested activity: inspect barriers, pressure evidence, routes, and utility contingencies.
- Suggested activity: decide escalation, corrective action, terminal cleaning, and release evidence.

## **FAQs**

### **Who should attend healthcare construction ICRA training?**

Healthcare construction ICRA training suits infection prevention, facilities, engineering, projects, safety, quality, risk, contractor, and clinical personnel who coordinate physical work near patient-care services.

### **When should an infection control risk assessment be completed?**

An infection control risk assessment should begin before construction, renovation, repair, demolition, or maintenance starts and should be revisited when scope, location, patient vulnerability, airflow, water, access, or work methods change.

### **How are construction activity and patient risk classifications used?**

The two classifications are combined in an ICRA decision matrix to select proportionate barriers, airflow, cleaning, movement, monitoring, communication, and approval requirements for the specific work zone.

### **What evidence belongs in an ICRA permit?**

An ICRA permit records scope, location, activity type, patient risk, selected precautions, owners, routes, barriers, pressure requirements, contingencies, inspection frequency, escalation conditions, and release criteria.



## **How is a healthcare project released after infection control closeout?**

Release follows documented removal controls, debris clearance, terminal cleaning, HVAC or utility verification where applicable, inspection, correction of exceptions, handover approval, and retention of closeout evidence.

### **Conclusion**

Participants leave with a Healthcare Project ICRA Control File containing classifications, a precautions matrix, permit, control plans, inspection records, exception decisions, and closeout evidence. The file links infection prevention requirements to project execution and accountable field checks. It supports consistent decisions from early scope review through safe handover.