

Title

Corporate Safety Supplementary Program - Communicable Disease Safety Plan

Authorities

Subject Matter Specialist

Robert Ingraham

Manager Corporate OH&S

Content Authority

Rob Ingraham

Manager Corporate OH&S

Approval Authority

Chris Neilson

Senior Manager Human Resources

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1 STATEMENT OF PURPOSE

Section 21 of the Workers' Compensation Act of British Columbia (*Act*) requires employers to ensure the health of their workers. The purpose of this document is to provide CRD employees with important information to ensure that basic steps are taken to reduce the risk from communicable diseases.

2 INTRODUCTION

Communicable diseases are illnesses caused by an infectious agent or its' toxic products that can be transmitted in a workplace from one infected individual or another vector.

For the purpose of this Safety & Exposure Control Plan, the communicable diseases of concern are those that circulate in the community from time to time and as a result may be introduced into a workplace, such as COVID-19, norovirus, and influenza. When warranted, the Provincial Health Officer or a medical health officer ("Public Health") may indicate communicable diseases of concern to B.C. workplaces.

During periods of elevated risk where Public Health officials issue guidance, notices, or orders related to an employer's region and industry, employers must take steps to implement appropriate measures in accordance with the guidance of Public Health. These measures are in addition to the general measures for communicable disease prevention which should be in place at all times.

3 PUBLIC HEALTH DIRECTIVES

The Provincial Health Officer is the senior public health official for B.C. and is responsible for monitoring the health of the population across the province, providing independent advice to the ministers and public officials on public health issues.

The responsibilities of the Provincial Health Officer (PHO) are outlined in the *Public Health Act* and include the following:

- provide independent advice to the ministers and public officials on public health issues;
- monitor the health of the population of B.C. and advise on public health issues and on the need for legislation, policies and practices;
- recommend actions to improve the health and wellness of the population of BC;
- deliver reports that are in the public interest on the health of the population and on government's progress in achieving population health targets;
- establish standards of practice for and conduct performance reviews of Medical Health Officers; and
- work with the BC Centre for Disease Control and Prevention and BC's Medical Health Officers



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across the province to fulfill their legislated mandates on disease control and health protection.

As an employer, the CRD must be prepared to implement or maintain additional measures at times when the risk of communicable disease in our region or workplace is elevated, as advised and directed by public health. Public Health's specific guidance for a particular communicable disease will be followed where their information differs from this document.

4 WORKSAFEBC DIRECTIVES (WORKERS' COMPENSATION ACT/OHS REGULATIONS)

WorkSafeBC is a provincial regulatory agency dedicated to promoting safe and healthy workplaces across BC. They partner with workers and employers to prevent work-related injury, disease, and disability. Their services include education, prevention, compensation and support for injured workers, and no-fault insurance to protect employers and workers.

WorkSafeBC helps businesses meet their obligations under the *Workers Compensation Act* and the *Occupational Health and Safety Regulation*. All employers in British Columbia have an obligation under the *Act* to ensure the health and safety of workers and other parties at their workplace.

To assist employers in the fundamental components of communicable disease prevention, WorkSafeBC has developed [Communicable disease prevention: A guide for employers](#). This guide describes a four-step process to help employers reduce the risk of communicable disease in their workplace, which involves understanding the level of risk in the workplace, application of the fundamentals and implementing appropriate measures, communicating policies and protocols to all workers, and updating measures and safeguards as required.

Workers, including joint health and safety committee representatives and/or worker representatives, are encouraged to **immediately inform** management of concerns related to potential exposures in the workplace. Open communication is key to finding out about specific tasks that concern workers as well as gaining input on appropriate control measures to keep workers safe.

Workers should know and understand their workplace health and safety responsibilities — and those of others.

5 RESPONSIBILITIES

CRD is committed to providing a safe and healthy workplace for our employees. This document assists Managers, Supervisors and Employees in:

- Mitigating the spread of communicable diseases among employees (and their families and friends).
- Assisting employees (and their families) in managing personal/family illness.
- To minimize an employee's exposure to Communicable Disease, a combination of measures will be utilized, including the most effective control technologies available. Work procedures will protect not only employees, but also contractors or public who enter CRD facilities and Parks. All employees must follow the procedures outlined in this plan to prevent or reduce exposure to Communicable Diseases.

5.1 Employer Responsibilities:

- Stay updated with Regulatory Requirements
- Keep employees informed - ensure that the materials (for example, gloves, alcohol-based hand rubs, and hand washing facilities) and other resources such as employee training materials required to implement and maintain the safety and exposure control plan are readily available where and when they are required.
- Select, implement and document the appropriate site-specific control measures.
- Evaluate the workplace for areas where people have frequent contact with each other and share spaces and objects and increase the frequency of cleaning in these areas.
- Ensure that high traffic work areas or frequently touched surfaces are cleaned and disinfected more often.
- Ensure that cleaning supplies are available for employees to clean and disinfect their workspaces.
- Ensure that Supervisors and Workers are educated and trained to an acceptable level of competency.
- Provide employees with any personal protective equipment recommended by occupational health and safety guidelines, and training to ensure it is used correctly.
- Ensure that employees use appropriate personal protective equipment for the level of risk based on Risks Assessments. Identify the hazard, assess the risk and establish the controls to eliminate or control the risk for specific work areas.



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- Conduct a periodic review of the Plan's effectiveness. This includes a review of the available exposure control technologies to ensure that these are selected and used when practical.
- Maintain records of training and inspections.
- Ensure that a copy of the Communicable Disease Safety & Exposure Control Plan is available to employees.
- Close facilities or limit services to the public if warranted to maintain compliance with public health directives.
- Ensure employees know what to do when they have symptoms of a Communicable Disease.

5.2 Manager and Supervisor Responsibility

- By legal definition, a "supervisor" is any individual responsible for directing the work of others.
- Managers are to ensure that a communicable disease risk assessment has been conducted for each working group to determine the level of risk to employees in their work section, and Managers and Supervisors are to ensure any mitigation measures are enforced.

This risk assessment looks at all elements of the work including proximity to others, ability for workers to maintain physical distancing, maintaining cleanliness of tools, workspaces, and provision of necessary personal protective equipment.

- Ensure that employees are adequately instructed on the controls for the hazards at the location(s).
- Ensure that employees use proper personal protective equipment as is appropriate for each situation.
- If respirators are used, ensure that employees use the proper respirator, for which they have been fit tested, and the results are recorded.
- Direct work in a manner that eliminates or minimizes the risk to employees.
- Send employees home if they are ill.
- Keep your personal environment clean. Use appropriate products to clean and disinfect items like your desk, work surfaces, phones, keyboards and electronics, keypads, elevator buttons, customer service counters, especially when visibly dirty.

5.3 Employee Responsibility (including Managers and Supervisors)

- Complete self-checks daily and don't come to work if you have symptoms of illness – **let your supervisor know as soon as possible if you have symptoms.**
- Inform Manager or Supervisor and leave work if suffering from flu-like symptoms and stay home until the symptoms are gone.
- Avoid coming to work if they share a residence with a person that has an active communicable disease.
- Follow established work procedures as directed by the Manager/Supervisor.
- Practice physical distancing (> 2 metres) at all times and wear masks when unable to do so. Masks must always be worn in common areas;
- Carry out meetings virtually when possible;
- Practice good hand hygiene including frequent hand washing and/or use of hand sanitizer
- Keep your personal environment and common space environments clean. Use appropriate products to clean and disinfect items like your desk, work surfaces, phones, keyboards and electronics, keypads, elevator buttons, customer service counters, especially when visibly dirty.
- Use any required personal protective equipment as instructed.
- Report any unsafe conditions or acts to your Manager/Supervisor.
- Know how and when to report exposure incidents.

When re-entering the workplace, employees should:

- Comply with the employer's instructions around minimizing exposure to communicable diseases.
- Wash their hands frequently, and/or use hand sanitizer.
- Take steps to minimize exposure to communicable disease while away from work

5.4 Workers' Rights & Responsibilities

Everyone has the right to a safe work environment. This interactive web book explains the rights and responsibilities that employers, supervisors, and workers all have to make sure workplaces are safe and healthy.

If you're a worker, you also have three key rights:

5.4.1 *Right to Know*

- The right to know about hazards in the workplace.

5.4.2 *Right to Participate*

- The right to participate in health and safety activities in the workplace.

5.4.3 *Right to Refuse*

- The right to refuse unsafe work without getting punished or fired

Workers in BC have the right to refuse work if they believe it presents an undue hazard. An undue hazard is an "unwarranted, inappropriate, excessive, or disproportionate" risk, above and beyond the potential exposure a general member of the public would face through regular, day-to-day activity.

In these circumstances, the worker should follow some specific steps documented in the CRD Corporate OH&S Program Manual ([LINK](#)). The worker should report any undue hazard to their supervisor for investigation. Each refusal of unsafe work is dealt with on a case-by-case basis.

If the issue is not resolved between the worker and the supervisor, Corporate Safety and the joint occupational health & safety committee is notified of the concern. A joint investigation must be conducted.

If the matter is not resolved, the worker and the supervisor or employer must contact WorkSafeBC and a prevention officer will then investigate and take steps to find a workable solution for all involved.

NOTE: By law, employers are prohibited from penalizing workers for raising a health and safety issue. Please refer to the CRD OH&S Program Manual Section 17.5.34 for the Right to Refuse Dangerous Work Procedure.

5.4.4 Workers' Responsibilities

- Be alert to hazards. Report them immediately to your supervisor or employer.
- Follow safe work procedures and act safely in the workplace at all times.
- Use the protective clothing, devices, and equipment provided. Be sure to wear them properly.
- Co-operate with joint occupational health and safety committees, worker health and safety representatives, WorkSafeBC prevention officers, and anybody with health and safety duties.
- Get treatment quickly should an injury happen on the job and tell the health care provider that the injury is work related.
- Follow the treatment advice of health care providers.
- Return to work safely after an injury by modifying your duties and not immediately starting with your full, regular responsibilities unless your health care provider considers you fully recovered.
- Never work while impaired by alcohol, drugs, or other causes (**including fatigue**).

6 UNDERSTAND THE RISK

Communicable or infectious diseases are caused by organisms such as bacteria, viruses, fungi, and parasites. Some infectious diseases can be passed from person to person or from animal to person. Workers can be exposed to a number of different types of infectious diseases, including airborne, bloodborne, contact, and zoonotic diseases.

6.1 Airborne Diseases

- Airborne diseases can be spread through the air when infected people cough, sneeze, or speak. A person becomes infected by breathing in air contaminated with the virus or bacteria. Some common airborne diseases include:
 - Chicken Pox (varicella)
 - Pandemic influenza
 - Mumps
 - Tuberculosis

6.2 Bloodborne Diseases

- Bloodborne diseases are transmitted through contact with infected blood or certain body fluids. Some common bloodborne diseases include:
 - HIV/AIDS
 - Hepatitis B & C

6.3 Contact Diseases

- Contact diseases are transmitted through direct or indirect contact with bacteria or viruses. Direct contact can include physical contact with an infected person, or contact with blood and body fluids. Indirect contact involves touching an object or surface that has been contaminated by an infected person. Common contact diseases include:
 - Norovirus

6.4 Zoonotic Diseases

- Zoonotic Diseases are caused by infectious agents that can be transmitted between animals and humans in a variety of ways. Some zoonotic diseases can be transmitted directly to humans through contact with saliva, some are airborne, and others are transmitted through insect bites. Common zoonotic diseases include:
 - Avian Flu
 - Campylobacteriosis
 - Hantavirus
 - Rabies
 - West Nile Virus
 - Coronavirus/COVID-19
 - **COVID-19 Variants** - Viruses naturally mutate over time and lead to new versions or variants. Variants include different lineages and sublineages that share similar genetic mutations.
 - Five COVID-19 Variants of Concern have been detected in BC: Alpha, Beta, Gamma, Delta, and Omicron. For more information - [Click Here](#)
 - **Omicron Variant** – Omicron is becoming the most commonly detected variant in B.C. Omicron is spreading differently than previous COVID-19 variants. People are infected more quickly and with a smaller dose.

Rate of incubation is faster which means that by the time symptoms have developed you will likely have already spread the virus. There are more breakthrough infections with those who have been vaccinated but the vaccinated are more likely to have a mild or asymptomatic case.

6.4.1 Reducing the Spread of COVID-19 Variants

The new variants spread the same way as the original COVID-19, although some of the newer variants, such as Omicron, transmit much easier between people. Getting vaccinated, staying home when sick, visiting others outdoors or in small groups, wearing masks in indoor public spaces, increasing ventilation, and cleaning your hands are all important measures that will reduce the spread of COVID-19.

7 IMPLEMENT MEASURES, PRACTICES and POLICIES TO REDUCE THE RISK

Every CRD workplace is unique. The CRD must regularly assess all the hazards within our operations, taking appropriate steps to eliminate or control the associated risk. This process is referred to as a risk assessment.

Within the CRD, there are many routine situations where staff will have contact with customers, coworkers, and the physical environment itself (surfaces, doors, equipment etc.). During times of outbreaks, these encounters could give rise to contact with communicable diseases, if not controlled adequately.

All departments and divisions within the CRD must think about the risks in their workplace and take steps to control them. Such controls will include adhering to current public health orders, if applicable, public health advice, as well as implementing best practices to keep our employees and customers safe.

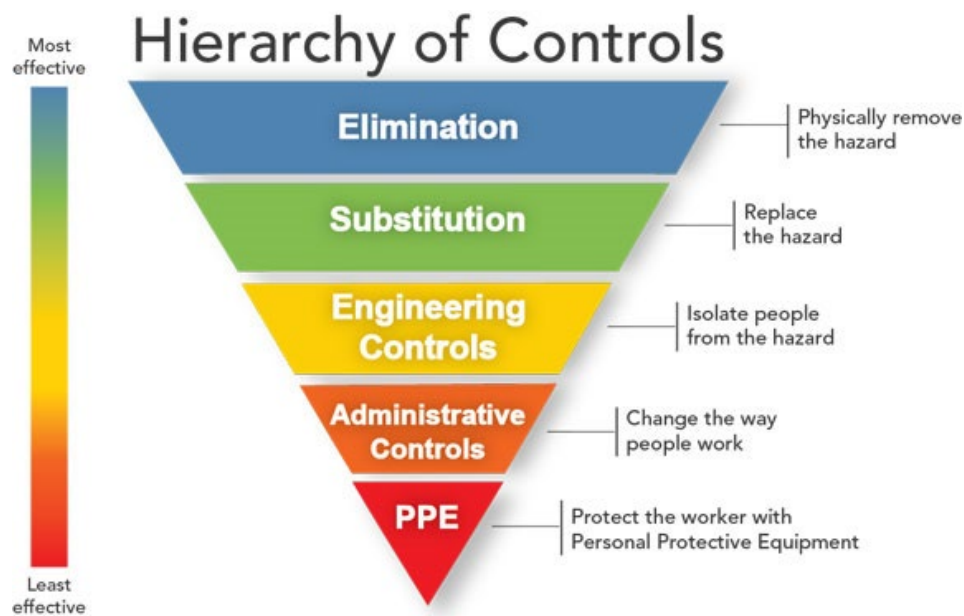
7.1 Control Measures

The most effective way to reduce the risk of COVID-19 transmission is to follow the hierarchy of controls and to use a layered approach. Physical distancing, proper ventilation, good hand hygiene, the wearing of non-medical masks, active screening, and contact tracing are some of the preventative measures that can help prevent the spread.

7.2 Hierarchy of Controls

The Hierarchy of Controls: **elimination, substitution, engineering controls, administrative controls and personal protective equipment**. The hierarchy is arranged beginning with the most effective controls and proceeds to the least effective.

When selecting a safeguard or a combination of safeguards, always start at the top of the hierarchy of controls outlined below to eliminate or control the hazards. Choose a less effective safeguard only when more effective solutions are impracticable and continuously monitor to ensure they are providing the best level of protection to workers.



The Hierarchy of Controls (in order of their effectiveness):

- **Elimination or substitution:** remove the hazard from the workplace, or substitute (replace) hazardous materials or machines with less hazardous ones.
- **Engineering controls:** includes designs or modifications to plants, equipment, ventilation systems, and processes that reduce the source of exposure. Are engineering controls, such as physical barriers, practicable?
- **Administrative controls:** controls that alter the way the work is done, including timing of work, policies and other rules, and **work practices** such as standards and operating procedures (including training, housekeeping, and equipment maintenance, and personal hygiene practices).

- **Personal protective equipment (PPE):** equipment worn by individuals to reduce exposure such as contact with chemicals or exposure to pathogens. This last form of protection should only be considered after careful consideration of the previous control measures. The use of gloves and face masks may be considered where none of the above controls are possible/effective. If gloves and masks are used, proper usage guidelines should be followed.

7.3 Safe Work Practices

Work practices are also a form of administrative controls. In most workplaces, even if there are well designed and well maintained engineering controls present, safe work practices are very important. Some elements of safe work practices include:

- Developing and implementing Safe Job Procedures (SJP) or Standard Operating Procedures (SOP).
- Training and education of employees about the operating procedures as well as other necessary workplace training (including WHMIS).
- Establishing and maintaining good housekeeping programs.
- Keeping equipment well maintained.
- Preparing and training for emergency response for incidents such as spills, fire or employee injury.

7.4 Education and Training

Employee education and training on how to conduct their work safely helps to minimize the risk of exposure and is a critical element of any complete workplace health and safety program. Training must cover not only how to do the job safely but it must also ensure that workers understand the hazards and risks of their job. It must also provide them with information on how to protect themselves and co-workers.

8. HOW TO REDUCE THE RISKS

If workers are at risk for communicable or infectious disease at the workplace, the CRD must develop and implement an exposure control plan. As a general rule, safe work practices everyone should follow include:

- **Stay home if you are sick -**
- **Masks** – Masks are recommended but not required. Masks are most effective when fitted, worn and handled correctly. They act as a barrier and, in combination with other measures, can help prevent the spread of respiratory illnesses.
- **Hand washing** - One of the best things you can do to prevent infection is to wash your hands

regularly and avoid touching your face.

- **Physical Distancing** - Physical distancing means limiting close contact with other people. When physical distancing is used with other public health measures, it can help to reduce the spread of respiratory illnesses.
- **Cleaning and disinfecting** – Regular cleaning and disinfecting can help prevent the spread of illness.

8.1 What Employees Should Know

8.1.1 *If you become sick at home*

- Workers should stay home if they are ill, especially if they are vomiting or have a fever or diarrhea.
- [COVID-19_Public_Health_Guidance.pdf \(bccdc.ca\)](#)

8.1.2 *“HealthlinkBC”*

- <https://www.healthlinkbc.ca/services-and-resources/healthlinkbc-files/category/disease-prevention>

8.1.3 *If you become sick at work*

- Workers who have symptoms upon arrival to work or become ill during the day should promptly separate themselves from other workers, inform their supervisors and go home.

8.2 What Employers Should Know

An important way to reduce the spread of communicable diseases is to keep sick people away from those who are not sick. The CRD will review and communicate our sick leave policies and practices to employees every year before flu season and any time when there is a risk of a communicable disease.

- For the flu, advise all employees to stay home if they are sick until at least 24 hours after their fever is gone without the use of fever-reducing medicines, or after symptoms have improved.

8.3 Promoting Vaccinations

Many infectious diseases are preventable through vaccination. The CRD will support Public Health messaging for vaccinations against pandemic or communicable diseases and may collaborate with Public Health to offer vaccination clinics in public facilities.



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The CRD recognizes the public health benefits of vaccination programs to reduce illness, disability and death from community acquired diseases. Programs may be created to encourage employee participation in public health vaccination programs.

In addition, the CRD is an essential service provider whose employees interact with other staff, vendors, and the public in areas where physical distancing is not always possible. The CRD has a responsibility to protect its essential operations and the vulnerable populations we serve.

8.3.1 COVID-19 Vaccination

The Capital Regional District (CRD) initially implemented a COVID-19 Vaccination Policy requiring employees, contractors and volunteers, without approved Exemption, to be fully vaccinated against COVID-19 as of December 13, 2021.

Effective December 13, 2021, all individuals who were able to be vaccinated, and to whom this Communicable Disease Plan applies, were required to be Fully Vaccinated against COVID-19. "Fully Vaccinated" meant having obtained all required doses of a COVID-19 Vaccine.

Effective April 8th, 2022 the CRD suspended its' vaccination Policy until further notice. While the CRD's COVID-19 Vaccination Policy is suspended as of April 8, 2022, confirmation of vaccination status remains required for:

- All employees,
- Direct service volunteers working alongside CRD employees,
- Contractors who are required to follow CRD safety policies and/or who work alongside CRD employees.

This information is necessary because the CRD must be prepared to implement or maintain additional measures at times when the risk of communicable disease in our region or workplace is elevated, as advised and directed by public health. This may include reactivating the CRD COVID Safety Plan and Vaccine Policy.

Public Health's specific guidance for a particular communicable disease will be followed where their information differs from this document.

8.3.2 Reasons to get vaccinated

1. **Vaccine-preventable diseases have not gone away** - The viruses and bacteria that cause illness and death still exist and can be passed on to those who are not protected by vaccines.
2. **Vaccines will help keep you healthy**
Vaccines can prevent short term illnesses and prevent long term chronic disability or increased risk of cancer depending on disease.



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3. **Vaccines are as important to your overall health as diet and exercise**

Similar to eating healthy foods, exercising, and getting regular check-ups, vaccines play a vital role in keeping you healthy. Vaccines are one of the most convenient and safest preventive care measures available.

4. **Vaccination can mean the difference between life and death**

Vaccine-preventable infections can be deadly. Example: Every year in the US, prior to the COVID-19 pandemic, approximately 50,000 adults died from vaccine-preventable diseases.

5. **Vaccines are safe**

Potential side effects associated with vaccines are uncommon and much less severe than the diseases they prevent.

6. **Vaccines will not cause the diseases they are designed to prevent.**

Vaccines contain either killed or weakened viruses, making it impossible to get the disease from the vaccine.

7. **Young and healthy people can get very sick, too**

Infants and older adults are at increased risk for serious infections and complications, but vaccine-preventable diseases can strike anyone. If you are young and healthy, getting vaccinated can help you stay that way.

8. **Vaccine-preventable diseases are expensive**

Diseases not only have a direct impact on individuals and their families, but also carry a high price tag for society as a whole.

9. **When you get sick, your children, grandchildren, and parents may be at risk, too.**

Adults are the most common source of pertussis (whooping cough) infection in infants which can be deadly for babies. When you get vaccinated, you are protecting yourself and your family as well as those in your community who may not be able to be vaccinated.

10. **Your family and co-workers need you**

Millions of adults get sick from vaccine-preventable diseases, causing them to miss work and leaving them unable to care for those who depend on them, including their children and/or aging parents.

9 CLOSE CONTACTS and CONTACT TRACING

Contact tracing helps to stop the spread of COVID-19 by identifying people who have come into close contact with someone with COVID-19 and asking them to take certain steps. Precautions are different

for vaccinated and unvaccinated people. For more information - [Close contacts and contact tracing \(bccdc.ca\)](https://www.bccdc.ca).

9.1 Who is considered a close contact?

A close contact is generally someone who has been near a person with COVID-19 for at least 15 minutes when health and safety measures were not in place or were insufficient.

If you have to notify your close contacts, consider who you were with and where you've been in the two days before you started having symptoms up until you started to self-isolate. If you have not had any symptoms and tested positive, consider who you were with and where you've been in the two days before your positive test.

Generally, you should notify:

- People you live or share a room with.
- People you had intimate contact with.
- People outside of your household (e.g. at a social gathering) who:
 - you were face-to-face with for 15 minutes or more
 - while you were indoors, *and*
 - while you were not wearing a mask.

People who may have been exposed to saliva or other bodily fluids, such as people with whom you shared items like a drink, personal hygiene item, cigarette/vape, lipstick, or eating utensils, as well as people who may have been coughed or sneezed on.

If public health decides you are a close contact, you have to follow their advice.

9.2 Instruction for close contacts

If you have been exposed to COVID-19. You need to self-monitor and may also need to self-isolate and/or get tested. Click here for - [Instructions covid19 close contact.pdf \(bccdc.ca\)](#)

9.2.1 Self-Monitoring

You should monitor for symptoms of COVID-19 for 14 days from the day you last had contact with the person who has COVID-19, even if you are fully vaccinated or had COVID-19 in the last 90 days.

You should get tested if you develop any symptoms:

- Fever or chills
- Cough
- Difficulty breathing

- Loss of sense of smell or taste
- Sore throat
- Loss of appetite
- Extreme fatigue or tiredness
- Headache
- Body aches
- Nausea or vomiting
- Diarrhea

You can use the [Self-Assessment Tool](#) to see if you should get tested for COVID-19.

9.2.2 Self-Isolation

If you are **fully vaccinated or had COVID-19 in the last 90 days**

- **You are not required to self-isolate**
- You can continue to participate in routine activities, such as work or school, as long as you do not have any symptoms
- Do not visit friends or relatives who are higher risk for severe COVID-19 (i.e. those currently in hospital, long term care, those with compromised immune systems, or over the age of 70 years) for 14 days after you were last exposed to COVID-19.

If you are **not fully vaccinated and did not have COVID-19 in the last 90 days**

- You are required to **self-isolate for 10 days** from the day you last had contact with the person who has COVID-19, even if you do not have any symptoms.
- You should not visit friends or relatives who are higher risk for severe COVID-19 (i.e. those currently in hospital, long term care, those with compromised immune systems or over the age of 70 years) for 14 days after you were last exposed to COVID-19

Self-isolation means keeping away from others to help stop the spread of COVID-19. For more information - [CLICK HERE](#)

9.2.3 Testing & Results

If you need to get tested, [find the nearest testing location](#).

- If you test positive for COVID-19, you will need to self-isolate for at least 5 days from when your symptoms started or from the date of the positive test if you are fully vaccinated (at least 10 days for those who are not fully vaccinated).

- If you test negative or indeterminate for COVID-19, you still need to self-isolate for 10 days from the day you had contact with the person who has COVID-19 unless you are fully vaccinated or had COVID-19 within the last 90 days. If you are fully vaccinated or had COVID-19 within the last 90 days, you do not need to self-isolate and may return to normal activities once you feel better.

9.2.4 How Does Contract Tracing Work?

Contact tracing is an important tool to help diagnose people who may have COVID-19 sooner and prevent the virus from spreading in the office and/or the community.

When a person tests positive for COVID-19, they become a “case”. The people they have spent time with during their infectious period may be considered “close contacts” and should be notified. Public health will follow up with COVID-19 close contacts in several different ways.

9.2.5 Should I get tested if I am a close contact of someone with COVID-19?

If you are not showing any [symptoms](#) of COVID-19, you **do not** need to be tested, unless you are asked to by Public Health. It can take several days from the last time you were exposed to someone who has COVID-19 for symptoms to develop or to have enough virus in your body for a test to detect COVID-19.

If you get symptoms, you will likely need to get tested. Go to the [testing page](#) for more information.

Not sure if you should be tested? Complete the [BC COVID-19 Self-Assessment Tool](#).

10 HYGIENE & CLEANING

10.1 Personal Hygiene and Cleaning

Depending on the communicable disease, it’s possible for people to become infected if they touch contaminated surfaces and then touch their nose, mouth, or eyes.

10.2 Washing Hands Frequently

The most reliable way to prevent infection from surfaces is to wash your hands. Washing your hands often and practicing good hand hygiene will reduce the chances of getting or spreading germs. Washing your hands with soap and hot water for at least 20 seconds is most effective. This is because soap actively destroys the surface of some viruses and a soapy lather really reduces the number of germs left on your skin. Alcohol-based hand rubs can be used to disinfect your hands when soap and water are not available.

The CRD will provide hand-hygiene facilities with appropriate supplies (see section 4.85 of the OHS Regulation).

The CRD will maintain a clean environment through routine cleaning processes that are appropriate for our industry and work practices.

Other things to consider:

- Cover your mouth and nose with a disposable tissue or the crease of your elbow when you sneeze or cough instead of your hands.
- Do not share food, drinks, utensils, etc.
- Avoid unnecessary contact
- Consider physical distancing
- Wear a mask

10.3 Facility, Vehicle and Equipment Hygiene

Cleaning and disinfecting surfaces can also reduce the risk of infection.

Always follow standard practices and appropriate regulations specific to your type of facility for minimum standards for cleaning and disinfection. This guidance is indicated for buildings in community settings and is **not** intended for [healthcare settings](#) or for [other facilities](#) where specific regulations or practices for cleaning and disinfection may apply. Additionally, this guidance only applies to cleaning and disinfection practices to prevent the spread of exposures. It does not apply to any cleaning or disinfection needed to prevent the spread of other germs.

10.3.1 When to Clean and When to Disinfect

Cleaning with products containing soap or detergent reduces germs on surfaces by removing contaminants and decreases risk of infection from surfaces.

When confirmed or suspected communicable disease cases are low, cleaning once a day is usually enough to sufficiently remove germs that may be on surfaces and help maintain a healthy facility.

Disinfecting kills any remaining germs on surfaces, which further reduces any risk of spreading infection.

You may want to either clean more frequently or choose to disinfect (in addition to cleaning) in shared spaces if the space is a high traffic area or if certain conditions apply that can increase the risk of infection from touching surfaces:

- [Reportable Disease Data Dashboard](#)
- [BC COVID Dashboard](#) in your community;
- Low vaccination rates in your community;
- Infrequent use of other prevention measures, such as hand hygiene; or

- The space is occupied by people at increased risk for severe illness.
- If there has been a sick person in your facility within the last 24 hours, you should clean AND disinfect the space.

10.3.2 Determine What Needs to Be Cleaned

Consider the type of surface and how often the surface is touched. Generally, the more people who touch a surface, the higher the risk. Prioritize cleaning high-touch surfaces at least once a day. If the space is a high traffic area, or if certain conditions (listed above) apply, you may choose to clean more frequently or disinfect in addition to cleaning.

10.3.3 Consider the Resources and Equipment Needed

Keep in mind the availability of cleaning products and the personal protective equipment (PPE) appropriate for the cleaners and disinfectants used (as recommended on the product label, product information sheets or Safety Data Sheet).

10.3.4 Clean High-Touch Surfaces

During periods of communicable disease events you may need to clean high-touch surfaces at least **twice** a day or as often as determined is necessary. Examples of high-touch surfaces include: pens, counters, shopping carts, tables, doorknobs, light switches, handles, stair rails, elevator buttons, desks, keyboards, phones, toilets, faucets, and sinks.

10.3.5 Protect Yourself and Other Cleaning Staff

- Ensure cleaning staff are trained on proper use of cleaning (and disinfecting, if applicable) products.
- Read the instructions on the product label, product information or Safety Data Sheet to determine what safety precautions are necessary while using the product. This could include PPE (such as gloves, glasses, or goggles), additional ventilation, first aid procedures, or other precautions.
- [Wash your hands](#) with soap and water for 20 seconds after cleaning. Be sure to wash your hands immediately after removing gloves.
 - If hands are visibly dirty, always wash hands with soap and water.
 - If soap and water are not available and hands are not visibly dirty, use an alcohol-based hand sanitizer that contains at least 60% alcohol, and wash with soap and water as soon as you can.

- Special considerations should be made for people with asthma. Some cleaning and disinfection products can trigger asthma.

10.3.6 Disinfect Safely When Needed

If you determine that regular disinfection may be needed

- If your disinfectant product label does not specify that it can be used for both cleaning and disinfection, clean visibly dirty surfaces with soap or detergent before disinfection.
- Use a disinfectant product that is effective against the communicable disease.
- **Always follow the directions on the label** to ensure safe and effective use of the product. The label will include safety information and application instructions. Keep disinfectants out of the reach of children. Many products recommend keeping the surface wet with a disinfectant for a certain period (see “contact time” on the product label).
 - Check the product label to see what PPE (such as gloves, glasses, or goggles) is required based on potential hazards.
 - Ensure adequate ventilation (for example, open windows).
 - Use only the amount recommended on the label.
 - If diluting with water is indicated for use, use water at room temperature (unless stated otherwise on the label).
 - Label diluted cleaning or disinfectant solutions.
 - Store and use chemicals out of the reach of children and pets.
 - Do not mix products or chemicals.
 - Do not eat, drink, breathe, or inject cleaning and disinfection products into your body or apply directly to your skin. They can cause serious harm.
 - Do not wipe or bathe people or pets with any surface cleaning and disinfection products.

10.4 Ventilation

For all activities that take place indoors, basic principles of good indoor air quality include supplying outdoor air to replenish indoor air, thereby removing and diluting contaminants that naturally accumulate in indoor settings, especially in well-sealed buildings.

10.4.1 Strategies to optimize ventilation system functionality

- Maintain ventilation systems. WSBC requires employers to ensure that heating, ventilation and air conditioning (HVAC) systems are designed, operated, and maintained as per standards and specifications for ongoing comfort for workers ([Part 4 of the OHS Regulation](#)).
- Ensure preventative maintenance is conducted (for example, regular filter changes and inspection of critical components).
- Make sure the system is properly balanced, which means verifying that the system meets its design conditions for air flow, temperature, pressure drop, noise and vibration.
- During periods of communicable disease events limiting occupancy in facilities or vehicles should be considered. Promotion of employees to work from home is another example.

10.4.2 Flexible Work Arrangements

All work units have a Business Continuity Plan (BCP) that identifies opportunities for work to be performed remotely where operationally feasible and with prior approval, considering the nature of the work, the ability to maintain public service and the availability of equipment and technology.

Check with your manager to determine if social contact may be reduced by:

- Working remotely
- Teleconferencing
- Holding Virtual Meetings through SharePoint and Teams

10.5 Using Personal Protective Equipment

Workers should be trained in the proper selection of appropriate PPE and how to properly put it on and take it off, including:

- Gloves
- Respirators
- Face shields
- Gowns
- Foot covers
- Eye Protection
- All Specialized PPE

10.5.1 Masks

The Provincial Mask mandate requirements are subject to change based on PHO Orders. On December 3, 2021, the PHO made an order entitled *Face Coverings (COVID-19)*. This order required masks to be worn in all public indoor settings indoors for all people born in 2016 or earlier (5+).

The PHO **order of March 10th/22** titled, *Face Coverings (COVID-19)*, removed the province wide ordering the wearing of face coverings in all public settings.

Wearing a mask in most indoor public spaces is now a personal choice. This includes shopping malls, schools, grocery stores, and community centres.

Masks are still required in some situations like visiting healthcare facilities or on federally-regulated transportation like airplanes or trains. Masks may also be required for people returning from international travel.

Masks are encouraged in some settings like on public transit and BC Ferries. Some businesses, workplaces or events can choose to require that masks be used in their spaces.

Some people may choose to continue to wear a mask because they are more comfortable wearing a mask or because they, or someone in their family, may be at higher risk and want to take extra precautions. Some things to consider:

- Have you received all recommended doses of vaccine?
- Will you be in close contact or closed, crowded spaces with other people who are not fully vaccinated?
- Are you spending time with others outdoors or indoors?
- Are you at-risk due to age or medical condition?

Some people cannot wear a mask due to psychological, behavioural, or physical conditions. Some people may also need to remove their masks to communicate due to a hearing impairment.

Be respectful of everyone whether they choose to wear a mask or not. It is important to be kind and respectful of other's choices.

10.5.2 Wear a personal mask if you are sick

As noted above, if you are sick, stay home until you are well. Personal masks are recommended for use by sick people to prevent transmission to other people. Masks are an appropriate part of infection prevention and control if you have symptoms or are caring for a person with symptoms. The mask acts as a barrier and helps stop the tiny droplets from spreading when you cough or sneeze.

Using a mask is not enough and should be combined with other preventative measures such as frequent [hand washing](#) and [physical distancing](#).

10.5.3 Wearing masks if you are healthy

It may be less effective to wear a mask in the community when a person is not sick themselves. Masks may give a person a false sense of security and are likely to increase the number of times a person will touch their own face (e.g., to adjust the mask). Any mask, no matter how efficient at filtration or how good the seal, will have minimal effect if it is not used together with other preventive measures, such as frequent hand washing and physical distancing.

Some cultures and families wear masks out of respect for others. It is important to treat people with respect if they do choose to wear a mask.

10.5.4 Cleaning and disposing of masks

Respirators, medical masks, and non-medical disposable masks are typically sold as single-use, but they can be reused until visibly dirty, damp, or damaged. They should not be cleaned because it will damage the protective layers and reduce their effectiveness. Cloth masks should be cleaned frequently. Wet masks are ineffective and should be replaced.

- Clean your hands before putting on your mask and after taking it off.
- Put masks that will not be reused in a garbage bin.
- When emptying garbage bins, do not touch used masks or tissues with your hands.
- Cloth masks can be washed by hand or in a washing machine. Dry the mask completely before use. Be aware that some fabrics may shrink in the dryer, affecting mask fit.
- Any damage, fabric breakdown, or change in fit will reduce the protection of cloth masks.

11 COMMUNICATE MEASURES, PRACTICES AND POLICIES

The CRD will:

- Make sure everyone entering the workplace, including workers from other employers, receives information about our measures, practices, and policies for managing communicable disease.
- Make sure all workers understand the measures in place in their workplaces
- Provide all workers with information on policies for staying home when sick and working from home.
- Post signage in our workplaces to support the measures we have in place.



Making a difference...together

- Make sure our supervisors are knowledgeable about our measures, practices, and policies, and incorporate these into supervision practices at workplaces.
- Provide information, signage, and materials to workers in a language they understand.
- Be mindful that some aspects of managing communicable disease in the workplace may raise privacy and confidentiality issues. The CRD will seek advice on these issues as necessary.

12 INSPECTIONS

The CRD must also undertake regular inspections of CRD workplace(s) and remedy unsafe or harmful conditions without delay.

13 POLICY DEVELOPMENT & IMPLEMENTATION

The CRD has developed and will continue to develop necessary policies to manage our workplace, including policies around who can be at the workplace, how to address illness that arise at the workplace, and how workers can be kept safe in adjusting conditions.

13.1 Business Continuity Plans (BCP)

Managers and Supervisors are expected to follow their work unit's BCP during certain pandemic or Communicable Disease events. Examples of these events include but are not limited to:

- Establishment of the Emergency Operations Center (EOC).
- Excessive employee absenteeism resulting in imminent risk of critical services being impacted.
- A confirmed large-scale employee exposure.
- A "local" outbreak in the community.

CRD work unit BCPs have outlined those positions considered critical or essential services.

14 COMMUNICATION PLANS & TRAINING

14.1 Employee & Customer Communications

Effective communications to employees and customers are an important element of a good workplace.

Ensuring employees and customers are kept informed, and fully understand, expectations around hygiene, CRD policies, safe work practices, safe job procedures and protocols to be followed will not only ensure better compliance but will also go a long way in obtaining employee & customer commitment.



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Ensure workers' mental as well as physical health is maintained. The CRD advises all employees how to contact the CRD Employee and Family Assistance Program.

The CRD has developed standard communications that we can share with customers visiting, or planning to visit, CRD locations. This communication includes:

- A message welcoming them to the premises
- Specifics about current operation environment (e.g. provincial health directives that apply)
- An overview of all the efforts that the CRD is undertaking to ensure customer health & safety
- This communication are available in English and other languages as appropriate and are featured on the CRD website, signage at the premises and are included in any social media information.

15 MONITORING WORKPLACE

The CRD will continuously evaluate and our plan as necessary. If we identify a new area of concern, or if it seems like something isn't working, we will take the necessary steps to update our policies and procedures. We will continue to involve workers, joint health & safety committees and union representatives in this process.

The CRD will:

- The CRD will use workplace inspections and ongoing supervision in the workplace to ensure measures are functioning properly.
- Monitoring the guidance, notices, orders, and recommendations from Public Health (as required) and will adjust our plan where necessary
- Monitor the workplace and risk level. Change our measures, practices, and policies as necessary.
- Update our plan to reflect changes in our workplace, including work processes, staff and premises.
- Continue to make sure workers know how to raise health and safety concerns.
- When Identifying and resolving safety issues, involve Joint Health & Safety Committees or worker Health & Safety representatives.

16 RESOURCES

- WorkSafeBC - [LINK](#)
- WorkSafeBC [Communicable Disease prevention guide for employers.](#)
- [BC Municipal Safety Association](#)

17 DOCUMENT REVIEW

- This is a living plan and can change rapidly and significantly depending on events. All changes will be made in consultation with applicable stakeholders.