



OCCUPATIONAL HEALTH AND SAFETY

COVID-19

EXPOSURE CONTROL SAFETY PLAN

Contents

- CORONAVIRUS (COVID-19) SAFETY PLAN..... 4
- INTRODUCTION..... 4
- BACKGROUND..... 4
- OUR RESPONSIBILITIES* 5
 - Employer Responsibilities*..... 5
 - Supervisor Responsibilities*..... 5
 - Employee Responsibilities*..... 5
- WHAT IS CORONAVIRUS (COVID-19)? 6
- WHAT ARE THE SYMPTOMS OF CORONAVIRUS (COVID-19)? 6
- COVID- 19 INCUBATION PERIOD 6
- ROUTES OF TRANSMISSION - HOW DOES COVID-19 SPREAD? 7
- SUSCEPTIBILITY 7
- RISK IDENTIFICATION AND ASSESSMENT..... 7
 - Breathing in droplets in the air 8
 - Close contact 8
 - Surface contact 8
- POSITION RISK CHART ASSESSMENT 10
- FIELD STAFF..... 12
- SUGGESTIONS FOR VARIOUS CONTROL OPTIONS..... 15
- PHYSICAL DISTANCING 15
- CALCULATING AND MAINTAINING THE MAXIMUM NUMBER OF PEOPLE IN A RECREATION FACILITY TO SUPPORT PHYSICAL DISTANCING: 15
- PHYSICAL BARRIERS..... 16
- HYGIENE PRACTICES..... 16
- PERSONAL PROTECTIVE EQUIPMENT 17
- OTHER 17
- SAFE WORK PRACTICES..... 17
 - Hand Hygiene..... 17
 - Cough/Sneeze Etiquette 18
 - Use of Facial Coverings/non-surgical masks 19
 - Use of surgical masks 19
 - Use of N95 Respirators..... 19
- SOURCE OF EXPOSURE..... 20
- PREVENTION STEPS TO SLOW THE SPREAD OF VIRUS: 20
 - KEY PREVENTION STEPS:..... 20

WHAT SHOULD YOU DO IF YOU HAVE SYMPTOMS* OR HAVE BEEN EXPOSED?.....	22
EMPLOYEE ASSISTANCE PROGRAM & NOT MYSELF TODAY.....	23
DEFINITION.....	23
WHAT IS PHYSICAL DISTANCING?.....	25
IMPORTANCE OF PHYSICAL DISTANCING.....	25
SELF-CARE & PHYSICAL DISTANCING POSTER.....	26
HAND HYGIENE POSTER.....	27
CITY OF SURREY CORONAVIRUS PREVENTION TOPS POSTER.....	28
MANAGERS/SUPERVISORS WORKSITE COVID-19 SAFE PRACTICE REVIEW.....	29
INSTRUCTIONS FOR FITTING N95 RESPIRATOR.....	31
FLAT-FOLD THREE PANEL STYLE.....	32
CITY OF SURREY FACILITY RE-OPENING CHECKLIST.....	33

This is a living document that will be updated on a regular basis. It is a supplement to our existing Occupational Health & Safety Management System and Programs.

CORONAVIRUS (COVID-19) SAFETY PLAN

The purpose of this Safety Plan is to provide information to staff about the COVID-19 virus and the key steps required to prevent the spread of the virus.

INTRODUCTION

The World Health Organization declared the Novel Coronavirus (COVID-19) outbreak to be a global pandemic on March 11, 2020. The BC provincial government declared a state of emergency on March 18, 2020. In response to this situation, City of Surrey departments are taking measures to support operations, and apply the Public Health Officer orders, notices & guidance with respect to our workplaces.

BACKGROUND

The health and safety of workers is a top concern amid the global COVID-19 pandemic. During this time, all parties must place an increased focus on health and safety to prevent the spread of COVID-19.

All measures taken to prevent the spread of COVID-19 should be done in compliance with requirements under the *Workers Compensation Act (WCA)*, Occupational Health and Safety Regulation and the directives/orders issued from the Provincial Health Officer.

While the COVID-19 situation is changing rapidly, the legislation and regulations used to govern BC's workplaces are not. Under BC law, employers have the duty to keep workers and work sites safe and free of hazards. Workers have the right to refuse unsafe work. Each refusal of unsafe work is dealt with on a case by case basis. If health and safety concerns are not resolved internally then a WorkSafeBC Prevention Officer will then be contacted by the Occupational Health and Safety Manager or the Safety Specialist. The WorkSafe BC Prevention Officer will then investigate and take steps to find a workable solution for all involved. Failure of the employer to comply with the WCA and its regulation could result in a stop-work order upon inspection by a WorkSafe BC Safety Officer.

Workers must immediately report safety concerns to their:

- Supervisor and/or manager
- Joint Occupational Health and Safety committee/representatives
- Occupational Health & Safety Section

This will help ensure that we have taken all reasonable precautions measures to protect employees from a contagion like the Novel Coronavirus (COVID-19).

OUR RESPONSIBILITIES*

Everyone - employers, supervisors, contractors, and workers - has responsibility for health and safety in the workplace.

EMPLOYER RESPONSIBILITIES*:

- Provide a safe and healthy workplace.
- Maintain facilities and equipment to ensure that COVID-19 related hazards & risks are controlled or eliminated.
- Ensure employees receive the COVID-19 crew talk.
- Initiate, maintain and publicize occupational health & safety policies and programs as they relate to COVID-19.
- Provide personal protective equipment where required.
- Provide adequate first aid facilities and services to the level required during a pandemic
- Ensure all contactors complete the City of Surrey Contractor Screening Guidelines prior to commencement of work at any City of Surrey Facility.
- Conduct Managers/supervisors worksite covid-19 safe practice review

SUPERVISOR RESPONSIBILITIES*:

- Follow COVID-19 safe work procedures and set a good example.
- Ensure all workers receive adequate instruction and training in COVID-19 safe work procedures.
- Provide the COVID-19 toolbox chat to their employees.
- Ensure workers follow COVID-19 safe work procedures.
- Consult & cooperate with the Joint Occupational Health & Safety Committees.
- Ensure all contactors complete the City of Surrey Contractor Screening Guidelines prior to commencement of work at any City of Surrey Facility
- Conduct Managers/supervisors worksite covid-19 safe practice review

EMPLOYEE RESPONSIBILITIES*:

- Know and follow COVID-19 health and safety requirements affecting your job.
- Actively participate in the City's COVID-19 Health & Safety program.
- Use or wear personal protective equipment as required by City COVID-19 procedures.
- Self-Screen Prior to coming into work
- If you become sick with symptoms compatible with COVID-19 to stay at home and notify your Supervisor.

*These responsibilities complement and do not replace the responsibilities in the OHS Policy or COS Safety Management System.

WHAT IS CORONAVIRUS (COVID-19)?

Coronaviruses are a large family of viruses and can cause diseases ranging from the common cold to more severe diseases such as SARS. On December 31, 2019, Chinese health authorities identified a new coronavirus through a series of reported cases of pneumonia in Wuhan, China. This coronavirus (COVID-19) is a new strain that has not previously been identified in humans. COVID-19 is a zoonotic virus.

WHAT ARE THE SYMPTOMS OF CORONAVIRUS (COVID-19)?

While many of the characteristics of COVID-19 are still unknown, mild to severe illness has been reported for confirmed cases. The symptoms of COVID-19 are like other respiratory illnesses, including the flu and common cold.

They include:

- Fever (37.5°C or Higher)
- Cough
- Sneezing
- Sore Throat
- Difficulty Breathing
- Muscle Aches/Fatigue
- Loss of Appetite
- Nausea and Vomiting
- Chills
- Runny Nose
- Diarrhea
- Loss of Sense of Smell/Taste

In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death.

COVID- 19 INCUBATION PERIOD

A person exposed to COVID-19 virus may get sick up to 14 days after exposure (incubation period).

- If they become sick with symptoms compatible with COVID-19 (fever, cough, muscle aches, difficulty breathing, runny nose, sore throat, or diarrhea) then that person can start spreading the virus in the environment.
- It may be possible to spread the virus even when someone has mild symptoms

ROUTES OF TRANSMISSION - HOW DOES COVID-19 SPREAD?

The Covid-19 virus spreads in the same way as seasonal influenza. The virus spreads through infected liquid respiratory droplets.

Exposure to the virus may occur in a variety of ways, including the following:

- **Close unprotected contact with an infected person**
 - Infectious droplets from a person breathing, talking, coughing or sneezing and landing in the eye or onto the inner surfaces of the nose or mouth of another person. Close contact with an infected person (shaking hands or hugging)
 - Inhaling infectious droplets or particles (from coughing, sneezing, or aerosol-generating medical procedures on infected patients)
 - The respiratory droplets can travel ~ 2 meters, approximately two adult arm lengths. They do not hang in the air, but they can land on surfaces and contaminate them (i.e. doorknobs, light switches, counters). The virus is not known to be airborne (e.g. transmitted through the particles floating in the air) and it is not absorbed through the skin.
- **Touching a surface contaminated with the infected droplets followed by touching one's eyes, nose, or mouth and the virus gets into the body.**
 - If an infected person coughs or sneezes into their hands, they can transfer the virus onto things that they touch.
 - The virus can survive on surfaces between 4 and 72 hours depending on the type of surface, temperature, and humidity of the environment.

SUSCEPTIBILITY

As COVID-19 is a newly identified pathogen, there is no known pre-existing immunity in humans. Based on the epidemiologic characteristics observed so far, everyone is assumed to be susceptible, although there may be risk factors increasing susceptibility to infection. Some people have an increased chance of developing severe illness or complications from COVID-19 including older people (>65) and those with pre-existing conditions including respiratory disease, cardiac disease, diabetes and compromised immune systems.

RISK IDENTIFICATION AND ASSESSMENT

The extent of control measures outlined in this COVID-19 Health and Safety Exposure Control Plan (H&S Plan) will depend on the level of risk to worker health and safety. An important part of the H&S Plan is to ensure all work groups and tasks are identified and assessed for their level of risk. Appropriate protective measures will vary according to the

level of risk and kinds of activities an employee performs. Risk levels include:

There are three primary routes of transmission for SARS-CoV-2, all of which need to be controlled. These include contact, droplet, and airborne transmission.

BREATHING IN DROPLETS IN THE AIR

BCCDC advises that SARS-CoV-2 is not typically transmitted through airborne transmission, however, if somebody coughs or sneezes they do generate droplets which are airborne for at least a short period of time but do not float in the air and generally fall to the ground within one to two meters. Anybody who is near the individual may risk breathing in these droplets. Physical distancing (maintaining 2 meters/6 feet of distance from other people at all time) will reduce the risk of this occurring.

CLOSE CONTACT

Close contact refers to physical contact with another person, for example shaking hands or hugging. When people cough or sneeze droplets may deposit on their skin or clothing, especially if they cough or sneeze into their hands. People who are carriers of SARS-CoV-2 may transfer the virus from their hands or clothing to others during close contact.

SURFACE CONTACT

Surfaces can become contaminated when droplets carrying SARS-CoV-2 deposit on them, or when they are touched by a person who is infected. Surface contact involves a worker touching a contaminated object such as a table, doorknob, telephone, or computer keyboard or tool, and then touching the eyes, nose, or mouth. Surface contact is important to consider because SARS-CoV-2 can persist for several days on surfaces.

The following risk assessment table is adapted from WorkSafeBC Occupational Health and Safety Regulation Guideline G6.34-6. Using this guideline as a reference, we have determined the risk level to our workers, depending on their potential exposure in the workplace.

Table 1: Risk assessment for pandemic influenza

RISK LEVEL	Low Risk Workers who typically have no contact with people COVID-19	Moderate Risk Workers who may be exposed to COVID-19 infected people from time to time in relatively large, well-ventilated workspaces	High Risk Workers who may have contact with COVID-19 infected people or with infected persons in small, poorly ventilated workspaces
HAND HYGIENE (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)	Yes	Yes	Yes
DISPOSABLE GLOVES	Not required	Not required unless handling contaminated objects on a regular basis	Yes, when working directly with COVID-19 patients
APRONS, GOWNS, OR SIMILAR BODY PROTECTION	Not required	Not required unless providing first-aid services.	Yes when working directly with COVID-19 patients
EYE PROTECTION – GOGGLES OR FACE SHIELD	Not required	Not required unless providing first-aid services	Yes when working directly with pandemic COVID-19 patients
AIRWAY PROTECTION – RESPIRATORS	Not required	Not required unless likely to be exposed to coughing and sneezing or providing first-aid service (i.e. CPR/Choking)	Yes (minimum N95 respirator)

Various forms of PPE may be required or provided as an additional form of protection depending on the site or worker comfort.

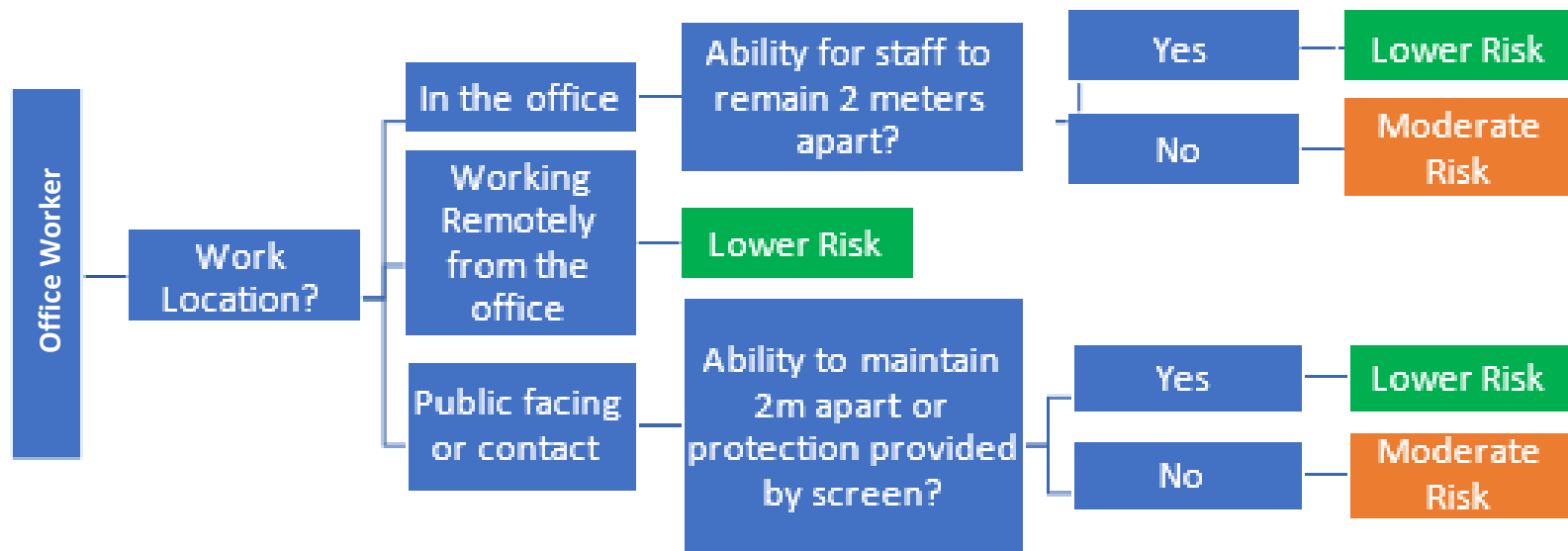
POSITION RISK CHART ASSESSMENT

POSITION	LEVEL OF RISK	CONTROL PROCEDURES
Front Counter Staff Positions - Municipal Hall	Low to Moderate	Hand hygiene
Parks & Recreation facilities Front Counter Clerks, Program Leaders, Instructors	Low to Moderate	Hand hygiene
First Aid Attendants	Moderate	Hand hygiene and PPE (depending on injury)
Firefighter/First Responders	High	Hand hygiene, disposable gloves, turnout gear, goggles and/or face shield, N95 respirator
Lifeguard	Moderate	Hand hygiene
Supervisors	Low	Hand hygiene
General Staff	Low	Hand hygiene

OFFICE STAFF

Risk levels posed to office staff are dependent on the level of community transmission, where the workers are located (office or home), whether it is a front facing customer service office usually open to the public or a private office, and the size of staff in the office area. Figure 1 below identified risk levels based on different work type, location and capacity to allow for minimum of 2 meters distance apart.

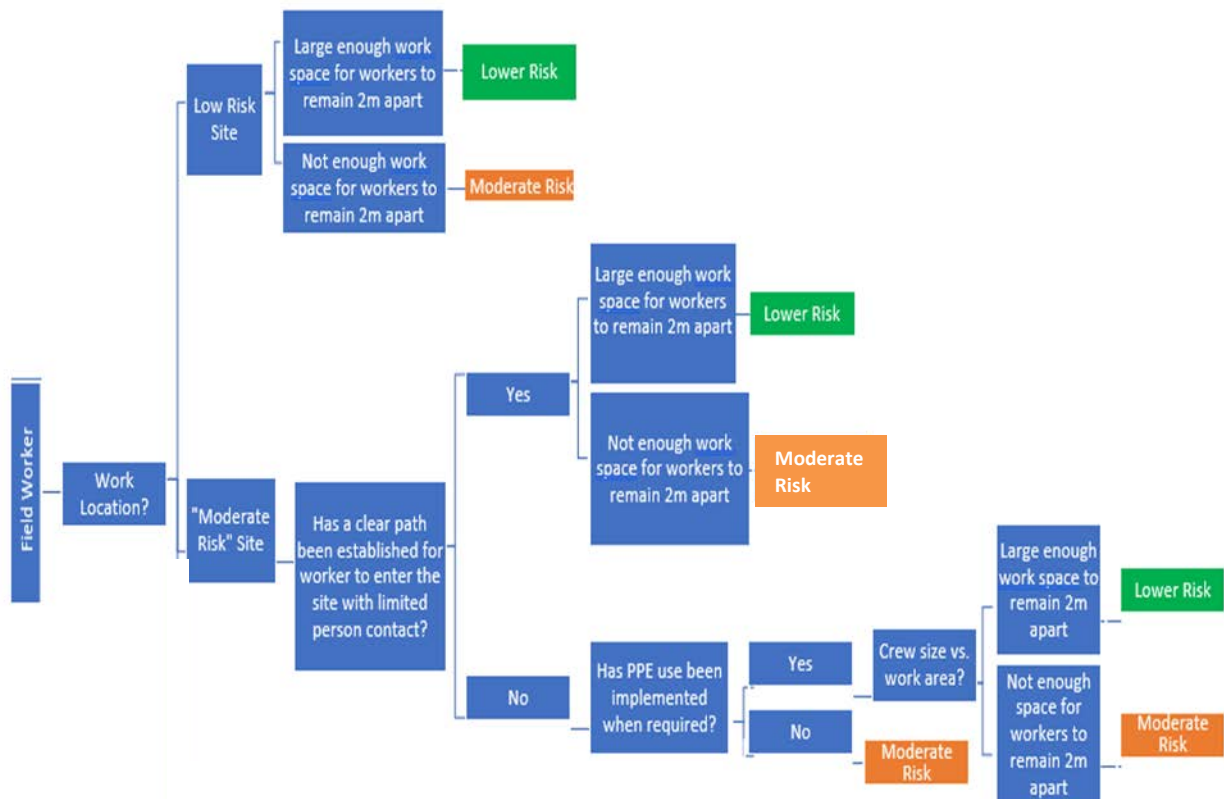
Fig. 1 Office Workers Risk Assessment



FIELD STAFF

Risk levels posed to field staff are dependent on the level of community transmission, where the worker is located and the size of the work crew. Figure 2 below identified risk levels based on different types of work type, location, and capacity to allow for a minimum of 2 meters distance apart.

Fig. 2 Field Worker Risk Assessment



RISK CONTROL






The Regulation requires the employer to implement infectious disease controls in the following order of preference (Hierarchy of Controls):

1. Elimination
2. Substitute
3. Engineering controls
4. Administrative controls
5. Personal Protective Equipment (PPE)

Hierarchy of Controls - Infectious Illness: COVID-19



<p>Elimination:</p>	<p>Elimination of face-to-face contact is the best control possible.</p> <ul style="list-style-type: none"> • Controls would include distance control at reception counters, relying on phone, email or regular mail to answer public questions. • If practicable, conduct financial transactions by electronic means rather than cash or cheque at the municipal counter. • Have Workers work remotely. • Work from home where possible, no contact with members of the public.
<p>Substitute:</p>	<p>Change the work process, person, substance, tool or equipment for a less hazardous one.</p> <ul style="list-style-type: none"> • Using forklift to lift materials instead of 2 persons. • Microsoft Electronic Team Meetings
<p>Engineering Controls:</p>	<p>Physical Barriers are an Engineering controls.</p> <ul style="list-style-type: none"> • Working from inside an enclosure when receiving bill payments or selling passes/tickets online for public recreation facilities or events. • Plexiglass counter shields which limit personal human contacts • Individual offices/ work pod separation or partitions • One-two person per vehicle, (Fire Trucks exempt) <p>Note: This may not prevent all exposure, Administrative and/or PPE maybe required</p>
<p>Administrative (Work Practice) Controls:</p>	<p>Administrative controls include hand washing and cough/sneeze etiquette.</p> <ul style="list-style-type: none"> • Education and Training & safe Work Procedures/practices • Cover your mouth and nose with a sleeve or tissue when coughing or sneezing. • Allow a reasonable personal distance space to reduce human-to-human transmission. • An increase in cleaning frequencies for shared work surfaces and equipment, including City operated vehicles. • Practices to increase physical distancing: visits by appointment to various other locations, own location or private home (with pre-screening), staggering shifts (days or times, lunches), usage schedules, screener (monitor number of visitors) • Worker Hygiene: Handwashing /hand sanitizing, cough etiquette • Cleaning and disinfecting: - High Frequency Touch Point Surfaces and Vehicles • Screening: Screening – self screening and self-reporting, contractor & visitor screening • Signage: physical distancing, covering face when cough/sneeze, don't touch face, Floor-markers and/or directional arrows, area in use or at maximum capacity • Communication (Health and Safety talks):_Reminders (email, outlook calendars, newsletters, meeting)
<p>Personal Protective Equipment (PPE):</p>	<p>Personal Protective Equipment is the last resort of mitigation.</p> <ul style="list-style-type: none"> • Wearing of masks, respirators, coveralls/turnout gear, gloves, goggles and/or face-shields. • The use of PPE is required in high-risk situations, such as dealing with infectious patients <p>See PPE Chart</p>

Hazard Risk Factors	Cloth Face Covering/ Non-Medical Mask	Respirator N95 or better Fit Tested	Gloves	Eye Protection Glasses, Face Shield, Physical Barrier	Apron/Gown/ Disposable Coverall
					
Close Proximity to Co-Workers	✓ Optional -If not able to maintain physical distancing	✗	✗	✓ If not able to maintain physical distancing	✗
Close Proximity to Public	✓ Optional -If not able to maintain physical distancing	✗	✗	✓ If not able to maintain physical distancing	✗
Close Proximity to Potential Irate Individual – Spitting/Coughing	✓	✗	✓ Optional	✓	✓ Optional
Close Proximity to Sick Persons	✓	✓	✓	✓	✓
Caring for a Sick Person	✓	✓	✓	✓	✓
Providing CPR/Procedure Producing Aerosolized Droplets on a Sick Person Non-medical mask must be placed on patient	✗	✓	✓	✓	✓
Entering Private Residence	✓ If not able to maintain physical distancing, or upon resident request due to vulnerable person	✗	✓ Optional Hand-hygiene mandatory	✓ If not able to maintain physical distancing	✓ Optional
Cleaning Biohazard /Splashing	✗	✓	✓	✓	✓
Cleaning Biohazard/ Non-splashing	✗	✗	✓	✗	✗
Handling Mail / Packages/Internal Paperwork	✗	✗	✓ Optional-Hand-hygiene preferred	✗	✗
Customer Service Counters	✓ If not able to maintain physical distancing or physical barriers are not in place	✗	✓ Optional if exchanging documents/ other materials with customers	✓ If not able to maintain physical distancing or physical barriers are not in place.	✗

SUGGESTIONS FOR VARIOUS CONTROL OPTIONS.

Below are some options for hazard controls beyond standard recommendations. Be sure to review the BC Government (Ministry of Health, BCCDC, Public Health Office, Fraser Health Authority, WorkSafe BC) safety recommendations for OHS practices and other work associations such as BCMSA, BCRFMA, suggestions for more ideas. Occupational Health & Safety will review these throughout the hazard and risk assessment process.

A number of recommendations are applicable to all common areas and have been summarized below.

PHYSICAL DISTANCING

Physical distancing means making changes in your everyday routines in order to minimize close contact with others. Some examples include but are not limited to:

- Identify Key Entrance and Exit Doors
- If practicable, reconfiguring the workplace to maintain appropriate distance between workers and public
- Hallway arrows designating direction, which would be helpful in buildings and some floors that can accommodate. Many work offices have narrow hallways which may be re-configured based on the new normal. Passing someone in the hallway is not considered close contact or a significant risk for exposure
- Limit Occupancy in common areas and post signs for the washrooms /lunchrooms/ print rooms etc....
- Elevator use – limit number of people using one elevator at a time depending on the size. Even large elevators have a maximum of 4 individuals.
- Mark lines on public side of counter to indicate 2 meters from staff working location
- Online video meetings and interviews
- Staggering start times, breaks and end times
- Using machines or other equipment to assist with job task usually performed by two workers (i.e. Lifting/carrying heavy objects)
- Providing a waiting area outdoors with markers to designate safe distances if it is safe to do so

CALCULATING AND MAINTAINING THE MAXIMUM NUMBER OF PEOPLE IN A RECREATION FACILITY TO SUPPORT PHYSICAL DISTANCING:

- It is critical to evaluate how many people can reasonably be in a facility and easily practice physical distancing of 2 metres between people to reduce the spread of COVID-19.

- It is strongly recommended that there are 5m² of unencumbered floor space per person, i.e. 5m²/person.
- This unencumbered space would be floor space minus floor space used for change rooms, desks, etc.
 - Take, for example, a recreation facility with 200m² of floor space with 70m² of desks/displays.
 - The store has 200m² - 70m² = 130m²* of unencumbered floor space for customers.
 - Maximum number of people allowed in the facility to support physical distancing would be: (130 m²) / (5 m²/person) = 26 people.

**Using the same example as above, but using feet instead of metres, a facility has 2153 sq. ft floor space with 753 sq. ft of desks/displays. The facility has 2153 sq. ft - 753 sq. ft = 1400 sq. ft of unencumbered floor space for customers. Using 53.8 sq. ft of unencumbered floor space per person, the maximum number of people allowed in the recreation facility to support physical distancing would be: 1400 sq. ft ÷ (53.8 sq. ft/person) = 26 people.*

- Monitor the number of customers and staff entering and leaving the store. Once the maximum number of persons for a recreation facility is reached, allow one person in for every person that leaves. Separate incoming and outgoing customer flows if possible.

PHYSICAL BARRIERS

Reduce exposure and diffusion of droplets generated by coughing or sneezing. This does not replace all other measures, nor does it eliminate all associated risks.

- Use clear barriers in customer service areas or between public/workers (where practical)
- Point of Sale machines – encourage payment online or without cash.
- Ensure POS machines accept “tap” or can be disinfected between use.

HYGIENE PRACTICES

Best way to prevent the spread of COVID-19 is to follow basic hygiene measures:

- Automatic/no touch hand sanitizers, bathroom water faucets and soap dispensers
- No touch Automatic doors at high volume entrance/exits ie. City Hall sliding door
- Stay home when you are sick
- Centralized cleaning station that carries supplies (disinfectants and hand sanitizers)
- Cover when coughing/sneezing
- Wash hands with soap and water for a min of 20 seconds
- Field or outdoor hand washing stations

- Process for picking up or dropping materials – tables, counters, bins.
- Clean and disinfect high touch points or shared items (tools, printers, etc.....)
- Workspaces should not be shared where there is a computer station and phone without disinfection between use.
- Limit the use of physically opening doors – auto doors where possible with proximity readers, or keep doors open in areas that do not have public access

PERSONAL PROTECTIVE EQUIPMENT

Personal protective equipment (PPE) refers to kind of devices worn by the worker to protect against hazards in environment. PPE prevents the worker by creating a barrier between the potential hazard and worker.

Ensure you have completed a Risk Assessment for all tasks to determine appropriate level of PPE that is needed.

OTHER

HVAC plays a minor role in the control of COVID 19; social distancing and sanitization are key.

Increase outside fresh air if possible and exhaust is recommended.

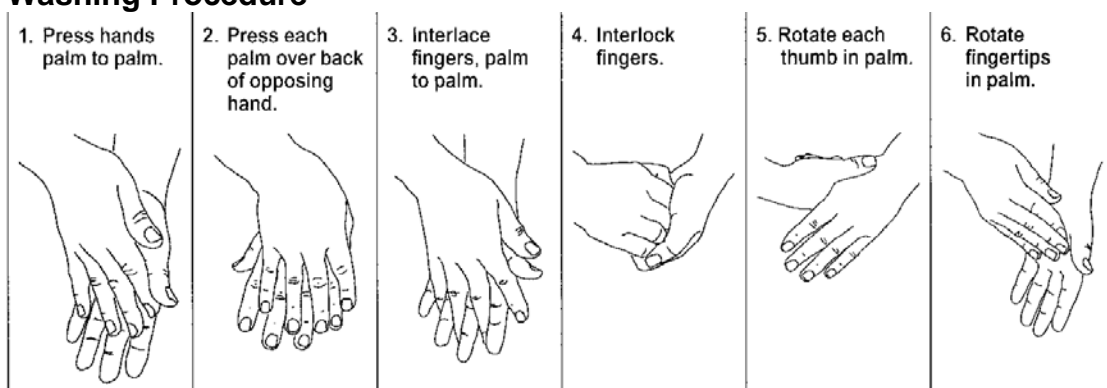
Ensure washroom exhaust is running. Consider maintaining relative humidity of 40% to 60%, if possible.

SAFE WORK PRACTICES

HAND HYGIENE

Hand washing, proper coughing and sneezing etiquette, and not touching your face are the key to the prevention of transmission and therefore minimize the likelihood of infection.

Hand Washing Procedure



Use soap and warm running water; it does not have to be hot to be effective. If water is unavailable, use an alcohol-based sanitizer with greater than 60% ethanol or 70% isopropanol content. Follow the manufacturer's instructions on how to use the cleanser. Wash and rinse your hands for at least twenty seconds.

Proper hand washing helps prevent the transfer of infectious material from the hands to other parts of the body – particularly the eyes, nose and mouth – or to other surfaces that are touched.

Wash your hands “well” and “often” with soap and water for at least 20 seconds (the time it takes to hum the “Happy Birthday” song twice). If soap and water is not available, use an alcohol-based hand rub to clean your hands.

“Often” includes:

- upon arriving and when leaving work
- after coughing or sneezing
- after bathroom use
- when hands are visibly dirty
- before, during and after you prepare food
- before eating any food (including snacks)

“Well” means:

- wet hands and apply soap
- rub hands together vigorously for at least 20 seconds ensuring the lather covers all areas – palm to palm, back of hands, between fingers, back of fingers, thumbs, fingernails (using palm) and wrists
- rinse hand thoroughly with water
- dry your hands with paper towel (or a hand dryer), use the paper towel to turn off the tap and open the door, dispose of the paper towel

Additionally:

- Avoid touching your eyes, nose or mouth with unwashed hands
- Use utensils: consider using forks, spoons or toothpicks when eating and serving foods (especially snacks or “finger foods”)

COUGH/SNEEZE ETIQUETTE

All staff are expected to follow cough/sneeze etiquettes, which are a combination of preventative measures that minimizes the transmission of diseases via droplet or airborne routes. Cough/sneeze etiquette includes the following components:

- Cover your mouth and nose with a sleeve or tissue when coughing or sneezing to reduce the spread of germs
- Use tissues to contain secretions, and immediately dispose of any tissues you have used into the garbage as soon as possible and wash your hands afterwards
- Turn your head away from others when coughing or sneezing

USE OF FACIAL COVERINGS/NON-SURGICAL MASKS

Wearing a cloth mask is a matter of personal choice. Some people can spread the virus when they have very mild symptoms or may be unaware that they are infected. In this case, wearing a mask can help in containing your own droplets and protect others but it will not protect you from COVID-19. 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

Wearing a cloth mask or face covering is a matter of personal choice and is permissive.

As per safe work procedure, wearing a facial covering/non-surgical mask is supported when working in close contact for more than a short period of time.

USE OF SURGICAL MASKS

Masks should be used by sick people to prevent transmission to other people. A mask will help keep a person's droplets in.

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) (BC Centre for Disease Control).

It is not recommended that people who are well wear a mask to protect themselves from respiratory illnesses, including COVID-19. You should only wear a mask if the Public Health Officer or a healthcare professional recommends it. A facemask should be used by people who have COVID-19 and are showing symptoms. This is to protect others from the risk of getting infected. The use of facemasks also is crucial for healthcare workers and other people who are taking care of someone infected with COVID-19 in close settings (at home or in a healthcare facility) (Centre for Disease Control).

USE OF N95 RESPIRATORS

For COVID-19, the N95 mask is typically worn by workers directly involved in an **aerosol** generating medical procedure (as defined by Health Canada). An N95 mask is a protective barrier that is worn on the face, covers at least the nose and mouth, and is used to contain large droplets generated during coughing and sneezing. A fit tested N95 mask helps minimize the spread of potentially infectious material.

NOTE: If a worker's job tasks previously required them to wear respiratory protection when performing certain tasks than they must continue to follow the SWP and wear the required

PPE. Surrey Fire Services will have additional responsibilities and/or OG's as it relates to PPE.

SOURCE OF EXPOSURE

Employees may be exposed to COVID-19 from a range of different sources. Be aware that exposure to COVID-19 could happen at any point during your day and during any task that involves close contact with others or contaminated surfaces at home, work or in the community.

PREVENTION STEPS TO SLOW THE SPREAD OF VIRUS:

Steps we MUST follow to prevent the spread of all types of respiratory illnesses, including COVID-19 in our workplace include:

KEY PREVENTION STEPS:

1. Social/Physical distancing of 2M is an essential strategy for the control of this infectious disease.
2. Staying home when you are sick and also keeping a safe distance, (at least 2m or 6 ft away) from someone else.
3. Self-screen for symptoms before you come to work.
4. Greeting each other in a positive manner with a wave instead of a handshake (ensuring that you are two meters away).
5. Wash your hands often with soap and water for at least 20 seconds. Antibacterial soap is NOT required to prevent the spread of COVID-19. If soap and water is not available, use an alcohol-based sanitizer with greater than 60% ethanol or 70% isopropanol content.
6. Avoid touching your eyes, nose, and mouth with unwashed hands or gloved hands.
7. Cover your cough or sneeze with a disposable tissue, then throw the tissue in the trash or use the crease of your elbow when you sneeze.
8. Avoid close contact with people who are sick.
9. Clean and disinfect frequently touched objects and surfaces i.e. door handles, light switches, tables, keyboards, phones, handles, toilets, sinks, steering wheels, etc.
10. Advise your supervisor or OHS if you have had a positive Covid-19 test. Test results will be kept confidential. OHS must be advised of COVID-19 Positive Test so the Workplace Contact Tracing protocol can be implemented.

11. Stay home and self-isolate when you are sick or have flu like symptoms (even if they are mild symptoms).
12. Avoid close contact meetings, use tools like Microsoft Team Meetings to help maintain physical distancing.
13. Field workers should hold their safety crew talk meetings outside, while maintaining 2m physical distancing.
14. Utilizing the interim flexible work program (i.e. work from home) if possible.
15. Know the location of the hand sanitizer/disinfectant for your jobsite.
16. Contact your supervisor if you need any guidance and direction to perform your work safely during this pandemic.
17. Avoid any unnecessary travel at this time, follow the instructions of the Public Health Officer
18. Embrace change. Things are changing daily; you should expect regular communications from your supervisor; and you will need to be prepared that you may be expected to change your routines

Examples include:

- Maintaining social distancing
- Cleaning and disinfecting your tools and work surfaces after every use
- Wellness questions being asked to ensure you are not sick before entering sites or random checks

19. Limit your time in common places.
20. Supervisors following the absence from work workstation cleaning and disinfection protocol.
21. Mandatory online COVID-19 awareness training for all workers.
22. Managers/Supervisors to conduct Worksite COVID-19 Safe Practice Review
23. Review and follow safety practice guidelines, safe work procedures and safety talk information- i.e. Contractor Enhanced Screening, Visitor Screening, Handling Mail During a Pandemic, Operational Field Staff Safety, Physical Distancing and Municipal Vehicle,

WHAT SHOULD YOU DO IF YOU HAVE SYMPTOMS* OR HAVE BEEN EXPOSED?

As a precaution, the Ministry of Health asks that if you have a fever or cough to self-isolate for **10 days AND** until your fever is gone **AND** you are feeling better. If you are uncertain and/or feel very sick, contact your family doctor/nurse practitioner or call 8-1-1. To monitor your fever, take your temperature every day. If you are having other symptoms such as:

- Sore Throat
- Headache
- Chills
- Muscle Aches/Fatigue
- Loss of Appetite
- Nausea and Vomiting
- Runny Nose
- Diarrhea
- Loss of Sense of Smell/Taste

*the symptom list will increase as we learn more about this virus. The most updated symptom information can be found at the BCCDC or <https://www.healthlinkbc.ca/>

Please self-isolate until you are feeling better, unless your symptoms are related to your usual seasonal allergies. You are encouraged to use the self-assessment tool, developed by the BCCDC and the BC Ministry of Health, this tool will help determine whether you may need further assessment or testing for COVID-19. The self- assessment tool is intended for assessment of COVID-19 only. Your symptoms may not be related to COVID-19 and could require you to seek medical attention.

Use the BCCDC Self-Assessment Tool: <https://covid19.thrive.health>



BC COVID-19 Symptom Self-Assessment Tool

Stay Home and self-isolate if you have been in close contact with:

- A person with COVID-19 (probable or confirmed) while they were ill (cough, fever, sneezing, or sore throat); or
- A person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing, or sore throat).

Self-isolate as there is a chance you could get sick since it has been less than 14 days since your exposure. You should self-monitor for any symptoms, if you begin to develop

symptoms you should take the self-assessment test again or contact 8-1-1 or your general practitioner for guidance and direction.

EMPLOYEE ASSISTANCE PROGRAM & NOT MYSELF TODAY

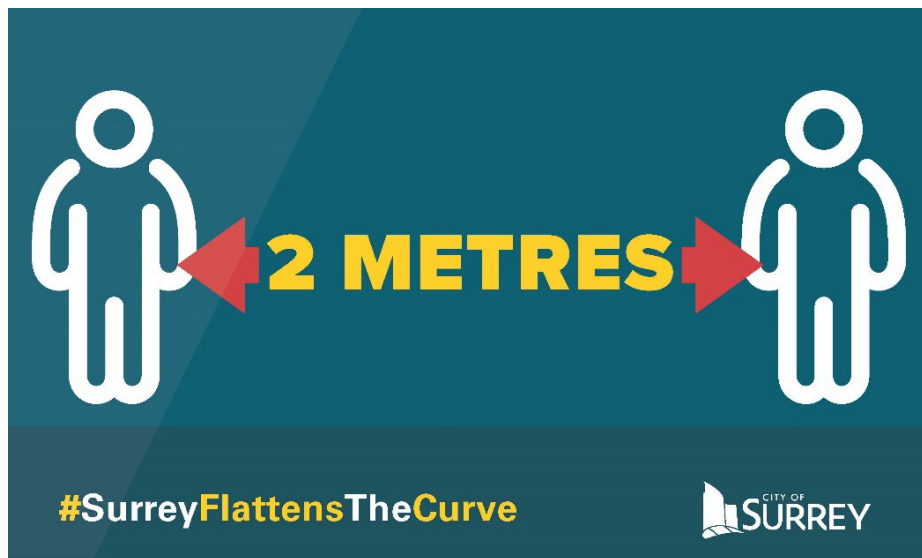
These are unprecedented times and you may be feeling anxious. As a City of Surrey employee, the services of our Employee Family Assistance Program (EFAP) are available for you. Please call EFAP at any time at (604) 732-6933 or 1-800-667-0993. The EFAP provides confidential, free counselling service to City staff and their dependents.

Mental health is everyone’s business. **Not Myself Today** is an evidence-based, practical solution is to help transform mental health at work. Learn to support your own mental health, and to support those with mental health issues. You are encouraged to create or log into the Not Myself Today account (use the staff access code: RZHGEM) and check out the Mindful Moments guided meditation series in the Mental Health Toolkit.

DEFINITION

Term	Definition
Coronavirus	A large family of zoonotic viruses that cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS-CoV) and Severe Acute Respiratory Syndrome (SARS-CoV).
COVID-19	Novel corona virus that has not previously been identified in humans.
COVID-19 Symptoms	Fever, cough, difficulty breathing, pneumonia in both lungs. In severe cases, infection can lead to death.
Close Contact	Being within approximately 2 metres of a COVID-19 case for a prolonged period (e.g. living with or caring for a COVID-19 case); OR Having direct contact with infectious secretions of a COVID-19 case (e.g. being coughed on).
Isolate	Individuals need to be isolated if they: Have symptoms, even if mild, associated with COVID-19 or Have been diagnosed with COVID-19 or Are waiting for laboratory test results or Have been advised to do so by your Public Health Authority Isolating yourself means to stay home until the local public health authority says you are no longer at risk of spreading the virus and to avoid contact with others. If symptoms worsen, immediately contact your healthcare provider or Public Health Authority and follow their instructions.

Self-Isolate	<p>Individuals need to self-isolate if they:</p> <ul style="list-style-type: none"> • Have no symptoms and • May have been exposed to COVID-19 as a result of either travelling out of Canada in the last 14 days or coming into close contact with someone diagnosed with COVID-19 or • Have been asked to do so by your public health • Self-isolation means to stay at home, monitor for symptoms for 14 days, and avoid contact with others.
Self-Monitoring	<p>Individuals need to self-monitor if they:</p> <p>Have no symptoms and May have been exposed to COVID-19 in the last 14 days or Are in close contact with older adults or people who are medically vulnerable or Have been asked to do so by your Public Health Authority</p> <p>Self-monitoring means to monitor yourself for 14 days for symptoms of respiratory illness (e.g. fever, cough, difficulty breathing) and to avoid crowded places and increase your personal space from others whenever possible</p>
Travel Advisory	<p>An official global travel advisory is currently in effect to avoid all non-essential travel outside of Canada until further notice and to avoid all cruise ship travel.</p>
Zoonotic Disease	<p>Diseases that are transmitted between humans and animals.</p>



WHAT IS PHYSICAL DISTANCING?

This means making changes in your everyday routines in order to minimize close contact with others, including:

- avoiding crowded places and non-essential gatherings
- avoiding common greetings, such as handshakes
- limiting contact with people at higher risk (e.g. older adults and those in poor health)
- keeping a distance of at least 2 arms lengths (approximately 2 meters) from others, as much as possible
- Passing someone on the sidewalk or in the hallway is not considered close contact or a significant risk for exposure

IMPORTANCE OF PHYSICAL DISTANCING

In order to decrease transmission of COVID-19, we must practice physical distancing.

Working outdoors does have a dilutional effect that disperses droplet particles, however at this time, we don't have enough scientific information on viral load and infection rates therefore we must be vigilant and maintain a 6 ft (2m) distance from each whether we are inside or outside until such time the BCCDC advises otherwise.

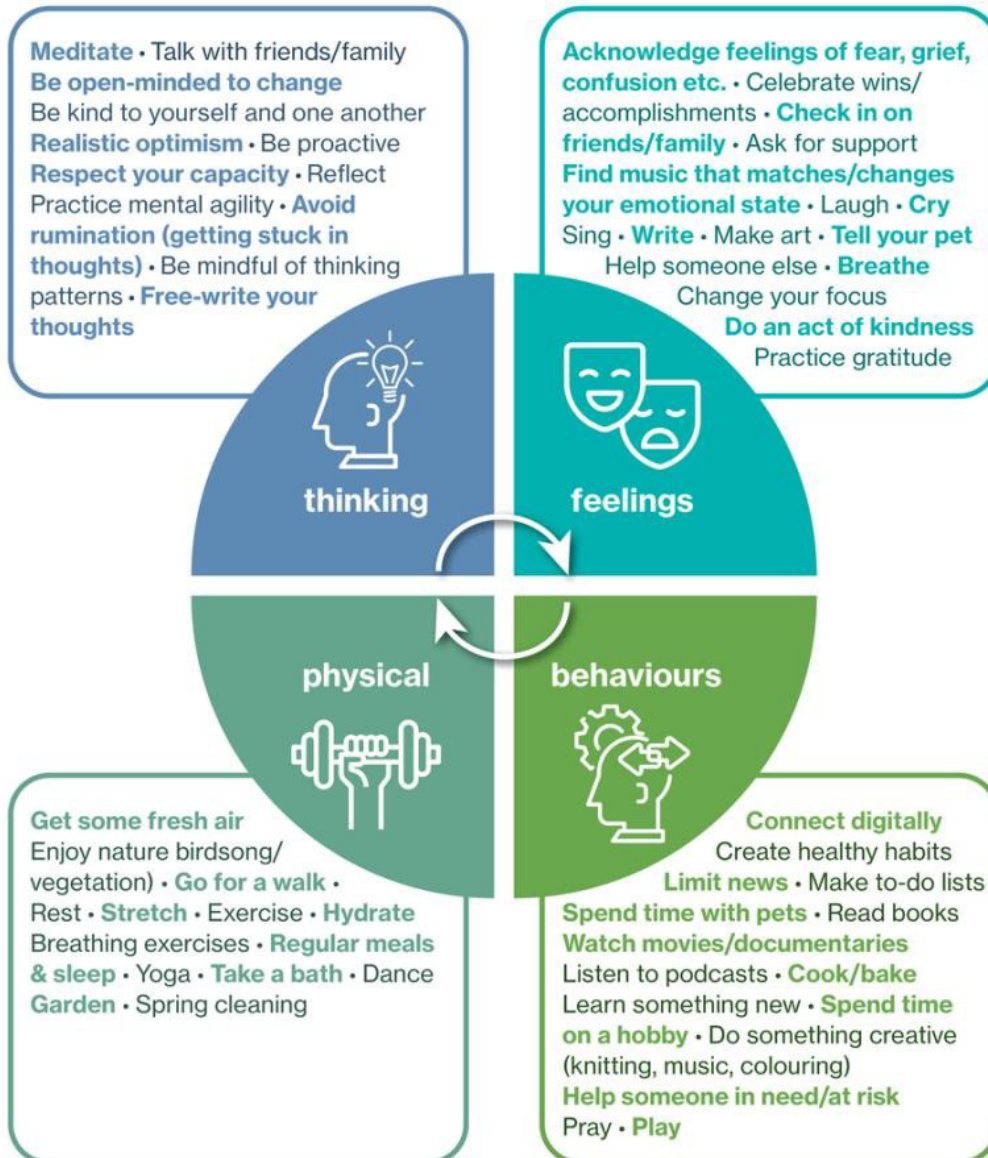
Physical distancing is crucial because we don't have a vaccine or effective treatment for COVID-19.

If someone accidentally enters the 2m safety zone, you can politely say, "would you mind just being a little further away from me? We are supposed to keep six feet away from each other. I will be done my task in just a minute."

Self-Care & Physical Distancing

During this stressful time, it is important to care for your mental health!

Balancing a variety of activities helps maintain overall health. Adding structure can help to alleviate stress, but don't force productivity. Here are some suggestions of how to manage stress and practice self-care. Please be kind to your body and mind.



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



Hand Hygiene

SOAP OR ALCOHOL-BASED HAND RUB: Which is best?



Either will clean your hands: use soap and water if hands are visibly soiled.



Remove hand and wrist jewellery

HOW TO HAND WASH

 <p>1 Wet hands with warm (not hot or cold) running water</p>	 <p>2 Apply liquid or foam soap</p>
 <p>3 Lather soap covering all surfaces of hands for 20-30 seconds</p>	 <p>4 Rinse thoroughly under running water</p>
 <p>5 Pat hands dry thoroughly with paper towel</p>	 <p>6 Use paper towel to turn off the tap</p>

HOW TO USE HAND RUB

 <p>1 Ensure hands are visibly clean (if soiled, follow hand washing steps)</p>
 <p>2 Apply about a loonie-sized amount to your hands</p>
 <p>3 Rub all surfaces of your hand and wrist until completely dry (15-20 seconds)</p>

CITY OF SURREY CORONAVIRUS PREVENTION TIPS POSTER



Coronavirus Prevention Tips*

	✓	Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer.
	X	Avoid touching your eyes, nose, and mouth with unwashed hands.
	✓	Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
	X	Avoid close contact with people who are sick.
	✓	Clean and disinfect frequently touched objects and surfaces.
	✓	Stay home when you are sick.
	✓	Physical distancing means making changes in your everyday routine in order to minimize close contact with others. Keep about 2m apart when possible.

*BC Ministry of Health & BCCDC

MANAGERS/SUPERVISORS WORKSITE COVID-19 SAFE PRACTICE REVIEW

DATE: _____ Department/Division: _____

Location: _____ Work Crew/Section: (ie.HR, Water Crew, P&D 3 floor, etc.) _____

Met with the following staff:

- | | | |
|----|----|----|
| 1. | 2. | 3. |
| 4. | 5. | 6. |
| 7. | 8. | 9. |

Yes No N/A

- All staff at the worksite were following regular safe work practices.
- All contractors working with crew at the worksite were following safe work practices.
- Staff were observed more than two meters (six feet) away from one another or they had protective contact measures in place. If workers are unable to work greater than two meters apart depending on the task i.e. working in a trench on a specific task- are workers wearing masks or half face respirators.
- Do staff have easy access to at least two of the following safety cleaning/disinfectant supplies on site:
- Disposable disinfectant cloth or spray disinfectant and/or paper towel
 - Washrooms with soap and water or hand sanitizer
 - Water jug filled with water and access to soap
- Staff and contractors at the specific work location were not displaying any flu like symptoms (coughing/sneezing, fever, difficult breathing).
- The following good safety behaviors were observed:

- The following coaching was provided:

Reviewed/Discussed Key COVID-19 Preventative Measures:

- Wash your hands often with soap and water or alcohol-based hand sanitizer.
- Sneeze and cough into your sleeve. If you use a tissue, discard immediately in the trash and wash your hands afterward.
- Avoid touching your eyes, nose, or mouth with unwashed hands.
- Avoid contact with people who are sick.
- Stay home if you are sick.
- Avoid high-touch areas, where possible, or ensure you clean your hands after.
- Disinfect tools that are being used frequently by multiple employees.
- If you are ill, notify your supervisor immediately, complete the Covid-19 self-assessment test, call 8-1-1 or your general practitioner and follow the instructions you get.
- Physical Distancing -Importance of maintaining two meters (six feet) away from one another.

Comments: _____

Manager/Supervisor) Please Print Name: _____ Date: _____

Please completed and send a copy of this document to safety@surrey.ca

GLOVE DONNING AND REMOVAL

Technique for donning and removing non-sterile examination gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

I. HOW TO DON GLOVES:



1. Take out a glove from its original box



2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)



3. Don the first glove



4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist



5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand

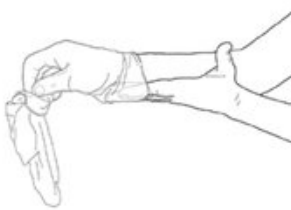


6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

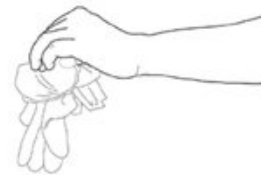
II. HOW TO REMOVE GLOVES:



1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out



2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove



3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

INSTRUCTIONS FOR FITTING N95 RESPIRATOR

The following instructions must be followed **each time** the respirator is worn. Before donning, inspect the respirator to ensure it is not damaged, soiled, or crushed and the straps are intact with good elasticity. Replace the respirator with a new one if any of these problems are observed.



Cup the respirator in your hand with the nosepiece facing your fingertips and the straps hanging below the hand.



Position the respirator under your chin and tilt the nosepiece onto your nose.



Pull the top strap up and position it on the crown of your head



Pull the bottom strap up and position it on the nape of your neck.



Form the nosepiece across the bridge of your nose using two fingers on each hand, press inward, moving your fingertips down both sides of the nosepiece.



Seal check the respirator by placing your hands gently on the respirator and exhaling. If air leaks around your nose, readjust the nosepiece as described in step 5. If air leaks at the respirator edges, adjust the straps along the sides of your head and do another fit check.

FLAT-FOLD THREE PANEL STYLE

The following instructions must be followed **each time** the respirator is worn. Before donning, inspect the respirator to ensure it is not damaged, soiled, or crushed and the straps are intact with good elasticity. Replace the respirator with a new one if any of these problems are observed.

1



Remove respirator from package and hold with straps facing up. Place the bottom strap under the centre flap (where the ATTENTION statement is located)

2



Open top and bottom panels, bending the nosepiece in a slight arc. Straps should separate when panels are open. Ensure bottom panel is unfolded and completely opened.

3



Place the respirator on your face ensuring the foam is on your nose and the bottom panel is under your chin. Hold the panel securely in place while pulling the straps over your head.

4



Place the bottom strap on the nape of your neck and the top strap on the crown of your head.

5



Form the nosepiece across the bridge of your nose using two fingers on each hand, press inward, moving your fingertips down both sides of the nosepiece.

6



Fit check the respirator by placing your hands gently on the respirator and exhaling. If air leaks around your nose, readjust the nosepiece as described in step 5. If air leaks at the respirator edges, adjust the straps along the sides of your head and do another fit check.

CITY OF SURREY FACILITY RE-OPENING CHECKLIST

FACILITY NAME:			
ADDRESS:			
Approximate gross square footage of open space to the public:			
# of public allowed into Facility: 5 m ² per person of unencumbered space = _____ occupancy			
Operations must implement all applicable measures listed below and be prepared to explain why any measure was not implemented or not applicable to the operation.			
A. SIGNAGE			
<input type="checkbox"/>	Signage at each public entrance of the facility to inform all employees and visitors that they should: avoid entering the facility if they have flu like symptoms (i.e. fever, cough, fatigue, etc....)		
<input type="checkbox"/>	Occupancy limits are posted in the following locations <table style="width: 100%; border: none;"> <tr> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ✓ Entrances of Space/Facility ✓ Common areas ✓ Washrooms ✓ Lunchrooms ✓ Meeting Rooms </td> <td style="width: 50%; vertical-align: top;"> <ul style="list-style-type: none"> ✓ Elevators ✓ Fitness center ✓ Changeroom ✓ Classrooms ✓ Staff Rooms </td> </tr> </table>	<ul style="list-style-type: none"> ✓ Entrances of Space/Facility ✓ Common areas ✓ Washrooms ✓ Lunchrooms ✓ Meeting Rooms 	<ul style="list-style-type: none"> ✓ Elevators ✓ Fitness center ✓ Changeroom ✓ Classrooms ✓ Staff Rooms
<ul style="list-style-type: none"> ✓ Entrances of Space/Facility ✓ Common areas ✓ Washrooms ✓ Lunchrooms ✓ Meeting Rooms 	<ul style="list-style-type: none"> ✓ Elevators ✓ Fitness center ✓ Changeroom ✓ Classrooms ✓ Staff Rooms 		
<input type="checkbox"/>	Signage posted at each public entrance of the facility and parking areas enforcing the 2m physical distancing protocol.		
<input type="checkbox"/>	Hand Hygiene and Respiratory /Personal Etiquette signage Encouraging all staff, patrons, and swimmers to wash their hands often and cover their coughs and sneezes.		
<input type="checkbox"/>	Clear signage is in place identifying entry and exit points of facilities and activity areas, directional signage, and floor markings in place to manage traffic flow.		
<input type="checkbox"/>	Posting of cleaning schedules for break rooms, washrooms and other common areas are in place.		
<input type="checkbox"/>	Expectations for users to sanitize equipment, before and after each use is posted.		
B. COMMUNICATION			
STAFF CONSIDERATION			
<input type="checkbox"/>	Staff need to be aware that COVID-19 OHS information available on the OHS intranet.		
<input type="checkbox"/>	All employees have been instructed to maintain at least six feet (2m) from customers and from each other.		
<input type="checkbox"/>	Advise staff that there is a COVID-19 inquiry email COVID-19Inquiries@surrey.ca		
<input type="checkbox"/>	Copies of the City's COVID-19 Occupational Health and Safety Plan have been distributed to all employees and is posted on site.		
PUBLIC CONSIDERATIONS			
<input type="checkbox"/>	Broadcasting/communicating regular announcements about how to stop the spread on PA/monitor system(s).		

<input type="checkbox"/>	Announcements will be made 30, 15 and 5 minutes before the end of each session. Visitors/customers will be informed at time of registration to not arrive more than 10 minutes early before their program start time. Visitors will not be allowed in early.
<input type="checkbox"/>	Participant awareness – communication to participants in advance of their session about personal health, new expectations, rules, and limitations for participation. Individuals exhibiting signs of illness onsite will be addressed.

C. EDUCATION AND TRAINING	
<input type="checkbox"/>	All staff that are working in the facility have received COVID-19 OHS Awareness Training
<input type="checkbox"/>	The number of staff working in the Facility is: _____ The number of staff who have received COVID-19 education and training is: _____
<input type="checkbox"/>	Employees understand the hazard/control – and understand that PPE is last option
<input type="checkbox"/>	Managers/Supervisors will conduct preventative measure reviews using online tool at regular basis
<input type="checkbox"/>	Safety Board in place with safety policy/Joint Safety Committee minutes and safety talks posted
<input type="checkbox"/>	Violence in the Workplace procedure reviewed with all staff. Ensure workers who are expected to manage line-ups of visitors and/or customers are trained in what your protocols are. Ensure that they have support and strategies for dealing with the public who may be unwilling or who are unable to understand your approach to managing volumes.
<input type="checkbox"/>	Working Alone procedure reviewed and communicated
<input type="checkbox"/>	Discussed with staff General Health and Safety - incident reporting, work refusal, safety concerns, safe work procedures
<input type="checkbox"/>	Instruction on cleaning/disinfection PPE including Face Coverings provided to staff
<input type="checkbox"/>	Procedures for COVID-19 cases and/or outbreaks is in place and all staff are trained

D. MEASURES TO PROTECT EMPLOYEE HEALTH	
<input type="checkbox"/>	All employees have been told not to come to work if they are sick or have flu like
<input type="checkbox"/>	Reminder system for staff to Self-Screen before coming into work (Each Shift) <ul style="list-style-type: none"> <input type="checkbox"/> Self-Screening Questions <ol style="list-style-type: none"> 1) Do you have any of the following symptoms: fever, new cough, difficulty breathing, or a combination of these symptoms 2) Have you travelled outside Canada within the last 14 days? 3) Have you been advised by Public Health Authority, BC COVID-19 symptoms self-assessment tool or your family physical to self-monitor or self-isolate in the last 14 days? 4) Have you been in close contact with a person who has been confirmed with or
<input type="checkbox"/>	Protections for Vulnerable Staff (i.e. older workers with chronic medical condition that puts them at greater risk, staff with weakened immune system,). Potential options such as telework or modified job responsibilities that reduce interactions should be considered. Seek direction from Human Resources.

<input type="checkbox"/>	Assigning staff to one facility only, they must avoid travel to other facilities. This will make contact tracing easier should someone be exposed to COVID-19 infected person or have signs/symptoms in the workplace.
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E. CONTRACTOR GUIDELINES

<input type="checkbox"/>	Contractors and other visiting workers that will spend more than 15 minutes in a facility and will be in close proximity to City workers must sign in/out.
<input type="checkbox"/>	Enhanced Contractor screening form will be completed prior to allowing contractors to work at the facility. All Contractors MUST Complete Surrey’s Enhanced Screening Guidelines prior to commencing any work. https://citynet.surrey.ca/Exempt-COVID19/Documents/Covid-19%20City%20of%20Surrey%20Contractor%20Enhanced%20Screening%20Guidelines.pdf

F. PUBLIC COMING INTO A CIVIC FACILITY (CONSIDERATIONS)

<input type="checkbox"/>	Develop protocols to screen members of the public coming into the facility (no temperature checks). Screening Questions for members of the public <ol style="list-style-type: none"> 1) Do you have any of the following symptoms: fever, new cough, difficulty breathing, or a combination of these symptoms 2) Have you just returned from outside of Canada within the last 14 days? 3) Have you been advised by Public Health Authority, the BC COVID-19 symptoms self-assessment tool or your family physician to self-monitor or self-isolate in the last 14 days? 4) Have you been in close contact with a person who has been confirmed with or probable COVID-19 case (family or friend that you live with) in the last 14 days?
<input type="checkbox"/>	Consider restricting walk-ins, and instead have the public schedule appointments.
<input type="checkbox"/>	Post an employee at the entrance to ensure the maximum number of customers in the facility is not exceeded.
<input type="checkbox"/>	Time limits are in place for use of equipment and or program participation and public are made aware that these are in place for the health and safety of everyone.

G. PHYSICAL DISTANCING CONSIDERATIONS

STAFF SPACE CONSIDERATIONS	
<input type="checkbox"/>	Workstations are separated by at least 2m (6 ft). Workers are not positioned side by side. Physical barriers will need to be installed.
<input type="checkbox"/>	For workstations that do not meet the physical distancing guidelines and should not be used, consider posting decals/signs or removing chairs to discourage use.
<input type="checkbox"/>	Create rotating schedules to ensure you don’t exceed occupancy limits.
<input type="checkbox"/>	Individuals that can carry on their work duties from home have been directed to utilize the city’s Interim Flexible-Work-Program. This program guideline is located on the link shared at the end of this document. Number of staff working from home _____ Number of staff working in facility _____

<input type="checkbox"/>	Limit the number of people in meeting rooms and post occupancy limits on doors to ensure that 2m is easily maintained.
<input type="checkbox"/>	Break times /lunch times are staggered
<input type="checkbox"/>	Barriers are installed where workers cannot keep physically distant from co-workers, or others.
<input type="checkbox"/>	We have installed physical barriers at public facing counters
<input type="checkbox"/>	Limit the number of people in lunchrooms/break rooms/rest rooms have an occupancy limit
<input type="checkbox"/>	Vehicle sharing - Ideal 1 person with a 2 max. per vehicle, except fire apparatus. Protocol is located on the link shared at the end of this document.

PUBLIC SPACE CONSIDERATIONS

<input type="checkbox"/>	Separate entrance and exit areas if possible (use delineator/ stanchions/floor markings if needed)
<input type="checkbox"/>	Markings for 2m distancing at front counters is in place
<input type="checkbox"/>	Establish one-way flow through facilities and set up delineator/stanchions/floor markings at designated areas to manage customer flow
<input type="checkbox"/>	Place floor markings at least six feet apart in customer queueing line areas inside the facility and walkways at public entrances with signs directing customers to use the markings to remain distant. Mark increments of acceptable social distance on floors or where queues could form
<input type="checkbox"/>	Floor decals in elevators to indicate where passengers should stand and which way to face (one decal in each corner). Limit numbers in elevators
<input type="checkbox"/>	Equipment and furnishings that do not allow for 2m distancing are removed and securely stored away from public.
<input type="checkbox"/>	Pre-registration is in effect wherever possible for any programs or services to manage capacity and crowd control.

SHARED SPACES CONSIDERATION

<input type="checkbox"/>	Control access to entry points for workers, customers and deliveries and consider having limited points of entry/exits.
<input type="checkbox"/>	Entrance and exit routes are clearly marked for main buildings as well as interior program spaces.
<input type="checkbox"/>	Close spaces where people may spend a longer time in the company of others
<input type="checkbox"/>	Plexi Glass Barriers installed where needed
<input type="checkbox"/>	Remove seating in common areas to maintain occupancy limits and 2m physical distancing
<input type="checkbox"/>	Remove seating and shared equipment/toys from lobbies and common areas to minimize congregating. Store in secure location away from public.
<input type="checkbox"/>	Consider instituting one-way aisles to facilitate physical distancing in narrow hallways or pathways.

H. CLEANING /SANITIZATION CONSIDERATIONS

STAFF SPACE CONSIDERATION

<input type="checkbox"/>	Lunchroom items that need to be cleaned and disinfected: <ul style="list-style-type: none"> • Touch points on refrigerators, microwaves, dishwashers, coffee makers, kettles • Tables • Chairs • Counters
<input type="checkbox"/>	Staff have been instructed not to leave dirty dishes/cutlery in the kitchen.
<input type="checkbox"/>	Employee(s) assigned to disinfect items frequently touched, preferably after each use.
<input type="checkbox"/>	Break Rooms: Cleaned daily as part of regular rounds
<input type="checkbox"/>	WorkStation cleaning protocols are located on the link shared at the end of this document
<input type="checkbox"/>	Touch points such as door handles, handrails, elevator buttons, etc. are wiped down with disinfectant
<input type="checkbox"/>	Soap and water are available to all employees at the following location(s): _____ _____
<input type="checkbox"/>	Disinfectant and Related supplies (i.e. paper towels) are available to all employees at the following location(s): _____
<input type="checkbox"/>	Employees are allowed frequent breaks to wash their hands.
PUBLIC SPACE CONSIDERATIONS	
<input type="checkbox"/>	Upon entering Surrey facilities all visitors/customers must sanitize their hands.
<input type="checkbox"/>	Hand sanitizer is available to the public at or near the entrance, at front counters, and anywhere else inside the facility where people have direct interactions
<input type="checkbox"/>	Hand sanitizer stations are installed throughout the facility including at entrances and exits for worker and customer use. Hand Sanitizer are available at the following location(s): __ _____
<input type="checkbox"/>	Restrooms normally open to the public shall remain open to the public
<input type="checkbox"/>	Disinfecting supplies available for customers to use after/before using equipment.
SHARED SPACE CONSIDERATIONS	
<input type="checkbox"/>	We have included barrier cleaning in our cleaning protocols.
<input type="checkbox"/>	Do not share tools or equipment, unless it is immediately cleaned and disinfected
<input type="checkbox"/>	Break rooms, restrooms, and other common areas are being disinfected frequently, on the following schedule: _____
<input type="checkbox"/>	Designate periods of time between user groups to allow for proper cleaning and disinfecting after use or before use. Specific activity/area that requires this include: _____
<input type="checkbox"/>	Disinfecting all payment portals, pens, and styluses after use.
<input type="checkbox"/>	Provide and follow enhanced cleaning schedule and disinfection protocols. Increased rate of frequency is suggested for 2 – 4X daily

<input type="checkbox"/>	Disinfecting all high-contact surfaces frequently
<input type="checkbox"/>	Discourage people from sharing items that are difficult to clean, sanitize, or disinfect
<input type="checkbox"/>	Shared equipment is identified, and cleaning requirements built into cleaning schedules.
<input type="checkbox"/>	Other: Common areas are cleaned and disinfected a min. of <u>2X</u> daily.
<input type="checkbox"/>	Indoor touch points – inventory of high touch areas completed and identified in cleaning schedules. Consider propping open doors or installing motion sensors to reduce need to touch door handles, etc. where feasible and safe to do so.
<input type="checkbox"/>	No shared equipment or tools unless they are immediately cleaned and disinfected. Disinfectant supplies are available in areas where any shared equipment or tools are stored.
<input type="checkbox"/>	All flat surfaced countertops and desks clear of as many objects as possible for easier cleaning and disinfecting (e.g., admission counter, gift shop counter, staff and volunteer desks, simulator desk, kitchen counter, etc.)

I. OTHER CONSIDERATIONS	
MAIL/PARCEL /HANDLING	
<input type="checkbox"/>	Mail/books/parcels cool down periods (24-hour period), or wash hands often
<input type="checkbox"/>	Delivery of supplies to a designated area
<input type="checkbox"/>	Utilize Drop Off bins for the public to place their documents, plans, paperwork, books, etc.
<input type="checkbox"/>	Customer self-serve drink stations, water dispensers and water fountains are closed.
PUBLIC CONSIDERATIONS	
<input type="checkbox"/>	Appropriate control and access measures are in place for monitoring capacity and compliance with safe behaviours.
<input type="checkbox"/>	Touchless transactions for payment in place wherever possible.
<input type="checkbox"/>	Safe cash handling protocols are in place.
<input type="checkbox"/>	We have identified rules and guidelines for how workers should conduct themselves
<input type="checkbox"/>	List the areas that are to be off limits (no public access): _____ _____
<input type="checkbox"/>	Playfields and ball diamonds: Open for non-organized, passive use only with appropriate physical distancing.
<input type="checkbox"/>	Plan developed for Child Care/Camps/Activities
<input type="checkbox"/>	Provide for contactless payment systems or, if not feasible, sanitizing payment systems regularly. Describe: _____
STAFF CONSIDERATION	
<input type="checkbox"/>	Developed a plan for increasing staff capacity
<input type="checkbox"/>	Discourage staff from sharing any items that are food related.

<input type="checkbox"/>	Food service requirements are identified and measures in place for safe food handling.
<input type="checkbox"/>	Placing per-person time limits (i.e. 1 hr) in the facility will help others to also enjoy the facility. Explain why the limit is being established.
<input type="checkbox"/>	<p>Customers attend facility by appointment only. Patrons must make Appointments with 1.5-hour increments with a 30 min time buffer in-between to allow staff to clear the facility and conduct cleaning/sainting prior to allowing next group of user's entry and use.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Announcements will be made 30, 15, 5 min. before the end of each session <input type="checkbox"/> This will allow staff to contact trace should someone be identified COVID-19. <input type="checkbox"/> Members arriving early are prohibited from entering building until their reserved time and will be encouraged to wait in their vehicles. <input type="checkbox"/> Members must check in at desk <input type="checkbox"/> No passes will be sold <input type="checkbox"/> Seniors will be encouraged to stay at home or special time will need to be scheduled for Seniors only day? <input type="checkbox"/> Lockers will need to be spaced 2 to 3 lockers in-between, <input type="checkbox"/> Equipment needs signs on used/sanitized. <input type="checkbox"/> Equipment that is hard to sanitize will be prohibited <input type="checkbox"/> Patrons bring their own basketballs, no physical play

J. EMERGENCY PROTOCIOLS CONSIDERATIONS	
<input type="checkbox"/>	<p>Preparing for When Someone Gets Sick - Facilities must consider:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Isolating those who are sick. <input type="checkbox"/> Immediately separating staff, patrons, or swimmers with COVID-19 symptoms (for example, fever, cough, or shortness of breath). <input type="checkbox"/> Notifying health officials and close contacts. <input type="checkbox"/> Immediately notifying local health officials, staff and patrons, of any case of COVID-19 while maintaining confidentiality. <input type="checkbox"/> Informing those who have had close contact with a person diagnosed with COVID-19 to stay home and self-monitor for symptoms and follow BCCDC guidance if symptoms develop. Call 8-1-1. <input type="checkbox"/> Cleaning and Disinfection -Closing off areas used by a sick person and not using the areas until after cleaning and disinfecting them. <input type="checkbox"/> Waiting more than 24 hours before cleaning and disinfecting these areas. Ensuring safe and correct use and storage of chemicals, including storing products securely away from children.
<input type="checkbox"/>	Isolation room is identified and reserved for any instances of COVID on site.
<input type="checkbox"/>	Fire Plan in place
<input type="checkbox"/>	Updated facility emergency plans – first aid, PPE, response to fire alarms (mustering stations), crowd control, and protocol response to cases or outbreaks of COVID-19 etc. are in place.
<input type="checkbox"/>	First-Aid attendants have reviewed the COVID-19 first-aid protocol

K. PERSONAL PROTECTIVE EQUIPMENT	
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<input type="checkbox"/>	<p>It is permissible for Staff who want to utilize reusable cloth or disposable face coverings for work that requires high customer-volume environments who have frequent contact with the public. This may include, but is not limited to, cleaning public spaces, point of sale (passes, credit cards, etc.), and for first aid related emergencies, early childhood educators handling children</p>
<input type="checkbox"/>	<p>All employees that may have close contact during their shift(s) with the public or other employees are offered, at no-cost, a cloth face covering to be used when interacting with them</p>
<input type="checkbox"/>	<p>If staff opt to use Cloth, washable face coverings. It is highly recommended that coverings are cleaned each evening Protocol is located on the link shared at the end of this document</p>
<input type="checkbox"/>	<p>Staff should utilize disposable gloves for work that requires high customer-volume environments who have frequent contact with the public and cannot wash their hands often with soap and water. This may include, but is not limited to, cleaning public spaces, point of sale (passes, credit cards, etc.), and for first aid related emergencies. Care must be taken to not cross contaminate other areas or workspaces when disposable gloves are utilized. Before putting on gloves staff should clean hands with soap and water following hygiene guidelines noted above. Gloves that become worn or visibly contaminated should be replaced. When eye protection is needed, use goggles or eye shields. Personal eyeglasses are not considered eye protection. After removing PPE, always wash hands with soap and water for at least 20 seconds, if available.</p>

COVID-19 Resource [Link](#)

Any additional measures not included above should be listed on separate pages, which the facility should attach to this document.

GM/Division Manager Responsible for Plan: _____

Date: _____ **Signature:** _____

OHS Reviewed by: _____

Date: _____ **Signature:** _____