



7-2640-1-COVID-19

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COVID-19 Safety Plan

ADOPTED BY:

Chief Administrative Officer

AMENDED DATE:

N/A

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DEPARTMENT:

Corporate Services

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1. PURPOSE

The District of Ucluelet is committed to providing a safe and healthy workplace for all employees and recognizes that precautions should be taken to reduce the risk of transmission of respiratory illnesses including COVID-19, to ensure our employees and community remain as safe and healthy as possible, and so that our workplaces continue to operate as normally as possible during an outbreak.

This document assists all employees and volunteers, to:

- Comply with WorkSafeBC Occupational Health and Safety Regulations.
- Comply with Provincial Regulations and governing bodies.
- Comply with Provincial Health Authority and Local Health Authority orders and recommendations.
- Mitigate the spread of COVID-19 among employees (and their families and friends).
- Describe procedures for probable or confirmed Covid-19 in the Workplace.
- Describe procedures for Precautionary Covid-19 Absences from Work.

The purpose of this plan is to establish measures to reduce opportunities for transmission of COVID-19 illness in the workplace and to set protocols for precautionary employee absences from work due to actual or potential exposure to COVID-19.

To minimize an employee’s exposure to COVID-19, a combination of measures will be used, including the most effective control technologies available. Work procedures will protect not only employees, but also



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contractors and members of the public that enter District of Ucluelet facilities. All employees must follow the procedures outlined in this plan to prevent or reduce exposure to COVID-19.

The COVID-19 employee screening initiative is a temporary measure. The District is adopting this initiative for the duration of the COVID-19 pandemic, or until we are advised by the Health Authority that normal working conditions can resume, whichever is earliest. However, recognizing that the situation, recommendations and orders are in a state of flux, this timeframe could be adjusted as time progresses.

2. SCOPE

This plan applies to all District employees and volunteers.

3. DEFINITIONS

In this plan,

“a probable case of COVID-19” means either:

- the person has not had a laboratory test, has a fever (over 38 degrees Celsius) or new onset of (or exacerbation of chronic) cough, and
 - close contact with a person with a confirmed case of COVID-19; or
 - lived in or worked in a closed facility known to be experiencing an outbreak of COVID-19 (e.g., long-term care facility, prison);

OR

- the person has had a laboratory test for which a diagnosis of COVID-19 was inconclusive, has a fever (over 38 degrees Celsius) or new onset of (or exacerbation of chronic) cough, and in the 14 calendar days before onset of illness:
 - traveled to an affected area (including inside Canada) identified by the World Health Organization (Consult HealthLink (8-1-1) for an up to date list of affected areas); or
 - had close contact with an individual with acute respiratory illness who within 14 calendar days before their onset of illness traveled to an affected area (including inside Canada) identified by the World Health Organization (Consult HealthLink (8-1-1) for an up to date list of affected areas); or
 - participated in a mass gathering identified as a source of exposure; or
 - had laboratory exposure to biological material (e.g. primary clinical specimens, virus culture isolates) known to contain COVID-19.

“a confirmed case of COVID-19” means the person has been confirmed via laboratory testing to be infected with the virus that causes COVID-19.



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“close contact” means the person provided care for, or had other similar close physical contact with, or lived with, or otherwise had close prolonged contact with, an individual with a probable or confirmed case of COVID-19 while the individual was ill.

“coronaviruses” means a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease, or COVID-19.

“COVID-19” is the infectious disease caused by the most recently discovered coronavirus.

“essential service worker” means a worker who provides services that are considered critical to preserving life, health, public safety and basic societal functioning, and who has been determined by the District, on an individual basis, to be critical to delivering essential services.

“fatigue” means a feeling of tiredness or exhaustion or a need to rest because of lack of energy or strength.

“high-touch surfaces” include countertops/hard surfaces, food contact surfaces, tables/chairs, doorknobs, light switches, dispensers, floors, phones, waste receptacles, photocopiers, any other shared equipment etc.

“isolation” means isolation from others and is required when you have COVID-19 symptoms (fever, cough, difficulty breathing), even if mild, or you have been diagnosed with COVID-19, or are waiting for the results of a lab test for COVID-19. To be ISOLATED means to stay at home until public health officials advise you that you are no longer at risk of spreading the virus to others. Avoid contact with other people to help prevent the spread of disease in your home and in your community, particularly people at high risk of severe illness outcomes such as older adults or medically vulnerable people.

“non-close contact” means the person provided care for the probable case with consistent and appropriate use of PPE or has had contact with the probable case but has not been within 2 meters of the probable case while the probable case had symptoms of COVID-19.

“pandemic” is defined as an epidemic of infectious disease that spreads through human populations on a continental or global scale.

“self-isolation” means to stay at home and monitor yourself for symptoms, even if mild, for 14 days AND avoid contact with other people to help prevent the spread of disease in your home and in your community in the event you become symptomatic. Self-isolation is required if you have no symptoms AND a history of possible exposure to the novel coronavirus due to travel outside of Canada or close contact with a person diagnosed with COVID-19.

“self-monitor” means monitoring your health and the health of your children or live-in family members for symptoms such as fever, cough and difficulty breathing.

“social distancing or physical distancing” means making changes in your everyday routines in order to minimize close contact with others, including:



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- 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/6 feet) from others, as much as possible when in public

“**symptoms of infection**” means fever/chills, conjunctivitis (pink eye), cough, diarrhoea, fatigue, sneezing, sore throat, stuffy or runny nose, shortness of breath / difficulty breathing, weakness.

“**weakness**” means a lack of physical or muscle strength and a person’s feeling that extra effort is required to move their arms, legs, or other muscles.

4. RISK IDENTIFICATION AND ASSESSMENT

THIS SECTION OUTLINES THE FOLLOWING:

- COVID-19 Symptoms
- Routes of virus transmission
- Work activities and workers at risk of exposure

Covid-19 Symptoms

Those who are infected with COVID-19 may experience few or no symptoms. Employees may not know they have symptoms of COVID-19 because they are similar to a cold or flu. Symptoms may take up to 14 days to appear after exposure to COVID-19. This is the longest known infectious period for this disease. Symptoms include:

- fever
- chills
- cough
- shortness of breath
- sore throat and painful swallowing
- stuffy or runny nose
- loss of sense of smell
- headache
- muscle aches
- fatigue
- loss of appetite

In severe cases, infection can lead to death. Symptoms are subject to change and are listed at www.bccdc.ca.

Virus Transmission

People can catch COVID-19 from others who have the virus. The disease can spread from person to person through small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. These droplets land on objects and surfaces around the person. Other people can



catch COVID-19 by touching these objects or surfaces, then touching their eyes, nose or mouth. People can also catch COVID-19 if they breathe in droplets from a person with COVID-19 who coughs out or exhales droplets. This is why it is important to stay more than 2 meters (6 feet) away from a person who is sick.¹

The primary routes of transmission anticipated for COVID-19 are listed below, all of which need to be controlled.

Contact transmission, both direct and indirect

Direct contact involves skin-to-skin contact. First Aid Attendants or Fire Brigade first responders could be exposed by direct contact. Indirect contact involves an employee touching a contaminated intermediate object. Examples of both direct and indirect contact include:

- Shaking hands with an infected person, followed by touching one's eyes, nose, or mouth;
- Touching a surface contaminated with the virus, followed by touching one's eyes, nose, or mouth;
- Sharing food items or utensils with an infected person;
- Contact with virus in sewage, followed by touching one's eyes, nose, or mouth.

Contact transmission is important to consider because COVID-19 can persist on hands and surfaces for an unknown amount of time.

Droplet transmission

Large droplets may be generated when an infected person coughs or sneezes. Droplets travel a short distance through the air and can be deposited on inanimate surfaces (leading to indirect contact transmission), or in the eyes, nose, or mouth.

Infectious droplets from a coughing or sneezing person can directly contact a nearby person and be ingested through the eye, nose or mouth.

As the distance from the person coughing or sneezing increases, the risk of infection from droplet transmission is reduced, but it can still be a concern in smaller, enclosed areas, especially where there is limited ventilation. As the number of infected people in a room increases, the risk of infection can increase.

Identification of Work Activities and Workers at Risk of Exposure To COVID-19

The following risk assessment table is adapted from WorkSafeBC Occupational Health and Safety Regulation Guideline G6.34-6 (the Regulation). Using this guideline as a reference, risk level to employees has been determined.

¹ World Health Organization



Table 1. Risk Levels and PPE

Risk Levels	Low Risk	Moderate risk	High risk
Employees and Controls (for each group)	Employees who typically have no contact with people infected with COVID-19 (Includes most District Employees)	Employees who may be exposed to infected people from time to time in relatively large, well-ventilated workspaces or employees who clean/disinfect public spaces*.	Employees who may have contact with infected patients or with infected people/ substances in small, poorly ventilated workspaces (such as Fire Fighters and Parks employees)
Hand Hygiene	Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)	Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)	Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)
Disposable gloves	Not required	Not required, unless handling contaminated objects or harmful substances on a regular basis	Yes, in some cases, such as when working directly with COVID-19 patients
Coveralls, turnout gear or similar body protection	Not required	Not required	Yes, in some cases, such as when working directly with COVID-19 patients
Eye protection – glasses or face shield	Not required	Not required, unless cleaning/disinfecting public spaces.	Yes, in some cases, such as when working directly with COVID-19 patients
Airway protection – respirators	Not required	Not required. Employees required to maintain distance of 2 meters or 6 feet from others. N95 respirators /masks or cloth masks may be used for short periods if social distancing is not possible for certain tasks.	Yes (minimum N95 respirator / mask or equivalent) (mask to be placed on infected person if no oxygen mask is utilized)

Includes, but not limited to: First Aid Attendants, Public Service Counters, Bylaw Officers, Fire Fighters (Suppression, Prevention), Child Care Workers, Recreation Staff, Building Service Workers, Parks Staff.



5. COVID-19 RISK CONTROLS

The Regulation requires the District of Ucluelet to implement infectious disease controls in the following order of preference:

1. **Elimination:** *Elimination* of face-to-face contact is the best control possible. In a pandemic, this may include closing facilities and reception counters, relying on phone, email or regular mail to answer public questions, limiting meetings and relying on conference calls, mail or messenger tools, taking financial transactions by electronic means rather than cash or cheque at the public service counter and working from home options.
2. **Engineering controls:** *Engineering* controls include the introduction of another technical solution to avoid/reduce risks, such as guards/enclosures when interfacing with public.
3. **Administrative controls:** *Administrative* controls include cleaning intensity, hand washing and cough/sneeze etiquette, etc.
4. **Personal Protective Equipment (PPE):** Personal Protective Equipment includes the wearing of gloves, respirators/masks coveralls/turnout gear, gloves, goggles and/or face shields.

Please see Appendix A for series of effective controls for COVID-19.

6. DUTIES AND RESPONSIBILITIES

Employer:

- Ensure that the materials (for example, gloves, alcohol-based wipes and hand washing facilities) and other resources such as employee training materials required to implement and maintain the COVID-19 Safety 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 and high-touch surfaces are cleaned and disinfected more frequently and intensely.
- Ensure that appropriate cleaning supplies are available for employees to clean and disinfect their workspaces.
- Cancel or postpone all non-essential employee travel.
- Ensure that supervisors and workers are educated and trained on COVID-19 control measures to an acceptable level of competency.
- Provide employees with any personal protective equipment required/recommended by occupational health and safety guidelines and training to ensure it is used correctly.
- Ensure that employees use personal protective equipment as is appropriate for each situation (see Risk Assessment COVID-19 section).
- Conduct a monthly (or more frequent, where required) review of the Plan's effectiveness. This includes a review of the available control measures to ensure that these are selected and used when practical.
- Ensure that a copy of the COVID-19 Safety Plan is available to ALL employees.



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- Close facilities or reduce services if warranted to maintain compliance with public health and Provincial directives.
- Ensure employees know their rights and responsibilities and what to do when they have COVID-19 symptoms (See APPENDIX E - Procedures for Probable or Confirmed COVID-19 Case at the Workplace, and APPENDIX F - Procedures for Precautionary COVID-19 Absences From Work)

Managers and Supervisors:

- Ensure that a COVID-19 risk assessment has been conducted for working group to determine the level of risk to employees in their work section. This risk assessment looks at all elements of the work including proximity to others, ability for workers to maintain social/physical distancing, ability to limit worker participation in in-person gatherings, maintaining cleanliness of tools, workspaces, and provision of necessary personal protective equipment.
- Ensure crew talks are administered to discuss COVID and operational risks / considerations / controls.
- Consider ways that employees can practice physical distancing, such as increasing distance between desks and workstations.
- Increase distance between desks, tables and workstations.
- Keep a distance of 2 metres between you, your coworkers, and the public.
- Ensure any public contacts closer than 2 metres only occur when wearing appropriate PPE or screening is in place.
- Report to Management Team any challenges to maintain a healthy and safe workplace.
- Ensure that employees are adequately instructed on the hazards and controls at their work location(s).
- Ensure that employees use proper personal protective equipment as is appropriate for each situation (see Risk Assessment COVID-19 section).
- If respirators/masks are used, ensure that employees use the proper type.
- Direct work in a manner that eliminates or minimizes the risk to employees.
- Send employees home if they are ill.
- Keep your environment clean. Use appropriate products to clean and disinfect items like your desk, work surfaces, phones, keyboards and electronics, keypads, customer service counters, especially when visibly dirty.

Employees:

- Know the hazards related to COVID-19 in the workplace.
- Follow established work procedures as directed by the employer or supervisor.
- Practice high standards of hand hygiene including frequent hand washing and/or use of hand sanitizer.
- Keep your environment clean. Use appropriate products to clean and disinfect items like your desk, work surfaces, phones, keyboards and electronics, customer service counters, especially when visibly dirty.
- Keep a distance of 2 meters between you, your coworkers, and the general public.
- Increase distance between desks, tables and workstations.
- PPE must be used when a 2 metre distance can not be maintained.



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- Use required personal protective equipment.
- Report any unsafe conditions or acts to their supervisor or manager.
- Know how and when to report exposure incidents.
- Leave work if suffering from flu-like symptoms and follow procedures outlined in this Plan.
- Take steps to minimize exposure to COVID-19 while away from work.

Employee Training

Employees will receive training in the following:

- The risk of exposure to COVID-19, and the signs and symptoms of the disease.
- The risk controls outlined in this plan.
- Location of washing facilities, including dispensing stations for alcohol-based hand rubs.
- Proper use of respirators/masks (for specific individuals).
- How to report an exposure to, or symptoms of COVID-19.

References and Resources

- District Web Pages: www.ucluelet.ca
- BC Centre for Disease Control www.bccdc.ca
- Provincial Health Services Authority: www.phsa.ca
- Health Canada: www.canada.ca/en/health-canada.html
- World Health Organization: www.who.int/emergencies/diseases/novel-coronavirus-2019
- BC Construction Safety Alliance: www.bccsa.ca/
- Health Canada: Public health management of cases and contacts associated with novel coronavirus disease 2019 (COVID-19)

Living Document

This is a living document and may change frequently depending on ongoing pandemic issues/developments. All changes will be made in consultation with applicable stakeholders including the OH&S Committee.



7. PROCEDURES

Please see attached documents:

- 1) Appendix A - Effective Controls for COVID-19
- 2) Appendix B - Cleaning Services During the COVID-19 PANDEMIC
- 3) Appendix C - Safe Use of Cleaning and Disinfectant Products
- 4) Appendix D - BC Centre for Disease Control Daily Self-Monitoring Form for Contacts of a Case of COVID-19
- 5) Appendix E - Procedures for Probable or Confirmed COVID-19 Case at the Workplace
- 6) Appendix F - Procedures for Precautionary COVID-19 Absences from Work
- 7) Appendix G - Employee Start of Isolation Period Notification Form
- 8) Appendix H - Employee End of Isolation Period Notification Form
- 9) Appendix I - Essential Services Thresholds Form
- 10) Appendix J - Essential Service Worker Designation Form
- 11) Appendix K - District Office Site Specific Plan
- 12) Appendix L - Ucluelet Community Centre Office Site Specific Plan
- 13) Appendix M - Communication Plan
- 14) Appendix N - COVID-19 Impact Mitigation Guide for Fire Department Operations
- 15) Appendix O – Measures Specific to Outside Workers

ISSUED BY: CAO



Appendix A – Effective Controls for COVID-19

Hand Hygiene

Hand washing is one of the best ways to minimize the risk of infection. 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.

Instructions to Staff:

Staff must wash hands immediately:

- Upon arrival at the workplace.
- After handling cash.
- Before and after breaks.
- Before and after handling high touch equipment.
- Before leaving a work area.
- After handling materials that may be contaminated.
- Before eating, drinking, smoking, handling contact lenses, or applying makeup.
- After coughing or sneezing if hands may have been contaminated.
- Before and after group meetings.

Hand Washing Procedure

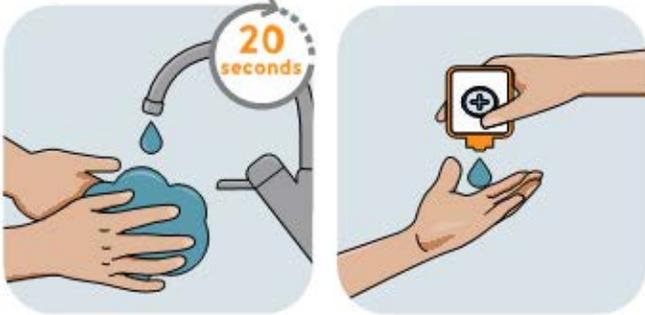
Use soap and warm running water; it does not have to be hot to be effective. Wash and rinse your hands for at least twenty (20) seconds. If water is unavailable, use a waterless hand cleanser that has at least 70% alcohol. Follow the manufacturer's instructions on how to use the cleanser.

Instructions to Staff

Handwashing Etiquette posters will be hung in a visible location in handwashing areas of all District bathrooms and kitchens.



Help prevent the spread of COVID-19



Wash your hands often with soap and water for 20 seconds. If soap and water aren't available, use an alcohol-based hand sanitizer.

Wash your hands:

- When you arrive at work
- Before and after going on a break
- After using the washroom
- After handling cash or other materials that have come into contact with the public
- Before and after handling shared tools and equipment
- Before and after using masks or other personal protective equipment

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Figure 1. Handwashing Etiquette

Respiratory Etiquette

Employees are expected to follow cough/sneeze etiquette, which is a combination of measures that minimizes the transmission of diseases via droplet or airborne routes.

Instructions to Staff:

Respiratory etiquette includes the following components:

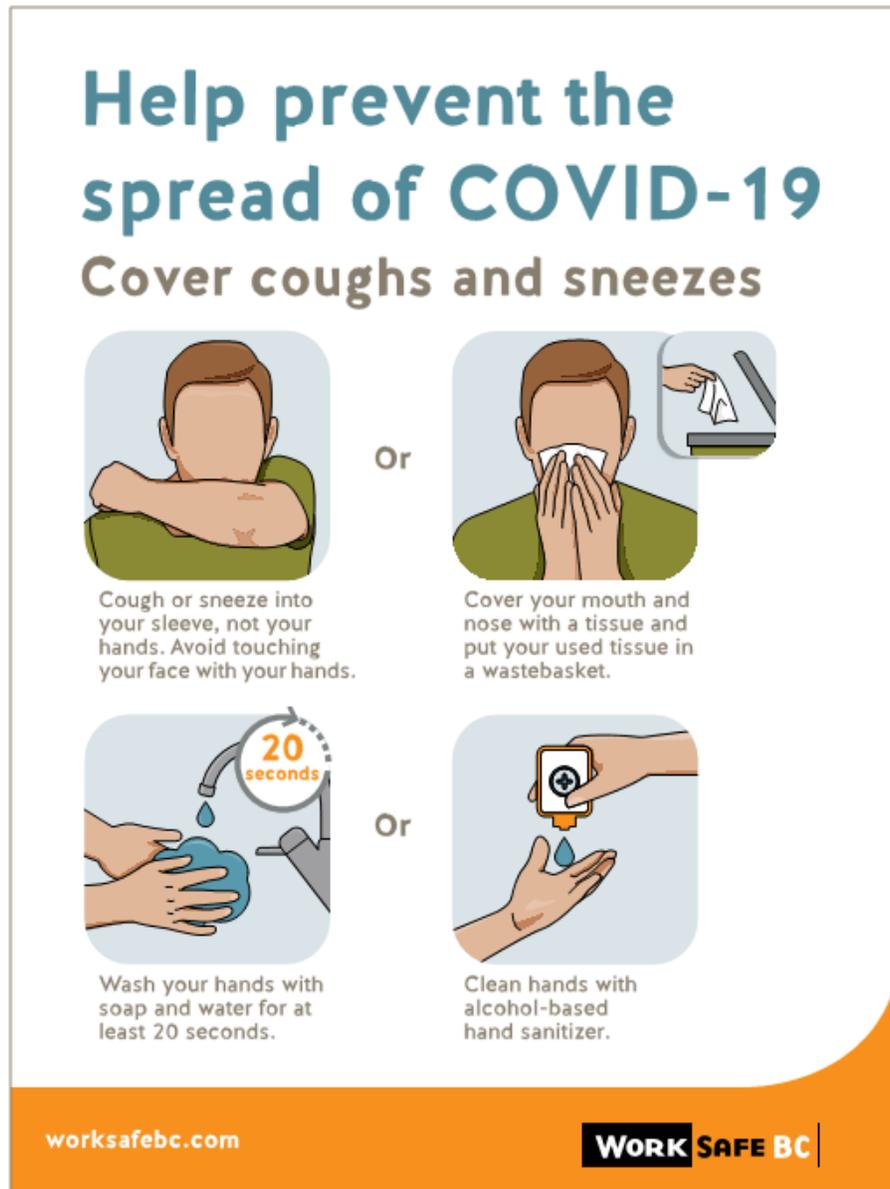
- Staff are reminded not to attend the workplace if they are exhibiting COVID-19 symptoms
- Cover your mouth and nose in your elbow, sleeve or tissue when coughing or sneezing



- Use tissues to contain secretions, and dispose of them promptly in a waste container

Wear non-medical masks to prevent the spread of germs when two metres distance can not be maintained

- Turn your head away from others when coughing or sneezing
- Wash hands regularly



Respiratory Etiquette

Physical Distancing

When someone coughs or sneezes, they emit small liquid droplets from their nose or mouth which may contain the virus. If you are too close, you may breathe in the droplets.



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Instructions to Staff:

- Maintain at least 2 metres (6 feet) distance between yourself and others, especially anyone who is coughing or sneezing. Wear a mask when two-meter distance cannot be maintained.

Disinfecting and Cleaning

Clean workplace surfaces to reduce the chance of spreading disease. Cleaning includes high-touch areas such as: handrails, doorknobs, counter tops, sinks, water taps, computer key boards and telephones, among other surfaces that may be touched by many people.

Appendix B lists cleaning services during the COVID-19 and Appendix B addresses the safe use of cleaning and disinfectant products.

Instructions to Staff:

- Employees are required to wear proper PPE (nitrile gloves) when cleaning common surfaces at the beginning of their shift or throughout the day.
- If any aspect of another employee's workstation must be used, it must be cleaned before and immediately afterwards.
- Employees who are required to use approved disinfectants will be trained in their use. SDS will be readily available to ensure that WHMIS & Hazard Communication protocols are adhered to.
- Many disinfecting wipes can also be effective at killing the virus. Use protective cloths (disposable or reusable) where required.

Public Access Procedures: In a pandemic, elimination of face-to-face contact is the best control possible.

Instructions to Staff:

- Members of the public are NOT permitted to enter the District of Ucluelet facilities at this time.
- Essential contractors (deliveries, couriers, etc.) will maintain social distancing protocols, remembering they are not permitted to enter the office. Delivery contractors must be instructed to drop off deliveries outside the office at the main entrance and contactless delivery must be requested. Contact may be made where proof of receipt or signature is required.
- Emergency (medical personnel) fit testing services will be completed outside as much as possible.

Facility Closures

When there are confirmed cases of COVID-19, Health Authorities and/or the District of Ucluelet will determine facility closures and provide guidance and direction on cleaning procedures and re-opening of the facility.

Use of Face Masks

Cloth mask will be supplied to District staff and should be utilized when employees cannot maintain 2 meters physical distance from one another.

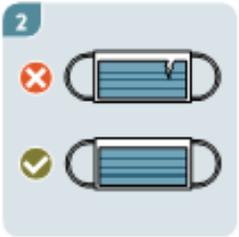
Masks will be cleaned regularly by District Staff.



District-provided respirators/masks are to be used by first responders and any other employees where their use is deemed necessary.

Help prevent the spread of COVID-19: How to use a mask

- 

1 Wash your hands with soap and water for at least 20 seconds before touching the mask. If you don't have soap and water, use an alcohol-based hand sanitizer.
- 

2 Inspect the mask to ensure it's not damaged.
- 

3 Turn the mask so the coloured side is facing outward.
- 

4 Put the mask over your face and if there is a metallic strip, press it to fit the bridge of your nose
- 

5 Put the loops around each of your ears, or tie the top and bottom straps.
- 

6 Make sure your mouth and nose are covered and there are no gaps. Expand the mask by pulling the bottom of it under your chin.
- 

7 Press the metallic strip again so it moulds to the shape of your nose, and wash your hands again.
- 

8 Don't touch the mask while you're wearing it. If you do, wash your hands.
- 

9 Don't wear the mask if it gets wet or dirty. Don't reuse the mask. Follow correct procedure for removing the mask.

Removing the mask

- 

1 Wash your hands with soap and water or use an alcohol-based hand sanitizer.
- 

2 Lean forward to remove your mask. Touch only the ear loops or ties, not the front of the mask.
- 

3 Dispose of the mask safely.
- 

4 Wash your hands. If required, follow the procedure for putting on a new mask.

Note: Graphics adapted from BC Centre for Disease Control (BC Ministry of Health), "How to wear a face mask."

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Figure 2. Proper donning procedures.



Flexible Work Arrangements

The District of Ucluelet may identify 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. Employees that are working remotely must follow Working Remotely Policy No. 7-2510-1.

Instructions to Staff:

Check with your Manager to determine if social distancing can be improved or is required by:

- Working remotely
- Teleconferencing
- Holding Virtual Meetings



Appendix B - Cleaning Services During The COVID-19 Pandemic

The District of Ucluelet is committed to taking actions to reduce the risk of transmission of respiratory illnesses including COVID -19. Regular cleaning and disinfecting of objects and high-touch surfaces will help prevent the transmission of viruses.

Employees will be educated / trained on cleaning routines prior to undertaking (see appendix B for additional details).

“High-Touch Surfaces” include countertops/hard surfaces, food contact surfaces, tables/chairs, doorknobs, light switches, dispensers, floors, waste receptacles, etc.

PROCEDURES:

Occupied Buildings:

1. Additional hand sanitizer stations added throughout public areas.
2. Scheduled daily cleaning/disinfecting as capacity allows in the following areas and high-touch surfaces:
 - a. Public/Staff washrooms and change rooms
 - b. Kitchens
 - c. Meeting rooms
 - d. Disinfect high-touch surfaces with a disinfecting spray

*All high-touch surfaces disinfected.

Unoccupied Buildings:

1. Thorough wipe down of all high-touch surfaces, i.e. workstations, door handles, hand railings, etc.
2. Clean walls in offices, hallways and public spaces as scheduled

Location / Frequency:

Municipal Hall, Fire Hall

- High-touch surface and shared areas disinfected during operational hours, entire areas cleaned and disinfected as scheduled.

Public Works Yard

- Shared and individual work areas cleaned and disinfected as per established schedule after hours Monday-Friday.

Public Washrooms (subject to opening)

- Entire areas cleaned and disinfected 5 - 7 days per week, 2 times daily as capacity allows

Ucluelet Community Centre

- Shared work areas cleaned and disinfected according to the regular schedule or directly following meetings, when required.



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Other Actions Taken:

- Order all available product from suppliers and have reserved back ordered items when in stock.
- Review upcoming schedules to ensure extra staff are available, if needed.
- Consistent communication to staff on procedures taken to ensure a safe workplace.
- Additional hand sanitizing stations in public areas as identified.



Appendix C – Safe Use of Cleaning and Disinfectant Products

For high-touch surfaces and areas that are likely to become contaminated, the below list of common disinfectants is provided as a guide to choosing products. Often janitorial product outlets carry all of these products. Always follow the manufacturer's instructions.

Important notes:

- Ensure disinfectant product has a Drug Identification Number (DIN) on its label.
- Follow product instructions for dilution, contact time and safe use.
- All soiled surfaces should be cleaned before disinfecting (unless otherwise stated on the product).

Staff are to Ensure the Following:

- Follow cleaning product safe-use practices, as defined by product manufacturer
- Familiarize yourself and post product labels and safety data sheets (SDSs)^{2,3}
- Wear gloves (reusable where possible) when wiping surfaces and objects with cleaning solutions
- Wear safety glasses and long sleeves for minor cleaning. Add respiratory protection and any other PPE (as appropriate) when cleaning larger surfaces or in poorly ventilated areas.
- Ensure surfaces and areas are clean / free from debris before disinfecting them.
- Disinfectants are most effective when residing on a surface for more than one minute.
- Wash hands regularly and thoroughly with warm water and soap after removing gloves.
- Report to your supervisor all spills, incidents, etc.
- Ensure all labels remain intact.
- Ask for clarifications/instructions from your Manager, where required.

Staff are to Prevent the Following:

- Do not mix cleaners and disinfectants unless the labels say it is safe to do so. Mixing products (such as chlorine bleach and ammonia cleaners) can cause serious injury.
 - Ensure cloths/materials only come into contact with one product type
 - If mixed, these can produce harmful gases.
- Do not eat or drink while using bleaches, cleaning agents, disinfecting agents, or other chemical products.
- Do not store containers unsafely where they could harm others – do not leave open in areas used by other staff, visitors or other members of the public.

² https://advantagemaint.com/files/SDS/Novus_SDS_English.pdf

³ <https://www.thecloroxcompany.com/wp-content/uploads/2020/03/Clorox%C2%AE-Performance-Bleach1.pdf>



The Corporation of the District of Ucluelet COVID-19 SAFETY PLAN

Appendix D – BCCDC COVID-19 Symptom Monitoring Form

BC Centre for Disease Control
Provincial Health Services Authority

Daily Self-Monitoring Form for Contacts of a Case of COVID-19

If you are a contact of a COVID-19 case, you need to self-monitor for symptoms and self-isolate for 14 days.

What does it mean to self-monitor?

To self-monitor, each day you should record whether you have any of the symptoms listed on the second page of this handout. This should be done for 14 days from the date of exposure. This applies, even if you don't have symptoms.

What is self-isolation?

Self-isolation means that you need to stay home and avoid contact with others for 14 days. This applies, even if you don't have symptoms. Go to [self-isolation on the BCCDC website](#) for more information.

What if I develop symptoms?

- If you have mild symptoms that can be managed at home (e.g., fever, cough, sneezing, or sore throat) continue to self-monitor and self-isolate at home for **AT LEAST** 10 more days. Please read "When can I return to my regular activities" below.
- Contact public health to notify them that you were a contact of a case and experiencing symptoms compatible with COVID-19. Find your local public health unit with the [ImmunizeBC Health Unit Finder](#).
- If your symptoms worsen, or if you are concerned, you can do the [BC COVID-19 Symptom Self-Assessment Tool](#); or, call 8-1-1 any time of the day or night. Please do not go to a family doctor or walk-in clinic unless your symptoms worsen. If you do need to visit a family doctor, or walk-in clinic, please call ahead and tell them your symptoms, and that you had contact with a case of COVID-19.

Severe Symptoms require immediate attention.

Examples of severe symptoms include severe difficulty breathing (e.g. struggling to breathe or speaking in single words), severe chest pain, having a very hard time waking up, or feeling confused or losing consciousness). You should call 9-1-1 immediately, or go directly to your nearest emergency department. If possible, you or someone caring for you should call ahead and tell them your symptoms and you had contact with a COVID-19 case.

When can I return to my regular activities?

If you did **NOT** develop any symptoms, you can return to your routine activities after 14 days from your last contact with a COVID-19 case. This means you no longer have to continue to self-monitor and self-isolate.

If you developed respiratory symptoms and are at home, you can return to your routine activities (stop self-monitoring and self-isolating) when:

- A. At least 10 days have passed since your symptoms started; AND
- B. At least 72 hours have passed since you did not have a fever; AND
- C. Any other symptoms (respiratory, gastrointestinal, and systemic) have gotten better. Symptoms are listed on page 2. Coughing may go on for several weeks, so a cough alone does not mean you need to continue to self-monitor and self-isolate.

If you are unsure whether you can stop self-monitoring or self-isolating, speak with a health care provider. You can call 8-1-1 any time of the day or night to speak with a nurse.



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BC Centre for Disease Control
 Provincial Health Services Authority
 Daily Self-Monitoring Form for Contacts of a Case of COVID-19

Your Name: _____

Local Public Health Unit Phone Number: _____

Date you were exposed to a case of COVID-19: _____

Take and record temperature daily and avoid the use of fever-reducing medications (e.g., acetaminophen/Tylenol, ibuprofen/Advil) as much as possible. These medications could mask early symptoms of COVID-19; if these medications must be taken, speak with your health care provider.

Day	1	2	3	4	5	6	7	8	9	10	11	12	13	14
Date														
Symptoms	Pay close attention to your health. Each day, check for symptoms below and enter a Yes or No for each.													
No symptoms														
Chills														
Conjunctivitis (pink eye)														
Cough														
Diarrhoea (loose stools)														
Fatigue (tired)														
Temperature (°C)														
Sore throat														
Runny nose														
Short of breath/difficulty breathing														
Other (add in notes)														

Notes:



Appendix E - Procedures for Probable or Confirmed COVID-19 Case at the Workplace

The following procedures have been developed using the Health Canada “Public health management of cases and contact associated with novel coronavirus disease 2019 (COVID-19)” guidance⁴.

Managers are to follow these procedures and the flow chart that follows if someone in your working group meets any of the following criteria:

1. Has been tested for COVID-19 within the last 10 days of being at work.
2. Has been directed by public health to self isolate.
3. Has tested positive for COVID-19 within the last 10 days of being at work.
4. Has developed symptoms of COVID-19 within the last 10 days of being at work (cough, fever, sneezing, sore throat, fatigue).

This individual will be referred to as either the “probable case” or “confirmed case.”

When can the probable or confirmed case return to work?

A worker with a probable or confirmed case of COVID-19 shall not be permitted back at work until they are no longer experiencing symptoms of COVID-19 SYMPTOMS AND 10 days have passed since they developed symptoms.

If the probable/confirmed case is hospitalized or otherwise under the care of a medical professional, they should not return to work until the medical professionals determine that it is appropriate.

How should the workplace be cleaned after a probable or confirmed case was present?

Contact Recreation staff to disinfect the area. Facilities will clean and disinfect all high-touch surfaces in the area where the probable/confirmed case was present.

Should other teams or workers be isolated?

1. If the probable case has been tested for COVID-19, call Health Link BC at 8-1-1 for guidance. The steps below still apply, but testing or other actions may also be required.
2. Identify any individuals who have been in CLOSE CONTACT with the probable/confirmed case. These individuals should self-isolate for 14 days.
3. Identify any individuals who have been in NON-CLOSE CONTACT with the probable/confirmed case. These individuals should self-monitor for symptoms (including daily temperature checks) for 14 days and should maintain physical distance (2 meters) from other workers, as well as handwashing and cough/sneeze etiquette. If they develop any symptoms, they should self-isolate.
4. Wherever possible, the probable case’s coworkers should work separately from other work groups for 14 days after the probable case developed symptoms (e.g. in a different room, on a different shift, on a separate job site).

If any workers who have had CLOSE or NON-CLOSE contact with the probable case develop symptoms, then they should also be considered as probable cases and the steps should be repeated.

⁴ <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html>



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The following flowchart can be used as a reference:

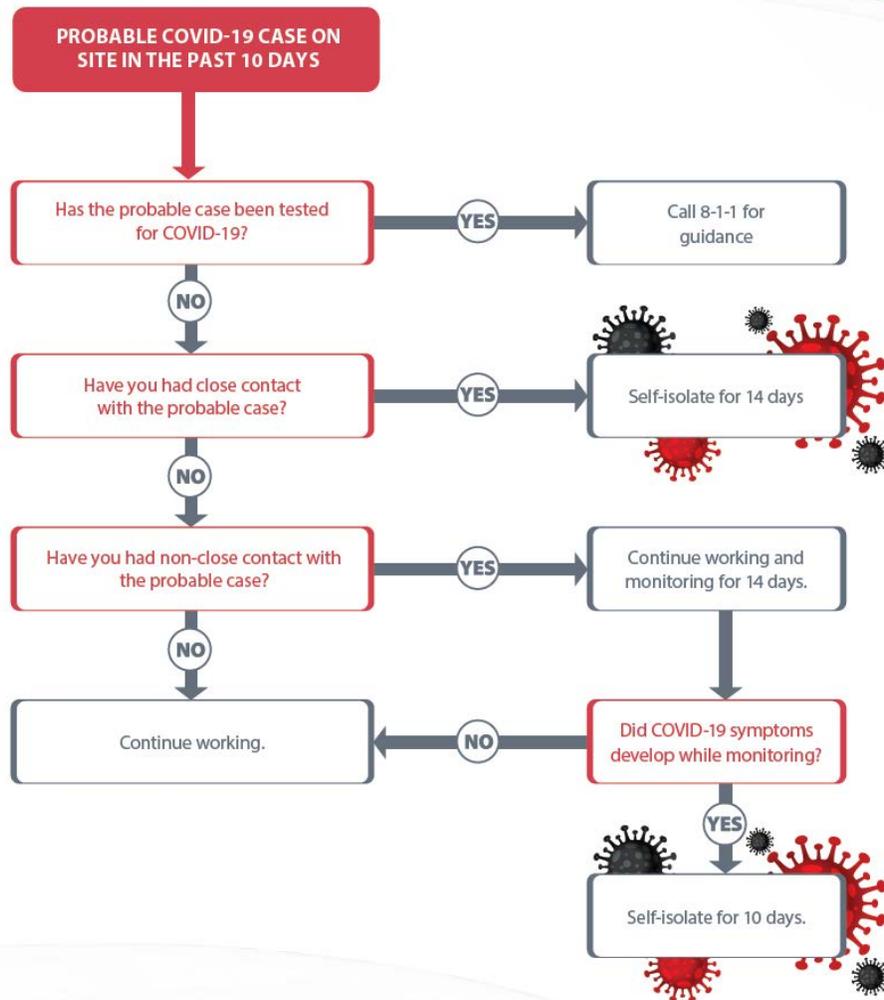


Figure 3. COVID-19 Exposure/Non-Exposure Response Considerations.



Appendix F - Procedures for Precautionary COVID-19 Absences from Work

An employee that feels ill while at work must:

- report to their manager immediately,
- wash their hands immediately,
- immediately put on a mask,
- leave the workplace.

Immediately after the employee leaves the workplace, janitorial staff will clean and disinfect any services that the ill worker may have come into contact with.

An employee who is experiencing any of the symptoms of infection for which the employee does not have a prior alternate diagnosis (asthma, COPD, chronic sinusitis, etc.) should seek medical advice as necessary from their doctor, HealthLink BC (8-1-1) or the Island Health COVID-19 Testing Call Centre (1-844-901-8442)

The employee must not attend the workplace for any reason until either:

- a doctor has confirmed in writing that they do not have COVID-19; or
- one of the following circumstances apply to them:
 - at least a 10-calendar day isolation period, from the date the symptoms of infection first began, has passed; or
 - all of their symptoms of infection, except for a cough, have ceased, and they have had no fever for at least 72 hours.

An employee who has no symptoms of infection, to whom a circumstance below applies, must not attend the workplace for any reason for the duration of the applicable isolation period below:

Table 2. Employee COVID-19 Isolation / Screening Process

Circumstance	Isolation Period
<ul style="list-style-type: none"> • the employee has travelled outside of Canada within the last 14 calendar days 	<ul style="list-style-type: none"> • 14 calendar days from the date of their return to Canada
<ul style="list-style-type: none"> • the employee provided care (without the use of appropriate personal protective equipment) to a person with a probable or confirmed case of COVID-19, while the person had symptoms of infection 	<ul style="list-style-type: none"> • a period starting on the date the employee first provided care to the ill person when the person had symptoms of infection, and ending 14-calendar days from the last date that care was provided to the ill person while the person had symptoms of infection, other than a cough



<ul style="list-style-type: none"> the employee lives in the same household as a person with a probable or confirmed case of COVID-19, while the person had symptoms of infection 	<ul style="list-style-type: none"> a period starting on the date the ill person first developed symptoms of infection, and ending 14-calendar days from the last date of contact with the ill person, while the person had symptoms of infection, other than a cough
<ul style="list-style-type: none"> the employee had close contact with a person, with a probable or confirmed case of COVID-19, while the person had symptoms of infection 	<ul style="list-style-type: none"> a period starting on the date of close contact with the ill person while the person had symptoms of infection, and ending 14-calendar days from the last date of close contact with the person, while the person had symptoms of infection, other than a cough

Employees subject to an isolation period pursuant to this plan must self-monitor their existing symptoms of infection, or self-monitor for the development of any symptoms of infection, whichever is applicable, in accordance with the attached guidelines of the BC Centre for Disease Control (which form part of this plan), and in accordance with the following additional protocols:

- An employee must not engage in heavy exercise less than 1 hour before taking their temperature; and
- An employee must not smoke, eat, or drink hot or cold liquid less than 30 minutes before taking their temperature.

To be clear, if an employee who previously did not have symptoms of infection, but who was subject to an isolation period above, develops symptoms of infection, the isolation period for employees with symptoms of infection applies to them starting on the date that they first develop the symptoms.

An employee who will be absent from work due to an isolation period under this plan, must contact their supervisor or manager as soon as possible, normally not later than the employee’s shift start time of the first workday that will be missed, to advise of the circumstances giving rise to the absence.

The supervisor or manager will consider whether it is practical for the employee to work from home during an isolation period under this plan, and will contact the employee to discuss the next steps.

An employee whose isolation period has ended, must contact their supervisor or manager to advise of the circumstances, before returning to the workplace, so that arrangements can be made for their return.

The District may attempt to make arrangements with the Vancouver Island Health Authority for a COVID-19 test for an essential service worker, who is subject to an isolation period pursuant to this plan. Employee participation in such a test is voluntary.



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The District may, on an individual basis, exempt from an isolation period related to travel outside of Canada, an essential service worker who is not experiencing symptoms of infection. If the District does so, it will at that time provide protocols with which the employee must comply.

BENEFITS

Employees who are subject to an isolation period pursuant to this plan may be eligible for sick leave benefits under a collective agreement and those benefits may be extended by the Chief Administrative Officer pursuant to “Information and Interim Policy for District of Ucluelet staff – COVID 19 (Coronavirus)” Policy No: 7-2510-2, April 2, 2020 as replaced or amended from time to time.



Appendix G – COVID-19 Employee Start of Isolation Period Notification Form

CORONAVIRUS (COVID-19) EMPLOYEE ISOLATION PERIOD NOTIFICATION FORM

Date: _____
(Month/Day/Year)

Employee Name/Position: _____

Select the circumstance causing the need for an isolation period:

- Experiencing symptoms of infection
- Travel outside of Canada within the last 14 calendar days
- Provided care (without the use of appropriate personal protective equipment) to a person with a probable or confirmed case of COVID-19, while the person had symptoms of infection
- Live in the same household as a person with a probable or confirmed case of COVID-19, while the person had symptoms of infection
- Had close contact with a person with a probable or confirmed case of COVID-19, while the person had symptoms of infection
- Other reasons related to COVID-19 identified by HealthLink BC (8-1-1). Please specify:

Start date of isolation period: _____
(Month/Day/Year)

Anticipated end date of isolation period: _____
(Month/Day/Year)

Signature



Appendix H – Employee End of Isolation Period Notification Form

CORONAVIRUS (COVID-19) EMPLOYEE RETURN TO WORK NOTIFICATION FORM

Date: _____
(Month/Day/Year)

Employee Name/Position: _____

I confirm that:

(Select all that apply)

- I have read the COVID-19 Safety Plan (the “Policy”).
- I have completed all isolation periods applicable to me under the Policy.
- I had symptoms of infection within the meaning of the Policy, but all of the symptoms except for a cough have ceased, and I have had no fever for at least 72 hours.

Signature



Appendix K – District Office Site Specific Plan

Employees working at the District Office are at risk of contracting COVID-19 at work through contact transmission (direct or indirect) and droplet transmission derived from visitor interactions as well as employee interactions.

Employee Interactions:

- Workstation Location
 - Employee desks should be positioned so 2 meters may be maintained between desks.
- High Touch Surfaces
 - Communal doors are to remain open as much as possible to reduce contact with doorknobs.
 - Office doors are to remain open as much as possible to reduce contact with office door knobs.
 - Washrooms will be cleaned at least 5 days a week.
 - All high touch surfaces will be cleaned by janitorial staff in accordance with the cleaning schedule.
- Staff meetings
 - Employees should continue to meet with each other electronically as much as possible.
 - If in person meetings are necessary, they should be conducted outdoors or in spaces that allow for 2 meters to be maintained between employees. Windows should be kept open as much as possible to encourage airflow.
 - Avoid conducting impromptu meetings in the hallways in order to maintain safe distances and allow for employees to move around the office freely.
- Narrow and small spaces
 - Staff members should enter through the typical staff door and upstairs staff should exit the building via the back door and ramp.
 - Staff members must circulate in accordance with the arrows on the first floor.
 - Staff must maintain 2 meter distance in hallways and should wait for other staff to clear areas where 2 meter distance cannot be maintained such as the space at the bottom of the stairs to the second floor.
 - Two people are permitted in the upstairs kitchen at the District Office at a time and one person is permitted in the downstairs kitchen at District office at a time.
 - The downstairs kitchen may not be used as a kitchen at this time. Staff may use the upstairs kitchen to store and prepare food.
 - Six people are permitted in the Lyche Boardroom at any one time.
 - Three people are permitted in the Harbour Room at any one time.
- Lunch and eating at work
 - Workers are encouraged to take lunches at their desks or outside rather than in the kitchens and board rooms.
 - Workers are required to bring their own dishes and utensils.
 - Communal foods will not be provided at this time.
- Shared equipment
 - Staff must avoid sharing equipment such as phones and staplers, wherever possible.



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- Before and after using any communal equipment, such as Printer 1, workers will sanitize or wash their hands. After using communal equipment employees will sanitize the equipment.
- Employees that are using the shared keyboard at the front desk will do so in shifts – with one employee working attending at the shared keyboard for a set period of time, after which the workstation will be disinfected.
- Vehicles
 - If shared vehicle use is required, vehicles should be disinfected before and after use and masks may be worn.
 - High Touch Areas within vehicles must be sanitized at the end of each employees shift or when the vehicle will be used by a different employee.

Interactions with the Public

Once the public is permitted to enter the office the following steps will be taken to limit customer interactions:

- High touch surfaces
 - Staff must sanitize surfaces used by customers, such as the interact machine and front counter space.
 - The plexiglass at the front desk will be cleaned every day that the office is open.
- Entrance to the facility
 - Limits the number members of public in the front office area to 1.
 - Members of the public who are experiencing COVID-19 symptoms or live with someone who is displaying COVID-19 symptoms will be prohibited from entering the facility.
 - Members of the public who travelled outside of Canada will be prohibited to enter the facility until their 14 day self isolation period is completed.
 - Customers will be encouraged to provide payment via cheque and debit rather than cash.
 - Hand sanitizer will be made available at the entrance of the facility.
- Front desk area
 - Install plexiglass at the front desk.
 - Hand sanitizer and masks will be supplied to front desk workers.
 - Signage will be installed at the sidewalk that requires customers to stand 2 meters apart from one another outside the office.
 - All non-essential paperwork will be removed from the front desk area.
 - Install a sign on the front counter which indicates that proposed bylaws and agendas are available online and copies are available upon request.
 - A garbage can will be installed at the front desk area for the disposal of sanitary wipes and other PPE.
- Meeting with customers:
 - Meetings should occur by appointment only.
 - Customers should be reminded when booking the appointments to reschedule if they experience any COVID-19 symptoms, travelled outside of Canada or lived with someone who is experiencing COVID-19 symptoms.
 - Actively encourage customers to meet over the phone or by video conference rather than in-person.



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- If in person meetings are necessary, meet outdoors if appropriate.
- If indoor in-person meetings are necessary, meet in the Harbour Room
 - Book meetings in the Harbour Room calendar and sanitize high touch surfaces such as the table after the meeting.
 - Encourage customers to attend appointments alone.
 - Staff enter and exit from door behind the counter, customers to enter and exit from the door in front of the counter.
 - Leave doors open if appropriate and open windows.
 - Maintain 2-meter physical distance at all time.
- Essential contractors (deliveries, couriers, etc.) will maintain social distancing protocols, remembering they are not permitted to enter the office. Delivery contractors must be instructed to drop off deliveries outside the office at the main entrance and contactless delivery must be requested. Contact may be made where proof of receipt or signature is required.



Appendix L – Ucluelet Community Centre Office Site Specific Plan

Employees working at the Ucluelet Community Centre are at risk of contracting COVID-19 at work through contact transmission (direct or indirect) and droplet transmission derived from visitor interactions as well as employee interactions.

Employee Interactions:

- Work Station Location
 - Employee desks should be positioned so 2 meters may be maintained between desks.
- High Touch Surfaces
 - Communal doors are to remain open as much as possible to reduce contact with doorknobs.
 - Office doors are to remain open as much as possible to reduce contact with office door knobs.
 - All high touch surfaces and washrooms will be cleaned by janitorial staff in accordance with the cleaning schedule.
- Staff meetings
 - Employees will be encouraged to meet with each other electronically as much as possible.
 - If in person meetings are necessary, they should be conducted outdoors or in spaces that allow for 2 meters to be maintained between employees. Windows should be kept open as much as possible to encourage airflow.
 - Avoid conducting impromptu meetings in the hallways to maintain safe distances and allow for employees to move around the office freely.
- Narrow and small spaces
 - Staff must maintain 2 meter distance in hallways and should wait for other staff to clear areas where 2 meter distance cannot be maintained.
 - One person is permitted in the Support room at the UCC at a time.
- Lunch and eating at work
 - Workers are encouraged to take lunches at home, their desks, or outside rather than in the kitchens.
 - Workers are required to bring their own dishes and utensils.
 - Communal foods will not be provided at this time.
- Shared equipment
 - Staff must avoid sharing equipment such as phones and staplers, wherever possible.
 - Before and after using any communal equipment, such as the printer, workers will sanitize or wash their hands. After using communal equipment employees will sanitize the equipment.
 - Employees that are using the keyboard at the front desk, who normally use another keyboard, will disinfect the front desk keyboard once they have completed the task.
- Vehicles
 - If shared vehicle use is required, vehicles should be disinfected before and after use and masks may be worn.
 - High Touch Areas within vehicles must be sanitized at the end of each employees shift or when the vehicle will be used by a different employee.



Interactions with the Public

Once the public is permitted to enter the Ucluelet Community Centre the following steps will be taken to limit customer interactions:

- Hours of operations
 - The office will be open from 12:30 – 4:30 pm, Monday to Friday.
- High touch surfaces
 - Staff must sanitize surfaces used by customers, such as the interact machine and front counter space.
 - The plexiglass at the front desk will be cleaned every day that the office is open.
- Entrance to the facility
 - Limits the number members of public using the front desk to 1 or a family pod.
 - Members of the public who are experiencing COVID-19 symptoms or live with someone who is displaying COVID-19 symptoms will be prohibited from entering the facility.
 - Members of the public who travelled outside of Canada will be prohibited to enter the facility until their 14 day self isolation period is completed.
 - Customers will be encouraged to provide payment via cheque and debit rather than cash.
 - Hand sanitizer will be made available at the entrance of the facility.
- Front counter area
 - Install plexiglass at the front counter.
 - Hand sanitizer and masks will be supplied to workers.
 - Signage will be posted at the front entrance that requires customers to stand 2 meters apart from one another outside the counter.
 - All non-essential paperwork will be removed from the front counter area.
 - A garbage can will be placed at the front desk area for the disposal of sanitary wipes and other PPE.
- Meeting with customers:
 - Meetings should occur by appointment only.
 - Customers should be reminded when booking the appointments to reschedule if they experience any COVID-19 symptoms, travelled outside of Canada or lived with someone who is experiencing COVID-19 symptoms.
 - Actively encourage customers to meet over the phone or by video conference rather than in-person.
 - If in person meetings are necessary, meet outdoors if appropriate.
- Essential contractors (deliveries, couriers, etc.) will maintain social distancing protocols, remembering they are not permitted to enter the office. Delivery contractors must be instructed to drop off deliveries at the front counter and contactless delivery must be requested. Contact may be made where proof of receipt or signature is required.



Appendix M – Communication Plan

Signage

Occupancy limit signage, respiratory hygiene signage, and hand washing signage will be posted through the workplace. Signage will be posted at the main entrance limiting public attendance to the workplace and prohibiting individuals who have COVID-19 symptoms from entering the facility.

Communication Plan

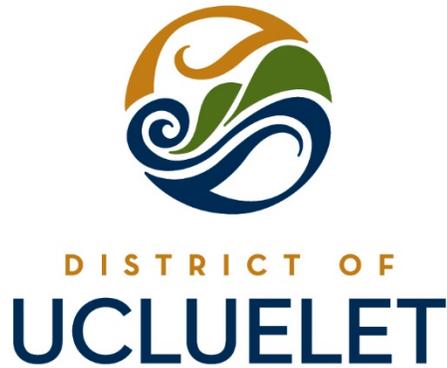
Corporate Services will review the policy with managers. A Crew Talk will be conducted with Town Office Staff, to review the plan.

Managers or designate will review the policy with their staff members if they do not work at the Town Office.



COVID-19 Impact Mitigation Guide for Fire Department Operations

Version 1
2020-06-02





Document Purpose and Format

This COVID-19 impact mitigation guide has been assembled based on input received from:

- Provincial Health Authority
- WorkSafeBC
- Fire Chiefs Association of BC
- Iridia Medical

The purpose of this document is to provide guidance to the Ucluelet Volunteer Fire Brigade (UVFB) as it relates to the following:

- The resumption of full fire department activities in a staged, and responsible manner that aligns with expectations from public health
- The provision of the services considering necessary COVID-19 precautions
- Providing a safe environment for members

The document is divided into functional sections as follows:

- An outline of the basic COVID-19 Impact Mitigation Strategy, and its five component pillars
- An overview of general recommendations for the UVFB in keeping with the basic strategy
- Specific fire-related commentary and feedback for infusion into the planning and preparation efforts.

Disclaimer

While much effort has already been put into COVID-19 planning, and more will come in the weeks and months ahead, it is important to note that it is not possible to create a zero-risk environment. More specifically, the risk of COVID-19 infection cannot be 100% eliminated.

This notwithstanding, with appropriate measures in place the risk of infection can be greatly reduced and the potential of its spreading, greatly minimized.

The information within this document is current at the time of production and will be updated as new information becomes available.



COVID-19 Impact Mitigation Strategy – The Five Pillars

The fundamental approach to mitigating the spread of COVID-19 is conceptually simple and consists of the following five pillars.

1. SELF ASSESS FOR SYMPTOMS AND RETURN WHEN HEALTHY

The first pillar of the mitigation strategy will be to make efforts to prevent illness from arriving at the hall in the first place. The best approach to this end will be to screen incoming members on symptom presentation. This will not eliminate asymptomatic people but is key to reducing potential arrival of illness.

For anyone that does have COVID-19 like symptoms, it will be important to determine if / when they are safe to return to the firehall.

2. PHYSICAL (SOCIAL) DISTANCING

Efforts to maintain a physical distance of at least 2 metres (6 feet) between people at all times must be made. In doing so, it becomes difficult for anyone to become infected by someone else, whether they are symptomatic or asymptomatic.

3. HAND HYGIENE

By focussing on keeping your hands clean, you reduce the possibility of people infecting themselves when their hands contact virus droplets on surfaces. Doing so also reduces the potential to spread the virus via common use objects (railings, door handles etc.).

Proper hand washing should occur regularly and should entail using soap and washing with warm water for at least 20 seconds.

4. FACE TOUCHING AVOIDANCE (E.G. TOUCHING EYES, MOUTH, NOSE, ETC.)

Another way to avoid getting infected is to encourage the avoidance of touching your eyes, nose, or mouth with hands. In lieu, use of one's shoulder, forearm, or a tissue if an itch must be addressed.

5. ENHANCED CLEANING

Regular cleaning of all high-touch surfaces and common use objects is another important way to curtail the spread.

The District of Ucluelet janitorial staff regularly cleans the firehall with focus on high-touch areas.



The Fire Department as Part of a Broader Ecosystem

The mitigation strategy outlined above is simple by design, but it can be tricky to apply. A robust workplace COVID-19 plan will include support, education, and tools for firefighters to use when they are not in the firehall.

By embedding these directly into the workplace plan, it introduces consistency in all areas of firefighters' lives. This is important as COVID-19 does not distinguish between spreading at home, at work, or in the community, and neither should your approach to minimizing its spread.

The art of applying the strategy comes in finding effective ways to apply it in a way that appreciates the differences between the home, the community, and the workplace. The focus of this guide is guidance for firefighters while at the firehall.

General Recommendations for Fire Department Operations

Fire department operations will resume in a phased-in approach, and the recommendations that follow may be best introduced in steps. This will provide an opportunity to see how everyone responds to the measures introduced, and if they are being achieved. If compliance is at a high level during the initial stages of resuming operations, additional operations can also be considered for resumption.

PREVENTING ILLNESS

- To the extent possible, continue to minimize the number of members onsite.
- Screen members
 - Educate everyone to prevent all symptomatic individuals from arriving at the firehall
 - Self-screen at home prior to attending the firehall and repeat with their peer group once onsite (while practicing physical distancing). This approach introduces an element of accountability to the mix.
 - Members will be sent home if they have COVID-19-like symptoms identified on arrival at the firehall.
 - While onsite, if any member develops symptoms, they will leave the hall immediately.
- For members who are at home with symptoms, follow up will take place to track status and encourage testing.
- For confirmed positive test results that come to light after a being at the firehall, the following steps will take place:
 - Gathering of case background specifics
 - Appropriate notifications will be delivered
 - Ongoing monitoring and screening will be conducted
 - Enhanced cleaning measures are in place for primary work areas
 - Conducting case follow up including monitoring and liaison with Public Health
- Protocols for allowing department access following member illness will be established
 - Protocols will be in keeping with public health recommendations for returning members following illness.



FIRE HALL RECOMMENDATIONS

- Alcohol-based hand sanitizer dispensers/bottles are located near entrance doors, and both meeting rooms.
- The Impact Mitigation Guide will be posted in the firehall and distributed to members.
- To the extent possible, design traffic flow will be unidirectional to minimize close contact of members
- For traffic flows where physical distancing is not possible, members are encouraged to give the right of way as others approach.
- For blind corners, extra caution will be used to observe others approaching in the opposite direction.
- Whenever possible, keep doors are to be kept open to eliminate door handles and doors acting as high touch points.
- Movable objects that can act as infection vectors will be identified and a cleaning procedure or elimination of the object will take place.
- Position proper hand washing technique posters in all bathrooms.
 - Consider also notices about avoid touching of face.
- Turnout Gear Room
 - Wipe down bench/change areas
- Bathrooms
 - Increased frequency of cleaning has been implemented

TRAINING ACTIVITIES

- Prior to commencing with training, the Officer in Charge (OIC) or Training Officer (TO) must assess each training session using the COVID-19 Risk Assessment Tool to determine:
 - Risk Factors
 - Risk Mitigation
 - If the training is essential or non-essential
 - Risk level to personnel in proceeding with training
- The completion of the Risk Assessment Tool will inform if the training should proceed, and what steps need to be implemented to mitigate a potential COVID-19 exposure. The identified risk factors and risk mitigations for each training session shall be shared with personnel prior to the training commencing.
- Assign POC members into platoons maximum 6 per platoon including one officer.
- All group training to be in accordance with Provincial Health Officer directive.
- Weekly paid on call training - stagger paid on call training start times by 15min increments for each platoon Wednesday evening starting at 18:00
- POC recruit training to be conducted on Tuesday evenings starting at 19:00 with group split into groups of 4 plus 1 instructor per group. Each group to stagger start time by 15 min.
- Maximum 4 members per apparatus/vehicles
- Conduct as much physical training as possible at the fire hall location(s) to reduce travelling in groups.
- Training stations to be set up to allow for small group activities.
- Classrooms will be set up in accordance with 2m physical distance.



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- Occupant Load signs based on 2m physical distance requirements posted in all fire station meeting rooms.
- All group meetings that cannot meet the 2m physical distancing requirements will be conducted virtually.
- Any catering required for training will be individual orders. No buffet style meals will be permitted.

FIRE PREVENTION ACTIVITIES

- Prior to commencing with fire prevention activities (Inspections, Plan Review), the Fire Prevention Officer (FPO) or Officer in Charge (OIC) will assess each fire prevention activity using the COVID-19 Risk Assessment Tool to determine:
 - Risk Factors
 - Risk Mitigation
 - If the fire prevention activity is essential or non-essential
 - Risk level to personnel in proceeding with the fire prevention activity
- The completion of the Risk Assessment Tool will inform if the fire prevention activity should proceed, and what steps need to be implemented to mitigate a potential COVID-19 exposure. The identified risk factors and risk mitigations for each fire prevention activity shall be shared with personnel prior to the activity commencing.
- Maintain 2m physical distancing during all fire prevention activities.
- Prioritize Inspections using risk-based model as businesses reopen: A - Assembly Occupancies, B – Care & Detention Occupancies, C - Residential Occupancies, D - Personal Service Occupancies, E – Mercantile, F – Industrial Occupancies.
- No public education activities at the fire halls until further notice.
- Permit applications to be done online.
- Plan review to be done online. Any communications with developers/contractors to be done virtually. (e.g.: Fire Dept Checklist, Development Plans, Fire Safety Plans, Construction/Demolition Fire Safety Plans)

OTHER ACTIVITIES

- Public access to the fire hall will remain restricted.
- Occupant loads posted in all fire hall facilities in accordance with 2m physical distancing.
- 2m floor markings in public areas in fire stations to be provided.
- Fire Dispatch to maintain separation from fire operations. Dispatchers to enter/exit room from separate doors. (signage to be provided). Occupant load posted in accordance with 2m physical distance requirements
- Fire Station meeting rooms – seating to meet 2m physical distancing. Occupant load posted.



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COMMUNICATE YOUR COVID-19 MITIGATION MEASURES

The measures put in place as part of the COVID-19 response will only function if all members are aware of them as well as of the expectations placed upon them as part of this strategy.



Appendix O – Measures Specific to Outdoor Workers

- Practice the 2 meter/6.5' physical distancing at all times. If this does not allow you to complete a job safely then delay the job and address this issue immediately with your supervisor.
- Sanitize vehicles, tools and equipment after each shift.
- Only one person per vehicle, and please do not carpool to work.
- Safety meetings continue to occur and will contain COVID-19 specific topics related to worker safety and identification and remediation of likely job-site sources of exposure to COVID-19.