

# BC Hydro COVID-19 Protocol

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*Site C Clean Energy Project*

*June 25, 2020*

*Revision 1*

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## Version History

Date	Version	Revisions
June 25, 2020	1	Updates in response to Northern Health comments and updates on the implementation of measures.

## **1.0 Project Overview**

### **1.1 Project Description**

BC Hydro's Site C Clean Energy Project (the Project) will be the third dam and hydroelectric generating station on the Peace River in northeast B.C. The Project is split between dam site work such as construction of the generating station and spillways and off-dam site work including transmission line construction and realignment of sections of Highway 29. The Project started construction in August 2015 and is in the fifth year of construction. The fifth year of construction was forecast to be the busiest year of work for the Project and have the highest number of workers on the Project. The dam site is located approximately 7km southwest from the City of Fort St. John. There is a hospital operated by the Northern Health Authority (Northern Health) in Fort St. John. There is also an airport in Fort St. John which is serviced by charter and commercial flights. Commercial flight schedules are currently highly reduced during the COVID-19 pandemic.

The Work on the dam site is completed through multiple Prime Contractors, with BC Hydro as the owner and prime for a couple of the workfronts including the security perimeter and gates. Each Prime Contractor is responsible for their work sites and activities and manages several sub-contractors. All workers whose housing is on the dam site live in the worker accommodation on the North Bank operated by ATCO Two Rivers Camp Services (ATCO) regardless of their employer or contracting model. Other workers live at home in nearby communities or stay in temporary accommodation and commute to the dam site, or other Project work sites such as the transmission line, reservoir clearing or Highway 29. A small temporary camp may be implemented for reservoir clearing on the south bank.

The main BC Hydro construction office is located just across a road from the worker accommodation. BC Hydro has 11 satellite offices, 7 on the dam site. The two largest Prime Contractors use shuttles to transport workers to and from their worksite. BC Hydro workers typically walk to the main construction office or have light duty trucks assigned to them to move around the site.

### **1.2 Worker Accommodation Population**

On March 18, 2020, BC Hydro announced it was substantially reducing certain work activities on the Project in response to the increasing escalation of provincial measures to manage the global COVID-19 pandemic. Work at the dam site was scaled back to only those activities that were critical to achieve river diversion and essential services such as site security, safety and environmental protection.

The off-dam site construction activities related to the re-alignment of Highway 29, reservoir clearing, the construction of the transmission line and substation, and environmental mitigation and monitoring programs are continuing to the extent possible as those workers generally do not stay in the camp.

Based on the application of additional guidance from the Provincial Health Officer, Ministry of Health and Northern Health regarding limiting the spread of COVID-19, BC Hydro is

implementing a phased approach to restart selected work which will increase the number of workers staying at the worker accommodation over the course of spring and summer 2020. The worker accommodation capacity increased from 1750 rooms to 2200 rooms as of May 31, 2020. The number of workers returning to the worker accommodation during each phase will depend on the work being restarted.

Site C employers, including BC Hydro are responsible for work shift schedules for their workers. BC Hydro and ATCO's COVID-19 measures are designed to be effective independent of shift schedules.

BC Hydro will closely monitor the work ramp-up, with regular formal assessments so any issues can be quickly addressed and compliance with current provincial guidance is maintained.

BC Hydro's Senior Coordinator will review the following Site C information weekly during the ramp-up to identify any potential issues quickly:

1. Metrics from pre-access screening to detect if an appreciably higher percentage of workers are being identified as needing to enter isolation.
2. Metrics from the Clinic to identify if an appreciably higher percentage of workers are being identified as needing to enter isolation, particularly those from a specific contractor or workfront.
3. Metrics from contractors to identify if an appreciably higher percentage of workers are being identified as needing to enter isolation.
4. Verification reports by BC Hydro safety staff for compliance with provincial guidelines on workfronts and the worker accommodation.
5. Any information disclosed from positive COVID-19 cases which may occur among the workforce.

BC Hydro will consult with the other Prime Contractor Senior Coordinators, the Clinic and Northern Health as needed during this process to promptly address any issues that may arise.

## **2.0 Objective and Scope**

This Protocol is prepared in accordance with the Order of the Provincial Health Officer – Industrial Camps, dated April 23, 2020 (the Order) primarily for BC Hydro's workers housed at the Project's worker accommodation and working at the dam site but living outside the worker accommodation. However, section 3.0 describes the policies and measures applicable across the dam site and for multiple employers. The worker accommodation is the only congregate housing facility used by BC Hydro workers for the Project year-round however some BC Hydro workers live in local communities and a small temporary camp for reservoir clearing workers on the south bank is being planned.

Other employers at the dam site will also prepare COVID-19 management protocols specific to the unique circumstances of their work activities and sites however as the worker accommodation houses workers from different employers, the measures in place at the worker

accommodation are the standard for all employers and are described in section 3.0 of this Protocol.

Policies specific to the workers of individual employers are part of each employer's COVID-19 training and information outreach activities and is overseen by the Employer's Coordinator. Site C workers are familiar with having variations in policies between employers as Site C has been a multiple Prime Contractor site for almost five years with multiple unions on-site and different policies and labour agreements.

## **3.0 Project Wide Policies**

The following policies are applicable across employers with workers staying in the worker accommodation at the dam site unless otherwise specified.

### **3.1 Approach for Site C Coordinator Assignment and Delegation**

BC Hydro is implementing an integrated approach to establishing Coordinators to comply with the Order's intent. The approach includes all employers at the dam site with workers staying in the accommodation. BC Hydro understands the Order is intended to prevent the transmission of COVID-19 in congregate settings thus allowing industrial construction projects to keep operating, without burdening provincial health officers and employers with inefficient administrative overhead with many points of contact.

BC Hydro is working with the Prime Contractors that have employees housed in the worker accommodation including Peace River Hydro Partners (PRHP), Aecon-Flatiron-Dragados-EBC Partnership (AFDE) and ATCO, to identify individual 'Senior Coordinators' to represent each major employer and their sub-contractors and form a Coordinator Council for the Project. These Senior Coordinators will collaborate to align the employers' protocols to ensure full compliance across the Project. BC Hydro's understands this "Rollup Coordination" approach is also being proposed for other major industrial construction projects. BC Hydro's Senior Coordinator is identified in section 4.1.

Senior Coordinators are accountable for the key roles described in Table 1 and will retain or delegate duties as appropriate to Assistant Coordinators who are more directly responsible for and accessible to workers. All delegations will be in writing so that Assistant Coordinators have a clear understanding of their responsibilities and lines of communication.

To assist with contract tracing, Senior Coordinators are ensuring the following information is be available for health authorities on their request for a minimum of 30 days.

- BC Hydro's Senior Coordinator is responsible for liaising with other employer's Senior Coordinators to ensure that health authorities can quickly receive the following information about a worker or workers:
  - camp accommodation records,
  - work site assignments,
  - worker pod assignments and
  - transportation modes.

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- BC Hydro's Senior Coordinator is responsible for ensuring that dam site perimeter gate log records are available from the perimeter security contractor.
- The ATCO Senior Coordinator is responsible for ensuring that a list of workers staying in the worker accommodation can be provided for any day(s) requested with their contact information.
- Prime Contractor Senior Coordinators are responsible for ensuring that updated contact information is available for workers linked to their work site assignment, worker pod assignments and transportation modes.
- Prime Contractor Senior Coordinators are responsible for ensuring all sub-contractors comply with this protocol and provincial requirements for industrial camps.

Prime Contractors are encouraged to consider a similar rollup of coordinator responsibilities with their sub-contractors, to achieve the same objectives of preventing transmission of COVID-19 while ensuring efficient communications with Northern Health.

BC Hydro will submit a contact list of all Senior Coordinators to the local Northern Health Medical Health Officer.

BC Hydro has a contract with International SOS (ISOS) to provide primary health care at an on-site Medical Clinic ('Clinic'). The Clinic is staffed with experienced medical personnel and advanced care medical equipment. Currently, the Clinic manages all respiratory cases in accordance with Provincial Health Officer, Ministry of Health and Northern Health guidance as well as the *International SOS Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic*.

Given that primary health care is available at the on-site Clinic, BC Hydro will not inform Northern Health of every worker with COVID-19 like symptoms. Instead, the Clinic will inform Northern Health if a case under their care meets the standard described in the *ISOS Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic*. This will limit the demands on Northern Health and fully utilize the skilled health care workers on-site to care for workers.

Table 1: Coordinator Duties and Delegation

Coordinator Duties	Proposed Assignment
Act as a liaison between the employer and the health officer or Provincial infection prevention and control officer;	Senior Coordinator
Oversee the implementation of the Protocol;	Senior Coordinator
Monitor the health of workers daily for symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing), keep a daily record of monitoring activities	Assistant Coordinators
Inform the health officer or Provincial infection prevention and control officer if any worker exhibits symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing).	Project Health Clinic
<i>Note: See amendment to this duty as described above.</i>	

Oversee the manner in which workers are transported between their accommodation and worksite to ensure that workers are transported in such a way that it limits the risk of transmission of SARS-CoV-2 between the workers and to the driver to the extent practical;	Assistant Coordinators
Monitor the compliance of workers with the requirements imposed upon them by this Order;	Assistant Coordinators
Inform the health officer or the Provincial infection prevention and control officer of any failure to implement the Protocol on the part of the employer, or if a worker fails to comply with the requirements imposed upon the worker by this Order.	Senior Coordinator
Approve workers leaving the accommodation if not already permitted under the terms of the [employer's] protocol.	Senior or Assistant Coordinators
Train Assistant Coordinators how to monitor for potential COVID-19 symptoms.	Senior Coordinators

References (Located in Appendix B):

International SOS Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic, dated March 4, 2020.

Order of the Provincial Health Officer – Industrial Camps, April 23, 2020.

### 3.2 Positive COVID-19 Test Disclosure

BC Hydro is an essential service provider and expects all its employees including those on Site C, to notify their managers if they test positive for COVID-19 so that BC Hydro can track positive cases and take appropriate actions to protect worker health and safety such as enhanced deep cleaning, restricting work or other measures.

BC Hydro has communicated a similar expectation to all Site C contractors for their workers to confidentially disclose to their employer if they have been tested for COVID-19 or received a positive COVID-19 test result. Only information critical for the response is provided to BC Hydro. All identifying worker information is kept confidential and only disclosed to the staff or medical professionals required to respond to the positive test. BC Hydro will also confirm that Northern Health is aware of any positive case that is disclosed to BC Hydro from another health authority area or province so that contact tracing can be implemented, and any necessary direction can be provided to the Project.

### 3.3 Access to health professionals and notification of health officer

All Project workers have access to the Project Health Clinic (Clinic) located in the worker accommodation. The Clinic opened at the Project's dam site on March 1, 2016 and supports a healthy workforce, reduces incremental demand from the Project construction workforce on local health care services, and complies with requirements of the Environmental Assessment Certificate issued for the Project by the Province of British Columbia.

The Clinic has an external and internal entrance. The Clinic provides Project workers with access to primary and preventative health care and work-related injury evaluation and treatment services. The Clinic is open seven days a week, 24 hours a day. An advanced care paramedic is on-duty 24 hours a day. A nurse practitioner and when warranted by demand, a registered nurse are on-duty during the day and on-call at night.



The Clinic is operated by Halfway River International SOS Medical Ltd. The Clinic staff are supported by an off-site Medical Director licensed to practice in British Columbia. They are also supported by an administrative staff member on-site and other off-site company resources.

While it is recognized that sick notes are not recommended under the *Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic* guidelines (April 28, 2020), the Clinic does provide these types of notes for workers if required by an employer to reduce demands on the local health care system and visits to the community.

The Clinic provides care in accordance with provincial regulations and public health officer guidance and as described in the ISOS *Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic*. The Clinic is equipped with appropriate PPE for the health care that is provided by the staff including gowns, gloves, procedural/surgical mask and eye protection when providing care to suspected or confirmed COVID-19 cases. N95 respirators are also available if required for specific procedures.

The Clinic performs COVID-19 testing as indicated by provincial guidelines. The number of tests taken, and results of those tests are confidential however workers are encouraged to disclose tests and results as described in section 3.2 either through the Clinic or directly to their employer. The Clinic will not disclose any COVID-19 test results to the worker's employer or BC Hydro without the consent of the worker. The Clinic staff also perform daily checks on any workers in isolation to monitor their health.

The Clinic can direct workers to additional levels of care in the provincial health system if required. The Clinic staff also work directly with the Medical Health Officer for Northern Health when required.

Workers are requested to call the Clinic for an initial phone assessment or to make an appointment to visit the health practitioners. This allows the health practitioners to take appropriate precautions depending on the worker's symptoms and the nature of the visit. With potential COVID-19 cases, the Clinic tries to limit the need to visit the Clinic and performs as much of the assessment by phone or in the worker's room with appropriate PPE and disinfection of all equipment after use. If urgent in-person intake is required, the patient is evaluated in a COVID-19 prepared exam room which is sanitized after each use.

References (Located in Appendix B):

International SOS Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic, dated March 4, 2020.

### **3.4 Pre-Travel to Site**

To reduce the risk of an ill worker or visitor coming to the Project, BC Hydro and contractors have implemented the following measures:

- All non-essential site tours, meetings and on-site training are postponed.
- Teleconference options are being used for all meetings as feasible.

- Workers who feel sick at home are instructed to contact their employer, stay home and contact their health professional or 811.
- Prior to leaving their home residence for travel to the site, all workers must complete the provincial COVID-19 self-assessment and stay home if directed to isolate.
- Workers are screened again prior to boarding commercial and charter flights.

### **3.5 Pre-access Screening at Project Security Gates**

BC Hydro is carrying out a pre-access screening program at two of the three security gates where screeners conduct the BC Ministry of Health COVID-19 self-assessment, along with a non-invasive temperature scan. The temperature scan is carried out in the worker's vehicle and if necessary, a secondary check with a hospital grade electronic oral thermometer can be carried out privately inside an isolation room in a trailer.

Only commercial vehicles greater than 5 ton are authorized to access and exit site through Gate B on Old Fort Rd. All other traffic (private, commercial, non-commercial) is required to access and exit site through Gate A located off the south end of 269 Rd. Gate C on the south bank is closed and managed by remote access control. Anyone entering through Gate C is directed to the health screening at Gate A.

Each worker is first assessed by Occupational First Aid (OFA) Level 3 attendants and a secondary screening by Clinic staff can be carried out if warranted. A BC Hydro representative will notify the worker's employer if they are required to self-isolate. No other details of the assessment will be provided to BC Hydro or their employer.

If a worker is recommended for self-isolation, regardless of if they are self-isolating at home or in the camp, their site card will be temporarily deactivated during their isolation period.

### **3.6 Response and Isolation of Symptomatic Workers**

ATCO and the Clinic have implemented an isolation and quarantine plan to manage any contagious illness, including seasonal influenza, gastrointestinal infections, and COVID-19. There are an additional four dormitories (120 rooms) that could be converted to self-isolation and quarantine, if necessary. COVID-19 cases would be isolated separately from other contagious cases. Guests who are in self-isolation or quarantine are not permitted in common areas of the lodge.

BC Hydro and ATCO have issued information to workers about what to do if they feel sick, especially with flu-like symptoms while in the worker accommodation. They are instructed to not leave their room but to contact the Clinic at 778.844.0281 for a pre-screening. A trained professional from the Clinic will come to the workers room if further assessment is necessary to determine if they need to be moved to the isolation dorm.

ATCO will provide meal service to guests who are self-isolated. The Clinic will provide medical services to guests who are self-isolated. ATCO has constructed a "quarantine smoking structure" outside of the furthest dormitory and the ISOS clinic has nicotine patches on hand.

The employer's protocols address their employee's compensation during isolation.

If a guest in the camp refuses to follow medical advice or a COVID-19 compliance measure, the individual may be subject to eviction from the accommodation, possibly also from site.

- If a worker has seriously breached a COVID-19 compliance measure and is subject to enforcement, but remains in camp, they will remain in isolation while their employer uses established Site C transportation protocols to safely get them home.
- If a worker has seriously breached a COVID-19 compliance measure and is subject to enforcement, but has left camp on their own, their employer or the Clinic will report the protocol violation to Northern Health and take further measures.

References (Located in Appendix B):

ATCO - COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO), Version 4 - May 28, 2020.

International SOS Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic, dated March 4, 2020

### **3.7 Communication to Workers**

BC Hydro established a website with COVID-19 information that is accessible by workers and the public. The website address is <https://www.sitecproject.com/COVID-19> and it is linked on the home page of the Project. The website includes information which is regularly updated on:

- Official orders and guidance from the public health officer, the province and other ministries
- Daily update on the number of workers in worker accommodation and in self-isolation in the worker accommodation
- Infographics on reducing the spread of COVID-19
- Vehicle occupancy policies at the Project
- Project worker accommodation to Fort St. John shuttle service
- Enhanced health screening measures at the Project access points
- BC Hydro's response to potential COVID-19 risks
- Enhanced COVID-19 measures at worker accommodation
- Other resources for contractors
- A FAQ document for workers

BC Hydro also issues COVID-19 related site wide notices for contractors and workers as needed. This general information is in addition to the training which is being developed by all Site C employers including BC Hydro to train workers regarding self-assessment for COVID-19 symptoms and COVID-19 specific policies. This training will be incorporated into the orientation training for all workers.

### **3.8 Workers Accessing Local Communities**

BC Hydro has temporarily shut down the operation of the shuttle between the local community of Fort St. John and the worker accommodation. Individual employers on the site have different policies for their workers leaving site which will be described in their respective protocols. BC Hydro's policy is described in section 4.4.

As the provincial restart program progresses, BC Hydro will monitor the situation in Fort St. John and will review the possibility of restarting the Fort St. John shuttle service with appropriate hygiene, physical distancing and other measures in place. Any restart of the shuttle service will be discussed with local government representatives and Northern Health in advance.

### **3.9 Worker Accommodation**

The worker accommodation is operated by ATCO who have prepared a *COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO)* in accordance with the Order. BC Hydro has reviewed the document and considers it appropriate to protect workers staying at the worker accommodation from risks associated with COVID-19. ATCO will update the document to reflect any substantive changes in guidance or operation of the facility.

#### References (Located in Appendix B)

ATCO - COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO), Version 4 - May 28, 2020.

## **4.0 BC Hydro Worker Specific Policies**

The following information applies specifically to BC Hydro workers on the dam site and staying in the worker accommodation. BC Hydro workers include BC Hydro employees, dependent contractors and consultant staff.

### **4.1 BC Hydro Coordinator**

The BC Hydro Senior Coordinator is Fiona Taylor, Director Safety & Security, Site C. The BC Hydro Senior Coordinator may delegate roles to BC Hydro Assistant Coordinators as needed to meet the intent of the Protocol for each of the coordinator's duties.

Any delegated roles will be made in writing and will include regular reporting of compliance or non-compliance with the Protocol to the BC Hydro Senior Coordinator.

### **4.2 Symptomatic Worker Response**

If a worker in any of the BC Hydro construction offices feels sick, they are to remain at their desk or go outside and contact the Clinic as per Section 3.3. After evaluating the worker by phone, the Clinic can advise on next steps.

If needed, the ATCO procedure to allow a worker to transfer to the isolation dorm without going through the worker accommodation can be implemented. If the worker lives within two days drive of the Project, the worker or their employer can contact the Clinic for protocols on how the worker can drive home in a safe and responsible manner to protect themselves and communities. These protocols were developed with feedback from Northern Health.

BC Hydro workers receive their regular compensation while in isolation.

BC Hydro is tracking all employees who present with COVID-19 type symptoms including those working on Site C. All BC Hydro employees are expected to report any COVID-19 like

symptoms and, if taken, test results to their manager who will assist them in submitting the information into the BC Hydro COVID-19 tracking system. A step-by-step guide and checklist for managers is available on BC Hydro's internal COVID-19 site for reference by managers and employees along with other supporting information.

References (Located in Appendix B):

ATCO - COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO), Version 4 - May 28, 2020.

### **4.3 Worksite and Travelling back and forth to the Worker accommodation**

BC Hydro worksites for workers staying in worker accommodation include construction offices of various sizes. Prior to the COVID-19 related changes, these offices held approximately 250 BC Hydro workers. Occupancy was reduced to approximately 80 BC Hydro workers and is now slowly scaling back up in accordance with current provincial guidance.

ATCO provides the cleaning services for the main construction office in accordance with the *COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO)*, similar cleaning protocols are in place for the smaller offices.

Updated versions of all BC Hydro's procedures are available to all employees on the internal BC Hydro safety website here:

<https://hydroshare.bchydro.bc.ca/sites/safehub/documents.aspx?resultType=search&k=covid>.

BC Hydro has implemented the following measures at the main construction office with similar practices at the satellite offices:

- A reduced number of BC Hydro workers in the offices (approximately 30-60% of office capacity to start) with the remainder working from home or their vehicles.
- Two (2) meter physical distancing maintained at all times in office.
- Directional arrows installed on the floor in the hallways and walkways for one-way traffic where feasible.
- Extensive signage regarding physical distancing and hand washing is posted throughout the building.
- 90% of meetings are held using teleconference.
- Necessary in-person meetings occur for small groups only (e.g. 3-4) while maintaining distance in a large meeting room.
- Lunch room reduced seating to ensure physical distancing
  - Working on installing outdoor picnic tables to make more eating space.
- Lunch room lounge area has every second seat blocked off.
- Shared kitchen appliances (e.g. microwave, coffee machine) are wiped down before and after each use with cleaning supplies placed next to them.
- Hand sanitizer and cleaning products are available in common areas and on individual desks.

The following vehicle policies also apply to BC Hydro workers:

- Vehicles are assigned to a single individual, not shared.
- Single cab vehicles have only one occupant (the driver).

- Dual cab vehicles have a maximum of two occupants, the driver and one passenger in the rear seat, on the opposite side of the vehicle (diagonal seating).
- Crew vans have one occupant per row of seating, on the opposite side of the vehicle from the occupant in the row ahead (diagonal seating).
- Ensure the inside and outside of vehicles are cleaned before and after each use, including a disinfectant wipe down of all touch points (door handles, steering wheels, consoles, seats and windows).
- Where more occupants are required, all occupants wear masks and sterilize their hands.

In addition to these measures in the main construction office, BC Hydro employees follow *BC Hydro's Protective Measures Against COVID-19 During Work* which includes procedures for:

- PPE Cleaning – Arc Flash Suit and Face Shield, FR Clothing and Rubber Gloves
- Tool and Equipment Cleaning – Insulated Tools for Energized work
- Tool and Equipment Cleaning – All Other Tools
- Document Handling
- Maintain a Clean Workspace and Common Area
- Travelling in Vehicles and Aircraft
- Job Site – Customer Isolation Visits
- General Precautions
- Physical Distancing

Other procedures include:

- BC Hydro Work Procedure: Cleaning Measures to Prevent the Spread of COVID-19
- BC Hydro Work Procedure: Donning and Doffing PPE to Minimize Risk of COVID-19 Transmission
- BC Hydro Working in Close Proximity During COVID-19 Pandemic

References (Located in Appendix B):

ATCO - COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO), Version 4 - May 28, 2020.

#### **4.4 BC Hydro Workers and Access to the Local Community**

All workers leaving or entering the dam site perimeter must swipe their access badge. This creates an electronic record of their movements. BC Hydro has implemented the following to apply to all BC Hydro workers in the worker accommodation:

- BC Hydro is committed to the safety of our employees, and repeatedly asks that they take precautions to ensure their safety, including regular completion of the Provincial Self-Assessment tool and following applicable laws with regards to recent public health orders and guidelines.
- BC Hydro implemented strict travel policies for BC Hydro workers to prevent unnecessary travel to site in Fort St John. All travel must be approved by BC Hydro senior management.
- BC Hydro posted signage and regular reminders for BC Hydro workers to regularly wash hands, practice coughing etiquette, maintain physical distancing in the community and avoid congregating in community settings.

- BC Hydro enables BC Hydro workers to limit travelling to nearby communities by providing worker accommodation with facilities and services (including meals, internet, commissary, communication systems, laundry) that enable workers to remain in worker accommodation on days off.
- BC Hydro has set clear expectations that any BC Hydro workers can only travel to a nearby community for work-related reasons or essential personal services that cannot be accommodated in the worker accommodation. When completing such travel, BC Hydro workers must fully comply with all COVID-19 physical distancing measures.

Based on the above, BC Hydro will permit BC Hydro workers to leave site without prior approval from BC Hydro coordinators before leaving worker accommodation. Any non-compliance with BC Hydro policies will be addressed by the BC Hydro Senior Coordinator.

## **5.0 Process for Revision and Updating of the Protocol**

BC Hydro will provide copies of this Protocol to all the Site C Prime Contractors as well as post the Protocol.

BC Hydro will submit and post a revised version of the Protocol in the following circumstances:

1. If any of the reference documents in Appendix B are materially updated
2. If new guidance from the province and the provincial health officer warrants updates to the Protocol.
3. If any new COVID-19 related site wide or BC Hydro policies are developed and implemented.

## Appendix A. Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic Policy and Practice Concordance Table

The documents referenced in the concordance table are either found in Appendix B or are posted on BC Hydro's internal safety website. Use of a website allows procedures to be updated and provides a single point for workers to access up to date policies. During an inspection the current version of the procedures will be provided to the inspector.

Table A1: Steps for Employers and Operators

	<b>Guideline Section</b>	<b>Project Wide</b>	<b>BC Hydro</b>
1	Conduct a COVID-19 Workplace Risk Assessment for your work camp	ATCO: <i>COVID Infection &amp; Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO)</i>	Same as project wide.
2	Employee Education	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.7 "Communication to Workers"	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.7 "Communication to Workers"  And  <i>BC Hydro Site C COVID-19 Protocol</i> , Section 4.3 "Worksite and Travelling back and forth to the Worker accommodation"
3	Increased Hygiene and Cleaning Practices for Employers, Employees, and Contractors	All contractors and subcontractors to BC Hydro are required to submit a revised Safety Management Plan (SMP) to BC Hydro for review and approval, which addresses COVID-19. The revised SMPs must meet or exceed the standards set out by BC Hydro for its own direct employees and work fronts.	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work.</i>  <i>BC Hydro Work Procedure: Cleaning Measures to Prevent the Spread of COVID-19.</i>  <i>BC Hydro Work Procedure: Donning and Doffing PPE to Minimize Risk of COVID-19 Transmission.</i>
4	Physical Distancing	See response for #3	Posted on BC Hydro's internal safety website.



			<i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work, "Physical Distancing" section.</i>
5	Transportation for Employees – Hygiene, Physical Distancing, Reducing Social Interactions	See response for #3	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work, "Travelling in Vehicles and Aircraft" section.</i>
6	Guidance for Employees While Working – Physical Distancing and Increased Hygiene	See response for #3	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work, "Physical Distancing" section.</i>
7	Guidance for Employees During Breaks or while in Communal Spaces	See response for #3	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work, "Physical Distancing" section.</i>
8	Guidance for Situations where Maintaining Physical Distance of 2m is Difficult	Contractors to develop guidance specific to their work areas.	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Working in Close Proximity during COVID-19 Pandemic.</i>
9	Guidance on Handling Tools and Equipment	See response for #3	Posted on BC Hydro's internal safety website.  <i>BC Hydro Work Procedure: Protective Measures Against COVID-19 During Work, "Tool and Equipment Cleaning" section.</i>
10	Guidance on COVID-19 and Worker Accommodation	Appendix B - ATCO: COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO).	Same as project wide

11	Important Information Regarding First Nations and First Nations Health Centres	Not generally applicable as BC Hydro is the lead with local indigenous groups for the Project. However individual contractors may have first nations workers and contractors which will be addressed in their respective Protocols.	BC Hydro maintains a dedicated Indigenous Relations team. Every local First Nation (FN) has an appointed BC Hydro Relationship Lead (RL). The RLs are working closely with their respective FNs and are in regular contact to facilitate two-way conversations and coordination about their unique needs.
12	Physical Distancing and Local Communities	See <i>BC Hydro Site C COVID-19 Protocol</i> Section 3.8 “Workers Accessing Local Communities”	Same as project wide  And  See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 4.4
13	Face Masks – Additional cautionary information from BCCDC	Addressed in contractor protocols.	Posted on BC Hydro’s internal safety website.  <i>BC Hydro Work Procedure: Donning and Doffing PPE to Minimize Risk of COVID-19 Transmission</i>

Table A2: What the Employer Needs to Put in Place to Assess and Monitor Employee Health

	Guideline Section	Project Wide	BC Hydro
1	Employer and Employee Health Self-Assessment	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.4 “Pre-Travel to Site” and  Section 3.5 “Pre-access Screening at Project Security Gates”	Same as project wide
2	Employer Responsibility for Screening of Workers Upon Arrival and Staff Health	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.5 “Pre-access Screening at Project Security Gates”	Same as project wide
3	Monitoring Employees for Illness	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.6 “Response and Isolation of Symptomatic Workers”	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.6 “Response and Isolation of Symptomatic Workers” and Section 4.2 “Symptomatic Worker Response”
4	Supporting Employee Self-Isolation and Response to Suspected COVID-19 cases	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.6 “Response and Isolation of Symptomatic Workers”	Same as project wide
5	Monitoring close contacts of COVID-19 cases	All employers will assist Northern Health or ministry of health in contact tracing and isolating any workers as instructed by the authorities.	Same as project wide


Table A3: Precautions for On-Site Medical Clinics

	<b>Guideline Section</b>	<b>Project Wide</b>	<b>BC Hydro</b>
1	On-site Management of Company Policy Requirements	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 3.1 “Approach for Site C Coordinator Assignment and Delegation”	See <i>BC Hydro Site C COVID-19 Protocol</i> , Section 4.1 “BC Hydro Coordinator”
2	On-site Medical Clinics	See <i>BC Hydro Site C COVID-19 Protocol</i> Section 3.2 “Access to health professionals and notification of health officer”  And  International SOS “ <i>Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic</i> ”	Same as project wide
3	Considerations and Recommendations for Medical Clinics	See <i>BC Hydro Site C COVID-19 Protocol</i> Section 3.2 “Access to health professionals and notification of health officer”  And  Appendix B - International SOS “ <i>Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic</i> ”	Same as project wide
4	Outbreak Management Plan	Appendix B - <i>ATCO: COVID Infection &amp; Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO)</i> , “Pandemic Outbreak Prevention”  And  Appendix B - International SOS “ <i>Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic</i> ”	Same as project wide

## Appendix B. Protocol References

References are listed alphabetically by author.

#	Author	Document Title	Date or version
B1	ATCO	COVID Infection & Control Protocol for Worker Accommodation Area (WAA) and BC Hydro Offices (BCHO)	Version 4 - May 28, 2020.
B2	International SOS	Local Procedure for Isolation of (Suspected) Infectious Patients – Outbreak/Pandemic	March 4, 2020

	<b>ATCO Two Rivers Camp Services</b>  <b>COVID Infection &amp; Control Protocol</b>	<b>Issue date: March 12, 2020</b>
		<b>Revision Date: May 28, 2020</b>
		<b>Version:4</b>
		<b>Doc. Number: ATRL-PL-XXX</b>

## **COVID Infection & Control Protocol**

**FOR**

**WORKER ACCOMMODATION AREA (WAA) AND BC HYDRO OFFICES (BCHO)**



	<b>ATCO Two Rivers Camp Services</b>  <b>COVID Response Plan</b>	Issue date: March 12, 2020
		Revision Date: April 30, 2020
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Standard Operating Procedure – Cleaning and Disinfection Standard for the Lodge and BC Hydro Office

Introduction to ATRL Infection Control

	<b>ATCO Two Rivers Camp Services</b>  <b>COVID Response Plan</b>	Issue date: March 12, 2020
		Revision Date: April 30, 2020
		Version:3
		Doc. Number: ATRL-PL-XXX

## 1.0 BACKGROUND AND PURPOSE:

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease in Hubei Province, China to be a Public Health Emergency of International Concern. WHO stated there is a high risk of the 2019 coronavirus disease (COVID-19) spreading to other countries around the world. While concerted efforts are currently being made between Countries, Regional Health Authorities and relevant stake holders to contain the spread of COVID-19, the responsibility of ATCO is even more important to develop strategies to complement the above entities in the prevention and containment of the disease within the ATCO- BC Hydro Site C Project. The scope of this document outlines our protocol for ensuring the health and safety of our guests.

Since mid-March 2020 the British Columbia Provincial Health Officer and the British Columbia Centre for Disease Control have issued orders and guidelines that establish the operational requirements for the safe operation of the worker accommodation camp during the COVID-19 pandemic. Throughout this time ATCO Two Rivers Camp Services has worked in close collaboration with the ISOS Health Clinic (onsite), the Northern Health Authority, BC Hydro and other stakeholders to implement a number of measures to mitigate the risk of COVID-19 on the Site C Project. The protocols and procedures outlined in this document confirm that ATCO Two Rivers Camp Services is in alignment with the Industrial Camps Order of the Provincial Health Officer dated April 23, 2020 and the BC Centre for Disease Controls Guideline for Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic dated April 28, 2020.

The protocols outlined in this document will be reviewed on a regular basis as new guidelines are issued and as the number of guests in camp increases, as per the staged scale up plan, to ensure ongoing alignment with government guidance and orders.

## 2.0 COVID-19 RESPONSE MEASURES TAKEN TO DATE

Measures to increase social distancing and reduce the risk of COVID-19 have been undertaken in the worker accommodation and construction office facilities. As we move through scenarios to increase occupancy, additional measures may be implemented to continue to be in alignment with government guidelines.

Procedure/Area	Measures in Place
Check in/out of accommodation	<ul style="list-style-type: none"> <li>• Social distancing markers on floor</li> <li>• Protective barrier at front desk</li> </ul>






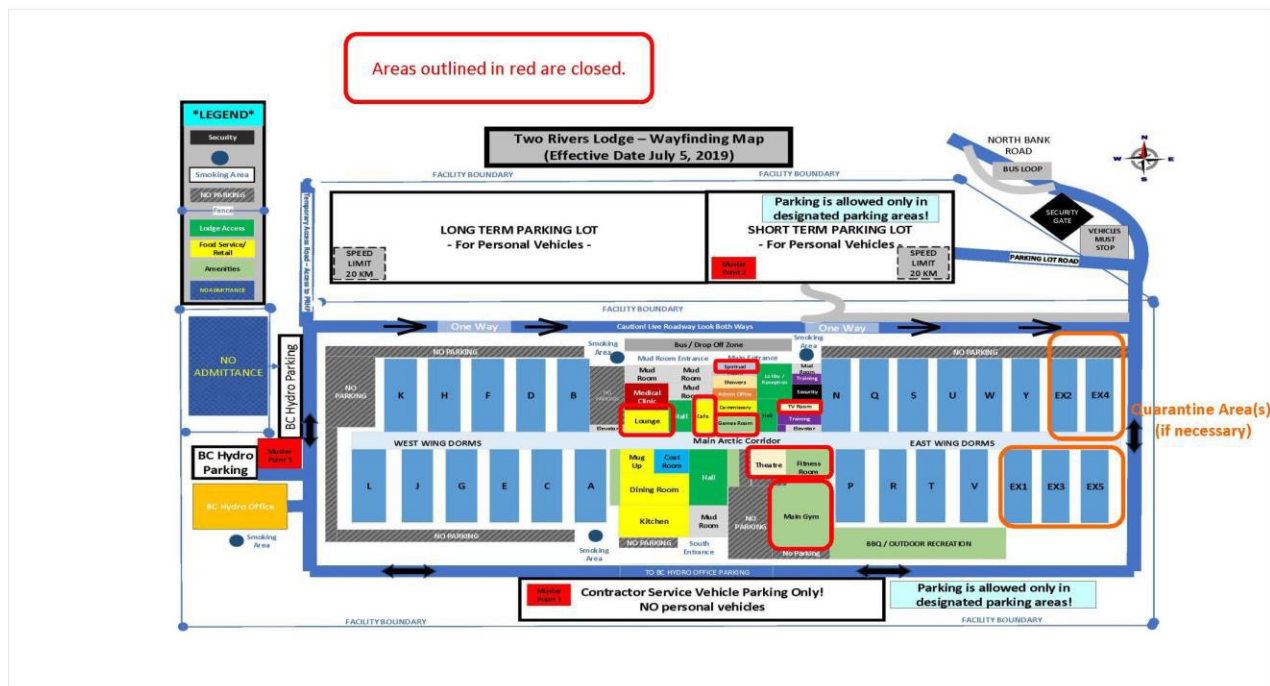
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Procedure/Area	Measures in Place
	<ul style="list-style-type: none"> <li>• Socially distant seating</li> </ul>
Closure of Common Areas	<ul style="list-style-type: none"> <li>• Gym</li> <li>• Lounge</li> <li>• TV room</li> <li>• Recreation rooms/areas</li> <li>• Theatre</li> </ul>
Cleaning & Sanitation	<ul style="list-style-type: none"> <li>• Enhanced cleaning of all high touch point areas in facilities</li> <li>• Disinfectant of self-isolation rooms upon becoming vacant</li> </ul>
Signage & Education	<ul style="list-style-type: none"> <li>• Signage throughout facilities regarding hand washing, sanitation &amp; hygiene practices, social distancing reminders</li> </ul>
Self-Isolation	<ul style="list-style-type: none"> <li>• Establishment of a 30 room self-isolation dormitory</li> <li>• Protocols in place for safe meal delivery, linen exchange, refuse disposal</li> <li>• Protocol in place to transport workers from security gate to isolation dorm without traveling through facility</li> </ul>
Dining & Meal Service	<ul style="list-style-type: none"> <li>• Mandatory handwashing before entering dining room</li> <li>• Touchless sanitizer stations throughout</li> <li>• Socially distant seating arrangements</li> <li>• Enforcement of maximum of 50 individuals in dining area</li> <li>• Removal of all self-service stations</li> </ul>
Marshalling Points (bus loading)	<ul style="list-style-type: none"> <li>• Social distancing queue barriers</li> </ul>



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**FIGURE 1 – FACILITY MAP INDICATING CLOSED COMMON AREAS & SELF-ISOLATION SPACE**

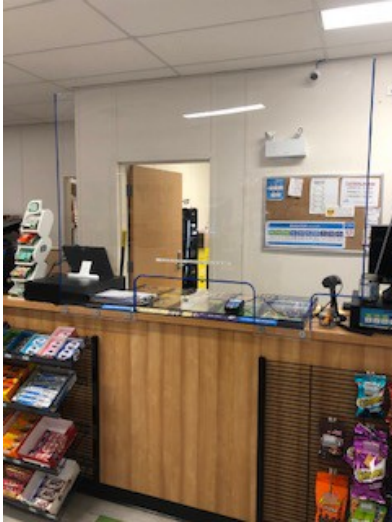



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**FIGURE 2 COVID-19 MEASURES - FACILITY PHOTOS**

<b>Social Distancing at Check-in</b>	
<b>Front Desk Protective Barrier</b>	

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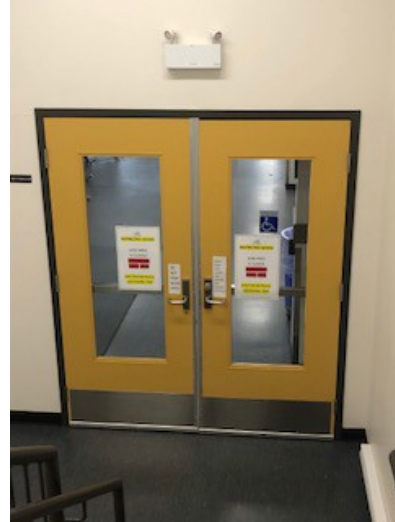
<b>Commissary Protective Barrier</b>	
<b>Elevator Social Distancing</b>	



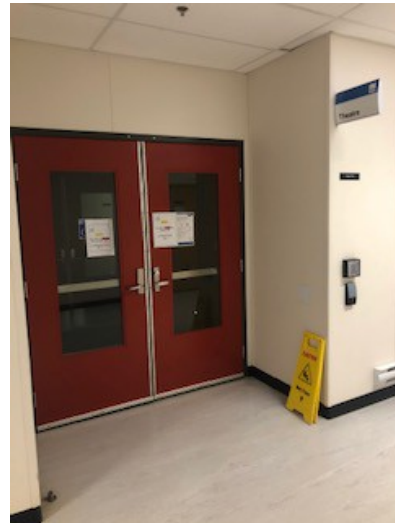
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**Closed Gymnasium**



**Closed Theatre**

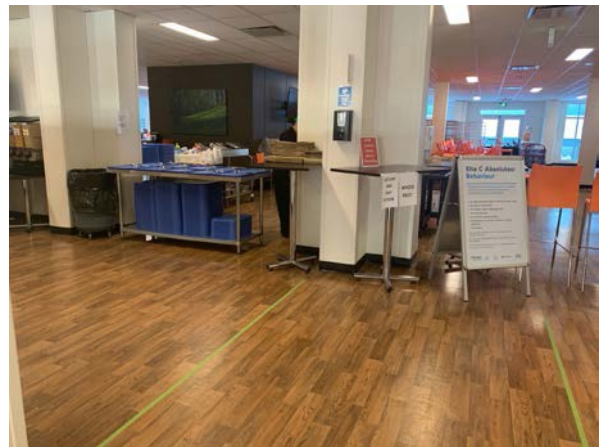





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**Dining Room Measures**





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<b>Closed Lounge</b>	
<b>Closed Coffee Shop</b>	

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### 3.0 KEY PERSONNEL & ORGANIZATION CHART

Brian Hussain – Facility Manager & **COVID Response Coordinator**: (250) 793-5336

Jim Morgan – Asst. Facility Manager (COVID Response Coord Delegate): (250) 224-4430

CJ Dann – Asst. Facility Manager (COVID Response Coord Delegate): (778) 256-7437

Wael Eltawansy – Safety Advisor: (250) 263-2703

### 4.0 REPORTING & MONITORING


ATCO Two Rivers Camp Services monitors and reports guest misconduct through the Worker Accommodation Disciplinary Committee (WADC) which addresses breaches of the Worker Accommodation Code of Conduct. Adherence to the Industrial Camps Order of the Provincial Health Officer dated April 23, 2020 and the BC Centre for Disease Controls Guideline for Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic dated April 28, 2020 is a requirement for workers staying in the camp and will be subject to WADC procedures. Procedures specific to the COVID-19 Pandemic are as follows:

If a guest in the camp refuses to follow medical advice or a covid compliance measure, the individual may be subject to eviction from the accommodation, possibly also from site.

If an employee has seriously breached a Covid compliance measure and is subject to enforcement, but remains in camp, they will remain in isolation while their employer uses established Site C transportation protocols to safely get them home.

If an employee has seriously breached a Covid compliance measure and is subject to enforcement, but has left camp on their own, their employer will report the protocol violation to Northern Health and take further measures.



	<b>STANDARD OPERATING PROCEDURE</b>  <b>Cleaning and Disinfection Standard for the Lodge and BC Hydro Office</b>	<b>Issue Date: March 04, 2020</b>
		<b>Revision #:</b>
		<b>Revised date :</b>
		<b>Document Number: ATRL7-SOP-038</b>

## 1.0 BACKGROUND AND PURPOSE:

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease in Hubei Province, China to be a Public Health Emergency of International Concern. WHO stated there is a high risk of the 2019 coronavirus disease (COVID-19) spreading to other countries around the world. While concerted efforts are currently being made between Countries, Regional Health Authorities and relevant stake holders to contain the spread of COVID-19, the responsibility of ATCO is even more important to develop strategies to complement the above entities in the prevention and containment of the disease within the ATCO- BC Hydro Site C Project.

According to the Centers for Disease Control and Prevention (CDC), “Based on what is currently known about the virus, spread from person-to-person happens most frequently among close contacts (within about 6 feet). This type of transmission occurs via respiratory droplets. Transmission of novel coronavirus to persons from surfaces contaminated with the virus has not been documented. Transmission of coronavirus in general occurs much more commonly through respiratory droplets than through fomites. Current evidence suggests that novel coronavirus may remain viable for hours to days on surfaces made from a variety of materials. Cleaning of visibly dirty surfaces followed by disinfection is a best practice measure for prevention of COVID-19 and other viral respiratory illnesses in community settings”.

The purpose of this Standard Operating Procedure (SOP) is to outline the process for preventing and/or containing the spread of the COVID-19 disease within ATCO Prime Area and particularly the BC Hydro Office (BHO) and ATCO Two Rivers Lodge (ATRL).


## 2.0 SCOPE:

This standard provides the PPE requirements for ATCO workers conducting the cleaning and disinfecting of the identified areas.

The standard also provides recommendations on the cleaning and disinfection of common areas, dorms, rooms or areas of those with suspected or with confirmed COVID-19 have visited. It is aimed at limiting the survival of novel coronavirus in key work environments. These recommendations will be updated if additional information becomes available.

The ATCO Two Rivers Lodge prime area and to a large degree, adjoining areas (e.g., PRHP, AFDE and other Contractor site offices), comprise most non-healthcare settings that are visited by the general public outside of a frequently lodge facility.

Cleaning refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. But by removing the germs, it decreases their number and therefore any risk of spreading infection.

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Disinfecting works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces. However, killing germs remaining on a surface after cleaning further reduces any risk of spreading infection will require both cleaning and disinfectants.

### **3.1 0 GUIDANCE/ PROCEDURE:**

Timing (frequency) and location of cleaning and disinfection of surfaces in ATCO prime areas on the BC Hydro Site C project is key part of this procedure. The following areas are specific:

At the lodge, office, or other facilities such as the Gym, Recreation room, Weight room, Dining room, Lodge lobby, Retail outlets and the Theater:

It is recommended to close off areas (office, rooms and other areas) used by the infected individuals and wait, if practical, before ATCO workers begin cleaning and disinfection to minimize potential for exposure to respiratory droplets. **If possible, wait up to 24 hours before begin cleaning and disinfection of occupied room(s).**

ATCO Cleaning workers should clean and disinfect all areas (e.g., offices, bathrooms, and common areas) used by the ill persons, focusing especially on frequently touched surfaces.

If illness manifestation occurs in a room:

ATCO Management should collaborate with International SOS medical professionals, Northern Health officials to help monitor isolated individuals to the designated areas starting with Dorms EX-2 to 5. For the purpose of this initial preparation of 12 rooms located at the furthest point (closest to the emergency exit door of EX-4). Upon significant increase in infection rates of guests/residents, the dorm will be cascaded forward utilizing the remaining rooms and subsequent identified dorms.


### **3.2 How to Clean and Disinfect**

ATCO Supply Chain should as a matter of urgency, prioritize supply of disinfectant/sanitizing products (as identified on attached list) to BC Hydro Site C Operation.

In addition, with the above, the frequency of cleaning and sanitization within identified scope and locations around the lodge and BC Hydro Office as identified in Levels 1, 2 and 3 Pandemic Cleaning and Disinfectant Logs.

#### **Levels 1: Low risk of contagion (As of January 29th 2020 in Canada)**

1. Hand washing for all employees many times, before and after lunch, after going to the washroom, at every disposable gloves removal, after a cigarette break, etc.

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2. Use of regular products with good cleaning practices. Many times, a good cleaning will eliminate 99.9% of bacterial loads.

3. Apply standard PPE procedures according to product and procedure.

4. Launder microfiber cloth with a good laundry detergent. Microfibers captures more soil and contaminants than cotton rags. They also do not release that soil easily. That's why a good laundry detergent is paramount.


**Levels 2:** Ensure sanitizing of touch points in all Lodge and BC Hydro Office at a frequency of three times in 24 hours as indicated in the Sanitization log. Please refer to the ATCO Pandemic info phase 1-6 document.

**Levels 3:** Ensure all TV rooms, Sporting, Recreation locations and water fountains are closed. Normal dining room activities and manned salad bars, disposable bowls, soup station, cutlery station, juice boxes/can beverage (subject to stock), bottle water, package salad options, bakery goods (service line), boxed cereal.

This level entail reoccurring frequency of 2 hours, subject to traffic volumes and shift considerations i.e. retail operations, BC Hydro Office hours, dining hours, mug up room hours etc. Refer to sanitization checklist.

According to OSHA: At this time, there is no evidence that the COVID-19 is spread through environmental exposures, such as encountering contaminated surfaces. Because the transmissibility of COVID-19 from contaminated environmental surfaces and objects is not fully understood, ATCO will conclude that areas occupied by people suspected to have the virus have been contaminated and will be decontaminated.

ATCO will train and enlighten all workers with reasonably anticipated occupational exposure to COVID-19 (as described in this document) about the sources of exposure to the virus, the hazards associated with that exposure, and appropriate workplace protocols in place to prevent or reduce the likelihood of exposure. Training should include information about how to isolate individuals with suspected or confirmed COVID-19 or other infectious diseases, and how to report possible cases. Training and enlightenment must be offered during scheduled work times and at no cost to the employee.


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## Surfaces

- If surfaces are dirty, they should be cleaned using a detergent or soap and water prior to disinfection.
- For disinfection, diluted household bleach solutions, alcohol solutions with at least 70% alcohol, and most ATCO approved disinfectants should be effective.
  - Diluted household bleach solutions can also be used if appropriate for the surface. Follow manufacturer's instructions for application and proper ventilation. Check to ensure the product is not past its expiration date. Never mix household bleach with ammonia or any other cleanser. Unexpired household bleach will be effective against coronaviruses when properly diluted.
- Prepare a bleach solution by mixing:
  - 5 tablespoons (1/3<sup>rd</sup> cup) bleach per gallon of water or
  - 4 teaspoons bleach per quart of water
  - (If applicable) for soft (porous) surfaces such as carpeted floor, rugs, and drapes, remove visible contamination if present and clean with appropriate cleaners indicated for use on these surfaces. - Ensure ATCO laundry sub contractor is aware of measures.
  - If the items can be laundered, launder items in accordance with the manufacturer's instructions using the warmest appropriate water setting for the items and then dry items completely. - Ensure ATCO laundry sub contractor is aware of measures.
  - Otherwise, use ATCO approved products. A great reference point would be the US Environmental Protection Agency (EPA)-approved emerging viral pathogens claims (examples at [this linkpdf iconexternal icon](#)) that are suitable for porous surfaces - Attached.

## Linens, Clothing, and Other Items That Go in the Laundry


- Do not shake dirty laundry; this minimize the possibility of dispersing virus through the air.
- Rooms with suspected and/or confirmed infected guests/residents will have linens bagged separately and tagged appropriately for identification of potential hazard for laundry to be safe guarded.
- Wash items as appropriate in accordance with the manufacturer's instructions. If possible, launder items using the warmest appropriate water setting for the items and dry items completely. Dirty laundry that has been in contact with an ill person can be washed with other people's items.

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		<b>Document Number: ATRL7-SOP-038</b>

- (If applicable) clean and disinfect hampers or other carts for transporting laundry according to guidance above for hard or soft surfaces.

### 3.3 Personal Protective Equipment

- **Cleaning staff should wear disposable gloves, masks and goggles for all tasks in the cleaning process, including handling trash.**
  - Gloves and goggles should be compatible with the disinfectant products being used.
  - Additional PPE might be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
  - Gloves and goggles should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to **clean hands** after removing gloves.
- Gloves should be removed after cleaning a room or area occupied by ill persons. **Clean hands** immediately after gloves are removed.
- Cleaning staff should immediately report breaches in PPE (e.g., tear in gloves) or any potential exposures to their supervisor.
- **Cleaning staff and others should clean hands often**, including immediately after removing gloves and after contact with an ill person, by washing hands with soap and water for 20 seconds. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains 70%-95% alcohol may be used. However, if hands are visibly dirty, always wash hands with soap and water.
- Follow normal preventive actions while at work and internalize same action by applying it at home, including cleaning hands and avoiding touching eyes, nose, or mouth with unwashed hands.
  - Additional key times to clean hands include:
    - After blowing one's nose, coughing, or sneezing
    - After using the restroom
    - Before eating or preparing food
    - After contact with animals or pets
    - Before and after providing routine care for another person who needs assistance (e.g., a child)

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#### 4.1 Identify and Isolate Suspected Cases

Identification of (new) case(s) would either be through individual self-reporting and/or through the direction of the onsite International SOS clinic medical professional. Upon communication ATCO management will relocate the infected guest or worker to the dedicated isolation wing of expansion phase 1 dorms.

According to OSHA, in all workplaces where exposure to the COVID-19 may occur, prompt identification and isolation of potentially infectious individuals is a critical first step in protecting workers, visitors, and others at the ATRL and BHO.

- Immediately isolate individuals suspected of having COVID-19 to a room in the above-stated expansion phase 1 dorm. For example, move potentially infectious people to isolation rooms and ensure they always close the doors.
- ATCO management to use established meal delivery program for occupants of the isolated dorms. Additionally, ATRL must establish a new designated smoke area dedicated to the isolated dorms occupants.
- Ensure to limit spread of the person's infectious respiratory secretions by providing them a facemask and asking them to wear it, if they can tolerate doing so. **Note: A surgical mask on a patient or other sick person should not be confused with PPE for a worker; the mask acts to contain potentially infectious respiratory secretions at the source (i.e., the person's nose and mouth).**
- Ensure only trained ATCO employees/ contractors have access to the isolated dorm(s). Restrict the number of personnel entering isolation areas, including the room of a patient with suspected/confirmed COVID-19.
- Protect workers in close contact\* with the sick person by using additional engineering and administrative control, safe work practices and PPE as per the hierarchy of hazard control (where applicable).

*\*CDC defines "close contact" as being about six (6) feet (approximately two (2) meters) from an infected person or within the room or care area of an infected patient for a prolonged period while not wearing recommended PPE. Close contact also includes instances where there is direct contact with infectious secretions while not wearing recommended PPE. Close contact generally does not include brief interactions, such as walking past a person.*

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		<b>Document Number: ATRL7-SOP-038</b>

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# Introduction to ATRL Infection Control

Training Materials



# Introduction to Infection Control

- ▶ Hand Hygiene, Gloves Usage, Microfiber Cleaning Cloths and Chemical Usage
  - ▶ What is it and how do we do it

# When do we perform Hand Hygiene and Change Gloves?



Before and after entering guest rooms. New gloves for each room.



When cleaning washrooms, change gloves per stall



When entering a new area for cleaning



After garbage removal



Hand Hygiene - 2 ways

# What are the two ways to clean your hands in the healthcare setting?

## ▶ **ABHR: #1 recommended way to control infection:**

- ▶ ABHR kills harmful germs on your hands
- ▶ Point of care accessibility
- ▶ Extremely effective method to clean hands
- ▶ Loonie size amount of product to all areas of the hands (including top and wrists)
- ▶ 20 - 30 second rub

## ▶ **Soap and Water:**

- ▶ Physical removal of harmful germs
- ▶ Entire process takes longer time 1 minute
- ▶ Use soap and water when hands are visibly soiled (blood, feces, urine)
- ▶ Use soap and water to clean hands when dealing with Isolation Cleans/Bodily Fluids/Blood

# Results of Cleaning Hands with Plain Soap and Water



Before  
>100 CFU (colony forming unit)

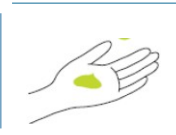


After  
> 100 CFU

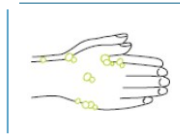
# HOW TO HANDWASH



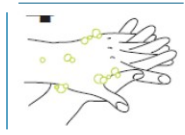
Wet hands with warm water.



Apply soap.



Lather soap and rub hands palm to palm.



Rub in between and around fingers.

Lather hands for a total of 30 seconds



Rub back of each hand with palm of other hand.



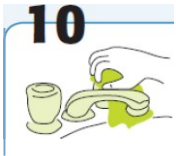
Rub fingertips of each hand in opposite palm.



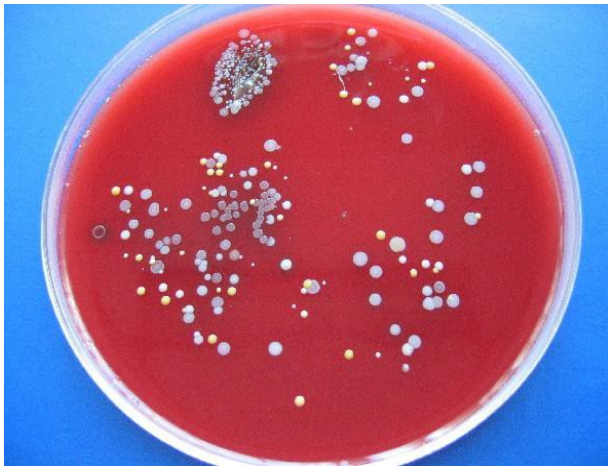
Rub each thumb clasped in opposite hand.



Rinse thoroughly under running water.



# Results of Cleaning Hands with Alcohol Based Hand Sanitizer



Before  
> 100 CFU



After  
2 CFU



# FYI Alcohol-Based Hand Sanitizers

- ▶ Instant Foaming Action
- ▶ Convenient
- ▶ 20-30 seconds of hand rubbing after application
- ▶ Contains Moisturizer to



# HOW TO HANDRUB



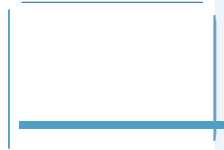
Apply 1 to 2 pumps of product to palms of dry hands.



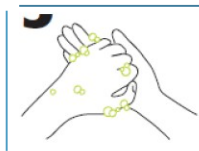
Rub hands together, palm to palm.



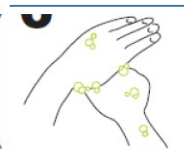
Rub in between and around fingers.



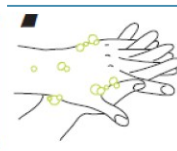
Rub back of each hand with palm of other hand.



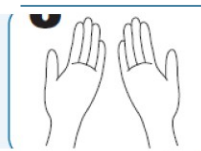
Rub fingertips of each hand in opposite palm.



Rub each thumb clapsed in opposite hand.



Rub hands until product is dry. Do not use paper towels.



Once dry, your hands are safe.



# Key points on glove use....



- ▶ **GLOVES ARE NOT A SUBSTITUTE FOR HAND HYGIENE** -it's a barrier only
- ▶ Not 100% effective
  - ▶ - failure rate- micropores
  - ▶ - "greenhouse effect"-grow germs
- ▶ Hand hygiene essential **BEFORE** putting on gloves and **AFTER** removal
- ▶ Hand hygiene between guest rooms and common areas

# Key Points of Hand Hygiene

- ▶ Alcohol based hand rub is #1
- ▶ Bare below the elbows
- ▶ Gloves are not a substitute for Hand Hygiene
- ▶ Educate staff, demonstrate & evaluate HH, glove use & audit
- ▶ Protect yourself, protect your coworkers and protect our guests

## PROPER USE OF MICROFIBER CLEANING CLOTHS

To prevent cross contamination of the various items and surfaces to be cleaned, each cloth has been designated for specific purposes. Used microfiber cloths should be washed every afternoon for use the following morning. Change Gloves when using new/clean cloth. Average 4-5 Cloths per room.



**RED**

used only for toilets



**GREEN**

used only for sinks and showers



**BLUE**

used only for surfaces, mirrors and TVs

# Charging Rags and Chemical Use

- ▶ Rags should be charged in pail and folded to achieve 4 sides of cleaning per cloth.
- ▶ Only charge what you need for 2 hours.
- ▶ Chemicals **MUST** be changed every 2 hours and pre-charged rags left at end of 2 hours must be discarded.

- ▶ **Oxivir 5 Concentrate**

- ▶ Used on hard surfaces in both guest rooms and common areas.



- ▶ **Oxivir Wipes**

- ▶ Used in medical clinic and as requested by supervisor or manager.



## **LOCAL PROCEDURE FOR ISOLATION OF (SUSPECTED) INFECTIOUS PATIENTS – OUTBREAK / PANDEMIC**

When populations are housed in an environment where facilities are shared, and food is served cafeteria style, the risk of exposure to contagions increases significantly. As such, vigilance, escalation, tact and conservative medical management of any potentially contagious illness is paramount in order to ensure the safety of the project.

### **1) Description of Site Facilities**

- a)
  - i) ATCO Two Rivers Lodge (ATRL) is the worker accommodation facility for those who are employed at the BC Hydro Site C Dam project
  - ii) Two Rivers Lodge provides individual guest rooms with private bathrooms.
  - iii) Cafeteria style hot meals are served by kitchen staff
  - iv) Cafeteria style cold items are self-serve in the bag up lunch area
  - v) Several common areas exist within the facility including the games room, gymnasium, exercise room, spiritual room etc.
- b)
  - i) The job site is large with Prime Contractors responsible for ensuring hygienic practices
  - ii) Job site lunch rooms are shared
  - iii) Job site heavy equipment vehicles are shared between employees with meal breaks taken within the equipment
  - iv) Wash cars for shared bathroom facilities exist in several locations throughout the job site
  - v) Office complexes exist with shared lunch rooms and bathroom facilities
- c)
  - i) BC Hydro has contracted International SOS (Intl.SOS) to provide medical services at the Site C Dam project.
  - ii) Intl.SOS will initiate escalation to the Northern Health Authority (NHA) if necessary for suspected contagious disease/illness
  - iii) Intl.SOS, the NHA infectious disease team, BC Hydro and all prime contractors will work together to coordinate an approach to mitigate the spread of disease/illness within the site facilities and to manage care for those afflicted with illness
  - iv) The coordinated approach may involve containment of workers within lodge facilities, particularly with infectious illnesses

### **2) Identification of Potential Outbreak / Pandemic Measures**

- a) **\*Any patients with COVID-19 type symptoms (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing) must be escalated to the NP on duty**
- b) All patients with nausea, diarrhea, vomiting, fever, or where a differential diagnosis includes impetigo ('scrum-pox'), influenza, pediculosis (head or body lice), pertussis (whooping cough), shingles/herpes zoster, will be escalated to the NP on duty immediately
  - a. The Intl.SOS duty NP will notify the Intl.SOS medical director - if more than a single case of gastro-intestinal (GI) illness or influenza like illness (ILI) in a week can be epidemiologically linked. (Refer to appendix 1)
- c) The Intl.SOS staff will initiate tracking measures and discuss with the medical director daily

- d) If an outbreak is identified the Northern Health Authority (NHA) Environmental Health Officer (EHO) will be notified by the duty NP
- e) The EHO is then responsible for alerting the Medical Health officer (MHO) except for weekends when the MHO will be contacted directly by the NP
- f) At the same time, BC Hydro (BCH), ATCO, PRHP and other prime contractors will be alerted to the potential outbreak

**Note:** It is imperative all staff recognize that fear, panic and rumors can arise in a camp environment when a potential containment situation arises. Recognition of this and careful communication is critical to mitigating speculation and panic. Added attention to the message, packaging and communications with the company and those exposed must be via the NP on duty.

### 3. Agreed Process and Location of Isolation Area

If an outbreak is declared by the Medical Health Officer (MHO) then the following procedures may be required:

- **International SOS medical staff will notify the following contacts:**
  - a) BC Hydro:
    - **COVID-19 Response Coordinator** – Fiona Taylor – 604-209-0224 (c)
    - Contracts Manager – Katy Anderson – 250-794-0834(c)
    - HSE Manager – Kent Thompson – 250-304-9873 (c)
    - HSE Manager – Justin Roberge – 250-837-8773 (c)
  - b) ATRL:
    - Facility Manager & **COVID Response Coordinator:**  
Brian Hussain - 250-793-5336 (c)
    - Assistant Facility Manager & COVID Response Delegate:  
Jim Morgan – 250-224-4430 (c)
    - Assistant facility manager & COVID Response Delegate:  
CJ Dann – 778-256-7437 (c)
    - Safety Advisor – Wael Eltawansy – 250-263-2703 (c)
  - c) Peace River Hydro Partners (PRHP) and/or subcontractors:
    - HSE Director & **COVID Response Coordinator:**  
Marina Gasman – 250-263-1168 (c)
    - HSE Manager – Ron Bedard – 250-261-8512 (c)
    - HSE Manager – Gavin Duzsik – 250-261-4930 (c)
  - d) AFDE (Aecon Flatiron Dragados EBC)
    - **COVID Response Coordinator** – Chad Sunde – 250-263-8934
    - Project Safety Manager – Jim Dow – 250-231-8925
    - Safety Coordinator & COVID Response Delegate:  
Allan Blair – 587-873-5108
  - e) Voith:
    - **COVID Response Coordinator** – Cecile McPherson – 418-319-5389
    - Site Manager – Stephane Giroux – 819-386-7050
    - HSE Manager – Don Fillion – 403-816-7961

- f) F&M Installations:
  - **COVID Response Coordinator** – not required
  - Project Manager – Leif Carlson – 250-616-6735 (c)
  - Site Supervisor – Terry Bennett – 250-714-2238 (c)
  - HSE/SSC – Tiana Barber – 250-713-4459 (c)
- g) Other Contractors: BC Hydro responsible to provide updated information
  - An emergency meeting will be facilitated at ATCO Two Rivers Lodge (ATRL) as soon as possible on the day of outbreak declaration by the MHO
  - Daily meeting times will be arranged with the frequency to be adjusted on an as needed basis
  - Intl.SOS will coordinate with ATRL and BC Hydro the designation of isolation areas with the camp as necessary and in line with requirements as indicated by the infectious illness and as per direction from Northern Health.

#### 4. Procedures and Responsibilities

- a) **Intl.SOS will implement medical management measures which may include:**
  - The provision of a masks, hand washing facilities / hand sanitizer for patients waiting in the clinic for assessment as appropriate.
  - Containment of individuals with confirmed or suspected potentially infectious illness by recommending returning home, or isolation to guest room, if being housed within the camp facility.
  - Inform ill persons that they may be contagious and require isolation for a designated period.
  - Provide patient educational handouts or online links explaining the illness, expectations for confinement, return to work, and medical management.
  - Obtain specimens for laboratory analysis to determine virus/bacteria type when possible.
  - Provide daily contact and reassessment of ill persons which may occur via telephone if not possible to do so in person in the medical clinic.
  - Complete and submit line lists of individuals effected to the MHO to keep them informed of facility activity.
- b) **BC Hydro will implement:**
  - The BC Hydro Infectious Disease Control Plan
- c) **ATRL will implement:**
  - The ATCO Pandemic Plan
- d) Prime contractors are expected to initiate their own procedures, plans and measures to manage there workforce.

#### 5. General Practice Guideline Information for Cross Contamination Risk for ATRL and Prime Contractors

- a) ATRL and Prime Contractors will commence specific cleaning recommendations within respective site facilities as per NHA MHO direction
  - Cleaning recommendations will depend upon type of infectious outbreak suspected
  - Cleaning recommendations, schedules, and products will be determined by NHA and Prime Contractors to ensure they are suitable for control



- Universal precautions are extremely important, especially when cleaning the guest rooms of contained infectious persons. Proper PPE will be imperative and may include:
  - Gloves
  - Gowns
  - Masks
  
- b) The movements of the ill persons will be limited as per containment protocol
  - No access to common areas while in contagious period as determined by MHO and Intl. SOS medical staff.
  - Absolutely no leaving the Two Rivers Lodge to go into Fort St John or their home communities while in containment, unless the ill person has chosen to recuperate at home and is cleared by Intl. SOS Medical Staff and MHO to do so.
  
- c) Ill persons remaining in camp could potentially be contained in a single wing if there are multiple workers requiring containment at one time. This will be dependent upon the type of infectious disease, MHO direction, and capacity within the ATRL to do so. Otherwise, they will be contained within their assigned room.
  
- d) Ill persons could be excluded from work for a duration of time depending upon the infectious agent. The NHA MHO provides exclusion criteria to decrease spread of the illness among healthy persons.
  
- e) Consideration will be required for individuals isolated in site facilities;
  - Delivery of meal and fluids to persons in containment
  - Provide a care package consisting of gloves, garbage bags, cleaning cloths, hand sanitizers, and instructions for use along with product MSDS sheets to all ill workers in containment
  - If a contained person smokes, gloves and masks, if appropriate, will be supplied to the patient
    - Gloves and masks may be mandatory for use when leaving the room to smoke
    - Segregated smoking areas need to be determined by ATRL and available for their use

## 6. Other Information

The BC Public Health Act and Community Care and Assisted Living Act defines the roles and responsibilities of the MHO and EHO in outbreak control (PICNet, 2016).

### a) Roles of Northern Health:

- Infection control physician (if available)
- Environmental Health Officer (EHO) – 250-263-6000 – Public Health Unit
  - Enforcement of BC public health legislation in regard to disease control and protection of the public
  - Works with the MHO and health care professionals (HCPs) to ensure appropriate outbreak control measures are in place
  - After hours emergencies call - MHO on call number at UNBC Switch Board 250 565 2000.
- Medical Health Officer (MHO) or delegate
  - Has legislative authority and responsibility to control the outbreak

- Consults with EHO, infection control, HCPs concerning outbreak declaration, control measures and declaration of the end of an outbreak
- Laboratory manager or representative
  - Provides advice on appropriate lab specimens to facilitate diagnosis
  - Assists in timely transportation of specimens to BCCDC when appropriate
- Person responsible for support services such as housekeeping and laundry
  - Assists in outbreak management by ensuring additional resources such as personnel, supplies, enhanced cleaning etc. are available
- Foods services supervisor
  - Assists the facilities manager to comply by recommendations by MHO and EHO's
- Front Line HCP – NP – 778-844-0282
  - Works collaboratively with the MHO, EHO, ATRL Managers, BC Hydro and Prime Contractors to ensure best practices are used for prevention and control of the outbreak

#### **b) Additional Consideration for Healthcare Workers**

- Although Healthcare workers are seen as essential services during an outbreak or pandemic, they must not contribute to it and cannot continue to work with symptoms due to the potential risk of spreading the illness.
  - Healthcare workers must not report to work if they become ill with symptoms consistent with the illness.
  - Development of symptoms must be reported to supervisor.
  - If Healthcare workers become ill they are now a patient and are treated as such.
- During an outbreak or pandemic regular clinical operational practice may change;
  - Regular clinical appointments may be cancelled, and patients will be encouraged to call before accessing the clinic and alternative measures may be proposed which may include telephonic assessment. This is to protect the public.
  - Facility entrances may be secured more than typical operations.
  - The facility will remain open for emergencies.
- Staff Health & Protection
  - Employees will be required to complete pre-mobilization health declarations to ensure only healthy employees come to work.
  - In the event an employee is potentially exposed to an ill individual, protocol will be initiated for enhanced self-monitoring of that employee and mandatory PPE while on duty to protect others.
  - Employees will be required to don appropriate PPE as a standard precaution when seeing all patients.
- Intl.SOS does maintain stringent infection control procedures and standards however recognizes that local governing bodies represent a level of authority during an outbreak or pandemic. As such and in the event of disagreement with Intl.SOS direction and local law or guidelines Intl.SOS employees will follow the local authorities direction during these events.

## Gastrointestinal Infections, Noroviruses, and Influenza

A case of probable GI infection defined as any one of the following conditions that cannot be attributed to another cause (e.g. laxative use, medication side effect, diet, prior medical condition):

- Two or more episodes of diarrhea in a 24 hour period – above what is considered normal for that individual **OR**
- Two or more episodes of vomiting in a 24 hour period **OR**
- One episode each of vomiting and diarrhea in a 24 hour period **OR**
- Positive culture for a known enteric pathogen with a symptom of GI infection (e.g. vomiting, abdominal pain, diarrhea)
- One episode of bloody diarrhea

### Identification:

- i) **Gastroenteritis** – the fecal-oral route is predominant mode of transmission

*Definition:* illness pertaining the digestive system – stomach and intestines

The following definitions are according to the duration of diarrhea:

- Acute — ≤14 days in duration
- Persistent diarrhea — more than 14 days in duration
- Chronic — more than 30 days in duration. Most cases of acute diarrhea are due to infections with viruses and bacteria and are self-limiting. They tend to become more non-infectious as the diarrhea persists (UpToDate)

Severe diarrhea (of any duration) defined as diarrhea with one or more of the following:

- Fever ≥ 38.5°C
- Bloody stools
- Profound systemic illness/toxicity
- Hemodynamic instability
- Mild to Moderate Diarrhea ≤ 5 days duration
- Most cases of mild to moderate diarrhea are of viral etiology, are self-limiting, and generally do not require laboratory investigations
- For patients with recent (< 3 months) or current antibiotic use, consider antibiotic-associated diarrhea.
- Earlier stool testing is warranted for patients over 70 years, severe abdominal pain

Mild to Moderate Diarrhea >5 days duration

- Culture
- Ova & Parasites for those who have travelled, prolonged diarrhea, unsafe food or water consumption (BC Guidelines (2009))

### ii) Description of Norovirus (BCCDC, 2016)

The most common symptoms

- diarrhea
- vomiting
- nausea
- stomach pain

#### Other symptoms

- fever
- headache
- body aches

Symptoms usually start 24 to 48 hours after being exposed to the virus, and generally last between 24 to 72 hours.

Fluid loss can be a serious problem for the elderly or very young

You are contagious:

- When you are sick with norovirus illness (nausea, vomiting, diarrhea) and,
- During the first few days after you recover from norovirus illness, i.e. 24- 48 hrs after last diarrheal or vomiting episode

Prevention:

- **Hand washing** with warm soapy water or alcohol based hand sanitizers
- Anyone who is ill should avoid going to work, especially food handlers or caregivers, until at least 48 hours after symptoms have stopped. This is supported by WorkSafe BC, BCCDC
- The virus is sturdy—it can live for days on surfaces without proper disinfection
- Clean up of vomit or diarrhea should occur with bleach solution: dilute bleach solution at least one part household bleach to 50 parts water - e.g. four teaspoons of bleach [20mls] to one litre of water - exercise caution with surfaces that can be damaged by bleach
- It is recommended that the person cleaning up vomit or diarrhea wear a surgical mask (easily obtained at any pharmacy); disposable, waterproof gloves; and clothes that can be changed and washed in hot water

### iii) Influenza

Commonly referred to as the flu is highly contagious respiratory illness. Whilst it often causes mild symptoms, it can be severe and can lead to serious complications.

- Seasonal influenza is the annual influenza that affects people in Canada during the winter, between November and April
- Seasonal influenza viruses change slightly from year to year
- Various strains of influenza virus circulate throughout the world each year and new strains can emerge and spread
- Most healthy people are able to recover from influenza without severe complications

- As with other viral illnesses, antibiotics do not work against an influenza virus. Antiviral medications may be used for treatment or prevention of influenza. (Alberta Health 2016)

You are contagious:

- Incubation period is 1-4 days after becoming infected
- Contagious from the day before symptoms start to 5-7 days after symptoms start
- Large amounts of influenza virus are present in respiratory secretions

Symptoms include:

- Abrupt onset of fever which can last for 3-4 days
- Body aches, headache, fatigue
- Accompanied by a sore throat, runny nose and cough. Appetite is suppressed

Treatment:

- Antiviral drug may lessen the duration of symptoms by approximately ½ to 3 days but should ideally be given within the first 24 hours
- Normally initiated in those with severe illness, underlying chronic disease, pregnancy, >65 years of age
- Standard treatment is symptomatic treatment for fever and cold symptoms

### **c) WorkSafe BC Guidelines for Infectious Disease**

*What can workers do to protect themselves?*

Workers have responsibilities to help reduce their risk of exposure to infectious pathogens, including the following:

- Attend education and training sessions
- Follow safe work procedures, including hand washing and wearing PPE, if applicable
- Seek immediate first aid and medical attention after an occupational exposure
- Report exposure incidents to supervisors or managers
- Refuse work that they have reasonable cause to believe will put themselves or others at risk

Contact precautions include routine practices, as well as the following:

- Wear gloves when entering rooms
- Change gloves after contact with potentially infected materials
- Wear gowns when entering rooms if direct patient contact is anticipated, or if the patient has diarrhea, a colostomy, or wound drainage that is not covered by a dressing
- Limit movement and transport of patients from the room
- Ensure there is daily cleaning of patient care items, bedside equipment, and frequently touched surfaces
- Dedicate the use of non-critical patient care equipment to a single patient or patients with the same infection
- Disinfect equipment after each patient contact if the item is used for multiple patients
- 
- Droplet precautions include: routine practices and contact precautions as well as the following:

- Place patients in private rooms or with other patients who have the same infection
- Wear a face shield when working with patients
- Place surgical masks on patients being moved

**For More Information:**

British Columbia Ministry of Health: <https://www.healthlinkbc.ca/>

British Columbia Centre for Disease Control: <http://www.bccdc.ca/>

Gastrointestinal Outbreak Guidelines for Healthcare Facilities, 2010. Retrieved from [http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/Other/PICNet\\_GI\\_Guidelines\\_2010\\_.pdf](http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/Other/PICNet_GI_Guidelines_2010_.pdf)

Norovirus. Retrieved from <http://www.cdc.gov/norovirus/about/index.html>

PICNet, 2016. Provincial Infection Control Network of British Columbia. Gastrointestinal infection outbreak guidelines for healthcare facilities. Retrieved from [https://www.picnet.ca/wp-content/uploads/PICNet-GI-Outbreak-Guidelines\\_Revised-June-2016.pdf](https://www.picnet.ca/wp-content/uploads/PICNet-GI-Outbreak-Guidelines_Revised-June-2016.pdf)

Provincial Case definitions for reportable diseases – Respiratory infection outbreaks in institutions, 2015. Retrieved from [http://www.health.gov.on.ca/en/pro/programs/publichealth/oph\\_standards/docs/respiratory\\_outbreaks\\_cd.pdf](http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/docs/respiratory_outbreaks_cd.pdf)

WorkSafe BC, 2009. Controlling Exposure: Protecting workers from infectious disease: <https://www.worksafebc.com/en/resources/health-safety/books-guides/controlling-exposure-protecting-workers-from-infectious-disease?lang=en>

Coronavirus information - Health Canada: <https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html>

Coronavirus information: <https://www.healthlinkbc.ca/health-feature/coronavirus-disease-covid-19>

Coronavirus Public Health Assessment: <https://bc.thrive.health/>

## **When to declare an outbreak?**

### **Gastrointestinal illness**

BCCDC defines gastrointestinal disease outbreak as:

- Two or more unrelated cases with similar illness that can be epidemiologically linked to one another - i.e. associated by time and/or place and/or exposure.

The Provincial Infection Control Network (PICNet) GI outbreak guidelines for Healthcare facilities state the potential *Outbreak/Alert Stage* is:

- When one or two suspected cases of GI infection occur within a 4-day period, it is recommended that the facility:
- Segregate patients/residents/clients with GI illness and continue to use Routine Practices plus Contact Precautions when providing direct care.
  - Ensure implementation of thorough hand hygiene and Routine Practices throughout entire unit/site.
  - Increase monitoring and recording of GI symptoms on remainder of patients/residents/clients.
  - Record self-reported GI symptoms among health care professionals (HCP).

The PICNet GI **outbreak** guidelines for Healthcare facilities outbreak is defined as:

- Three or more cases of GI infection, potentially related, occurring within a four-day period, within a specific geographic area.

### **Influenza like illness – ILI**

ILI outbreaks are defined as:

- All other facilities: two or more cases of ILI within a seven-day period with one case having a positive culture
- Influenza testing – specimen is taken and sent to PHSA labs

### **Industrial camp regulation states:**

#### **Duty to report illness**

**23** An operator must notify a medical health officer within 24 hours after it comes to the attention of the operator that there is an outbreak or occurrence of illness, above the incident level that is *normally expected*, at an industrial camp.

**This regulation is extremely vague, as nowhere does it define what normal is**

- The International SOS (Intl.SOS) Nurse Practitioner (NP) at the BC Hydro Site C Dam project will notify Intl.SOS medical director Dr. M. Evans of more than one case of gastrointestinal or ILI in one week that can be epidemiologically linked
- Dr. Evans will be briefed daily by the NP on further cases that come into the medical clinic
- A decision will then be made as to when to contact the MHO with an alert
- We will keep a spread sheet on the cases of gastrointestinal illness that presents to the medical clinic and it will be determined by the NP on duty in consultation with the Intl.SOS medical director that there is sufficient epidemiological evidence to link the cases together.

#### **To make determinations of an epidemiological link we are keeping track of**

- Contractor or subcontractor name
- Work area onsite
- Dorm or local community
- Lunch room utilized

- Symptoms
- Date of symptom onset
- Previous 48 hours movements – i.e. ate in town, stayed in camp, worked, others sick at home etc



## Appendix C. Provincial COVID-19 Guidance Documents

The following guidance documents and orders are those that are applicable for large resource sector projects with large camps.

#	Author	Document Title	Date or version
C1	Provincial Health Officer	Order of the Provincial Health Officer – Industrial Camps	April 23, 2020
C2	BC Centers for Disease Control	Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic	April 28, 2020



**ORDER OF THE PROVINCIAL HEALTH OFFICER**  
(Pursuant to Sections, 30, 31, 32, 39 (3) and 54 (1) (k) *Public Health Act*, S.B.C. 2008)

***Industrial Camps***

The *Public Health Act* and Regulations are at:

<http://www.bclaws.ca/civix/content/complete/statreg/08028/?xsl=/templates/browse.xsl>

(excerpts enclosed)

- TO: PERSONS WHO EMPLOY WORKERS IN THE AGRICULTURAL, AQUACULTURAL, FORESTRY AND RESOURCE SECTORS AND/OR WHO PROVIDE ACCOMMODATION FOR THEM IN AN INDUSTRIAL CAMP OR OTHER CONGREGATE SETTING INCLUDING A MOTEL, HOTEL OR TENTS (hereinafter referred to as “employers” and “accommodation”).**
- TO: PERSONS WHO ARE APPOINTED AS INFECTION PREVENTION AND CONTROL CO-ORDINATORS BY EMPLOYERS (hereinafter referred to as “coordinators”).**
- TO: WORKERS IN THE AGRICULTURAL, AQUACULTURAL, FORESTRY AND RESOURCE SECTORS (hereinafter referred to as “workers”).**

**WHEREAS:**

- A. On March 17, 2020 I provided notice under section 52 (2) of the *Public Health Act* that the transmission of the infectious agent SARS-CoV-2, which has caused cases and outbreaks of a serious communicable disease known as COVID-19 among the population of the Province of British Columbia, constitutes a regional event as defined in section 51 of the *Public Health Act*;
- B. A person infected with SARS-CoV-2 can infect other people with whom the infected person is in direct contact, through droplets in the air, or from fluid containing SARS-CoV-2 left on surfaces;
- C. People living and/or working in close contact with one another can promote the transmission of SARS-CoV-2 and increase the number of people who develop COVID-19;
- D. You belong to one of the classes of persons to whom this Order is addressed;
- E. I have reason to believe and do believe that
- (i) the risk of transmission of SARS-CoV-2 and a resulting outbreak of COVID-19 among workers living in congregate accommodation or working closely together at a worksite in the

agricultural, aquacultural, forestry and resource sectors constitutes a health hazard under the *Public Health Act*;

- (ii) because the risk of transmission of SARS-CoV-2 and control of outbreaks extends beyond the authority of one or more medical health officers and coordinated action is needed to protect the public from contracting COVID-19, it is in the public interest for me to exercise the powers in sections 30, 31, 32, 39(3) and 54(1) (k) of the *Public Health Act* **TO ORDER** as follows:

## **DEFINITIONS:**

In this Order:

“industrial camp” has the same meaning as in the Industrial Camps Regulation;

“Provincial infection prevention and control officer” means a person to whom I have delegated in writing my powers under the *Public Health Act* for the purpose of ensuring compliance with this Order.”

“medical emergency” means that the medical situation of a worker requires that the worker visit or be taken to a health care facility.

## **EMPLOYERS**

### **MUST**

1.
  - a. develop a COVID-19 infection prevention and control protocol (the “Protocol”) to prevent and control the risk of transmission of SARS-CoV-2 among workers in their place of accommodation, at the worksite and when travelling to and from the worksite from their accommodation; and
  - b. have the Protocol posted in a prominent place at the accommodation and the worksite and have it available to provide to a health officer or Provincial infection prevention and control officer on request or during the course of an inspection.
2. maintain high levels of accommodation, worksite and worker hygiene.
3. provide for a rapid response if a worker develops symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing), including procedures to isolate the worker, providing access to a health professional, and notifying a health officer or Provincial infection prevention and control officer;
4. not permit a worker who has symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing) to work;

5. must ensure that a worker with symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing) is self-isolating and provide the support the worker needs to self-isolate;
6. appoint a person as a co-ordinator.
7. in the case of accommodation which is in use and a worksite which is in operation on the date that this Order is issued, as soon as possible arrange for
  - a. a health officer or a Provincial infection prevention and control officer to inspect the accommodation, worksite, vehicles used to transport workers and vehicles used by workers for work and to transport themselves to and from the worksite in order to determine if the accommodation, worksite and vehicles will support the prevention and control of transmission of SARS-CoV-2 and if you have the ability to implement the Protocol in a manner that will prevent the risk of transmission of SARS-CoV-2 among workers and to other persons.
  - b. in all other cases, must arrange for the inspection before placing workers in accommodation or operating a worksite.

## **CO-ORDINATORS**

### **MUST**

1. act as a liaison between the employer and the health officer or Provincial infection prevention and control officer;
2. oversee the implementation of the Protocol;
3. monitor the health of workers daily for symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing) , keep a daily record of monitoring activities and inform the health officer or Provincial infection prevention and control officer if any worker exhibits symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing).
4. oversee the manner in which workers are transported between their accommodation and worksite to ensure that workers are transported in such a way that it limits the risk of transmission of SARS-CoV-2 between the workers and to the driver to the extent practical;
5. monitor the compliance of workers with the requirements imposed upon them by this Order;
6. inform the health officer or the Provincial infection prevention and control officer of any failure to implement the Protocol on the part of the employer, or if a worker fails to comply with the requirements imposed upon the worker by this Order.

## WORKERS

### MUST

1. follow the Protocol of your employer to prevent the transmission of SARS-CoV-2 infection;
2. follow infection prevention and control practices including diligent hand hygiene;
3. to the extent practical, reduce close contact with other persons by maintaining a two metre separation and avoiding shared spaces;
4. to the extent practical, limit the risk of transmission of SARS-CoV-2 between one another and to the driver when travelling to and from work and between shifts;
5. remain in your accommodation on days when you are not required at the worksite;
6. avoid any unnecessary visits to public establishments and only leave your accommodation if approved by the coordinator or in the case of a medical emergency or need to attend a critical appointment if it cannot be postponed or cannot be held electronically.
7. if you leave your accommodation in the case of a medical emergency or to attend a critical appointment,
  - a. you must maintain a distance of two metres from anyone with whom you are meeting, unless you are meeting with a health care provider.
  - b. you must carry a mask or tissues at all times.
  - c. if you develop symptoms of COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing) while away from your accommodation, you must put on the mask or cover your nose and mouth with tissues and return immediately to your accommodation while avoiding contact with other people to the greatest extent possible, and phone a health professional for advice.
8. self-monitor daily for signs and symptoms of illness and,
9. if you exhibit symptoms COVID-19 (i.e. fever, sore throat, coughing, sneezing, or difficulty breathing), inform the coordinator and self-isolate for 10 days, unless instructed otherwise by a health professional.

This Order does not have an expiration date.

All persons to whom this order is directed are required under section 42 of the *Public Health Act* to comply with this Order. Under section 43 of the British Columbia *Public Health Act*, you may request me to reconsider this Order if you:

1. Have additional relevant information that was not reasonably available to the me when this Order was issued.

2. Have a proposal that was not presented to me when this Order was issued but, if implemented, would
  - (a) meet the objective of the order, and
  - (b) be suitable as the basis of a written agreement under section 38 [may make written agreements]
3. Require more time to comply with the order.

Under section 43 (6) an order is not suspended during the period of reconsideration unless the health officer agrees, in writing, to suspend it.

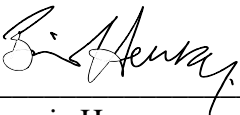
If you fail to comply with this Order, I have the authority to take enforcement action against you under Part 4, Division 6 of the *Public Health Act*.

You may contact me at:

Dr. Bonnie Henry  
Provincial Health Officer  
PO Box 9648 STN PROV GOVT  
Victoria BC V8W 9P4  
Fax: (250) 952-1570

DATED THIS: 23 day of April 2020

SIGNED:

  
\_\_\_\_\_  
Bonnie Henry  
MD, MPH, FRCPC  
Provincial Health Officer

DELIVERY BY posting on the BC Government website, posting on the BC Centre for Disease Control website and by email.

Enclosure: Excerpts of *Public Health Act* and Regulations

## ENCLOSURE

### *Excerpts of the PUBLIC HEALTH ACT and Industrial Camps Regulation*

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#### *Public Health Act [SBC 2008] c. 28*

##### *Definitions*

###### *1 In this Act:*

**"health hazard"** means

- (a) a condition, a thing or an activity that
  - (i) endangers, or is likely to endanger, public health, or
  - (ii) interferes, or is likely to interfere, with the suppression of infectious agents or hazardous agents, or
- (b) a prescribed condition, thing or activity, including a prescribed condition, thing or activity that
  - (i) is associated with injury or illness, or
  - (ii) fails to meet a prescribed standard in relation to health, injury or illness;

##### **When orders respecting health hazards and contraventions may be made**

**30** (1) A health officer may issue an order under this Division only if the health officer reasonably believes that

- (a) a health hazard exists,
- (b) a condition, a thing or an activity presents a significant risk of causing a health hazard,
- (c) a person has contravened a provision of the Act or a regulation made under it, or
- (d) a person has contravened a term or condition of a licence or permit held by the person under this Act.

(2) For greater certainty, subsection (1) (a) to (c) applies even if the person subject to the order is complying with all terms and conditions of a licence, a permit, an approval or another authorization issued under this or any other enactment.

##### **General powers respecting health hazards and contraventions**

**31** (1) If the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, a health officer may order a person to do anything that the health officer reasonably believes is necessary for any of the following purposes:

- (a) to determine whether a health hazard exists;
- (b) to prevent or stop a health hazard, or mitigate the harm or prevent further harm from a health hazard;
- (c) to bring the person into compliance with the Act or a regulation made under it;
- (d) to bring the person into compliance with a term or condition of a licence or permit held by that person under this Act.

(2) A health officer may issue an order under subsection (1) to any of the following persons:

- (a) a person whose action or omission
  - (i) is causing or has caused a health hazard, or
  - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (b) a person who has custody or control of a thing, or control of a condition, that
  - (i) is a health hazard or is causing or has caused a health hazard, or
  - (ii) is not in compliance with the Act or a regulation made under it, or a term or condition of the person's licence or permit;
- (c) the owner or occupier of a place where
  - (i) a health hazard is located, or
  - (ii) an activity is occurring that is not in compliance with the Act or a regulation made under it, or a term or condition of the licence or permit of the person doing the activity.

### **Specific powers respecting health hazards and contraventions**

**32** (1) An order may be made under this section only

- (a) if the circumstances described in section 30 [*when orders respecting health hazards and contraventions may be made*] apply, and
- (b) for the purposes set out in section 31 (1) [*general powers respecting health hazards and contraventions*].

(2) Without limiting section 31, a health officer may order a person to do one or more of the following:

- (a) have a thing examined, disinfected, decontaminated, altered or destroyed, including
  - (i) by a specified person, or under the supervision or instructions of a specified person,
  - (ii) moving the thing to a specified place, and



(iii) taking samples of the thing, or permitting samples of the thing to be taken;

(b) in respect of a place,

(i) leave the place,

(ii) not enter the place,

(iii) do specific work, including removing or altering things found in the place, and altering or locking the place to restrict or prevent entry to the place,

(iv) neither deal with a thing in or on the place nor dispose of a thing from the place, or deal with or dispose of the thing only in accordance with a specified procedure, and

(v) if the person has control of the place, assist in evacuating the place or examining persons found in the place, or taking preventive measures in respect of the place or persons found in the place;

(c) stop operating, or not operate, a thing;

(d) keep a thing in a specified place or in accordance with a specified procedure;

(e) prevent persons from accessing a thing;

(f) not dispose of, alter or destroy a thing, or dispose of, alter or destroy a thing only in accordance with a specified procedure;

(g) provide to the health officer or a specified person information, records, samples or other matters relevant to a thing's possible infection with an infectious agent or contamination with a hazardous agent, including information respecting persons who may have been exposed to an infectious agent or hazardous agent by the thing;

(h) wear a type of clothing or personal protective equipment, or change, remove or alter clothing or personal protective equipment, to protect the health and safety of persons;

(i) use a type of equipment or implement a process, or remove equipment or alter equipment or processes, to protect the health and safety of persons;

(j) provide evidence of complying with the order, including

(i) getting a certificate of compliance from a medical practitioner, nurse practitioner or specified person, and

(ii) providing to a health officer any relevant record;

(k) take a prescribed action.

(3) If a health officer orders a thing to be destroyed, the health officer must give the person having custody or control of the thing reasonable time to request reconsideration and review of the order under sections 43 and 44 unless

(a) the person consents in writing to the destruction of the thing, or

(b) Part 5 [*Emergency Powers*] applies.

## **Contents of orders**

**39** (3) An order may be made in respect of a class of persons.

## **Duty to comply with orders**

**42** (1) A person named or described in an order made under this Part must comply with the order.

(2) Subsection (1) applies regardless of whether the person leaves the geographic area for which the health officer who made the order is designated.

## **Reconsideration of orders**

**43** (1) A person affected by an order, or the variance of an order, may request the health officer who issued the order or made the variance to reconsider the order or variance if the person

(a) has additional relevant information that was not reasonably available to the health officer when the order was issued or varied,

(b) has a proposal that was not presented to the health officer when the order was issued or varied but, if implemented, would

(i) meet the objective of the order, and

(ii) be suitable as the basis of a written agreement under section 38 [*may make written agreements*], or

(c) requires more time to comply with the order.

(2) A request for reconsideration must be made in the form required by the health officer.

(3) After considering a request for reconsideration, a health officer may do one or more of the following:

(a) reject the request on the basis that the information submitted in support of the request

(i) is not relevant, or

(ii) was reasonably available at the time the order was issued;

(b) delay the date the order is to take effect or suspend the order, if satisfied that doing so would not be detrimental to public health;

(c) confirm, rescind or vary the order.

(4) A health officer must provide written reasons for a decision to reject the request under subsection (3) (a) or to confirm or vary the order under subsection (3) (c).

(5) Following a decision made under subsection (3) (a) or (c), no further request for reconsideration may be made.

(6) An order is not suspended during the period of reconsideration unless the health officer agrees, in writing, to suspend it.

(7) For the purposes of this section,

(a) if an order is made that affects a class of persons, a request for reconsideration may be made by one person on behalf of the class, and

(b) if multiple orders are made that affect a class of persons, or address related matters or issues, a health officer may reconsider the orders separately or together.

(8) If a health officer is unable or unavailable to reconsider an order he or she made, a similarly designated health officer may act under this section in respect of the order as if the similarly designated health officer were reconsidering an order that he or she made.

## **Industrial Camps Regulation**

### **Definitions**

**1** In this regulation:...

**"industrial camp"** means land or premises on which an employer, in connection with a logging, sawmill, mining, oil or gas operation, a railway construction project, a cannery, or a similar thing, owns, operates or maintains, or has established, permanent or temporary structures for use, with or without charge, by employees as living quarters....

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## Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic

April 28, 2020

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## INTRODUCTION

This guidance applies to employers, operators, employees, and contractors working in the natural resource sector, and living in employer-provided large industrial camps during the COVID-19 pandemic.

The British Columbia Provincial Health Officer (PHO) released a new [Order for Industrial Camps on April 23, 2020](#). This document assists employers to develop an operational protocol that helps employers implement this order, and other orders, notices, and guidance issued by PHO Office.

Workplaces and businesses that implement advice and guidance provided by public health officials significantly contribute to breaking the chain of transmission of COVID-19 amongst employers, employees, contractors, clients and communities.

The advice here complements the guidance prepared by the BC Centre for Disease Control (BCCDC). You are to take practical steps to maintain your operation during the current COVID-19 pandemic. The [BC Centre for Disease Control](#) is the best source for COVID-19 health information.

This guide cannot address all the circumstances that may put an employee, contractor, or client at risk of contracting COVID-19. It provides advice and key resources to help employers prevent the risk and spread of COVID-19 on work sites, as well as into communities. However, employers are encouraged to conduct a workplace risk assessment for COVID-19, as outlined below, that is specific to the business and work camp environment.

## SECTION 1: WHAT YOU NEED TO KNOW ABOUT COVID-19

### What is COVID-19 and how is it spread?

- Coronaviruses are a large family of viruses found mostly in animals. In humans, they can cause diseases ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).
- The disease caused by the new coronavirus has been named COVID-19.
- COVID-19 has been declared a global pandemic.
- COVID-19 is a reportable disease and the local Medical Health Officer must be notified if there is an outbreak or suspicion of an outbreak.
- Coronavirus is transmitted via liquid droplets when a person talks, coughs or sneezes. The virus can enter through these droplets through the eyes, nose or throat if you are in close contact.
- The virus is not known to be airborne (e.g. transmitted through the particles floating in the air) and it is not something that comes in through the skin.
- It can be spread by touch if a person has used their hands to cover their mouth or nose when they cough. That's why it is recommended to cough or sneeze into your elbow and wash your hands regularly.
- COVID-19 is a reportable disease and the local Medical Health Officer must be notified if there is an outbreak, or suspicion of an outbreak.

## What are the symptoms of COVID-19?

- The symptoms of COVID-19 are similar to other respiratory illnesses, including the flu and the common cold. These symptoms include cough, sneezing, fever, sore throat and difficulty breathing. Additional symptoms may include muscle aches, fatigue, headache, loss of appetite, chills, runny nose, nausea and vomiting, diarrhea, loss of sense of smell or taste.
- People infected with COVID-19 may experience little or no symptoms, with illness ranging from mild to severe.
- Some people are more vulnerable to developing severe illness or complications from COVID-19, including older people and those with chronic health conditions.

## How can employers and employees break the chain of transmission of COVID-19?

- Implement the guidance and orders of the Provincial Health Officer.
- **Practice good hygiene and cleaning including frequent handwashing as outlined below.**
- **Practice Physical Distancing:** at least 2 meters (m) distance between people should be maintained. Camp operations should take practical steps to ensure physical distancing is maintained or enhancing protection through other means where physical distancing is not practical.
- For additional information about COVID-19 refer to the BC Centre for Disease Control at <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>.
- For non-medical information about COVID-19 you can also call 1-888-COVID19 (1-888-268-4319), 7:30am-8pm, 7 days a week.

## Notifying the Health Authority of an outbreak

- You must notify the local Medical Health Officer if there is an outbreak or if there is a suspicion of an outbreak.
- An outbreak is when two or more cases of fever and/or respiratory symptoms (cough, sore throat, runny nose, shortness of breath, gastrointestinal illness) are detected.
- **To reach your local Medical Health Officer, contact:**

### **Fraser Health Authority**

Phone: (604) 870-7903

Email: [HPLand@fraserhealth.ca](mailto:HPLand@fraserhealth.ca)

### **Interior Health Authority**

Phone: (250) 851-7305

Email: [workcamps@interiorhealth.ca](mailto:workcamps@interiorhealth.ca)

### **Island Health Authority**

Phone: (250) 519-3401

Fax: (250) 519-3402

Email: [gateway\\_office@viha.ca](mailto:gateway_office@viha.ca)

### **Northern Health - Communicable Disease Hub**

Phone (during business hours): 1-855-565-2990

On-call Medical Health Officer after hours  
phone: 1-250-565-2000, press 7 and ask for the Medical Health Officer on call

### **Vancouver Coastal Health Authority**

Phone: (604) 675-3800 Manager on call

Fax: (604) 736-8651

Email: [EHVC@vch.ca](mailto:EHVC@vch.ca)

## SECTION 2: STEPS FOR EMPLOYERS ANDS OPERATORS

### 1. Conduct a COVID-19 Workplace Risk Assessment for your work camp

Workplaces and businesses that implement advice and guidance provided by public health officials can prevent and reduce the spread of COVID-19 amongst employees, contractors, and clients. Note that all employers and contractors that operate industrial camps, are now required to develop and implement an **Infection Prevention and Control Protocol** (Protocol) and appoint a Co-ordinator(s) for your operation(s) responsible for oversight for the implementation of the Protocol. It will be important that your Co-ordinator contributes to and understands the Protocol that you are required to create and implement to prevent and control the transmission of COVID-19.

Working through all sections of this document, *Protecting Workers at Large Industrial Camps During the COVID-19 Pandemic*, will help you identify the **risks** in your operation and guide actions to prevent and control the transmission of COVID-19. Addressing the risks through the guidance in this document as well as additional resources on the BC Centre for Disease Control (BCCDC), will assist in developing your Protocol for workers and employers.

The Protocol should identify the actions that will be taken to reduce the number of social interactions between workers and employers, as well as nearby communities, physical distancing or enhancing protection through other means where physical distancing is not practical, increased hygiene practices (outlined below), and cleaning and disinfecting high touch point areas. In circumstances where interactions are necessary such as for grocery shopping, it will be important to maintain physical distancing and practice good hygiene. Designate employees to the same small working crew or work pod for as long as practical will also reduce social interactions. Like a family unit, this work pod will ensure close contact only occurs within a select small crew.

#### Additional Resources:

- Risk-informed decision-making guidelines for workplaces and businesses during the COVID-19 pandemic: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html>.
- WorkSafeBC provides an exposure control plan guide at: <https://www.worksafebc.com/en/resources/health-safety/exposure-control-plans/exposure-control-plan-for-infectious-disease-for-occupational-first-aid-attendants?lang=en>.

### 2. Employee Education

On the first day of work and on a regular basis after that, all employees must participate in a COVID-19 training and education session provided by the employer. Training and education must also be provided to all contractors, service providers, visitors, or other parties that enter the worksite.

Training should include safety measures and procedures, physical distancing, proper hygiene practices, and monitoring and reporting illness.

Training and education will be available in both English and the language best suited for the employees (e.g., French, Punjabi, Spanish). Training will be offered by video or in-person and may include additional written materials. If training is done in person, ensure that people gather in small groups of 5 to 10, and that physical distancing of 2 metres between members can be maintained.



#### Additional Resources:

COVID-19 resources translated into various languages are available from:

- HealthLinkBC: <https://www.healthlinkbc.ca/health-feature/coronavirus-disease-covid-19>
- BCCDC website: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/translated-content>

### 3. Increased Hygiene and Cleaning Practices for Employers, Employees, and Contractors

All Employees and contractors must be trained on increased hygiene practices and cleaning. Limiting potential transmission of COVID 19 requires all employers and employees to practice increased hygiene and increased cleaning. Employees must be educated on measures to prevent infection and transmission. Employers must display these good practices while with employees, including diligent hand washing with plain soap and water or use of hand sanitizer with a minimum 60% alcohol.

Employers should support increased hygiene by reminding workers to cough and sneeze into elbows, avoid touching one's face with unwashed hands, and dispose of used tissues immediately, and hand washing frequently with plain soap and water or use hand sanitizer with a minimum 60% alcohol.

As part of the daily safety briefing, employees will be reminded of measures to prevent infection and transmission including that frequent handwashing and avoidance of face touching prevents infection transmission.

Additional signage requirements:

- Posters and printed reminders must be displayed in conspicuous places.
- Display posters that illustrate to:
  - cover your mouth and nose with a disposable tissue or the crease of your elbow when you sneeze or cough;
  - dispose of used tissues immediately;
  - wash your hands; and,
  - avoid touching your face, eyes, nose or mouth with unwashed hands.

Hand hygiene poster: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/covid-19-handwashing-poster.pdf>

#### Guidance for Handwashing

Employers must provide a suitable number of handwashing stations (see Appendix A: Hand-washing Stations) for the size of the work site and post signage that identifies their location or provide hand sanitizer with a minimum 60% alcohol. Antibacterial soap is not required for COVID-19.

Post signs to instruct employees and other staff and reinforce training on how everyone can protect themselves and others at the camp and common areas. Consider posting signs at entrances and in all types of washrooms (fixed or portable).

- Handwashing stations with soap and water must be made available to employees in the field, as well as immediately outside or inside all buildings that employees are working in or eating food.

- Handwashing stations may be either permanent or portable where there is a lack of pressurized water. Wash stations should be checked, cleaned, and restocked with supplies three times a shift.
- Soap and water hand-washing stations can be supplemented with waterless hand sanitizers with a minimum 60% alcohol where appropriate. For example, where supplies are available, each employee can be provided with hand sanitizer for personal use that is replaced prior to each shift.
- Handwashing periodically throughout the day and especially before and after break times, after using the washroom, or when work stations are changed or tools are switched must be encouraged as much as possible.
- Hand washing instructions and reminders will be posted in both English and the language appropriate for the employees at all handwashing stations.

### Guidance for Increased Cleaning

All common areas and surfaces should be cleaned at the start and end of each day and after any potential contamination that may occur throughout the day. Examples of common areas and surfaces include washrooms, shared offices, common tables, desks, light switches, handrails, tent flaps in common areas, and door handles. Regular household cleaners are effective against COVID-19, following the instructions on the label.

### Cleaning Common Areas

- Common areas and surfaces should be cleaned at the end of each day.
- Employees must not share items such as eating utensils, towels, glasses.
- [BCCDC Cleaning and Disinfectants for Common Areas](#)
- [BCCDC COVID-19 Prevention poster](#)
- [BCCDC Hand hygiene poster](#)

### Practice Proper Waste Management

Proper collection and removal of garbage is crucial to reducing the risk of disease transmission. This includes wearing disposable gloves to remove waste from rooms and common areas and using sturdy, leak resistant garbage bags for containing waste.

- Create a waste removal schedule
- Ensure there are sturdy, leak resistant garbage bags
- Provide disposable gloves to anyone handling garbage
- Ensure anyone handling waste removes gloves and performs hand hygiene immediately after handling and disposing of waste.
- If a garbage bag is punctured or contaminated, it should be placed into a second bag.

## 4. Physical Distancing

Employers, camp operators, employees, and contractors will practice physical distancing and other public health recommendations to prevent the spread of COVID-19. Physical distancing of at least 2 meters (m) should be maintained, at all times.

Employers should take practical steps to ensure physical distancing is maintained in the following areas:

- while being transported from home to the workplace or between work locations;

- while working;
- during breaks or while in communal spaces, or at any other time where employees may gather;
- during off-duty hours, employees must continue to practice physical distancing; and
- during all group activities including site meetings shall be held in open spaces or outside. In situations where maintaining physical distance of 2m is difficult, minimize workers' time in that situation and provide a physical barrier and wear masks.

### Creating Work Pods or Crews

There will be situations on a day to day basis where physical distancing between workers is not practical for extended periods of time (e.g. travel to site). 'Work pods' can be thought of like a family unit, this work pod will ensure close contact only occurs within a select small group. Designating employees to the same small working group or work pod for as long as practical can help reduce the risk of COVID-19 spreading to employees and others in the operation.

## 5. Transportation for Employees – Hygiene, Physical Distancing, Reducing Social Interactions

Employees must work with the Co-ordinators regarding travel to and from the accommodations or worksite as outlined in the Industrial Camp Order.

In situations where employees are required to travel together in vehicles to the work site, employees will travel in a designated vehicle for their work pod. The size of this work pod must not exceed the total number of seats in the crew vehicle. Please read the section on Guidance for Situations where Maintaining Physical Distance is Difficult to protect workers when they cannot maintain physical distancing.

Proper precautions should be exercised when travelling to and from accommodation and work sites, including frequent handwashing and avoiding touching one's own face, maintaining physical distancing, cleaning and disinfecting high touch points like door handles, and minimizing contact with crowds and public places.

Ensure safety protocols are in place in case employees who typically travel alone have a reporting process so that employers know whether they have made it to and from the site safely.

### Cleaning Vehicles

At the start of each working day and throughout the day, drivers clean and disinfect frequently touched surfaces in the vehicles using an alcohol-based cleaner or disinfecting wipes/spray and paper towel; if these are unavailable, use soap and water.

High touch or key contact points include:

- door handles (inside and out);
- window buttons;
- steering wheel and controls;
- wiper and turn signal handle;
- shifter;
- dash controls + buttons;
- ventilation grilles and knobs;
- rear-view mirror;

- armrests;
- grab handles, seat adjusters; and
- seat belt buckles
- radio and communication devices

When more than one worker is traveling, physical distancing practices apply. Shared travel with more than one person should be minimized. Employers may use the following options:

#### Using Buses & Vans – Physical Distancing

- Load and offload passengers by the rear doors if possible or establish a rule that the driver is last-on, first-off of the bus.
- Allow for enough time for passengers to disembark from vehicles to allow for adequate distancing and prevent crowding.
- Create spacing between riders such as staggering where people sit (e.g. aisle to window, alternating per row).
- Consider installing physical barriers that can minimize spread of droplets.
- Handwashing facilities or sanitizer must be made available before and after the bus ride.

#### Using Trucks & Cars – Physical Distancing

- Where possible limit a single driver in a conventional truck (i.e., single cab).
- A driver and one passenger may travel together in vehicles with two rows of seating. The passenger should sit in the back seat on the opposite side as the driver.
- The only exception to this is the work pod as described above.
- Hands should be washed thoroughly before and after the truck ride and common surfaces should be wiped down before and at the end of each trip.

### 6. Guidance for Employees While Working – Physical Distancing and Increased Hygiene

- Where possible, employees should be assigned to individual workstations or an area of the field that provides 2 metres of separation from other individuals.
- Where 2 metres separation is not possible, workers should wear masks, and a physical barrier may be constructed in collaboration with the occupational health and safety committee (where one exists).
- Workers should always ensure that hands are washed with plain soap and water or a hand sanitizer with a minimum 60% alcohol before and after work activity.
- In situations where employees are required to work together in close proximity to complete tasks, the employer will utilize ‘work pods’ as described previously. These ‘work pods’ will also include camp and kitchen staff as well as field worker/transport. The number of staff in each work pod should be kept to a minimum and be six or less whenever possible. These ‘work pods’ should stay together for as long as possible during the project.
- The employer must keep a record of which individuals are working in ‘work pods’ and should be maintained in the same quarters in cases where workers are communally housed in rental accommodations such as motels.
- Workers should NOT be reassigned between ‘work pods’. When there is an urgent and unavoidable need to reassign workers to another work pod, the Coordinator should review the risks to determine the impact on the risk of transmission of COVID 19, prior to making the decision.

- A current list of all designated 'work pods', and their members shall be maintained in the workplace along with a record of any reassignment of members among those 'work pods'.

#### Additional Resources:

- WorkSafeBC, COVID-19, What workers should do: <https://www.worksafebc.com/en/about-us/covid-19-updates/health-and-safety/what-workers-should-do>.

### 7. Guidance for Employees During Breaks or while in Communal Spaces –

Consider how to maintain physical distancing, decrease crowding, and reduce social interactions including maintaining small, and consistent groupings of people like 'work pods'.

- Start/stop times, breaks should be staggered where possible to minimize employees congregating.
- Employers should reduce in-person meetings, other gatherings and hold site meetings in open spaces or outside.
- Worker gatherings of any size be structured so that those present can maintain a physical distance of 2 metres from each other.
- Encourage employees and staff to wash hands: before and after breaks, after going to the washroom, and before preparing or eating food.
- If employees or staff are sick, they should be in self isolation and not preparing or handling food for others.
- Encourage employees not to share food or unwashed plates, cups or utensils. Disposable dishware is NOT required for COVID-19.
- Encourage employees to practise respiratory etiquette:
  - Cough or sneeze into elbow sleeve.
  - Dispose tissues in garbage cans.
  - Wash hands with plain soap and water for at least 20-30 seconds or use an alcohol-based sanitizer with at least 60% alcohol content.
  - Avoid touching one's face.
- Employees must practice [physical distancing as directed by the BC CDC while on breaks](#).

### 8. Guidance for Situations where Maintaining Physical Distance of 2m is Difficult

There are situations where it is not possible to maintain production while respecting the 2m separation. In preparation for COVID-19, please only buy personal protection equipment (PPE) if it is needed for the normal, reoccurring hazards associated with the job (e.g., certified pesticide applications). The following guidance provides employers methods to achieve physical distancing when it is difficult to do so:

- An impervious barrier ("Physical barrier") can be installed in collaboration with the joint health and safety committee between workstations (people). The barrier must be something that prevents one person's cough or sneeze from contacting another person. The barrier must be made of a non-porous material that can be effectively disinfected. Regular household cleaning products with a Drug Identification Number can be used to clean the physical barrier as they are effective against COVID-19. Follow the instructions on the product label.
- Barriers will be site specific and must be installed in such a way as to minimize risk of cross contamination (an example of this are Plexiglass barriers that some retailers have installed to protect cashiers in retail stores).

- If physical barriers cannot be erected on a work site, workers should wear a clean cloth mask or covering across the nose and mouth (e.g. a bandana) to minimize spread of droplets onto common work surfaces especially in instances where there is continuous close quarter work tasks (e.g., two or more people in an indoor or confined space).

Also see - [Face Masks](#) – additional cautionary information from BCCDC

## 9. Guidance on Handling Tools and Equipment

- Where possible, each employee should utilize only their own tools throughout the duration of their employment to minimize contact spread of COVID-19.
- Where it is not possible to provide personal tools, the shared tools and equipment must be wiped down and cleaned with a disinfecting agent such as disposable wipes or a diluted bleach solution between uses by different employees. Rubber gloves should be worn while handling bleach solutions and the area should be well ventilated.
- Employees must receive training on cleaning tools and must be offered assistance to ensure compliance and understanding of handwashing and hygiene.
- Employees who use specialized PPE and are properly trained in its use (e.g. employees certified and trained to use PPE because of their normal work role) should not share PPE with other employees. Employers must establish a labeling system to help with organization of this specialized equipment.
- Employees who wear leather gloves or other impermeable gloves as hand protection during work may share tools and equipment without disinfecting the tools between each user and must continue to clean and wash hands to break the chain of infection. Leather gloves may have droplets on them and could transmit infection to another worker. Assign and label leather gloves to ensure each pair remains with one employee.
- In situations where employees are required to work together in close proximity to complete tasks, the employer will designate employees into 'work pods'.

## 10. Guidance on COVID-19 and Worker Accommodation

This guidance also applies to any accommodation that may be housing any employee. Potential accommodation scenarios include tents, motels/hotels, and private accommodation.

Consider how to maintain physical distancing, decrease crowding, and reduce social interactions. Maintaining small and consistent groupings of people will help prevent and control the potential transmission of COVID-19.

### Camp Preparations and Camp Hygiene

Physical distancing general guidance - This will require a variety of actions to decrease crowding and social interactions.

- Gatherings of any size be structured so that those present can maintain a distance of 2 metres from each other.
- Stagger mealtimes where practical and minimize people using the kitchen at one time, opening additional dining areas, and cancelling group activities.
- Reduce in-person indoor meetings and other gatherings and hold site meetings in open spaces or outside.
- Shared accommodations should be arranged in such a fashion that beds are at least 2m apart and head-to-toe where possible. If beds cannot be at least 2m apart, use temporary barriers between beds, such as curtains, to prevent droplet spread while sleeping, and sleep head-to-toe.

- None of the residents in a shared accommodation can be ill or meet a criterion that requires self-isolation requirements. Any employees that are ill or require self-isolation must be immediately moved into separate facilities, otherwise all employees in the residence would have to be placed in self-isolation.
- The employer shall ensure that reusable eating utensils and dishes (cups, plates, bowls, forks, knives, spoons) are provided for all employees
- All eating utensils and dishes shall be cleaned by designated kitchen or cleaning staff, according to the 4-step process outlined in the BC Guidelines for Industrial Camps Regulation, that includes pre-rinsing, washing, soaking in a bleach solution, and air-drying.

#### Additional Resources:

[BC Guidelines for Industrial Camps Regulation \(October 1, 2017\)](#)

#### General Living Space-Cleaning protocols

##### *Cleaning Protocols – Common areas*

- Health and safety coordinators shall be established in each camp and crew to oversee implementation of [health and safety requirements](#) related to COVID-19.
- Cleaning protocols will be created and posted throughout all facilities. Use links for posters found at the beginning of this document.
- Ensure daily cleaning and disinfection of all common areas and surfaces.
- Cleaning products will be readily available, monitored daily and restocked daily as required.
- High touch surfaces such as counters, handles, control switches will be cleaned a minimum of twice per day with regular household cleaning products, disposable wipes or a diluted bleach solution. This includes food storage and preparation surfaces, serving areas, drinking stations, waste disposal facilities, tables, chairs, work surfaces, desktops and washroom facilities. Follow the directions on the product label.
- Clean visibly dirty surfaces before disinfecting, unless stated otherwise on the product instructions. Cleaning refers to the removal of visible dirt, grime and impurities. Cleaning does not kill germs but helps remove them from the surface.
- Use a disinfectant that has a Drug Identification Number and that it is effective against viruses. Follow the instructions on the product label.
- If commercial or household cleaning products are not readily available, you can prepare a bleach and water solution with 500 parts per million chlorine solution: 1:100 [e.g. mix 10 ml household bleach (5.25%) with 990 ml water] When using the bleach and water solution, the surface must remain wet for at least one minute. For more information, please see the [BCCDC guidance on cleaning](#).
- Floors and walls should be kept visibly clean and free of spills, dust and debris.
- Empty and clean garbage cans in public areas regularly.
- Items that cannot be easily cleaned and disinfected should be removed.
- Employees are required to disinfect shared areas (kitchen & bathroom counters, handles and control switches) after each use.
- Post signs to encourage hand hygiene among all staff and guests using the [BCCDC's Signage and Posters](#).
- Put up signage in your facility [promoting physical distancing](#).

### Living Spaces

- Shower facilities and toilets must be provided in numbers meeting or exceeding the numbers stated in Schedule 2 of the [BC Industrial Camps Regulation](#) onsite when overnight camping is provided. Additional facilities should be provided to ensure the availability of dedicated facilities for workers in isolation without reducing the minimal number of facilities available to other workers.
- Consider supplying shower facilities onsite when overnight camping is provided.
- Locate camps in locations with adequate drainage.

### Food Service

- Camp food service and preparation practices and procedures must follow [BC Guidelines for Industrial Camps Regulation](#)
- Buffet-style serving systems must not be utilized whenever such systems can practically be replaced with other systems such as kitchen staff serving food to workers.
- All small food items and snacks should be individually wrapped whenever possible or made available with systems to prevent common touching of either food items or utensils.
- Only kitchen workers and supervisory staff shall be permitted to enter food preparation or storage areas.
- Signs shall be posted to limit the number of people permitted in the dining area and any other common areas.
- Use a staggered meal schedule to support physical distancing and to limit the number of individuals in the dining area at any given time.
- Meals should be delivered to the outside of rooms of any workers that are in isolation.
- All employees must wash their hands immediately prior to entering any dining or food preparation area.

## 11. Important Information Regarding First Nations and First Nations Health Centres

- Indigenous populations face heightened health risks due to lower health outcomes compared with non-Indigenous Canadians. First Nations, Métis, and Inuit populations disproportionately face health disparities linked to the social determinants of health (i.e. social, economic, cultural, political inequities). As such, all employees must respect any precautions being taken to avoid carrying this virus into First Nations communities.
- Employers who are travelling to or established near a First Nations community, must connect with regional health authorities to be advised of any current precautions being taken in the region.
- It is recommended that individuals living at large industrial camps do not seek medical care from a local First Nations health center. There are inadequate resources to sustain an influx of external cases.
- If an employee who is symptomatic wishes to return to their home in a First Nation community, the First Nation health center should be notified to determine that sufficient resources are in place to support isolation of the individual on arrival.

## 12. Physical Distancing and local Communities

- Facilities and services (including meals, communication systems, laundry) should be organized on site and provided to enable workers to remain in camps on days off whenever possible, and personal purchases can be arranged without workers visiting nearby communities.
- Traveling to a grocery store or other necessary public establishment should be limited to one person per group who will also buy food and essentials for others.



- Post signage and reminders for employees and staff to regularly wash hands, practice coughing etiquette, maintain physical distancing in the community and avoid congregating in community settings.

### 13. Face Masks – additional cautionary information from BCCDC

The BCCDC states that:

- The use of a homemade mask should only be considered by members of the public who are symptomatic or caring for someone who is symptomatic as an interim measure if commercial masks are not available.
- It may be less effective to wear a mask in the community when a person is not sick themselves.
- Masks may give a person a false sense of security and are likely to increase the number of times a person will touch their own face (e.g., to adjust the mask).
- Any mask, no matter how efficient at filtration or how good the seal, will have minimal effect if it is not used together with other preventive measures, such as frequent hand washing and physical distancing.

If you decide to use and make a mask under these circumstances, here is some information to improve the effectiveness of homemade masks:

- some materials are better than others. Use clean and stretchy 100% cotton t-shirts or pillowcases;
- ensure the mask fits tightly around the nose and mouth; material that allows droplets to pass through will not work;
- the mask should be comfortable, or you won't want to wear it consistently;
- if the mask makes it a lot harder to breathe, then the seal will not be as good, and the mask will be less effective; and
- the mask should be cleaned or changed often.

Also see - [Face Masks](#) – additional cautionary information from BCCDC

## SECTION 3: WHAT THE EMPLOYER NEEDS TO PUT IN PLACE TO ASSESS AND MONITOR EMPLOYEE HEALTH

### 1. Employer and Employee Health Self-assessment

Employees must be instructed on how to complete self assessment tools to monitor for symptoms of COVID-19.

- Employees who have indicated symptoms of COVID-19 before arriving to the work site or accommodation site, will not be able to work as per a Provincial Health Officer approved self assessment guideline.
- Employees must complete a [self-assessment tool](#) at the start and end of each shift.
- Employees who determine they may have signs or symptoms of COVID-19 based on the [self assessment tool](#), will remove themselves from the work environment and initiate isolation, immediately report to the Co-ordinator, while ensuring physical distancing of 2m (e.g., reporting by phone).
- Employees should be trained on how to report symptoms and immediately access required assistance. For more information visit BCCDC's website: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/employers-businesses>.

Further details can be found on BCCDC website: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>.

The B.C. COVID-19 self-assessment tool is available online at: <https://bc.thrive.health/>.

## 2. Employer responsibility for screening of workers upon arrival and staff health

- Ensure your employee illness policy is up-to-date and communicated to all staff immediately.
- Employers must assess all employees and contractors prior to proceeding to the work site and/or work camp.
- Employers must notify workers to complete a Self-Assessment Tool to determine if further assessment or testing for COVID-19 is needed;
  - contact 8-1-1 or their medical provider if further health advice is required; and 9-1-1 if it is an emergency.
- Any testing for COVID-19 will be done in accordance with the BCCDC's up-to-date guidance on [COVID-19 testing protocols](#).
- Advise employees and contractors to immediately report symptoms of illness (e.g. cough, fever, shortness of breath, gastrointestinal signs) to the Co-ordinator who will provide information on the appropriate next steps (i.e. leave the work site and self isolate, or report to the on site medical clinic).
- Employees will not return to work until they have been reassessed through the self assessment tool and/or their medical provider.

## 3. Monitoring Employees for Illness

Develop and update a common workplace policy regarding what to do when your employees are ill, with the Coordinator(s) responsible for monitoring staff daily for COVID-19 like symptoms:

- Employees must monitor their symptoms daily for common cold or influenza like illness or symptoms compatible with COVID-19 and must notify the Co-ordinator immediately.
- The use of the self assessment tool will assist the employee in identifying the symptoms of COVID 19.

## 4. Supporting Employee Self-isolation and Response to Suspected COVID-19 cases

Employees must be informed of personal access to medical support for COVID-19 (i.e. 8-1-1) or their medical provider or a local virtual clinic (if available) by the employer. If an employee becomes ill with COVID-19 like symptoms, self-isolation measures should be put into place as per PHO approved guidelines. Employers must notify local Medical Health Officers if there is an outbreak or suspicion of an outbreak.

Detailed instructions for self-isolation can be found on the BCCDC website: [Self-Isolation](#)

### Who needs to self-isolate?

If an employee or contractor displays symptoms of COVID-19, they are required to begin self-isolation immediately, and consult with the self-assessment tool or a medical provider. If testing for COVID-19 is indicated then an employee or contractor should remain isolated until the results of that test are known and advice is provided by the medical provider accordingly. If a test is not indicated the self-isolation should continue until symptoms improve and any fever has resolved.

If an employee has common cold or influenza like illness or symptoms compatible with COVID-19 (fever, cough, shortness of breath) and are hospitalized, or the employee is identified by public health as a person who is part of a cluster or outbreak, arrangements will be made for a COVID-19 test:

- If an employee tests positive for COVID-19, they must self-isolate for a minimum of 10 days from symptom onset AND ensure their symptoms, including fever, have completely resolved.
- If an employee tests negative for COVID-19, they must self-isolate until their common cold or influenza like symptoms have completely resolved.

People who are [contacts of a confirmed COVID-19 case](#), meaning they have been, or could have been, exposed to the virus, but do not have symptoms, should immediately self-isolate, continue to monitor their symptoms and contact public health.

Additional Information:

- Please keep up-to-date on B.C.'s requirements for [who must self-isolate](#).
- As of March 25, 2020, all persons arriving in Canada must self-isolate (quarantine) and monitor for symptoms for 14 days under the Quarantine Act.
- All international travellers returning to British Columbia are required by law to self-isolate for **14 days upon their arrival** and complete a [self-isolation plan](#).

### Self-Isolation Requirements

Employers have a responsibility to provide safe isolation, monitoring and care for the employees that become ill, as well as to protect the staff on site from transmission.

For those employees that are living in accommodations at the industrial camp, isolation practices MUST include:

- a room with a separate room separate entrance;
- a separate shower/toilet will be designated and cleaned immediately following use;
- workers receiving daily wages and meal support;
- meals will be provided or delivered to the individual in isolation; and
- must be checked a minimum of twice daily to ascertain if medical assistance is required.

Self isolation at home may be an option for those employees who live close to the work camp, and are within close driving distance to their home to be able to safely travel home without stopping.

Detailed instructions for self-isolation can be found on the BCCDC website: [Self-Isolation](#).

### Waste Management for Ill Workers

- Designate one person, or small team to handle waste from all self-isolation rooms.
- All waste can go into regular garbage bags; line the container with a plastic bag.
- Take care not to touch the inside of the container, and wash hands well after emptying the waste.

## 5. Monitoring close contacts of COVID-19 cases

For employees that have come into close contact with someone with confirmed COVID-19 on the advice of local public health officer, advise them to call HealthLink BC at 8-1-1 or their medical provider to determine any necessary next steps.

Employers must ensure that the following employees do not come to work and begin self isolation. In some cases specific orders may need to be followed. Those orders will be identified through a case-by-case system.

- Workers who are ill, whether or not the illness has been confirmed as COVID-19.
- Workers with COVID-19-like symptoms must begin self-isolation and be reassessed for when they can return to work.
- Workers who share a residence with a person who has been exposed to COVID-19.

For employees that have come in contact with someone with COVID-19, see detailed instructions for: [Self-Isolation for people without symptoms](#).

### Employee Exit protocol

Contractors shall develop appropriate exit plans for workers leaving the worksite.

### Additional Resources:

BC Centre for Disease Control (BCCDC): <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>.

- <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/self-isolation>.
- HealthLink BC COVID-19: <https://www.healthlinkbc.ca/health-feature/coronavirus-disease-covid-19>.
- Office of the Provincial Health Officer: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>.
- BC Government COVID-19 Support website: <https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support>.
- WorkSafeBC, Preventing exposure to COVID-19 in the workplace: A guide for employers: <https://www.worksafebc.com/en/resources/about-us/guides/preventing-exposure-to-covid-19-in-the-workplace?lang=en>.
- Health Canada COVID-19 Fact Sheet: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/covid-19-be-prepared.html>.
- Risk-informed decision-making guidelines for workplaces and businesses during the COVID-19 pandemic: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html>.

***Employers must continue to check for new information and refer to the following links to public health resources in the event that any embedded link is broken and does not work:***

- BC Centre for Disease Control: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>.
- Government of Canada: <https://www.canada.ca/en/immigration-refugees-citizenship/services/coronavirus-special-measures.html>.

## SECTION 4: PRECAUTIONS FOR ON-SITE MEDICAL CLINICS

You can minimize transmission risks from COVID-19 in the medical office through common, effective infection prevention and control measures, similar to how you might deal with a more familiar condition like influenza. Medical clinics can access information about COVID-19, including information on recommended clinic infection control precautions, testing guidelines, and advice on clinical care of people with suspected or confirmed COVID-19 at <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care>.

It will be important that any targeted communicable disease interventions are non-stigmatizing and respect confidentiality. This includes maintaining privacy for those seeking healthcare or who may be part of self-isolation, contact tracing or outbreak investigation.

### 1. On-site Management of Company Policy Requirements

A significant burden to the local health care system can arise simply from company policies that require sick notes and back to work notes. Employers are asked to excuse staff for sick leave without requiring a doctor's note, if their employees are ill or required to self-isolate. This helps not only to reduce pressures on the health care system, but also minimizes the risk of spreading infection within the community.

### 2. On-site Medical Clinics

You can minimize transmission risks from COVID-19 in the medical office through common, effective infection prevention and control measures, similar to how you might deal with a more familiar condition like influenza. Medical clinics can access information about COVID-19, including information on recommended clinic infection control precautions, testing guidelines, and advice on clinical care of people with suspected or confirmed COVID-19 at <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/clinical-care>

### 3. Considerations and Recommendations for Medical Clinics

#### Reception Area

- Display posters at patient/client entrances with instructions for anyone with respiratory symptoms to identify themselves immediately to staff
  - [COVID-19 Poster for Medical Clinics](#)
- Upon arrival at the clinic, workers who exhibit respiratory symptoms should be given a surgical/procedural mask or tissues to cover their mouth and nose and be directed to a hand-washing or hand-sanitizer station.
  - [COVID-19 Hand Hygiene Poster](#)
  - [How to Wear a Face Mask](#)
- If possible, place patients exhibiting respiratory symptoms in a private room and close door. Put up contact and droplet precautions signs as necessary.
- Have alcohol-based hand rubs (60-90% alcohol) and/or hand-washing stations available as appropriate at the clinic entrance, the reception counter, around the waiting area, as well as near exam room doors.
- Increase frequency of cleaning of high-touch areas (at least twice daily).

#### Waiting Room

- Remove or cover cloth seating.

- Space waiting room chairs apart. Place some in a hallway if needed to separate patients.
- If patients being seen for COVID-19 are not wearing a mask and cannot be spaced apart in the waiting room, place them in an exam room as soon as possible.
- Air circulation should be increased if feasible.
- Increase frequency of cleaning of high-touch areas.

#### Exam Rooms

- Designate the closest possible exam room(s) for patients being seen for COVID-19 in order to allow rapid isolation.
- Empty these exam rooms of all but the bare minimum equipment (e.g. exam table, BP cuff).
- Wipe down all surfaces and equipment between patients who present with respiratory symptoms with an appropriate disinfectant.
- Complete cleaning and disinfection of all exam rooms.
- Air circulation should be increased if feasible.

#### Triage and Timing of Visits

- Patients calling about COVID-19 should be advised to present to the clinic at a set time, preferably a time when others are not in the waiting area.
- Where possible, workers who are self-isolating due to risk of COVID-19 should be asked to call ahead to tell the clinic they are coming in.

Health care workers should wear a gown, gloves, procedural/surgical mask and eye protection when providing care to patients suspected or confirmed to have COVID-19. Additional precautions including N95 respirators with eye protection should be used during aerosol-generating procedures. For more information, visit the BCCDC [webpage on personal protective equipment](#).

## 4. Outbreak Management Plan

Early detection of influenza-like-illness or gastrointestinal symptoms and laboratory testing of symptomatic employees will facilitate the immediate implementation of effective control measures. In addition, the early detection and immediate implementation of control measures are two of the most important factors in limiting the size and length of an outbreak.

In the event of a suspected outbreak of influenza-like-illness, immediately report and discuss the suspected outbreak with the Medical Health Officer (or delegate) at your local health authority.

A plan must be developed to support early detection and immediate implementation of the control measures. The plan must have the following written components:

- Monitoring system to rapidly identify ill employees
- Early notification by the Co-ordinator to the local health authority and medical health officer of a potential outbreak
- Early isolation and management of symptomatic and confirmed COVID 19 cases
- Roles and responsibilities of those involved in an outbreak management
- Procedures on how medical staff will manage ill employees
- Develop and implement enhanced infection prevention control measures for managing ill employees on site

- Develop testing procedures including early collection of viral samples and confirm location of local testing site.
  - Review the latest [BCCDC Testing Guidance](#) for specimen collection including recommended number of samples.
- Adequate medical equipment and supplies and use
- Procedures that reduces transmission of medical staff e.g. grouping ill employees
- Staff training regularly updated to align with current direction from BCCDC
- Communication strategy that includes signage, messaging to employees, coordination with medical staff and with health authority
- Debrief process and update of procedures where required

**Additional Resources:**

Up-to-date guidance on diagnostic testing for COVID-19 can be found here: <http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/lab-testing>

More information on environmental cleaning and disinfectants for physician's offices can be found here: [http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID-19\\_MOH\\_BCCDC\\_EnvironmentalCleaning.pdf](http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID-19_MOH_BCCDC_EnvironmentalCleaning.pdf)

## Appendix A

