

Employers resuming operations following work interruptions related to COVID-19 must develop a COVID-19 Safety Plan. To develop your plan, follow the six-step process described at [COVID-19 and returning to safe operation](#).

This planning tool will guide you through the six-step process. Each step has checklists with items you need to address before resuming operations. You may use this document, or another document that meets your needs, to document your COVID-19 Safety Plan.

WorkSafeBC will not be reviewing or approving the plans of individual employers, but in accordance with the order of the [Provincial Health Officer](#), this plan must be posted at the worksite.

## Step 1: Assess the risks at your workplace

The virus that causes COVID-19 spreads in several ways. It can spread in droplets when a person coughs or sneezes. It can also spread if you touch a contaminated surface and then touch your face.

The risk of person-to-person transmission increases the closer you come to other people, the more time you spend near them, and the more people you come near.

The risk of surface transmission increases when many people contact the same surface and when those contacts happen over short periods of time.

### Involve workers when assessing your workplace

Identify areas where there may be risks, either through close physical proximity or through contaminated surfaces. The closer together workers are and the longer they are close to each other, the greater the risk.

- We have involved frontline workers, supervisors, and the joint health and safety committee (or worker health and safety representative, if applicable).
- We have identified areas where people gather, such as break rooms, production lines, and meeting rooms.
- We have identified job tasks and processes where workers are close to one another or members of the public. This can occur in your workplace, in worker vehicles, or at other work locations (if your workers travel offsite as part of their jobs).
- We have identified the tools, machinery, and equipment that workers share while working.
- We have identified surfaces that people touch often, such as doorknobs, elevator buttons, and light switches.

## Step 2: Implement protocols to reduce the risks

Select and implement protocols to minimize the risks of transmission. Look to the following for information, input, and guidance:

- Review [industry-specific protocols](#) on worksafebc.com to determine whether any are relevant to your industry. Guidance for additional sectors will be posted as they become available. If protocols are developed specific to your sector, implement these to the extent that they are applicable to the risks at your workplace. You may need to identify and implement additional protocols if the posted protocols don't address all the risks to your workers.
- Frontline workers, supervisors, and the joint health and safety committee (or worker representative).
- [Orders, guidance, and notices](#) issued by the provincial health officer and relevant to your industry.
- Your health and safety association or other professional and industry associations.

## Reduce the risk of person-to-person transmission

To reduce the risk of the virus spreading through droplets in the air, implement protocols to protect against your identified risks. Different protocols offer different levels of protection. Wherever possible, use the protocol that offers the highest level of protection. Consider second, third, or fourth levels if the first level isn't practicable. You might need to use more than one level of protection to deal with a risk — for example, physical distancing and masks.

**First level protection (elimination):** Use policies and procedures to limit the number of people in your workplace at any one time. Implement protocols to keep workers at least 2 metres (6 feet) from co-workers, customers, and others.

**Second level protection (engineering controls):** If you can't always maintain physical distancing, install barriers such as plexiglass to separate people.

**Third level protection (administrative controls):** Establish rules and guidelines, such as cleaning protocols, telling workers to not share tools, or implementing one-way doors or walkways.

**Fourth level protection (PPE):** If the first three levels of protection aren't enough to control the risks, have workers and customers use personal protective equipment (PPE) such as masks. PPE should not be used as the only control measure. It should only be used in combination with other measures.

**First level protection (elimination): Limit the number of people at the workplace and ensure physical distance whenever possible**

- ✓ We have established and posted an occupancy limit for our premises. Public Health has advised that the prohibition on gatherings of greater than 50 people refers to “one-time or episodic events” (weddings, public gatherings), and is therefore not intended to apply to workplaces. However, limiting the number of people in a workplace is an important way to ensure physical distancing is maintained. [Public Health has developed [guidance for the retail food and grocery store sector](#) that requires at least 5 square metres of unencumbered floor space per person (workers and customers). This allows for variation depending on the size of the facility, and may be a sensible approach for determining maximum capacity for employers from other sectors that do not have specific guidance on capacity from Public Health.]
- ✓ In order to reduce the number of people at the worksite, we have considered work-from-home arrangements, virtual meetings, rescheduling work tasks, and limiting the number of customers and visitors in the workplace.
- ✓ We have **established and posted occupancy limits** for common areas such as break rooms, meeting rooms, change rooms, washrooms, and elevators.
- ✓ We have implemented measures to keep workers and others at least 2 metres apart, wherever possible. Options include revising work schedules and reorganizing work tasks.

Measures in place

List your control measures for maintaining physical distance in your workplace, for example:

- Working offsite or remotely complete virtual appointments as much as possible
- Changes to work schedules each worker needs to reduce their schedule by 40% of previous levels
- Changes to how tasks are done
- Occupancy limits for workers 2-3 per shift
- Limiting or prohibiting visitors No one including staff can enter the clinic with cold or flu-like symptoms
- Reducing the number of customers 6 people at one time

If this information is in another document, identify that document here.

Provision of Healthcare Services

All Colleges do not expect any registrant to provide treatment unless, in their professional opinion, it is safe to do so for both patients and staff. Professions covered under the Health Professions Act may have additional obligations around clinical care prescribed by their professional college.

Please at minimum follow the instructions below:

Conduct appointments virtually where clinically appropriate.

Conduct a point of care assessment for risk of COVID-19 for every client interaction. This includes:

**THIS MUST OCCUR BEFORE THE PATIENT ENTERS THE CLINIC**

Check their chart for a completed COVID-19 intake form from the last 24 hrs

Take the patients temp on arrival (see instruction below)

Ask if any of their answers have changed since they completed the intake form

Both you and patient wash/sanitize hands before the appointment

Health services should NOT be performed on ill or symptomatic clients, if that is clinically appropriate. Refer patient to 811.

Where the client requires timely treatment, ensure PPE is used in accordance with BCCDC guidance.

Wear mask throughout the shift, try to use only 1/shift

Provide a mask to the client if they do not have a face covering already (apply nominal fee in Jane to the appointment)

Do not wear gloves, unless performing a clinical task that has a risk of bodily fluid exposure

Wear a face shield or eye covering for any work that is in close proximity to the face and direct exposure to bodily fluids is possible.

Wear a gown if you are going to contact the patient's clothing or ask the patient to wear the gown if it would be more appropriate.

When possible, the health professional should position themselves at least two metres from the client.

Leave the treatment door open, as much as, possible

Treat only one client at a time to minimize risks associated with moving between patients.

Where shared equipment is used, make sure it is cleaned and disinfected between uses by clients. Use signs provided to state CLEAN or DIRTY.

Wherever possible, each employee should use their own products. If products are shared, they must be cleaned and disinfected between uses. Try to use your assigned cart only and restock it yourself.

Practice effective hand hygiene after each client by washing hands with soap and water or using an alcohol-based hand

**Second level protection (engineering): Barriers and partitions**

- We have installed barriers where workers can't keep physically distant from co-workers, customers, or others.
- We have included barrier cleaning in our cleaning protocols.
- We have installed the barriers so they don't introduce other risks to workers (e.g., barriers installed inside a vehicle don't affect the safe operation of the vehicle).

**Measures in place**

Describe how barriers or partitions will be used in your workplace.

If this information is in another document, identify that document here.

Waiting room sitting must be on the clinic wall in the public hallway.

Face shields provided for close contact where there maybe possibility of contact with bodily fluids (ie., vestibular assessment and treatments and TMJ assessment and treatments.

No entrance to the clinic without answering the COVID symptom questions

## Third level protection (administrative): Rules and guidelines

- ✓ We have identified rules and guidelines for how workers should conduct themselves.
- ✓ We have clearly communicated these rules and guidelines to workers through a combination of training and signage.

### Measures in place

List the rules and guidelines that everyone in the workplace has to follow to reduce the risk of airborne transmission. This could include things like using one-way doors or walkways, using single-use (disposable) products, and wiping down equipment after use. Consider creating pods of workers who work together exclusively to minimize the risk of broad transmission throughout the workplace.

If this information is in another document, identify that document here.

#### Lab Health: Health and Safety Policies and Procedures

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Leave the treatment door open, as much as, possible

Treat only one client at a time to minimize risks associated with moving between patients.

Where shared equipment is used, make sure it is cleaned and disinfected between uses by clients. Use signs provided to state CLEAN or DIRTY.

Wherever possible, each employee should use their own products. If products are shared, they must be cleaned and disinfected between uses. Try to use your assigned cart only and restock it yourself.

Practice effective hand hygiene after each client by washing hands with soap and water or using an alcohol-based hand sanitizer provided.

Where feasible, health professionals should avoid sharing equipment or treatment rooms. Treatment rooms should be allocated to a single health professional per shift.

#### Taking Payment

All patients have to have a valid credit card on their Jane file now as we cannot accept cash and we have to have completely contactless payments. So no touching credit card but you can get the number from the patient and punch it in to Jane if they for some reason do not have one on file. Please DO NOT touch their credit card. All the credit card swipers have been placed in storage.

#### Appropriate Clothing for Work

Must wear short sleeve or sleeves above elbows when in close contact (within 2 m) with patients

All clothing must be able to withstand the laundering instructions above

Wear scrubs if you want, not mandatory but will withstand the washing with bleach and hot water requirements better.

Must wear working only clothes and shoes, that are worn at work only. After your shift place the clothes in a bag and launder the items before every shift. Do not place your clean clothes back in the bag your dirty clothes came home in.

Have one dirty clothes bag and one clean clothes bag!

Bring a change of clothes for travel to and from work.

**Fourth level protection: Using masks** (optional measure in addition to other control measures)

- We have reviewed the information on **selecting and using masks** and **instructions on how to use a mask**.
- We understand the limitations of masks and other PPE. We understand that PPE should only be used in combination with other control measures.
- We have trained workers to use PPE properly, following manufacturers' instructions for use and disposal.

## Measures in place

Who will use PPE such as masks? All staff and patients and visitors

What work tasks will require the use of masks? All work tasks will require the use of masks

If this information is in another document, identify that document here. Lab Health: Health and Safety Policies and Procedures

**Reduce the risk of surface transmission through effective cleaning and hygiene practices**

- We have reviewed the information on **cleaning and disinfecting** surfaces.
- Our workplace has enough handwashing facilities on site for all our workers. Handwashing locations are visible and easily accessed.
- We have policies that specify when workers must wash their hands and we have communicated good hygiene practices to workers. Frequent handwashing and good hygiene practices are essential to reduce the spread of the virus. [**Handwashing** and **Cover coughs and sneezes** posters are available at worksafebc.com.]
- We have implemented cleaning protocols for all common areas and surfaces — e.g., washrooms, tools, equipment, vehicle interiors, shared tables, desks, light switches, and door handles. This includes the frequency that these items must be cleaned (number of times per day) as well as the timing (before and after shift, after lunch, after use).
- Workers who are cleaning have adequate training and materials.
- We have removed unnecessary tools and equipment to simplify the cleaning process – e.g., coffee makers and shared utensils and plates

**Cleaning protocols**

Provide information about your cleaning plan. Specify who is responsible for cleaning, the cleaning schedule, and what the cleaning protocols will include (e.g., which surfaces, tools, equipment, and machines). If this information is in another document, identify that document here.

**REQUIRED: Start & End of Shift Cleaning**

Please tick each box with a dry erase marker when completed and at the end of the day the last person must take a picture and send it to the admin for the daily cleaning record keeping.

Month: DAY: 2020

**Wipe down all surfaces in clinic:**

Counters

Tables (coffee table in back and reception)

Plinths (tops and underneath)

Only if there is no clean sign

Small Treatment room tables

Only if there is no clean sign

Chairs (treatment room being used by you, reception area, back area, including stools)

All Door handles both sides

Sink area (taps, sink, faucet)

Storage bin handles/fronts

Garbage Can lids

Printer

Treatment cart handles

Ultrasound (including wand and cord & treatment head)

\*\*\*If you used the gym, carry a spray bottle and paper towel with you and wipe down each item as you have finished with it.

Any other surface you see/think of that is not included.

Place CLEAN sign on plinth face up so next person knows the room is CLEAN

**In Between Every Patient:**

Wash Hands Immediately Before and After Cleaning

Wipe down surfaces in your assigned treatment room:

Door handles

Chair & Stool

Plinth (including under it where patients might grab or touch)

Table top

All Equipment used

Computer/iPad

Cellphone if in treatment room/gym

\*\*\*If you must do any face touching/mask adjustment before your next patient comes you must re-wash your hands.

### Step 3: Develop policies

Develop the necessary policies to manage your workplace, including policies around who can be at the workplace, how to address illness that arises at the workplace, and how workers can be kept safe in adjusted working conditions.

Our workplace policies ensure that workers and others showing symptoms of COVID-19 are prohibited from the workplace.

- Anyone who has had symptoms of COVID-19 in the last 10 days. Symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat, and new muscle aches or headache.
- Anyone directed by Public Health to self-isolate.
- Anyone who has arrived from outside of Canada or who has had contact with a confirmed COVID-19 case must **self-isolate for 14 days and monitor** for symptoms.
- Visitors are prohibited or limited in the workplace.
- First aid attendants have been provided **OFAA protocols** for use during the COVID-19 pandemic.
- We have a **working alone policy** in place (if needed).
- We have a **work from home policy** in place (if needed).
- Ensure workers have the training and strategies required to address the risk of violence that may arise as customers and members of the public adapt to restrictions or modifications to the workplace. Ensure an appropriate **violence prevention program** is in place.

Our policy addresses workers who may start to feel ill at work. It includes the following:

- Sick workers should report to first aid, even with mild symptoms.
- Sick workers should be asked to wash or sanitize their hands, provided with a mask, and isolated. Ask the worker to go straight home. [Consult the **BC COVID-19 Self-Assessment Tool**, or call 811 for further guidance related to testing and self-isolation.]
- If the worker is severely ill (e.g., difficulty breathing, chest pain), call 911.
- Clean and disinfect any surfaces that the ill worker has come into contact with.

### Step 4: Develop communication plans and training

You must ensure that everyone entering the workplace, including workers from other employers, knows how to keep themselves safe while at your workplace.

- We have a training plan to ensure everyone is trained in workplace policies and procedures.
- All workers have received the policies for staying home when sick.
- We have posted signage at the workplace, including occupancy limits and effective hygiene practices. [A customizable **occupancy limit poster** and **handwashing signage** are available on worksafebc.com.]
- We have posted signage at the main entrance indicating who is restricted from entering the premises, including **visitors** and **workers** with symptoms.
- Supervisors have been trained on monitoring workers and the workplace to ensure policies and procedures are being followed.



## Step 5: Monitor your workplace and update your plans as necessary

Things may change as your business operates. If you identify a new area of concern, or if it seems like something isn't working, take steps to update your policies and procedures. Involve workers in this process.

- We have a plan in place to monitor risks. We make changes to our policies and procedures as necessary.
- Workers know who to go to with health and safety concerns.
- When resolving safety issues, we will involve joint health and safety committees or worker health and safety representatives (or, in smaller workplaces, other workers).

## Step 6: Assess and address risks from resuming operations

If your workplace has not been operating for a period of time during the COVID-19 pandemic, you may need to manage risks arising from restarting your business.

- We have a training plan for new staff.
- We have a training plan for staff taking on new roles or responsibilities.
- We have a training plan around changes to our business, such as new equipment, processes, or products.
- We have reviewed the start-up requirements for vehicles, equipment, and machinery that have been out of use.
- We have identified a safe process for clearing systems and lines of product that have been out of use.