

Employers 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.

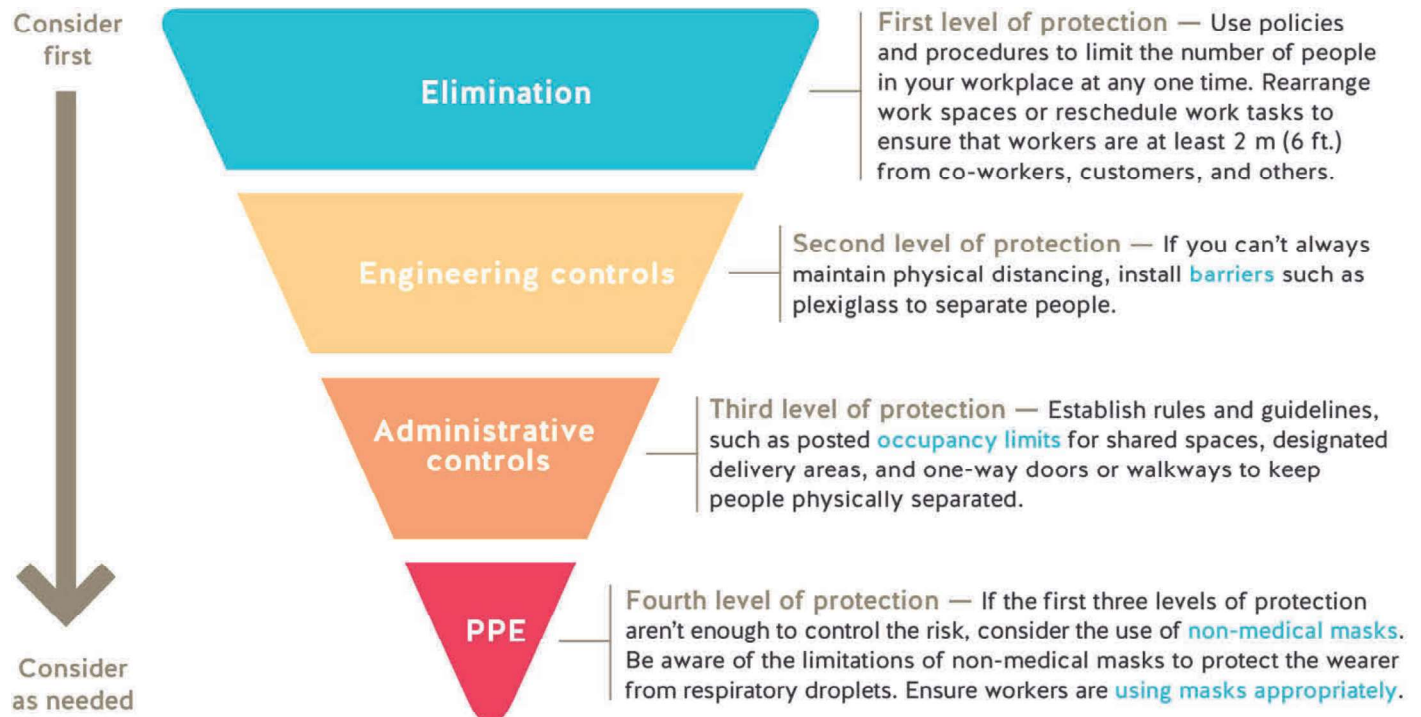
Step 2: Implement protocols to reduce the risks

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 controls from additional levels if the first level isn't practicable or does not completely control the risk. You will likely need to incorporate controls from various levels to address the risk at your workplace.



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

- N/A ☐ 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.
- N/A ☐ 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 of control measures for maintaining physical distance in ny workplace include:

- Working offsite or remotely (e.g., providing teletherapy services).
- Changes to how tasks are done (e.g., maintaining a no-contact, 2 metres distance during therapy).
- Limiting or prohibiting other visitors/family members in the space.

Second level protection (engineering): Barriers and partitions

Not Applicable for home-based therapy; as unable to install barriers in client's homes.

- ☐ 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

Although barriers/partitions are not considered a primary or ideal option for providing speech therapy in a safe manner, the clinician may consider providing therapy through a window partition as a last resort. This will be decided on a case-by-case basis.

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

The following rules and guidelines will be followed to reduce the risk of airborne transmission. This could include things like:

- Using 99% alcohol sanitization before and after entry into a client's home, and again before and after any physical contact with a client (e.g., carefully following the '5 moments of hand hygiene').
- Wiping the chair and table top before and after using.
- Using single-use (disposable) products (e.g., using disposable paper copies of games/worksheets, instead of the books or iPad)
- Wiping down equipment after use by clinician or client.
- Ensuring client and clinician have each of their own supplies (limiting the sharing of toys/games/writing utensils).

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 to protect the wearer from respiratory droplets. We understand that masks should only be considered when other control measures cannot be implemented.
- ☒ We have trained workers in the proper use of masks.

Measures in place

Who will use masks? Both clinician and client (ideally); however in cases where obtaining information from the the mouth/face shape for speech therapy is critical, then only the clinician (not the client) will wear a mask.

What work tasks will require the use of masks? Any activity requiring talking at a distance that is < 2 metres apart. The clinician has been informed of the correct use of masks, with adequate training received from Providence Healthcare.

In cases when the clinician's mouth also needs to be visible (e.g., for visual cueing, modeling, or for demonstrating appropriate focus for behavioural intervention), a clear face shield may be worn by the clinician.

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

- ☒ We have reviewed the information on **cleaning and disinfecting** surfaces.
- N/A ☐ 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.]
- N/A ☐ 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.
- N/A ☐ 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.

- Inside client's homes, Andrea will ask that clients will be able to prepare the space with basic cleaning and disinfecting prior to the in-person session.
- Andrea will be responsible for additional spot-cleaning on select high touch surfaces (e.g., chair, table) that she will come into contact with during the home session.

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.

N/A ☐ First aid attendants have been provided **OFAA protocols** for use during the COVID-19 pandemic.

N/A ☐ 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.

N/A ☐ 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.]

N/A ☐ We have posted signage at the main entrance indicating who is restricted from entering the premises, including **visitors** and **workers** with symptoms.

N/A ☐ 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.

- N/A ☐ 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.
- N/A ☐ We have reviewed the start-up requirements for vehicles, equipment, and machinery that have been out of use.
- N/A ☐ We have identified a safe process for clearing systems and lines of product that have been out of use.

Be advised that personal information must not be included in the COVID-19 Safety Plan

Personal information is any recorded information that uniquely identifies a person, such as name, address, telephone number, age, sex, race, religion, sexual orientation, disability, fingerprints, or blood type. It includes information about a person's health care, educational, financial, criminal or employment history. Visit <https://www.oipc.bc.ca/about/legislation/> for more information.