

COVID-19 Safety Plan

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.

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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

- schedule of therapists is decreased to one per hour (30 to 45 mins treatment, 15 mins to clean)
- each physiotherapist has a designated treatment room
- one kinesiologist in the gym area with one client a time, maintaining 2 meters apart as able
- designated desk space in the back office for two therapists, limit of 2 people in the back office at a time if more, appropriate PPE has to be worn (ie face mask)
- no waiting area for clients, they wait in the parking lot in their cars
- clients not to bring their family along for treatment unless its a minor being treated and need accompanied adult or required for safety of the client.
- each client will have the option of treatment thru telehealth versus in clinic session if appropriate
- one receptionist in the front office at time, no overlap to maintain their own space
- floor markings to designate spacing and direction of flow of traffic
- clinic occupancy limit is 18 persons based on square footage calculation as noted above

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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

- we have installed a sneeze guard plexiglass at the reception area
- we have taped off areas for distancing from other workers at the reception area and from the gym area
- sneeze guard cleaning will be done by receptionist at the end of each day

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

- we have emailed and discussed the guidelines of how the day is conducted
- video was created for clients and staff to see what client can expect on their in-clinic visit
- we have emailed all the staff new guidelines for cleaning, screening of clients and changes in the operations, upon finishing reading, workers will be signing off that they have understood the guidelines
- in clinic review of the guidelines: ie wearing masks at all times if can not maintain 2 meters apart, washing hands before and after work, washing hands before and after taking gloves off, using proper heigyne for sneezing and coughing
- there is signage for how to wash hands, use of PPE, social distancing, cleaning
- the main door to the clinic remains propped open all day to avoid opening and closing door

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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

- all staff will wear masks, disposable if seeing clients, cloth if not with direct contact with client. Its the responsibility of the staff member to wash their cloth mask daily.
- physiotherapists treating clients and can not maintain social distancing will wear disposable masks, gloves if preferred, changing of tops if in direct contact of patients body. Each therapist is responsible of bringing extra clothing/tops to work daily and they are responsible to wash their own clothes
- posters will be placed in the clinic for proper doning/doffing of PPE, ie wearing of mask, gloves, gowns
- goggles will be provided and used at the discretion of the professional

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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.

We have a cleaning and sanitation of clinic policy in place now,

We have a handwashing and respiratory etiquette policy in place

New protocols for Cleaning treatment rooms, general cleaning protocol

Binder with cleaning information of products and copy of the environmental cleaning and disinfectants for clinic settings document

All staff will review the binder and policy and comply

Cleaning will be checked by Joe or Liliana thru out the day

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.



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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.