



COVID-19 Safety Plan

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, mouth, nose or eyes.

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.

CNH will endeavour to do everything possible to lessen the risk staff, volunteers and participants face when they enter one of our facilities. CNH will also offer advice and training so that everybody understands what they can do for themselves to stay healthy.

This safety plan will guide CNH in implementing health and safety measures so that staff can return to work safely. This six-step process will assist CNH in setting policies and procedures to ensure staff feel safe returning to work during and after the pandemic.

Step 1: CNH Risks' Assessment

CNH has identified areas where there may be risks, either through close physical proximity or through contaminated surfaces. CNH has reviewed these risks and set systems in place to mitigate these risks.

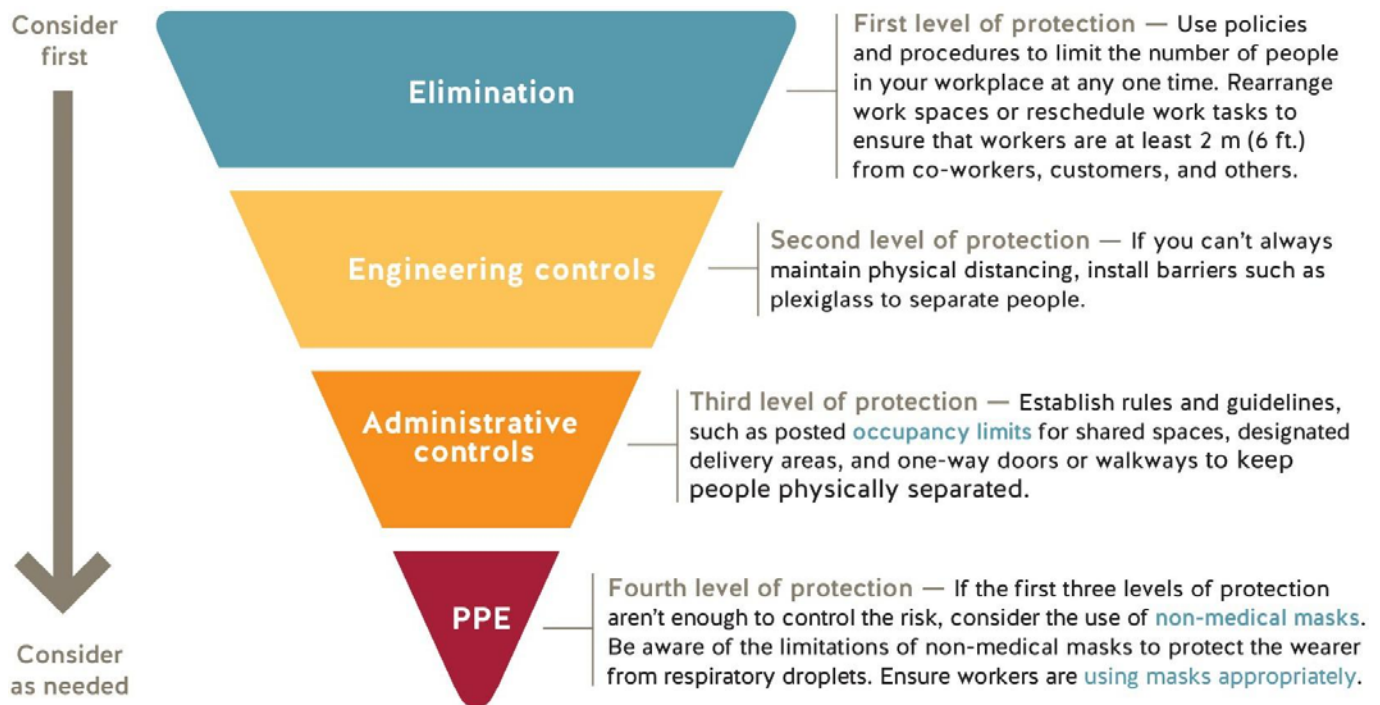
- A. We have involved frontline workers, supervisors, and the Health and Safety Committee.
- B. We have identified areas people use frequently such as the reception lobby, walkways, program and meeting rooms, stairs, gymnasium, washrooms, elevator, kitchen, and offices.
- C. We have identified job tasks and processes in areas where there is a potential risk of individuals being close to one another. This could occur at the reception, lobby, walkways, program and meeting rooms, stairs, gymnasium, washrooms, elevator, kitchen, offices, CNH vehicles, or at our off-site locations.
- D. We have identified the tools, machinery, and equipment that employees share while working.
- E. We have identified surfaces that people touch often, such as doorknobs, elevator buttons, light switches and water taps etc.

Step 2: CNH protocols to reduce the risks

- A. We have involved the frontline workers, supervisors, and the Health and Safety Committee.
- B. CNH closely follows the orders, guidance, and notices issued by the Provincial Health Officer that are relevant to the social services sector.

CNH is committed to reduce the risk of person-to-person transmission

To reduce the risk of the virus spreading CNH will apply the following protocol provided by WorkSafe BC:



1. First level protection (elimination): Limit the number of people in the facility and ensure physical distance whenever possible

- A. CNH has established and posted an occupancy limit for each room at our CNH-Joyce and Annex sites such as the reception lobby, walkways, program and meeting rooms, stairs, gymnasium, washrooms, elevators, kitchens and offices.
- B. In order to reduce the number of people working in the facility, we have considered work-from-home arrangements, virtual meetings, the rescheduling of work tasks and the limiting of the number of individuals in each room.
- C. We have implemented measures to keep employees, volunteers and program participants at least 2 meters (6 feet) apart, wherever possible. Options include revising work schedules, reorganizing work tasks, and posting proper signage based on programs that will be happening in each room.

Measures in place are as follows:

- Working off site or remotely:
Each department is encouraged to determine which staff can work off site or remotely, based on their position's work requirements.
- Changes to work schedules:
Each department was required to review and, if necessary, change their staff work schedules based on their position and program needs.
- Changes to how tasks are done:
Departments will review how programs are run and introduce changes based on WorkSafe BC safety guidelines and also following guidelines from the Provincial Health Officer. For example, Reception Staff will go cashless and use the debit machines.

- Occupancy limits for each room:
We have determined the maximum number of employees who will be working on site.
- Limiting or prohibiting community residents/visitors:
CNH is limiting the number of community residents, volunteers or visitors to the premises.
- Reducing the number of participants – Occupancy by space at **CNH Joyce**
 - First Floor Lobby: 7
 - Full Gymnasium: 50
 - Half Gymnasium: 20
 - Multiroom A/B: 23
 - Half Multiroom: 11
 - Kitchen: 2
 - Staff Lounge: 6
 - Family Place Room: 5
 - Full Program A/B: 12 (4 rectangular tables)
 - Half Program A/B: 6 (2 rectangular tables)
 - Second Floor Lobby: 1
 - Ladies Washroom on first floor: 2
 - Men's Washroom on first floor: 2
 - Ladies Changing Room: 2
 - Men's Changing Room: 2
 - Elevator: 2
 - Reception Staff area: 2
 - Staff Washroom: 1
 - Administration office: 6 (4 people in the central area and 2 Directors, each one in their own office)
 - Accounting office: 1
 - Workroom: 1
 - Youth Director office: 1
 - Community Services Director office: 1
 - Operations Director office: 1
 - Early Years Director office: 1
 - Executive Director office: 1
 - Recreation Team office: 1
 - Settlement Team office: 1
 - Small Settlement Team office: 1
 - Youth Team office: 1
 - Early Years Team office: 1
 - Community Development Team office: 2
 - Second Floor Lobby: 1
 - Gender neutral washrooms on second floor: 1
 - Hallways on second floor: 1
- Reducing the number of participants – Occupancy by space at **Annex**
 - Reception Lobby: 3
 - Full Multipurpose Room: 40
 - Half Multiroom A: 20
 - Half Multiroom B: 15
 - Kitchen: 5
 - Staff Room/Kitchenette: 2
 - Art Studio: 9
 - Community Development/Still Moon Arts office: 2

- Administration Office: 3
 - One Person Office: 1
 - Reception Staff area: 1
 - Children's Room hallway: 3
 - Children's Room: 10
 - Elevator: 2
 - Ladies Washroom: 3
 - Men's Washroom: 3
 - Gender Neutral Washroom: 1
 - End of Trip Room on P1: 1
- Admin office occupancy
 - There will be **four (4) staff** in the full central area and **two (2) Directors** in the office at CNH Joyce.
 - Office/Desk bookings will be through the POS system.
 - At the Annex we will have **three (3) staff** in the Admin office and **one (1)** in the One-person office

Note: This plan is developed for the CNH Joyce and Annex sites

2. Second level protection (engineering): Barriers and partitions

- A. We have installed barriers where employees will be required to keep physically distant from co-workers, volunteers, program participants or others.
- B. We have introduced the cleaning of the barriers into our cleaning protocols.
- C. 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 are as follows:

- Plexiglass Barriers:
 - Reception
 - Admin office/other offices: They will not have plexiglass barriers installed. We will make sure that staff working in these offices will follow the policy about 2 metres (6 feet) separation between work stations. Staff will be provided with gloves and sanitizing chemicals will be available at the front of the Admin office.
- Face Shields:
 - Face shields will be optional for staff who deal directly with program participants and clients. CNH will not provide face shields.
- One-way signage and marking on the floor at:
 - The entrance
 - Reception
 - Hallways
 - Stairs
 - Parkade
 - Administration office
- Appropriate parking regulation - *In progress*

3. Third level protection (administrative): Rules and guidelines

- A. We have identified rules and guidelines on how employees should conduct themselves.
- B. We have established rules about occupancy limits for shared spaces, designated delivery areas, one-way doors and walkways.

- C. We have clearly communicated these rules and guidelines to employees through a combination of training and signage.

Rules and guidelines in place are as follows:

- Staff will be required to stay at home if they are not feeling well.
- Practicing physical distancing (staying 2 metres or 6 feet apart) is the most effective way of preventing the spread of the COVID-19 virus.
- Practice frequent and thorough hand hygiene (vigorously washing hands for 20 seconds with soap and water) Handwashing guidelines information at: <https://www.worksafebc.com/en/resources/health-safety/posters/help-prevent-spread-covid-19-handwashing?lang=en>
- Use alcohol hand sanitizer with a minimum of 60% alcohol base.
- Avoid touching your face, mouth, nose or eyes.
- Practice mindful respiratory etiquette (sneeze/cough into arm or use a tissue and dispose of the tissue right away, wash hands). Respiratory etiquette information at: <https://www.worksafebc.com/en/resources/health-safety/posters/help-prevent-spread-covid-19-cover-coughs-sneezes?lang=en>
- Use the one-way doors or walkways appropriately.
- Disinfect communal equipment (e.g. computers, telephones, POS tills, etc.) before and after use using the approved cleaning supplies left with you for that purpose.
- Staff who are behind a barrier with co-workers and not able to consistently maintain a 2 metre or 6 foot physical distance are recommended to wear a non-medical mask/facial covering. Please see Fourth level protection: Using masks, for more information.
- Staff and volunteers will refrain from providing and consuming communal foods and will bring their own dishes, utensils, and cooked meals. Food gift certificates will be provided to volunteers to recognize them for their service.
- Staff and volunteers will be encouraged to take breaks at their own desk or outside.
- Staff will be instructed to use their own office supplies.
- Beverages (coffee, tea, water) to visitors/public will not be offered at this time.
- Water fountains will be used to fill up water bottles only. Staff, volunteers, program participants and visitors will be instructed to not touch the water source surface with their mouth and hands.
- Signage
 - At all entrance doors:
 - Opening hours
 - Do not enter if you're not feeling well
 - Throughout the buildings:
 - Physical Distancing (2 metres) is the most effective way to prevent infection.
 - Frequent and thorough hand hygiene (washing hands for 20 seconds with soap and water) is recommended to kill the COVID-19 virus.
 - Outside elevator and in elevator: Only two people in the elevator at once.
 - Use alcohol-based hand sanitizer with a minimum of 60% alcohol base
 - Avoid touching your face, mouth, nose or eyes.
 - Good respiratory etiquette (sneeze/cough into arm or use tissue and dispose of tissue right away, wash hands).
 - Stickers on floors to mark one-way doors or hallways and appropriate gaps between people for line-ups.
 - Maximum occupancy of the rooms in each room.
 - Clean and sanitize equipment after each use; work rooms included
 - No food sharing
 - Water fountains to fill up bottles usage only

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

- A. We have reviewed the information on selecting and using masks and instructions on how to use a mask
- B. We understand the limitations of masks to protect the wearer from others' respiratory droplets.
- C. We understand that masks should only be considered when other control measures cannot be implemented.
- D. We have trained workers in the proper use of masks.

Guidelines in place are as follows:

- If you do choose to wear one, please refer to the following information:

Guidelines on wearing non-medical masks and how to make your own at the Government of Canada website: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/about-non-medical-masks-face-coverings.html>) and the Special Advisory Committee's recommendations on the use of non-medical cloth masks or face coverings in community settings: <http://www.phn-rsp.ca/sac-covid-ccs/wearing-masks-community-eng.php>

Selecting and using masks at the WorkSafe BC Website:

<https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-selecting-using-masks>

How to use a mask at the WorkSafe BC Website:

<https://www.worksafebc.com/en/resources/health-safety/posters/help-prevent-spread-covid-19-how-to-use-mask>

- Remove and dispose of gloves and PPE in the garbage bins. Misuse of these items increases the risk of infection.
- Use single-use (disposable) products.

CNH is committed to reducing the risk of surface transmission through effective cleaning and hygiene practices:

- A. We have reviewed the information on cleaning and disinfecting surfaces.
- B. Our workplace has enough handwashing facilities on site for all our employees, volunteers and program participants. Handwashing locations are visible and easily accessible.
- C. We have policies that specify when workers must wash their hands and we have communicated good hygiene practices to employees. Frequent handwashing and good hygiene practices are essential to reducing the spread of the virus.
- D. We have implemented cleaning protocols for all common areas, surfaces and equipment — e.g. washrooms, Reception, equipment, vehicle interiors, shared tables, desks, light switches, 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).
- E. Employees who are cleaning have adequate training and materials.
- F. We have restricted access to the kitchen, use of kitchen equipment, and protocols of kitchen usage. We have removed unnecessary tools and equipment to simplify the cleaning process.
- G. We have assigned the Staff Lounge Room for staff to warm up lunches, make coffee, and get water.

Cleaning protocols in place are in Appendix 1

Step 3: CNH Policies

CNH policies ensure that employees, volunteers and program participants showing symptoms of COVID-19 are prohibited from the facility.

- A. 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.
- B. Anyone directed by Public Health to self-isolate.
- C. 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.
- D. We will ensure we have restrictions on the number of people in the buildings at one time.
- E. All first aid attendants will be provided with the **OFAA (Occupational First Aid Attendants) protocols** for use during the COVID-19 pandemic. The document can be found at <https://www.worksafebc.com/en/resources/health-safety/information-sheets/ofaa-protocols-covid-19-pandemic?lang=en>
- F. We have a **working alone policy** in place. - *In progress*
- G. We have a **work from home policy** in place. - *In progress*
- H. We have a **violence prevention policy** in place. - *In progress*

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

- A. Sick employees should report to the immediate supervisor or department director, even with mild symptoms.
- B. Sick employees should be asked to go straight home. Employees can consult with their supervisor to plan the best way to get home in order to limit community contact. [Staff should consult the [BC COVID-19 Self-Assessment Tool](#), or call 811 for further guidance related to testing and self-isolation.]
- C. If the employee is severely ill (e.g., difficulty breathing, chest pain), call 911.
- D. Clean and disinfect any surfaces that the ill employee has come into contact with.

Step 4: Communication plan and training

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

- A. We have a training plan to ensure everyone is trained on our COVID-19 Safety Plan and workplace policies and procedures. All employees have received the policy about staying home when sick.
- B. We have posted signage at the workplace, including occupancy limits in rooms and effective hygiene practices throughout the buildings.
- C. We have posted signage at the main entrance indicating who is restricted from entering the premises, including community residents/visitors and employees with symptoms.
- D. Supervisors have been trained on monitoring employees and the workplace to ensure policies and procedures are being followed.

Step 5: CNH Monitoring and updating plans as necessary

As we restart programs we will identify any new areas of concern. We will evaluate, monitor and mitigate risk of COVID-19 virus infections. All staff are required to report any potential areas of concern to the Health and Safety Committee or their immediate supervisor. We will ensure we monitor areas in the workplace that need changes in procedures to ensure the safety of all employees, volunteers and program participants. If we need to improve a process, we will take the necessary steps to update our COVID-19 Safety Plan and policies and procedures and provide appropriate information and training to staff. We are all in this together and all employees will be involved in keeping our workplace safe and healthy.

- A. Every program is required to monitor risks. We will make changes to our policies and procedures as

- necessary. All staff should be informed about who to approach to report health and safety concerns.
- B. When resolving safety issues, we will involve one of the members from the Health and Safety Committee.

Step 6: Assessing and addressing risks from resuming operations

We will clean and sanitize all areas of our facilities including those that have not been operating while CNH was closed. As we re-open each area, we will review and manage risks arising from re-opening that part of the facility.

- A. We have a training plan for new staff.
- B. We have a training plan for staff taking on new roles or responsibilities.
- C. We have a training plan around changes to our operations, such as new equipment, policies, procedures, and any new processes.
- D. We have reviewed the start-up requirements for equipment, vehicles and machinery that have been out of use.

Appendix 1



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COVID-19 Health and Safety

Cleaning and Disinfecting Protocol

The virus that causes COVID-19 is easily destroyed by mild soap and water. This works well for handwashing, but cleaning surfaces effectively can be a challenge. That's why it's important to clean and disinfect surfaces, especially high-contact surfaces, which are surfaces that are contacted frequently and/or by many people.

How COVID-19 spreads

COVID-19 is an infectious disease that mainly spreads among humans through direct contact with an infected person and their respiratory droplets. Respiratory droplets are generated by breathing, speaking, coughing, and sneezing. Your exposure risk is greatest when you have prolonged close contact with an infected person.

The virus can also spread if you touch a contaminated surface and then touch your eyes, mouth, or nose.

A surface can become contaminated if droplets land on it or if someone touches it with contaminated hands.

CNH continues to evaluate risks and ensure we have mitigation strategies for our operations, programs and services. This will be an ongoing learning process as guided by the data, evidence and advice from public health regarding risk levels.

Cleaning and disinfecting

Effective cleaning and disinfection involves a two-stage process.

Cleaning

To disinfect a surface effectively, you must clean it first to remove surface dirt and debris. Any residue left on work surfaces and equipment may deactivate the disinfectant. Use soap or detergent as a cleaning agent.

Disinfection

After cleaning, apply a disinfectant to the surface. You need to leave the disinfectant on for a specified contact time to neutralize any remaining organisms. Look for recommended contact times on product instructions.

What surfaces we will clean and disinfect

Start by cleaning and disinfecting all the common surfaces that staff, contractors, volunteers and program participants touch. Examples include doorknobs, light switches, handles, countertops, desks, tables, phones, keyboards, touch screens, toilets, faucets, gas pump handles, and debit card machines, elevator buttons, sound equipment, fans, doorbell, water fountains, chairs, plastic bulletin boards, and floors.

CNH will continue to conduct surveys of its workplace to determine if there are other surfaces that are regularly touched as our programming evolves. We need to ensure that we are cleaning and disinfecting common, high-contact surfaces inside and outside to limit the chance of the virus spreading through people touching contaminated surfaces. We will closely monitor areas in the building that are used by many program participants and community residents. These spaces will be cleaned frequently. We will clean and disinfect the communal and frequently used spaces more often and thoroughly. We will continuously assess the spaces usage and plan the cleaning and disinfecting accordingly.

We will continually review and increase cleaning as we ramp up our programming and services to full operations.

What we will use to clean and disinfect

For cleaning, we will use regular soap and water or another cleaning solution. Depending on how many people are in the space, how it's used and how often, we may need to clean some spaces more frequently.

There are a number of products we could use for disinfection. Health Canada has a list of disinfectants we can use to fight against COVID-19 transmission. They all have an assigned drug identification number. These are consumer products that don't require a safety data sheet, like some controlled products. However, it's still important to follow whatever safety information is available for the product. We will use these products with caution, as directed on the label, to avoid introducing other hazards into your workplace.

One of the most common disinfectant solutions is water and bleach. You can make a bleach solution by adding 42 ml (3 tablespoons) of bleach to 4 L (1 gallon) of water. For safety, bleach should never be mixed with other disinfecting products. This can result in dangerous fumes. For more information, visit the BC Centre for Disease Control's Cleaning and Disinfecting webpage.

Some sanitizing solutions contain up to 70 percent alcohol and will release flammable vapors. These are to be used with caution, and should not be used if there are ignition sources nearby.

Cleaning and disinfecting guidelines for CNH

Staff, volunteers and program participants play an important role in helping to reduce the spread of the COVID-19.

- Clean high touch surfaces and areas with approved, hand surface disinfectants. These areas will be cleaned twice a day at a minimum e.g. entrance door, elevators, phones, pens, computer desks, lunch tables, kitchen spaces, washrooms, cash register, public seating areas, surface counters, tables and chairs.
- Shared workspaces need to be cleaned and disinfected daily
- Clean and disinfect contaminated surfaces as they pose a greater risk of infection

- Communal computers and equipment need to be cleaned and disinfected when changing shift or at least twice a day, e.g. reception computer/POS till and cleaning equipment.
- Change garbage bags daily
- Cleaning and disinfecting is done using Lemon Quat
- We will ensure all high-touch surfaces are cleaned twice a day and all other surfaces are cleaned at least once a day. Custodians will be required to clean after each program has used a space. A cleaning system will be followed by reception and facility staff to ensure there is clear communication.
- Cleaning after each program has used a room or space. Thorough cleaning and disinfecting will be done before opening or after closing of the building. Cleaning before opening and after closing will limit the odors of cleaning and disinfect chemicals.
- Ensure there is sufficient time for staff to thoroughly clean and disinfect.
- All custodian staff will receive the Cleaning and Disinfecting guidelines and training to ensure proper cleaning.
- Custodians will be required to use personal protective equipment (PPE), e.g. rubber gloves, mask as required
- Ensure all machinery and cleaning equipment is cleaned after each use.
- Lemon Quat and paper towels are provided in the following rooms at Joyce location: Admin office, Settlement Team office, Early Years Team office, Recreation Team office, Youth Team office and Community Development Team office. At Annex location: Admin office, Community Development/Still Moon Arts office, Staff Room, Art Studio.
- Staff are encouraged to wipe down their desks, keyboards and phones at the start and end of each shift.

Hand Washing

Regular hand washing is an important part of maintaining clean surfaces. We will establish hand washing procedures and communicate them to staff. We will establish policies to ensure that staff are washing their hands regularly: at a minimum, when they arrive, immediately before any breaks, after using the bathroom and just before leaving. We realize this may be the most important infection control for our workplace.

We will ensure staff have access to hand washing facilities. We will also provide alcohol-based hand sanitizer.

Let's all do our part

When we create a healthy and safe workplace, we contribute to a safe and healthy province. As COVID-19 restrictions are lifted and more businesses and organizations resume operations, let's all do our part. For more information and resources on workplace health and safety, please visit worksafebc.com.