

COVID-19 Safety Plan

Safety Plans – V1.0 – June 22, 2020

Each Northern Health site has completed thorough facility and departmental risk assessments, and has developed a site safety plan.

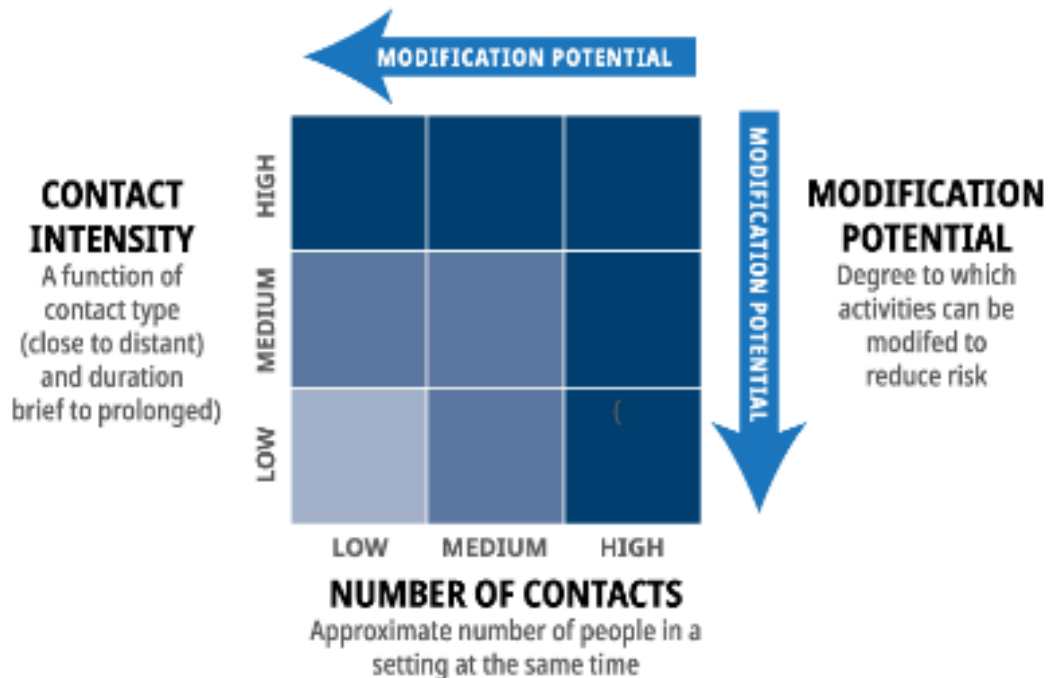
In accordance with the order of the Provincial Health Officer for posting of Workplace Safety Plans, each site has posted their Facility Risk Assessment and Safety Plan on the Joint Occupational Health and Safety Committee bulletin board. In addition, summarized safety plans are posted at entrances for visitors, patients, contractors, students and volunteers to view.

Risks in the 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 when someone touches a contaminated surface and then touches their face. The risk of surface transmission increases when many people contact the same surface and when those contacts happen over short periods of time.

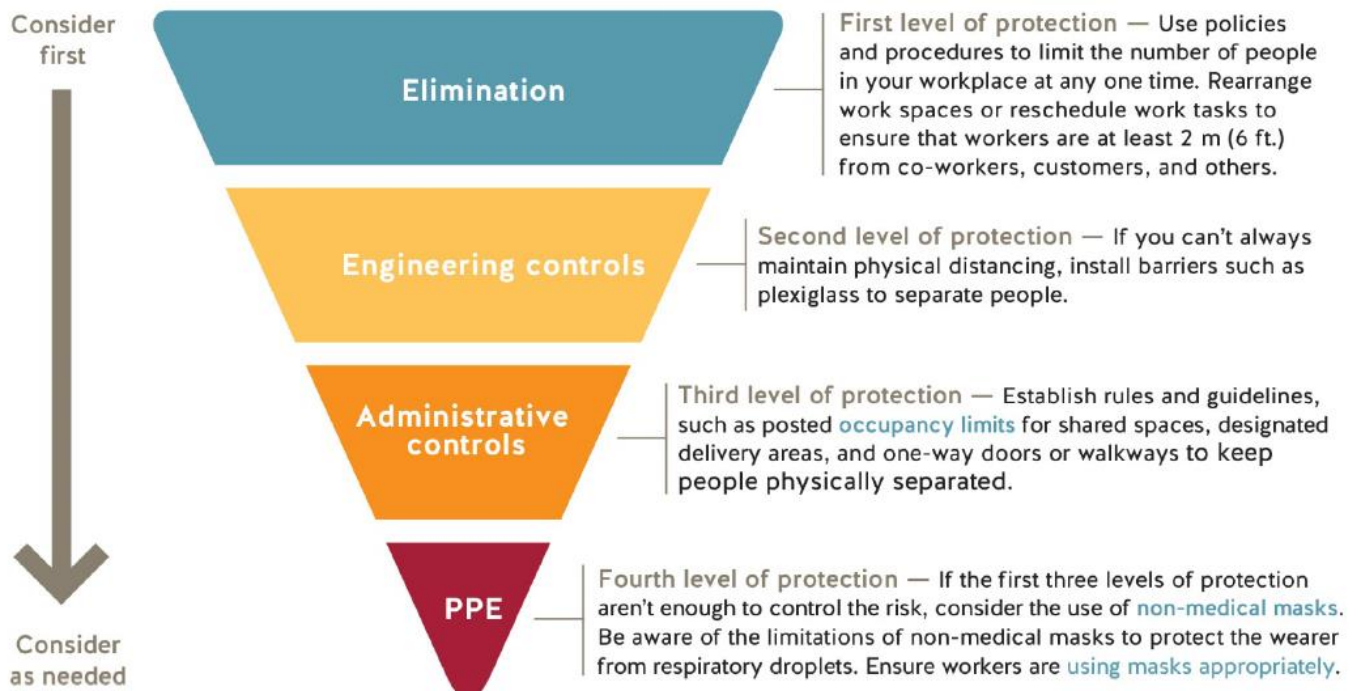
The risk of person-to-person transmission increases with contact intensity (how many people and duration of contact) and the number of contacts.

These risk factors have been taken into consideration in developing safety plans at each Northern Health facility.



At each site, frontline workers, supervisors and the Joint Occupational Health and Safety Committee have been involved in the facility and departmental risk assessments and development of control measures to eliminate or minimize risk of exposure to COVID-19.

To reduce the risk of the virus spreading through droplets in the air, protocols are in place to protect against identified risks. Wherever possible, protocols which offer the highest level of protection have been implemented. Where these are not practicable or do not completely control the risk, additional control measures are implemented.



Measures in place in all Northern Health facilities

Northern Health has implemented the BC Center for Disease Control (BCCDC) guidelines to reduce the risk of person-to-person transmission.

1. Measures for maintaining physical distance are in place throughout Northern Health facilities.

Depending on the site these measures may include:

- Reducing the number of staff on site by:
 - Allowing staff that are able to work offsite or remotely
 - Changing work schedules
 - Scheduling virtual meetings rather than in-person

- Access controls – may include reducing the number of open entrances, greeters at entrances
- Flow patterns may be established to maintain physical distancing (e.g., one-way hallways, directional signage, walking “lanes”)
- Changes to processes (e.g., touchless sign-in, electronic queue management, floor markings for physical distancing in line-ups)
- Changes to work tasks to incorporate physical distancing
- Limiting visitors
- Reducing the number of patients in an area at any given time
- Posting occupancy limits for common spaces (e.g. public washrooms, waiting rooms, reception areas, elevators)
- Where practicable, occupancy limits are posted for facilities (e.g., office settings).
- Changing processes for product deliveries

2. Engineering controls

- Protective barriers have been (or will be) installed where physical distancing cannot be maintained due to space constraints or physical layout.
- A process for review of barrier installation requests is in place to ensure that other risks to workers or others will not be created.
- Partitions may be used where installation of a barrier is not possible or practicable.

3. Administrative controls

- Signage is placed at entrances and throughout facilities as required, as reminders to maintain physical distancing and appropriate hygiene practices.
- Signage is posted at main entrances indicating who is restricted from entering the premises, including visitors and workers with symptoms.
- Greeters at entrances provide screening (at applicable sites).
- Operational procedures have been revised to incorporate BCCDC guidelines.
- Processes for reviewing risks in the workplace have been put in place, including worker, supervisor and Joint Occupational Health and Safety Committee input.
- High touch surfaces have been identified in public/common areas, and additional cleaning protocols have been implemented (e.g., doorknobs, elevator buttons, counters, handrails).
- All departments have identified high touch surfaces and implemented additional cleaning protocols.
- Single use products are used where possible.
- In some office settings, pods of workers work together exclusively to minimize risk based on number of contacts.
- All Northern Health sites have adequate handwashing facilities on site for all workers. Handwashing locations are visible and easily accessed.

- Policies are in place that specify when workers must wash their hands and good hygiene practices have been communicated to workers. Frequent handwashing and good hygiene practices are essential to reduce the spread of the virus.
- Workers who are cleaning have adequate training and materials.
- Unnecessary tools and equipment have been removed to simplify cleaning processes.
- Workers have been advised to self-monitor for symptoms of COVID-19 and to stay home when ill.
- Workers have been made aware of Public Health directives around self-isolation, returning from travel outside of Canada, and contact with a confirmed COVID-19 case.
- First aid attendants have been provided OFAA protocols for use during the COVID-19 pandemic. Workers that begin feeling ill at work will be asked to wash or sanitize their hands, provided with a mask, and isolated. They will report to first aid, if appropriate. The worker will be asked to go straight home. If the worker is severely ill (e.g., difficulty breathing, chest pain), 911 will be called. Any surfaces that the ill worker has come into contact with will be cleaned and disinfected.
- Working alone plans are in place (where applicable).
- The telework policy was recently updated to support safety of workers working at home.
- Northern Health has a robust violence prevention program. All workers take a series of e-learning modules. Staff in areas where there is high risk of violent incidents take an eight hour classroom course and annual 30-minute refresher. Additional guidance has been made available to staff in areas where the risk of violence may arise as patients and members of the public adapt to restrictions or modifications to the workplace.

Education and Training

- Each department and facility has identified training needs and developed a training plan to ensure everyone is trained in changes to workplace policies and procedures to prevent exposure to COVID-19, including:
 - Training plan for new staff
 - Training plan for staff taking on new roles or responsibilities.
- Workers know how to report health and safety concerns.

4. Personal Protective Equipment

- Northern Health has implemented all BCCDC guidelines as applicable, and follows updated provincial guidance on personal protective equipment usage.
- Northern Health follows provincial guidance for healthcare facilities regarding the use of masks for patients, visitors and the public as applicable.

5. Review, monitoring and updates to safety plans

- All sites will monitor risks as operations resume, and will make changes to procedures and processes as necessary.
- When resolving safety issues, the Joint Occupational Health and Safety Committees or worker health and safety representatives (or, in smaller workplaces, other workers) will be involved.

For full site safety plans please refer to the Site Safety Plan and Facility Risk Assessment posted on the JOHSC bulletin board with more site-specific information, or ask to speak with a Supervisor or Manager.