



POST-PANDEMIC BUSINESS PLAYBOOK

A guide for COVID-19 Pandemic
Preparedness and Response

In order to enable Ontario businesses to get back to work safely, Lear developed a “playbook” that lays out processes to raise awareness of new health and well-being protocols. This has greatly expedited our ability to produce and provide this free resource to the public. We are thankful we have great partners who are willing to share their resources for the greater community.

Thank you Lear!



WORKPLACE SAFETY & PREVENTION SERVICES

NOTE: This document is intended for informational purposes only to provide an overview of the potential hazards posed in the workplace due to COVID-19. It is not intended as medical advice, to provide a comprehensive risk assessment for all workplaces, or to replace any legislated workplace safety obligations. Due to the ongoing evolution of the situation in Ontario and around the world, this document may be used as a guide for Employers in addition to guidance delivered by public health authorities such as the World Health Organization (WHO), Ontario Ministry of Health, Public Health Ontario and the Centers for Disease Control and Prevention (CDC). Any use which is made of this document by any Employer, or any reliance on or decisions to be made based on it, are the responsibility of the Employer. WSPS and its partners, officers, directors, employees, agents, representatives, suppliers and service providers accept no responsibility for any errors or omissions in content or for damages of any kind or nature suffered by any Employer or any third party as a result of use of or reliance on this communication.

© 2020 Workplace Safety & Prevention Services (WSPS)

Workplace Safety & Prevention Services (WSPS) grants permission to approved end users to reproduce this document in whole or in part, provided its intended use is for non-commercial, educational purposes and that full acknowledgement is given to WSPS. Approved end users are firms registered with the Workplace Safety and Insurance Board. WSPS reserves the right to extend this permission to other stakeholders and interested parties by express written permission upon application. WSPS extends no warranty to materials amended or altered by the end user. Under no circumstances is this document, or any portion thereof, to be duplicated for purposes of sale or for external reproduction or distribution.

(Sample WSPS acknowledgement, “Reproduced or adapted from name of solution with permission of Workplace Safety & Prevention Services, Mississauga, Ontario.”)

The information contained in this reference material is distributed as a guide only. It is generally current to the best of our knowledge as at the revision date, having been compiled from sources believed to be reliable and to represent the best current opinion on the subject. No warranty, guarantee, or representation is made by WSPS as to the absolute correctness or sufficiency of any representation contained in this reference material. WSPS assumes no responsibility in connection therewith; nor can it be assumed that all acceptable safety measures are contained in this reference material, or that other or additional measures may not be required in particular or exceptional conditions or circumstances. WSPS will be pleased to respond to your individual requests for information, at any time.



TABLE OF CONTENTS

Introduction	1
1.0 Employer Responsibilities	2
2.0 Hierarchy of Controls	3
3.0 Health Screening	6
4.0 Isolation Protocol	8
5.0 Self-Isolation and Returning to the Workplace Protocol	10
6.0 Physical Distancing Protocol	11
7.0 Pathogen Decontamination Measures	15
8.0 Training and Communication	18
Resources	20
Reference List	22
Appendices	25



DEAR USER:

We are focused on keeping our employees, customers and partners safe during these uncertain times. As we continue to navigate this new normal, we have partnered with Lear to develop a “*playbook*” that lays out processes to raise awareness of new health and well-being protocols. While it is not a one-size-fits-all approach, the Post-Pandemic Business Playbook includes practical guidelines from the Ministry of Labour, Training and Skills Development (MLTSD), Health Canada and Public Health Ontario, that could be tailored by businesses to address various scenarios when returning to the workplace.

This resource has been developed to support businesses in adapting to new operating protocols and ways of working in unprecedented times. Should you need more assistance, WSPS continues to work remotely during the pandemic please contact your designated Account Manager or our Customer Care team for more information and support.

HEALTH & SAFETY CONSULTANT

Please check out our website to find our current hours of operations.

<https://www.wsps.ca/About-Us/Contact.aspx>

1-877-494-WSPS (9777) | dutyconsultant@wsps.ca

Customer Care 1-877-494-WSPS | customer care@wsps.ca

WSPS.CA



INTRODUCTION

This Pandemic Playbook provides general guidance for use in all workplaces. Due to unique circumstances, each workplace must adapt the suggestions of this document to address specific requirements based on the level of risk in their workplace. Additionally, workplaces must comply with all applicable laws and reference local, provincial and federal health agencies for the most up-to-date guidance and rules pertaining to public health. Workplaces are encouraged to establish a process to monitor alerts from credible organizations such as the Public Health Agency of Canada, Ontario Ministry of Health and local public health units.

WSPS has attempted to adapt this document to be flexible and useful for a wide variety of workplaces across many sectors. The information and tools provided herein, although a great starting point and guidance document in the time of the pandemic, do not provide an all-encompassing safety program to control all workplace hazards. Where available, workplaces are encouraged to review the supporting documentation and seek further guidance from their local public health units. A detailed review of site-specific risk factors and implementations of control will further ensure a safe workplace.

Workplaces are encouraged to engage the internal responsibility system. It is recommended that employers complete a risk assessment using the lens of the pandemic to identify potential sources of transmission and exposure. Consult with workplace parties including, but not limited to, the Joint Health and Safety Committee, senior leadership, union leaders, human resources department and health and safety professions (both internal and external) when preparing for business operations during and following the pandemic. All successful programs require continuous review, the pandemic response program should be evaluated for continual improvement as needed. It is important that all workers are provided with the training needed to succeed in contributing and ensuring a safe and healthy work environment for themselves, visitors and contractors. We are all responsible for health and wellness in our workplace, where a collective commitment from all workplace parties is conducive to a safer workplace for all.

For additional pandemic resources, such as job aids and business resources, please visit [WSPS.CA](https://www.wsp.ca).



1.0 EMPLOYER RESPONSIBILITIES

For the purpose of creating and implementing measures and procedures to ensure the safety of their workers throughout and following the pandemic. The employer is responsible for guiding the workplace through most current expectations and processes throughout phases of the organization's pandemic response.

The employer may wish to engage a team of workers across various functions or business units to assist with maintaining a healthy and safe work environment. These areas of focus could include:

- 1 Completion of a Risk Assessment through the lens of the Pandemic**
- 2 Development and implementation of a response plan**
- 3 Worker wellness and returning to the workplace**
- 4 Health checks and screening**
- 5 Isolation coordination**
- 6 Communication and training**
- 7 Personal Protective Equipment and materials**



2.0 HIERARCHY OF CONTROLS

Based on the unique risks and risk levels identified for the workplace, consider a control program to protect the general workforce from COVID-19. Additional resources to determine if controls may be warranted for a specific workplace can be found in the [Resources](#) section of this document. When introducing controls into the workplace, ensure there are no additional hazards being created (e.g. blind spots from barriers, entanglement hazards from personal protective equipment, etc.) and that controls related to other occupational hazards remain effective.

The controls listed herein are specific for working to eliminate the spread of COVID-19 in the workplace. Consider controls based on the hierarchy of controls including, but not limited to, the following suggestions:

Elimination

- Eliminating the need for face-to-face contact (e.g. meetings, to work from home).
- Screen Employees and Visitors for COVID-19.

Substitution

- Substitution would require substituting the hazard itself with a less hazardous exposure. This is not possible or relevant in the content of this type of hazard.

Engineering

- Isolating workers from the hazard.
- Using physical barriers when face-to-face contact cannot be avoided.
- Redesigning workplaces to allow for appropriate distancing.
- Don't share common equipment/tools.
- Sanitizer stations.
- Minimize worker contact in high traffic aisles/hallways with uni-directional floor markings.

Administrative

▪ PERSONAL HYGIENE

Consider the quantity and location of personal hygiene products made available in the workplace, such as soap, paper towels, tissues, alcohol based hand sanitizers, and waste bins equipped with refuse bags for disposal of materials. Portable disinfectant stations are recommended throughout high traffic and/or populated work areas.

▪ PHYSICAL DISTANCING

▪ HEALTH SCREENING

▪ SURFACE DECONTAMINATION

Consider maintaining an adequate stock of decontamination supplies at the workplace.

▪ WORKPLACE TRAINING on COVID-19 hazards and controls

▪ FACE COVERING

A face covering is considered an administrative control as it is not considered protection from this hazard but rather may be used to reduce the risk of transmission. Fabric face coverings (i.e. non-medical masks) may be used for source control in situations where physical distancing may not be possible or difficult to maintain. Refer to government guidelines regarding face coverings where recommended and/or required and/or where other controls may not be possible.

▪ SIGNAGE ON PREVENTATIVE ACTIONS

This could include physical distancing and workplace sanitation.

The employer may assign a designated individual or team to ensure an inventory of supplies is maintained and order time is adequate to restock supplies identified for personal hygiene and decontamination. When elimination, engineering and administrative controls are not adequate in reducing the risk to an acceptable level, personal protective equipment can be considered. The employer is responsible for ensuring adequate supplies of personal protective equipment are available at the workplace, as required by the company's hazards risk assessment.



Personal Protective Equipment & Face Coverings

Employers are encouraged to complete a risk assessment to determine when and which personal protective equipment may be required. Workers must use personal protective equipment as required by their employer. For any worker assigned to use personal protective equipment, adequate training on the selection, safe use, proper donning, doffing and cleaning/disposal procedures, and limitations of the personal protective equipment must be provided. Personal protective equipment once used should be disposed of in a responsible manner, as to not cause further harm to people, materials, processes or the environment. Manufacturer guidelines must be followed and storage locations should be provided for reusable personal protective equipment. In addition, ensure that personal protective equipment does not interfere with controls already implemented.

Consider the calibre and quantity of personal protective equipment made available in the workplace, as well as refuse bags made available for disposal.

For more information on Masks, Respirators, and Face Coverings, see [Appendix E – Masks Filtering, Face Piece, and Fabric Coverings Resource](#).

For more information and guidance about personal protective equipment as well as face coverings, refer to the Guide to Developing your Workplace COVID-19 Safety Plan at [Ontario.ca](#)

FACE COVERINGS AND RESPIRATORS



- Face coverings are intended to limit the potential spread of viral droplets from a person to the air around them. Face coverings can be a reusable fabric face covering or a one-time use disposable face covering. A face covering is used when physical distancing is not possible or a challenge, and most effective when both individuals that are required to come in close contact with each other wear one. It should cover both the wearer's nose, mouth and chin, and be comfortable such that the wearer is not constantly needing to adjust the face covering. Face coverings are not intended to replace physical distancing, but rather enhance existing controls to protect workers. Refer to government guidance regarding face coverings for further information.
- Although not necessary as a control in general workplaces, should a respirator is selected as a control in the workplace, the worker must first be fit tested and trained in the safe use, inspection and maintenance, limitations and cleaning/disinfecting when applicable. Refer to Ontario Regulation 833 and CSA Standard Z94.4 Selection, use and care of respirators for additional guidance. For more information on Masks, Respirators, and Face Coverings, see Appendix E – Masks Filtering, Face Piece, and Fabric Coverings Resource.

FACE SHIELDS



Face shields could be worn as a precautionary measure in addition to other measures when physical distancing may be challenging or not possible and physical barriers are not feasible. Face shields are not deemed an appropriate measure for control of spread or protection of the worker when used independently of other controls. Face shields may be appropriate when used in conjunction with other measures and procedures for the isolation coordinator and other on-site first responders. (See [Isolation Protocol](#)). Should there be a need to share face shields amongst workers in the workplace, Regulation 851 prescribes that protective clothing or other safety devices shall be cleaned and disinfected prior to being worn by another worker.



GLOVES



Gloves should be worn when appropriate for chemical and biological exposure and are not a primary control to prevent exposure to COVID-19. In fact, gloves may put workers at a higher risk when not taken off properly and may provide a false sense of security. When wearing gloves, people may be less inclined to wash their hands. This is counterproductive and puts others at a higher risk. Touching your face with contaminated hands, whether gloved or not, poses a significant risk of infection. When necessary, as required by industry guidelines or workplace protocols, change your gloves and wash your hands.

Proper use of gloves and their limitations requires training, including reinforcement, that handwashing is still required even when wearing gloves. Gloves may also pose other health risks, such as dermatitis and an entanglement hazard with certain equipment. If gloves are being worn in the workplace, ensure a risk assessment is completed to implement the right gloves for the task (e.g. cleaning with disinfectants). Safety data sheets can be used to further evaluate the appropriate control in this instance. All gloves must be disposed of in garbage bags/bins.

¹<https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html?topic=tilelink#wm>

Managing of Inbound Materials

According to the World Health Organization (WHO), it is safe to receive packages from areas where COVID-19 has been reported, stating that,

“The likelihood of an infected person contaminating commercial goods is low, and the risk of catching the virus that causes COVID-19 from a package that has been moved, travelled and exposed to different conditions and temperature is also low.”

The virus does not survive on surfaces for long, and the length of shipment time and other environmental factors should inactivate the virus.

If you receive an expedited package from an area where COVID-19 is present and are concerned about possible surface contamination consider these steps:

- Wash your hands frequently with soap and water after handling materials
- Use alcohol-based hand rub, with at least 60% alcohol, when soap and water are not available
- Avoid touching your face, eyes, nose or mouth



3.0 HEALTH SCREENING

Temperature and health screening protocols must be implemented as per provincial guidance to help prevent transmission of COVID-19 and reduce the potential risk of exposure to workers and visitors. The screening is not intended to provide medical advice. If individuals have medical questions, have them consult a health practitioner or the local public health unit. The procedure should be updated based on current recommendations from the provincial and/or local public health unit. Additional guidance can be found in the references section of this report.

A screening team, that may include internal or external personnel, should carry out the daily screening protocol for all incoming workers, contractors, suppliers, visitors, etc. A self-screening can be completed by the worker provided the self-assessment is monitored regularly.

Details:

- **ENCOURAGE** workers to perform daily [self-screening](#) or use the [COVID-19 self-assessment](#) and download the [COVID Alert mobile app](#) at home prior to coming to work
- **PERFORM** on-site health screening at site entry (e.g. gates, staff entrances, reception door, etc.)
- **ENSURE** barriers are in place to prevent anyone from missing the screening protocol
- **ENSURE** screening is carried out by a designated team who is trained on the process, equipment to be used
- **ENSURE** the health screening data is collected, monitored, and maintained

The screening may not need to be completed throughout the workday. Should an individual develop symptoms while at the workplace, the supervisor or host (in the case of visitors/contractors) should follow the steps outlined in the sample [Isolation Protocol](#).

When implementing a screening protocol, seek legal advice should a worker not accept to participate in the screening protocol.

Self-Screening Protocol

- The Daily Self-Screening protocol aims to prevent sick or symptomatic workers from leaving their homes and to decrease the likelihood of spreading infection at work. Workers can review the [Self-Screening Checklist](#) prior to each shift/workday to determine next steps.
- Even if self-screening is performed at home, on-site health screening could still be performed prior to entering the workplace.
- Any person exhibiting symptoms identified on the screening checklist, even if only mild symptoms are felt, should stay home, notify the employer of the situation and call the public health unit to determine next steps.

On-Site Health Screening Protocol

- The Health Screening should be completed at entry into the workplace, workers and essential visitors should undergo health screening following the provincial guideline for COVID-19 Health Screening.
- If the measured temperature is 37.8° Celsius/100° Fahrenheit or higher, or the individual reports symptoms of illness consistent with COVID-19 on the screening form, the individual should be asked to return home, self-isolate and contact their local public health unit for next steps.
- If this is a worker, the supervisor or other designate must be notified and the internal sick time policy consulted.



Visitors and Contractors

- As a way to further protect both workers and visitors, employers may no longer allow normal in-person visits.
- When necessary, meetings may take place virtually or held at an alternate location.
- When business-critical, if an essential visitor must enter the workplace, such as to allow equipment or facilities to remain operational, they should be in accordance with the protocols developed by the employer.
- In addition to current visitor policies that may be in place, ensure the visitor or contractor host is aware of their responsibilities (see below).

Host Directions

- Visitors onsite or contract work should not occur if there has been any “yes” response to the Self-Screening Checklist. If “yes” is checked for any response, the host should advise the visitor to leave the premises and notify the employer, the human resource department, or other contact person or department assigned by the employer.
- Once approved to be on-site, ensure visitors/contractors:
 - Take a direct route to meeting or work areas and do not unnecessarily interact with workers
 - Wear appropriate personal protective equipment as required by the host
 - Practice physical distancing at all times and instruct visitors of workplace expectations (e.g. no handshakes or embraces, keeping 2 metres (6 feet) distance when interacting, etc.)
 - Practice expected hygiene regarding washing hands, covering coughs/sneezes and referencing the employer or industry guidance
 - Use dedicated meeting rooms with good airflow where possible with common surfaces which are cleaned and sanitized between meetings
 - Maintain a visitor log or equivalent means, containing information such as: date and approximate length and frequency of interaction, full name(s), contact telephone number(s), address(es) (for workers), and/or the name of the visitor’s business



4.0 ISOLATION PROTOCOL

The intent of this protocol is to provide guidance for when a worker becomes sick at the workplace. It includes identifying the individuals who could participate in the process, response procedures and considerations for an isolation room/area.

Isolation Coordinator

An important part of the isolation protocol is to consider having a point of contact or contacts, isolation coordinator(s), who can help move through the response procedure and other important parts of the isolation protocol.

Isolation coordinator(s) are selected by the employer, based on the worker's knowledge, training and experience. An isolation coordinator could be a registered nurse, first aid trained worker, health and safety professional, human resources professional or supervisor.

Isolation Protocol for Persons Who Become Ill at Work

If a person feels ill or if someone observes that another person is exhibiting symptoms of COVID-19 at work, contact the isolation coordinator or other designate by telephone. The isolation coordinator or designate is responsible to direct any suspected infected person to a designated isolation room immediately by the most direct route, in order to prevent further exposure in the workplace.

Communications at a distance or through telephone are preferable to minimize the risk of exposure to other workers, including the isolation coordinator.

Response Procedure

- 1 Make a set of face coverings (or a medical-grade mask, if available) inside the isolation room for the suspected infected person.
- 2 Once the suspected infected person arrives in the isolation room, and wash their hands immediately instruct the person to put on a face covering (or a medical-grade mask, if available) and wash their hands.
- 3 The isolation coordinator can complete Ontario's [COVID-19 self-assessment tool](#) with the suspected infected person at a distance (2 metres apart), or via telephone. Local public health unit should be contacted regarding next steps.
- 4 Where communication at a distance is not possible, the isolation coordinator and any others attending to the suspected infected person should employ additional measures available through the hierarchy of controls.
- 5 A positive COVID-19 case in the workplace is to be reported to the MLTSD within 4 days. Any occupationally acquired illness is to be reported to WSIB within 3 days.



- 5 The isolation coordinator or other designate with the employer, should:
 - a. Contact the local public health unit and follow their advice.
 - i. Identify persons who may have been in close contact with the suspected infected person via a visitor log (or equivalent). Do maintain the confidentiality of the suspected/ infected person.
 - ii. If warranted under the local public health unit's advice, advise workers that may have been in close contact with the suspected infected person to stay home and self-monitor for 14 days. Those who exhibit symptoms should immediately self-isolate (quarantine) and contact their local public health unit, healthcare provider, and the employer. Refer to [Self-Isolation](#) and [Returning to the Workplace](#) for more information.
 - b. Instruct the supervisor to cordon off areas where the suspected infected person has come into contact.
- 6 Initiate the Deep-cleaning Decontamination Protocol in areas where the suspected infected person have come in contact in the workplace (i.e., the isolation room, workstation, common areas/surfaces.)
- 7 Report to the Workplace Safety and Insurance Board (WSIB) within three (3) days. Written notice must also be provided to the Ministry of Labour, Training and Skills Development, the workplace's joint health and safety committee or a health and safety representative, and the worker's trade union (if applicable) within four (4) days.

Isolation Room

Where possible, the isolation room should be an exterior room (building or tent structure), or a negative pressure room. If unavailable, an enclosed area with good airflow, and away from the general population can be used. If weather permits, consider isolating the person outside. The room may be equipped with a foot-activated close-lid garbage bin that is lined with plastic garbage bags. The garbage bin should also be labelled with appropriate warning signs. The room should also be equipped with education posters on personal hygiene (i.e. hand washing, donning and doffing face masks), and handwashing amenities (or hand sanitizers).

Those workers who **must** attend and work in close contact (i.e. within 1 metre for more than 15 minutes*) with the suspected infected person can use personal protective equipment. It is critical to avoid touching the face and to wash hands or use alcohol-based hand rub before donning personal protective equipment and doffing personal protective equipment. For any worker instructed to use personal protective equipment, adequate training must be provided. Refer to [Personal Protective Equipment & Face Coverings section](#) for more information.

*Refer to the local public health unit for further guidance.



5.0 SELF-ISOLATION AND RETURNING TO THE WORKPLACE PROTOCOL

The intent of the protocol is to provide guidance on self-isolation and self-monitoring requirements related to the *Quarantine Act* and Public Health Agency of Canada (PHAC) directives related to COVID-19.

Guidance for Self-Isolation and Self-Monitoring

The *Quarantine Act* requires workers to self-isolate at home and remain off company property for 14 days if they have:

- Returned from travel outside of Canada (mandatory quarantine)
- Had close contact with someone who has or is suspected to have COVID-19
- Been told by local public health unit that they may have been exposed and need to self-isolate

When workers exhibit symptoms, even if they are mild, they are to stay home and self-monitor. Follow local public health unit guidelines and resources on COVID-19, self-isolation, and self-monitoring.

If a worker contracts COVID-19 outside of the workplace or is directed by the local public health unit to self-isolate, the worker should inform their employer as soon as possible.

The employer or designate should contact the local public health unit for direction. Worker personal data and confidentiality must be protected, unless disclosure is required by law. Self-isolation requests of any healthy worker, who have come in contact with the infected worker at the workplace, will be determined by the local public health unit.

Returning to the Workplace After Self-Isolation

The employer or designate will maintain regular communication with workers under self-isolation. Affected workers, when medically cleared by local public health units, will contact the employer prior to returning to the workplace.

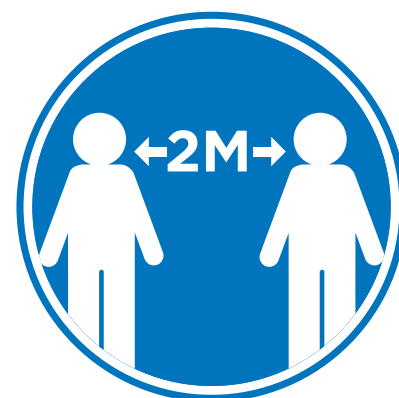


6.0 PHYSICAL DISTANCING PROTOCOL

Physical distancing is a simple yet effective mechanism to prevent potential infection which relies on distance to avoid person to person infection.

In practice, this means:

- Keeping a 2 metre (6 feet) distance between workers and between workers and the public
- Eliminating contact with others, such as handshakes or embracing coworkers, visitors or friends
- Avoiding hand contact with surfaces touched by others as much as reasonably possible
- Maintaining gathering and capacity limits intended to support managing physical distance



Follow provincial directives on gatherings of people for meetings and ensure that physical distancing is maintained. The practice of physical distancing should be maintained in all areas such as production lines, break and/or lunch rooms/areas, common areas, entrance and exit areas, offices, etc.

Consider the following general measures to help maintain physical distancing:

- Set up work areas/workstations that keeps a 2 metre distance between workers
- Consider floor markings to show distance to be kept apart, flow of people, or limiting numbers of people admitted in a workspace
- Consider where start-up meetings will take place, if needed, and how physical distancing will be maintained (i.e. specific area in the workplace, limit the number of workers at each meeting, floor markings for meetings, etc.)
- Avoid non-essential gatherings and meetings
- Consider having office workers continue to work from home or limit the amount of office workers within a facility and encourage teleconferencing for meetings
- Ensure that measures are communicated to workers and enforced
- Consider signage showing the desired position of the workers at workstations/work areas
- Consider job rotation
- Consider having fewer workers doing the same task in the same space
- Consider regular times to check in with public health updates and retrain/revise practices as needed

For more information on Floor Markings and Signage, see [Appendix F - Markings and Signage Checklist](#).



Where a minimum distance cannot be maintained, due to workplace design, use the hierarchy of controls (i.e. engineering controls, administrative controls, etc.) to mitigate exposure. This can include, but is not limited to:

- Installing physical barriers between workers such as a “plexi-glass panel”. If needed, an opening can be created that opens and closes to allow for controlled interactions (e.g. screening area, passing product/paperwork through opening, etc.)
- Improving circulation/fresh air intake as appropriate or possible
- Redesigning or reorganizing a workspace to allow for appropriate physical distancing
- If the above recommendations are still not enough for your workplace, consider personal protective equipment (only as effective as intended if worn and used properly). Workers need training that includes the donning, doffing, fit, use, care, maintenance, cleaning and limitations of personal protective equipment.

Physical Distancing During Shift Changes

- Shift changes should be managed thoughtfully to reduce infection risk and leverage the opportunity to ensure optimal disinfection of the workplace. Start times should be staggered with enough time to allow workers to come and go with minimum interaction between shifts.

Consider the following for maintaining physical distancing during shift changes:

- Designate specific entrances and exits for workers to use. Identify these locations using signage and communicate designated entrances and exits to all workers, visitors and contractors
- Implement a staggered start time for each shift and enforce physical distancing while workers go through the screening process. Each workplace is different so the amount of staggered start times needed and locations of entrances and exits will need to be assessed and set by the employer
- Create floor markings to show proper distancing wherever there may be a line or waiting may be taking place
- Ensure workers are aware of the screening process as well as designated arrival times and locations
- End of shift times should respect the same principles as the start of shift times

Helpful Tips to Communicate to Workers

- Avoid gathering when entering and exiting the facility.
- Remain in your car until your scheduled start time.
- Ensure physical distancing at all times while at work, waiting in line, or entering the site.
- When you talk to someone in line, make sure you do not point your head directly at them.
- Do not touch your face before you have had a chance to wash your hands.



Site-Specific Items to Consider

- How are health screenings captured; are completed questionnaires processed and addressed on a regular basis as they are received?
- Does security need to be stationed near entry doors at start and stop times?
- How can lines be accommodated during inclement weather?
- Can you implement contactless time clocks?
- Where appropriate and where industry guidelines permit, prop doors, install toe kicks, or automatic door opening devices to support non-contact entry.
- Are workers trained to lead with their elbows when moving through turn-styles?
- Are time clocks disinfected each time it is touched by a worker? For example: station a worker to observe the time clock at a safe 2 metre distance to disinfect the clock if it is inadvertently touched to avoid holding up the line.

Physical Distancing During Breaks

Management of worker breaks to provide physical spacing and proper hygiene is necessary. All break start and end times should be staggered and the areas for breaks should allow for physical distancing (i.e. minimize the number of workers in a lunch area).

Consider the following for maintaining physical distancing during breaks:

- Count the optimal number of allowable seats in the break room and limit and/or space chairs appropriately to allow for physical distancing.
- Place markings on tables and/or chairs to ensure proper physical distancing in each seat.
- Post the maximum amount of workers allowed in the break room for breaks.
- Consider allowing workers to sit only on one side of a table.
- Remind workers not to arrive to breaks early.
- Stagger break times with 10 minutes between each staggered break to have enough time to decontaminate surfaces (i.e. tables, seats, refrigerator, vending machines, etc.)
- Where appropriate, limit or discontinue the use of refrigerators and microwaves. Where necessary or required, discontinue use to prevent cross-contamination.
- Determine if break room monitors and disinfection workers are warranted to enforce physical distancing and cleaning protocols.
- Provide adequate supplies for workers to self-clean (i.e. wiping down tables, chairs, vending machines etc. before and after touching).
- For sites with full-service cafeterias, do not allow self-service.
- Place a permanent mark on the floors/concrete to ensure proper distance wherever there may be a line.



Physical Distancing for Washroom Breaks

Increase cleaning intervals to ensure a clean environment at all times and make sure physical distancing is maintained.

Consider the following for maintaining physical distancing:

- Establish maximum capacity for the washrooms that allows for physical distancing and post the maximum capacity.
- If the washrooms have more than one entrance and exit, consider denoting a “one-way” flow through the washroom.
- Consider installing contactless fixtures on sinks and toilets to minimize touching surfaces.
- Consider propping open washroom doors, if possible, or installing automatic doors or building privacy walls and removing doors to limit touching of door handles.
- Post signs showing how to properly wash hands with soap and water for a minimum of 20 seconds and to wash hands before leaving the washroom.
- Provide enough supplies in every washroom and consider instituting a schedule for checking on supplies (i.e. check soap dispensers, paper towel levels, etc.).

Physical Distancing for Locker Rooms

For workplaces that have locker rooms, consider the following to maintain physical distancing:

- Consider access to locker rooms that follow the staggered shift start and end times.
- Consider installing shelving for lunch bags/other personal hygiene items near the break room/area to limit the need to access lockers during break times.
- Establish maximum capacity for the locker rooms that allow for physical distancing and post the maximum capacity signage.
- Determine if locker room monitors and disinfection workers are warranted to enforce physical distancing and cleaning protocols.
- If the locker room has more than one entrance and exit, consider denoting a “one-way” flow through the room.
- Consider re-assigning lockers to ensure physical distancing.
- Provide supplies for workers to self-clean (i.e. wiping down the outside and inside of lockers before and after use).



7.0 PATHOGEN DECONTAMINATION MEASURES

It is important to understand that each workplace is unique and therefore site-specific circumstances must be taken into consideration when implementing decontamination (cleaning) measures. This includes working with and utilizing health and safety professionals, human resource professionals, managers, owners, supervisors, etc. A general checklist <https://www.wspss.ca/WSPS/media/Site/Resources/Downloads/pathogen-decontamination-checklist.pdf?ext=.pdf> has been prepared which can also be used to guide through this section.

General Guidelines

Prior to cleaning activities, ensure that the screening protocols have been followed for all cleaning personnel. Refer to [Self and On-site Screening Protocols](#).

Ensure to choose a Health Canada Drug Identification Number (DIN) approved disinfectant. It is important that the safety precautions and potential hazards for the disinfectant have been reviewed and shared with the workers.

Workers should be trained on the use and application of disinfectant products, hazards and precautions, use of any required personal protective equipment, personal hygiene techniques and personal decontamination/disinfection procedures. Refer to the [Personal Protective Equipment & Face Coverings section](#) for more details.

In addition, prior to using the disinfectant the following should be understood: the correct dilution rates, if applicable, as per manufacturers' instructions; the correct concentration needed to ensure the solution is effective (i.e. not too weak or too strong); and, the specific chemical ingredients and refraining from mixing chemicals as it may be dangerous if they interact (i.e. release vapours or heat).

While workers are cleaning it is important that workers are maintaining the appropriate physical distancing see [Physical Distancing Protocol](#).

Cleaning of all areas in the workplace should occur with special attention to high-touch surfaces. Examples can include:

- tools
- workstations and equipment
- barriers
- restrooms
- lunch room/lunch area
- lockers
- common high-touch surfaces (e.g. tables, doorknobs, light switches, countertops, handles, desks, touchscreens, equipment, etc.)
- computer screens and keyboards

An example [Sample Shift Specific Decontamination Checklist](#) can be found in the Appendices

Strict controls should be in place during the times the workplace is closed for cleaning. This may include defining who can enter and exit the building, such as sanitization vendors, security, etc.



Preventative Decontamination Measures

This section provides general information for performing cleaning at workplaces that are preventative (i.e. no suspected or confirmed cases of a pathogen). The following should be taken into account during planning stages:

- Cleaning personnel are using appropriate personal protective equipment (i.e. appropriate disposable gloves, eye protection, etc.) for the chosen disinfectant solution and work activities.
- Cleaning personnel are washing their hands with soap and water for a minimum of 20 seconds before and after cleaning or using an appropriate hand sanitizer. This would include washing their hands before donning gloves and after doffing gloves.
- Implement a decontamination schedule at the workplace and communicate the schedule with cleaning personnel. Frequency of cleaning can depend upon occupant usage patterns, population of the facility, and surfaces that are frequently touched by multiple people. An example of the decontamination schedule is attached in the [Appendices](#) to help reduce the risk of spreading infection.
- Consider sharing the decontamination schedule with the workers at the workplace.
- Leave the disinfectant on surfaces for the appropriate length of time, as indicated by the DIN-approved product instructions.
- Choose appropriate cleaner as recommended by industry guidelines. Use food grade disinfectant as appropriate and where sufficient or necessary.
- For sensitive equipment (e.g. tablets, touch screens, etc.), apply the disinfectant to cleaning cloths rather than direct application of disinfectant on equipment for cleaning.
- Clean by wiping in a uniform application to ensure full coverage on surfaces (i.e. wipe horizontal and then vertical).
- Use vacuums equipped with High-Efficiency Particulate Air (HEPA) filters (verified via aerosol challenge test) wherever possible.
- Eliminate dry sweeping/mopping/wiping methods that may release particles into the air.
- Apply an appropriate disinfectant on soft surfaces (e.g. carpets, fabrics, etc.) and leave to dry before using (e.g. chairs).
- Place all waste materials associated with decontamination in sealed bags and wipe the outside of the sealed bags with disinfectant.
- Eliminate the practice of compacting waste materials associated with decontamination.
- When possible, store decontamination waste bags outside of the building and place them directly into the waste bin.

Deep-Cleaning Decontamination Protocol

- The Preventative Decontamination Measures may be followed regularly whereas the Deep-Cleaning Decontamination Protocol is triggered when a worker is suspected or infected with a pathogen (e.g. COVID-19) who occupied an area in a facility.
- It is important to note that if the area has been closed for more than seven days since the person who is sick visited or used the facility, the deep-cleaning decontamination protocol is not necessary. Continue with preventative cleaning and disinfection.²

² CDC Reference Cleaning and Disinfecting Your Facility Everyday Steps, Steps When Someone is Sick, and Considerations for Employers, CDC, 2020



Considerations for Deep-Cleaning:

- Isolate the contaminated areas from the rest of the building and other workers.
- As appropriate and where possible, open outside doors and windows to increase air circulation in the contaminated area.
- Consider waiting 24 hours before decontamination or as long as feasibly possible, as well as industry specific guidelines where applicable.
- Complete a risk assessment prior to disinfection (i.e. determine the pathogen of concern, number of confirmed or suspected cases, length of time area has been unoccupied, size of area, types of surfaces that may need disinfecting, etc.).
- Confirm the personal protective equipment required by disinfection workers (i.e. disposable virus-impervious full-body coveralls with hood and shoe covers, protective gloves appropriate to the cleaning products used, respirators equipped with P100 filters and, if needed, combination cartridge for the cleaning solution, eye protection, etc.).
- Retain the services of an approved deep-cleaning (e.g. abatement) contractor or trained cleaning personnel on appropriate decontamination procedures.
- Retain the services of a knowledgeable consultant who can oversee the deep-cleaning activities.

When retaining the services of a contractor and/or consultant, at a minimum the contractor should have:

- trained personnel to clean, disinfect and dispose of contaminated materials.
- proper equipment and personal protective equipment to perform the task.
- use of a DIN-approved disinfectant.
- proper disposal methods for all disposable personal protective equipment and contaminated materials.

The development of a deep-cleaning strategy should begin with the completion of a risk assessment to determine a specific plan and strategy to clean the contaminated areas, including any machinery/equipment, common areas, offices and any typical areas where the worker would have made contact. The employer should ensure that during the deep-cleaning process only authorized people can access the areas during the cleaning operation. At the conclusion of the abatement, it should be communicated to all workers that the work areas have been decontaminated.



8.0 TRAINING AND COMMUNICATION

In light of all the changes in workplaces as a result of the pandemic it is important to prepare the workforce through training and communication. The training should be conducted before workers return to the workplace and the information provided reinforced through signage and informational posters. The following sections provide general information on the types of training to consider prior to reopening.

Pandemic Preparedness Training

The table below highlights some of the sample trainings to consider prior to workplace reopening or continuing to operate. It is important that worker training and confirmation of understandings are properly tracked and recorded.

TOPIC	AUDIENCE	CONTENT INCLUDED
Overview of the employer's pandemic protocols and resources	All Workers	High level Overview of: <ul style="list-style-type: none">▪ Company's COVID-19 Response▪ Health Screening; including signs and symptoms of COVID-19▪ Physical Distancing▪ Isolation Protocol▪ Self-Isolation & Returning to the Workplace▪ Personal Hygiene▪ Pathogen Decontamination Measures▪ Training and Communications Protocols may be communicated through virtual training (1 week prior), Training Management Systems or any other remote means. Employers may use <i>Appendices and Links & Additional Resources</i> documents to supplement communication
Health Screening Protocol	All Workers (including external essential visitors)	<ul style="list-style-type: none">▪ Rationale for the need to complete Health Screening▪ Criteria for health screening and what they mean and/or how they are captured▪ Expectations of health screening (when,how, who does, where)▪ Exceptions (who does not require screening, such as members of the general public)
In-house Cleaning Crew Team Training	Varies (internal cleaning crew or external vendor)	In-depth review of the roles, responsibilities and safety requirements for Disinfection Measures and Hierarchy of Controls; Health Screening, Physical Distancing and Isolation protocols, including company tools and resources. <i>Supplemented by in-person task-specific training in Orientation Training protocol.</i>
Isolation Coordinator and Health Screening Leads	On-site health screeners and Isolation Coordinator(s)	In-depth review of the role, responsibilities and safety requirements for Hierarchy of Control - Risk Assessment Protocols, Health Screening, Physical Distancing and Isolation Protocols, including company tools and resources. <i>Supplemented by in-person task-specific training in First Day Orientation Training protocol.</i>



Human Resource/ Attendance Policy

All Workers

In-depth review of the roles and responsibilities on protocols related to worker attendance, Health Screening, Isolation, and Self-Isolation & Returning to the Workplace, including tools and resources.

Orientation Training

Most trainings are ideally provided as per [Pandemic Preparedness Training](#) protocol. Where training is not practical, or where you have continued to operate, ensure training content in the Pandemic Preparedness Business Training

Minimum Training Requirement (for all workers):

- Overview of the [employer's pandemic protocol](#)
- Instruction on safe use of any new equipment
- Instruction on new processes, chemicals or products

Considerations for Training

- Use virtual training or other remote means where possible
- In-person meeting/training area must adhere to the company's [Hierarchy of Controls](#) and [Physical Distancing protocols](#)

In-person task-specific training (for health screeners, isolation coordinator, in-house cleaning crew):

- Emphasis on safety requirements for the protection of workers
- Includes hands-on practice with tools, materials (including legal requirement regarding chemical hazards), equipment and personal protective equipment
- Training can be conducted by the relevant department supervisor and/or health and safety professional

On-going Communication

Communication is encouraged to be provided to all workers prior to returning to the workplace and once onsite work has resumed. Communication can also be extended to key vendors, suppliers and business partners to ensure they are aware of the workplace expectations and protocols that may affect the supply chain or site entry. Employers should encourage workers to reach out to their supervisors with individual concerns to ensure they can be managed appropriately. Updates to protocols and government directives should be timely and clear for all workers.

Signage

Consider installing signage throughout the workplace to reiterate controls and safe work practices. This may include, but are not limited to, physical distancing, handwashing, screening checkpoints, cleaning work surfaces often, personal hygiene, health screening etc. Do ensure industry specific signage is posted as applicable. Refer to the [Resources](#) section and at the end of this document for samples and additional guidance.



RESOURCES

Legislation:

Occupational Health and Safety Act, R.S.O. 1990, c. O.1

Control of Exposure to Biological or Chemical Agents, R.R.O. 1990, Reg. 833

Industrial Establishments, R.R.O. 1990, Reg. 851 Workplace Hazardous Materials Information System (WHMIS), R.R.O. 1990, Reg. 860

Standards:

Canadian Standards Association. (2018). CSA Z94.4 - 18. *Selection, use and care of respirators*. Toronto, Canada: CSA Group

Workplace Safety & Prevention Services (WSPS)

WSPS offers critical information, resources, and updates to help employers ensure the safety of their workers. Resources available found both on the WSPS website and the COVID-19 resource hub:

- Pandemic checklists
- Job awareness health and safety guidance
- Workplace safety posters
- Tools and templates
- Articles and blogs

Link: [WSPS COVID-19 Site](#)

Link: [WSPS Website \(COVID Resources\)](#)

Ministry of Labour, Training & Skills Development

Sector-specific guidelines and posters to help protect workers, customers and the general public from coronavirus (COVID-19) in Ontario. Resources will include:

- Sector and industry-specific guidance supports
- Posters for and employers and employees
- Tip sheets and tools
- Resources from health and safety associations

Link: <https://www.ontario.ca/page/resources-prevent-covid-19-workplace>

Government of Canada

General information to keep Canadians safe and national updates on COVID-19. Resources are available in multiple formats and languages.

- Awareness resources
- Guidance documents
- Information for health professionals
- Infographics and posters

Link: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/awareness-resources.html# covid-awareness-table>



Government of Ontario

General information to keep Ontarians in-the-know regarding COVID-19 updates, testing info and resources to keep you and every Ontarian safe. Resources include:

- Latest Provincial news and updates
- Support for workers
- Support for businesses
- COVID-19 self-assessments
- Tips for stopping the spread
- Reopening businesses, services and public spaces
- Mandatory COVID-19 Health Screening for Workplaces and Organizations
- O. Reg. 364/20: Rules for Areas in Stage 3
- Link: <https://covid-19.ontario.ca/>

Public Health Ontario

The Public Health Ontario has developed the resources to support Ontarians with the COVID-19. Resources include:

- COVID-19 Information & Resource Page
- Public Health Unit Locations
- How to Self-Isolate
- How to Self-Monitor
- Cleaning and Disinfection for Public Settings
- Additional fact sheets

Link: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/public-resources>

Canadian Centre for Occupational Health & Safety

Browse helpful guidance, advice and tools to help you plan, prepare, prevent and protect against infectious disease outbreaks. Resources include:

- Guidance documents
- Infographics
- Business continuity plan
- Emergency Response Planning Guide
- Pandemic Tip Sheets by industry or sector
- Free pandemic-related resources

Link: <https://www.ccohs.ca/>



REFERENCE LIST

1. Mandatory COVID-19 Health Screening for Workplaces and Organizations – O. Reg. 364/20: Rules for Areas in Stage 3.
2. American Industrial Hygiene Association [AIHA]. (2020). Workplace Cleaning for COVID-19: Guidance Document. Retrieved from: https://aiha-assets.sfo2.digitaloceanspaces.com/AIHA/resources/Guidance-Documents/Workplace-Cleaning-for-COVID-19-Guidance-Documents_FINAL.pdf
3. Centers for Disease Control and Prevention [CDC]. (April 14, 2020). Disinfecting Your Facility Everyday Steps, Steps When Someone is Sick, and Considerations for Employers. Retrieved from: https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fprepare%2Fdisinfecting-building-facility.html
4. EACO. (2020). Emerging and Existing Pathogen Cleaning - Best Practices for Environmental Professional Services. Retrieved from: [http://www.eacontario.com/pdf/2020/EACO%20-%20Emerging%20and%20Existing%20Pathogen%20Cleaning%20-%20Best%20Practices%20for%20Environmental%20Professional%20Services%20\(version%20%202020\).pdf](http://www.eacontario.com/pdf/2020/EACO%20-%20Emerging%20and%20Existing%20Pathogen%20Cleaning%20-%20Best%20Practices%20for%20Environmental%20Professional%20Services%20(version%20%202020).pdf)
5. Environmental Consulting Occupational Health [ECOH]. (2020). Generic Disinfection Procedures for Coronavirus Contamination. Retrieved from: <https://secureservercdn.net/198.71.233.179/zg5.943.myftpupload.com/wp-content/uploads/2020/03/ECOH-COVID19-Disinfection-Procedures-1.1-2020.03.27.pdf?time=1585363615>
6. Health Canada. (2020). Hard-surface Disinfectants and Hand Sanitizers (COVID-19): List of disinfectants with evidence for use against COVID-19. Retrieved from: <https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html>
7. Occupational Safety and Health Administration [OSHA-USA]. (2020). Guidance on Preparing Workplaces for COVID-19 [OSHA 3990-03]. Retrieved from: <https://www.osha.gov/Publications/OSHA3990.pdf>
8. Public Health Agency of Canada. (2020). Coronavirus Disease (COVID-19): Prevention and Risks. Retrieved from: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html?topic=tilelink#wm>
9. Public Health Agency of Canada. (2020). Risk-informed Decision-making Guidelines for Workplaces and Businesses During the COVID-19 Pandemic. Retrieved from: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html>
10. Public Health Agency of Canada. (April 10, 2020). Public Health Management of Cases and Contacts Associated with Coronavirus Disease 2019 (COVID-19). Retrieved from: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html>



11. Public Health Agency of Canada. (2020). Coronavirus Disease (COVID-19): How to Quarantine (self-isolate) at Home When You May Have Been Exposed to COVID-19 and Have No Symptoms. Retrieved from: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/coronavirus-disease-covid-19-how-to-self-isolate-home-exposed-no-symptoms.html>
12. Public Health Ontario [PHO]. (May 2, 2020). Mask Use for Non-Healthcare Workers. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet/2020/05/factsheet-covid-19-masks-not-healthcare.pdf?la=en>
13. Public Health Ontario [PHO]. (April 10, 2020). How to Self-Monitor. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-self-monitor.pdf?la=en>
14. Public Health Ontario [PHO]. (2020). COVID-19 Public Resources. Retrieved from: <https://www.publichealthontario.ca/en/diseases-and-conditions/infectious-diseases/respiratory-diseases/novel-coronavirus/public-resources>
15. Public Health Ontario [PHO]. (February 14, 2020). Self-isolation: Guide for Caregivers, Household Members and Close Contacts. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-guide-isolation-caregivers.pdf?la=en>
16. Public Health Ontario [PHO]. (April 10, 2020). How to Self-Isolate. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-how-to-self-isolate.pdf?la=en>
17. Public Health Ontario [PHO]. (March 11, 2020) Cleaning and Disinfection for Public Settings. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet-covid-19-environmental-cleaning.pdf?la=en>
18. York Region, Community Health Services. (N.D.). Proper Cleaning and Disinfection Practices. Retrieved from: <https://www.york.ca/wps/wcm/connect/yorkpublic/928899a2-d56b-47af-a9a0-b6e62d8e0bb7/Proper+Cleaning+and+Disinfection+Practices.pdf?MOD=AJPERES&CVID=mVMtoGe>



Questions

WSPS continues to operate remotely during this pandemic to assist customers. Please contact your Account Manager or our Customer Care team for more information and assistance.

HEALTH & SAFETY CONSULTANT

Please check out our website to find our current hours of operations.

<https://www.wsps.ca/About-Us/Contact.aspx>

1-877-494-WSPS (9777) | dutyconsultant@wsps.ca

Customer Care 1-877-494-WSPS | customercare@wsps.ca | **WSPS.CA**

APPENDICES

- a. Shift-Specific Decontamination Checklist - Example
- b. Decontamination Schedule - Example
- c. Health Screening, Isolation and Returning to the Workplace Protocol
- d. Self-Screening Checklist - Example
- e. Masks Filtering, Face Piece, and Fabric Coverings Resource
- f. Markings and Signage Checklist





Shift-Specific Decontamination Checklist

EXAMPLE

The safety of our workers, customers and visitors remains our primary concern. As the COVID-19 outbreak continues to evolve and spread globally, we are monitoring the situation closely and will periodically update our guidance on current recommendations from the public health and other government authorities. To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our workers and visitors, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in the workplace.

Shift:**Date:**

Inspection Area:

Preventative Disinfection Measures

1. Was the DIN-approved disinfectant used as appropriate and as per manufacturers' instructions (i.e. dilution rates, applied for appropriate length of time, wiping in a uniform direction, etc.)?
2. Did the team conduct a comprehensive cleaning in all workstation common surfaces (i.e. control buttons, tools, conveyors, trays, containers, forklifts, machines)?
3. Did the team conduct a comprehensive cleaning in all offices, desk and conference rooms (i.e. cabinets, desk, tables, chair surfaces)?
4. Did the team conduct a comprehensive cleaning of high touch surfaces (i.e. doors, windows, handles, faucets, sinks, bathrooms, etc.)?
5. Did the team conduct a comprehensive cleaning in lunch areas (i.e. tables, chair surfaces, dispensers, vending machines)?

2nd Layer Audit

Audit of the above performed by a higher-level supervisor or Manager:

6. Were non-conformities raised? **YES** **NO**
7. If yes, were they actioned?
8. If no, please provide reasons:



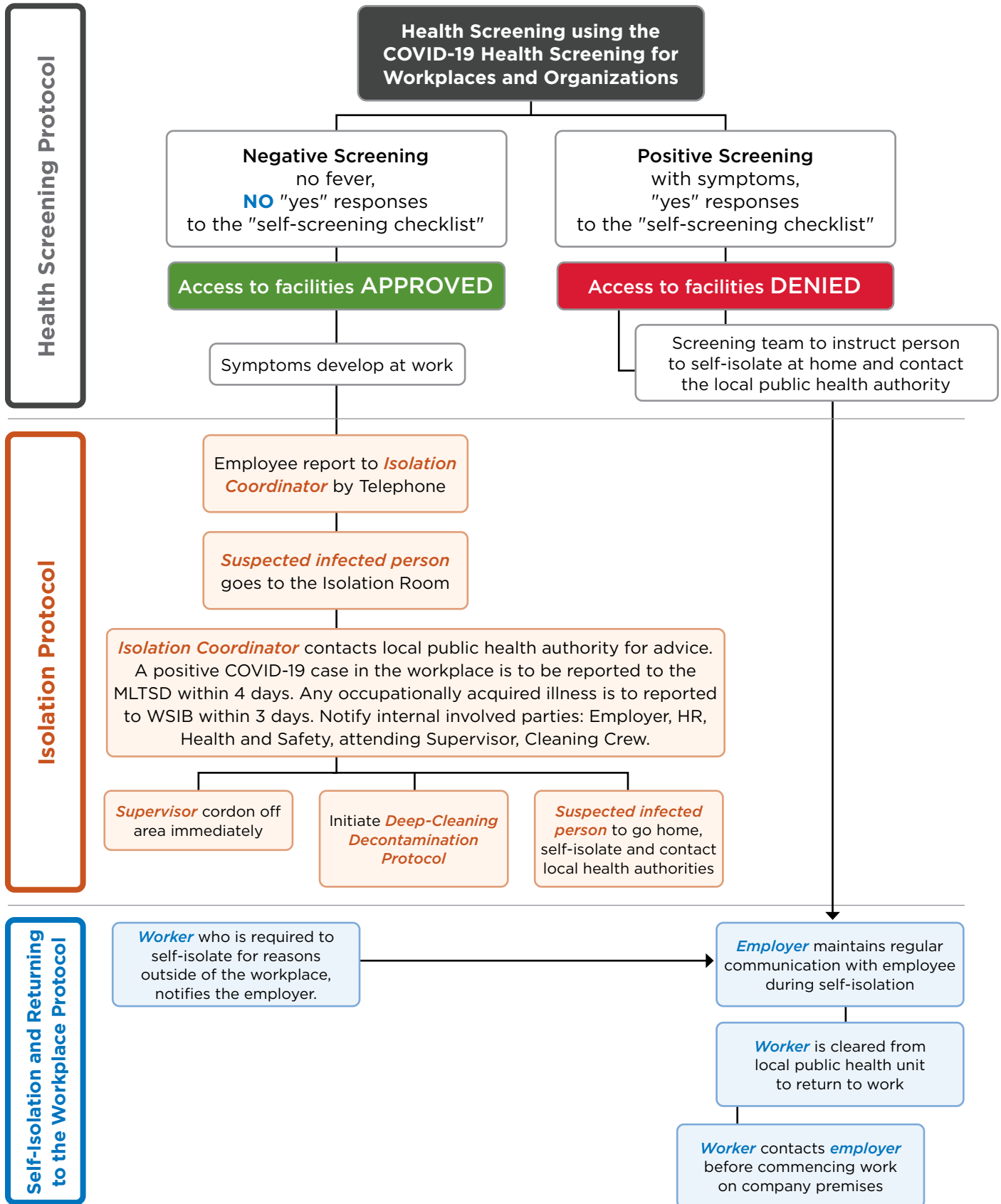
Decontamination Schedule

EXAMPLE

#	AREA/PLACE	SURFACES TO BE CLEANED	DISINFECTANT	DECONTAMINATION MEASURES	FREQUENCY
1	Workstation/ Work Areas	Control buttons, tools and other common surfaces	DIN approved disinfectant	Spray with handheld sprayer or wipe	Minimum at the end of each shift
2	Offices, desk and conference rooms	Table and chair surface		Spray with handheld sprayer or wipe	At the end of each meeting and end of day
3	Conveyor belts	Wipe areas of common worker interface		Spray with sprayer	At least twice per shift (i.e. morning and afternoon)
4	Moveable trays or containers	Handles and other commonly touched areas		Spray with sprayer	Based on use: Once per shift if contacted by 1 person only; otherwise, between users
5	General objects that are used or touched often	Doors and windows, handles, faucets, sinks and bathrooms		Spray with handheld sprayer or wipe	At least 4 times per day
6	Lunch Room/ Area	Table and chair surfaces, dispensers, vending machines, etc.		Spray with sprayer	After all breaks
7	Tableware	Forks, knives and spoons		Place in high- temperature disinfection cabinet, with temperature higher than 60°C, and time longer than half an hour	After use
8	Vending machines	Interface surfaces (pay, selection and vending surfaces)		Spray with sprayer	Generally 3 or more times per shift to include after all breaks
9	Forklifts	Wipe areas of common human interaction		Spray with sprayer	After each use
10	Multi-user safety vest	Only single user vest		Spray with sprayer	After each shift
11	Transport vehicles	Common surfaces (e.g. seat surfaces rails, belts, door and window controls)		Spray with sprayer	Before and after each use
12	All floors and walls	All general floors and walls at site		Mop	Periodically, where frequently touched; mop hard surfaces daily



Health Screening, Isolation and Returning to the Workplace Protocol





Self-Screening Checklist

EXAMPLE

The safety of our workers, customers and visitors remains our primary concern. As the COVID-19 outbreak continues to evolve and spread globally, we are monitoring the situation closely and will periodically update our guidance on current recommendations from the public health and other government authorities.

To help prevent the spread of COVID-19 and reduce the potential risk of exposure to our workers and visitors, we are conducting a simple screening questionnaire. Your participation is important to help us take precautionary measures to protect you and everyone in the workplace.

Thank you for your time and cooperation.

I am a: Worker Visitor/Contractor

Contact Information:

Name: _____ Mobile Number: _____

Email Address: _____

If the answer is yes to one or more of the following questions, access to the facility will be denied.

1. Do you have any of the following **new or worsening** symptoms or signs? *Symptoms should not be chronic or related to other known causes or conditions.*

- | | | |
|---|------------------------------|-----------------------------|
| ▪ Fever or Chills | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Difficulty Breathing | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Cough, Sore Throat | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Trouble Swallowing | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Runny Nose/ Stuff Nose or Nasal Congestion | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Decrease or Less of Smell or Taste | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Nausea, Vomiting, Diarrhea, Abdominal Pain | <input type="checkbox"/> YES | <input type="checkbox"/> NO |
| ▪ Not feeling well, extreme tiredness, sore muscles | <input type="checkbox"/> YES | <input type="checkbox"/> NO |

2. Have you travelled outside of Canada in the past 14 days?

YES NO

3. Have you had close contact with a confirmed or probable case of COVID-19?

YES NO



Masks Filtering, Face Piece, and Fabric Coverings Resource

	FILTERING FACEPIECE RESPIRATOR	SURGICAL MASK	KN95	NON-MEDICAL MASK	NON-MEDICAL MASK	FACE SHIELDS
	PERSONAL PROTECTIVE EQUIPMENT			SOURCE CONTROL		
Common Name(s)	N95 respirator, Respiratory Protection, FFR	Mask (Medical mask, Procedure mask)	Respirator	Disposable Mask, daily protective mask	Fabric Face Covering or cloth mask, Source Control	Face Shields, transparent visor
Who is this designed to protect?	Wearer, from exposure to aerosols	Wearer, from direct blood sprayed from a patient	Wearer, from exposure to aerosols	Others, from saliva droplets generated by the wearer, to a limited degree for wearer	Others, from saliva droplets generated by the wearer, to a limited degree for wearer	Others, from saliva droplets generated by the wearer, to a limited degree for wearer
Who certifies or tests the device?	United States: National Institute for Occupational Safety and Health (NIOSH) 42CFR84	United States: American Society for Testing and Materials International (ASTMI formerly ASTM) ASTM F2100	China: Standardization Administration of the People's Republic of China GB2626-2006	China: Standardization Administration of the People's Republic of China GB/T32610-2016	Not Applicable	Not Applicable
What is the classification?	N – non-oil E.g. N95, N99 and N100 R – oil resistant P – oil proof Note: 95, 99 and 100 refer to efficiency of particulate filtration <0.3 um	Level 1, 2, or 3 3.0 um >95% 0.1 um >95%	KN95 and as Non-Medical. Seek guidance from the US FDA on list of approved suppliers and verification by supplier by NIOSH.	Non-Medical Tested to PM 2.5 um environmental pollutant	No classification	No classification
Fitting	Tight Fitting and is verified through a fit test and daily user seal check. Must not have facial hair	Loose fitted, no verification. No mention of beard	Tight Fitting and is verified through a fit test and daily user seal check. Must not have facial hair	Loose fitted, no verification. No mention of beard	Lloose fitted, no verification. No mention of beard	Loose fitted, No verification. No mention of beard
Air leakage when inhaling or exhaling?	No air leakage, if fitted correctly, with no facial hair	Does leak. Not intended to prevent air leakage	If fitted correctly, for user wearing correctly, with no facial hair, should be no air leakage	Does leak. Not intended to prevent air leakage	Does leak. Not intended to prevent air leakage	Does leak. Not intended to prevent air leakage
Washable?	No	No	No	No	Yes	Yes



	FILTERING FACEPIECE RESPIRATOR	SURGICAL MASK	KN95	NON-MEDICAL MASK	NON-MEDICAL MASK	FACE SHIELDS
	PERSONAL PROTECTIVE EQUIPMENT			SOURCE CONTROL		
Major concern	Not currently available. Very expensive, and counterfeit product in market	Limited availability. Very expensive, poor understanding on fit and use by general public	Available. Ear loop style may not provide good fit for all users. Counterfeit products on market	Available. Ear loop style may not provide good fit for all users. Counterfeit products on market	Available. Anyone can make them with any material. Not tested nor approved. Too many variables	Very expensive, poorly understood by general public - It does not replace a mask.

NOTE: Prior to using this table as a resource for controls, a workplace risk assessment must be conducted and the Hierarchy of Control must be followed. Protective Equipment of any kind is not the sole method of control.

CAUTION: There are currently a variety of protective equipment on the market. Buyers should be aware that there are counterfeit products as well as non-certified products that are currently being sold. There are also products manufactured and certified by organizations outside of North America and may be effective in providing protection. Always use reputable sources for purchasing protective equipment. Wearers with pre-existing breathing conditions should consult their physician before using respiratory protective equipment.

General Guidance:

- Face coverings** is a generic term used to describe a variety of styles and designs that resemble, but do not follow any written standard or protocol for manufacturing and are not tested or rated. The variability is introduced with the fabric being used, the density of the weave, the fibre blend, number of layers, design etc. The second factor is the fit and use by the wearer, as there is no concern for beards, facial structures or user training. People below the age of 2 or those with breathing difficulty should consider other options for protection.
- Surgical masks** and **filtering face piece respirators** are designed, manufactured and meet the certification and testing for efficiency and performance requirements from a body like ASTM or NIOSH in the United State of America.
- Always start with a risk assessment to determine the level of risk and hazard posed by the work environment. Employ the Hierarchy of Controls to ensure all other methods of controls have been considered or not feasible before resorting to the use of PPE.**
- Irrespective of the protective equipment used, there should be some level of user training or knowledge to ensure the item is worn, cleaned and stored to avoid cross contamination or a false sense of protection.
- Physical (Social) distancing and other measures must always be considered as options before proceeding with protective equipment.
- If you feel compelled to wear a fabric face covering, it's for situations when physical distancing is not possible (i.e. grocery store). The secondary benefit is that it acts as a reminder not to touch your face, and the psychological comfort of others and yourself. This will all work if self-screening and physical distancing are used diligently and consistently.
- The value of hand washing or hand sanitizing along with sneezing and coughing etiquette should not be underestimated in its effectiveness in controlling the spread of SARS-CoV-2.



Other Questions Posed:

Q. How long can one covering (is this mask or cloth face covering?) be worn for (how often should it be changed in an 8 hour shift)?

- The length of use must be based on the type of protective equipment, the contaminant in question, the availability of the equipment, and the potential risk to the wearer. No single guidance can be applied across the board for the variety of protective equipment currently available.
- Surgical masks and disposable masks are normally not intended to be used more than once. If your mask is damaged or soiled, or if breathing through the mask becomes difficult, you should remove the face mask, discard it safely, and replace it with a new one.
- Seek guidance for your industry or trade on current advice during the shortage of protective equipment during the pandemic. The CDC has provided directions for the health care sector on this matter for length of use and re-use of surgical masks. The current guidance during the pandemic is quite different due to the shortage of equipment and its availability.
- The worker must take care not to touch their facemask. If they touch or adjust their facemask they must immediately perform hand hygiene.
- Be advised that non-medical face coverings are not designed or manufactured or tested to any standard and no single guidance can be applied across the board.
- Typically filtering facepiece respirators have and continue to be used in industry for extended timeframes to protect the wearer from industrial contaminants, without noted adverse effects from extended use over a work shift.

Q. What is the risk of bacteria accumulation on the coverings and the risk related to that to the worker?

- The risk of bacteria is ever present in our environment, the current pandemic is based on the virus SARS-CoV-2.
- The risk arises if the wearer touches surfaces or their face covering, and do not wash or sanitizing their hands. Hence, the secondary benefit of face covering to act as a barrier or reminder to those who inadvertently or habitually touch their face, mouth, nose or eyes.
- The reusable non-medical fabric face coverings should be washed with soap and water and follow the manufacturer's direction and dried. Inspect for damage or wear and tear prior to re-use. Discard if damaged.

Q. What is the risk of reduced oxygen due to the face covering over an 8 hour shift?

- Hypoxia is defined as the lack of oxygen. Hypoxia is not a known or observed issue with the use of filtering face pieces or surgical masks in the literature. Hence, it could be extrapolated that fabric face coverings would not cause hypoxia. It's not a leap in faith that the user is wearing a permeable fabric face covering.
- It is commonly misunderstood that discomfort during the use of any face covering etc. leads to heat build-up and varying degree of breathing resistance and does not constitute hypoxia condition. The micro climate within the mask can become uncomfortable with moisture building up inside of the mask. Exercise caution when wearing masks in hot, humid environments, or during physically demanding work, to avoid the effects of added heat strain on the wearer.

Q. Can a KN95 mask be fit tested?

- Yes, as it is considered a tight fitting respirator. The actually pass rate may vary compared to N95 mask due to the ear loop design. Ensure you purchase your masks from the approved manufacturers list published by the FDA.



Resources

Legislation:

Control of Exposure to Biological or Chemical Agents, R.R.O. 1990, Regulation 833. Retrieved from: <https://www.ontario.ca/laws/regulation/900833?search=833+>.

OHS Standards:

Canadian Standards Association (CSA). (2018). *Selection, use, and care of respirators*. Toronto, ON. CSA Group.

Guidance Documents:

3M. (May, 2020). *Comparison of FFP2, KN95, and N95 and Other Filtering Face piece Respirator Classes*. Retrieved from: <https://multimedia.3m.com/mws/media/17915000/comparison-ffp2-kn95-n95-filtering-facepiece-respirator-classes-tb.pdf>

National Institute for Occupational Safety and Health [NIOSH]. (April, 2020). *NIOSH-Approved Particulate Filtering Facepiece Respirators*. Retrieved from: https://www.cdc.gov/niosh/npptl/topics/respirators/disp_part/default.html

Public Health Ontario [PHO]. (May, 2020). *Mask Use for Non-Healthcare Workers*. Retrieved from: <https://www.publichealthontario.ca/-/media/documents/ncov/factsheet/2020/05/factsheet-covid-19-masks-not-healthcare.pdf?la=en#:~:text=When%20wearing%20masks%2C%20it%20is,alcohol%20based%20hand%20rub%20often.&text=Masking%20for%20source%20control%20needs,strategy%20to%20reduce%20transmission%20risk.&text=Medical%20masks%20are%20to%20be%20conserved%20for%20use%20in%20healthcare%20workers.>

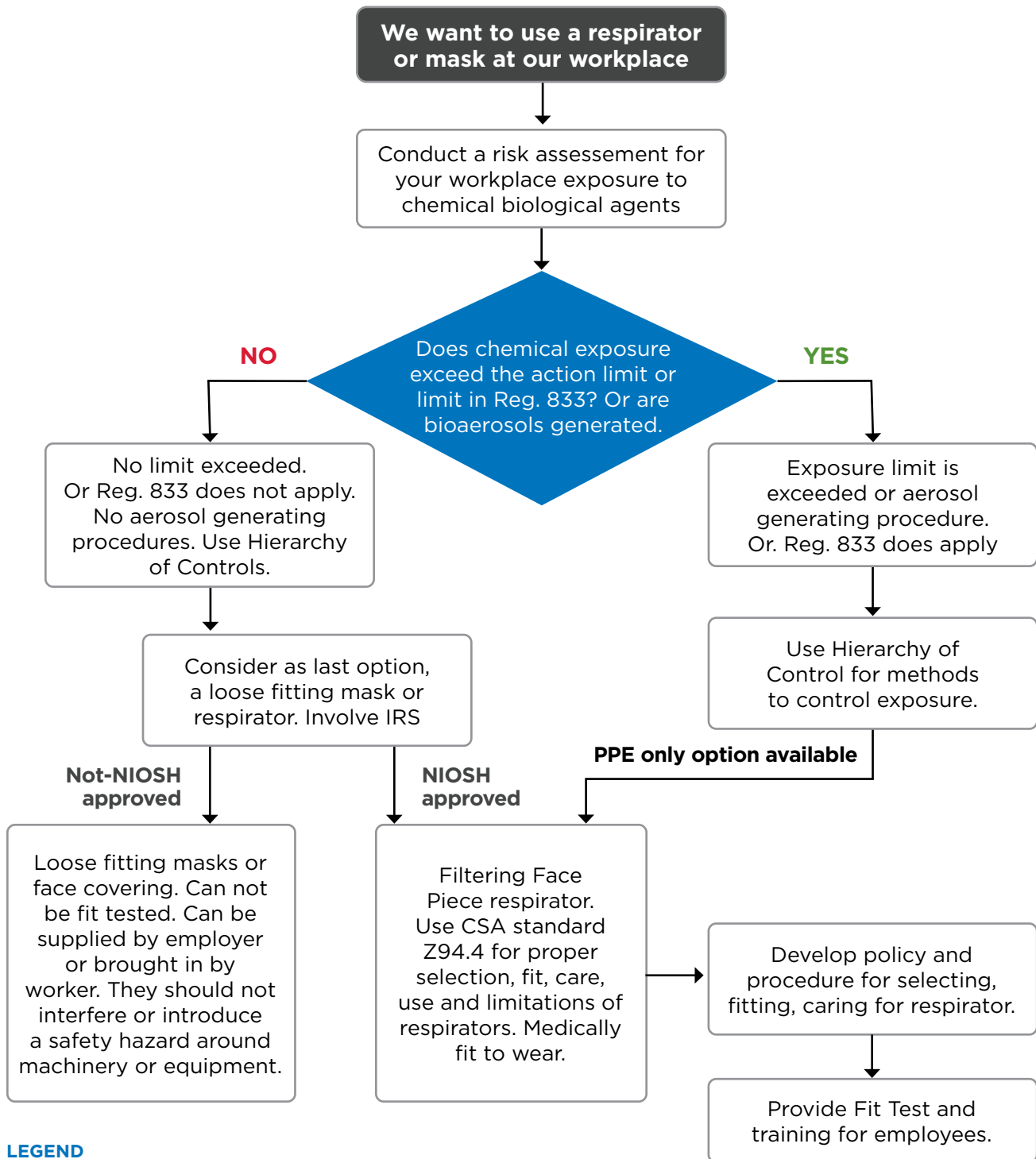
U.S. Food and Drug Administration [FDA]. (July, 2020). *Coronavirus (COVID-19) and Medical Devices: Masks and Respirators*. Retrieved from: <https://www.fda.gov/medical-devices/emergency-situations-medical-devices/coronavirus-covid-19-and-medical-devices#masksrespirators>

World Health Organization [WHO]. (January, 2020). *Advice on the use of masks in the community, during home care and in health care settings in the context of the novel coronavirus (2019-nCoV) outbreak: interim guidance*. Retrieved from: <https://apps.who.int/iris/handle/10665/330987>

World Health Organization [WHO]. (August, 2020). *Coronavirus disease (COVID-19) advice for the public: When and how to use masks*. Retrieved from: <https://www.who.int/emergencies/diseases/novel-coronavirus-2019/advice-for-public/when-and-how-to-use-masks>



General Principles and questions to ask before selecting Respiratory Protection during Pandemic. Industrial and Manufacturing sector.



LEGEND

Reg. 833 - Control of Exposure to Chemical and Biological Agents, made under the Occupational Health and Safety Act in Ontario

CSA Z94.4 - Canadian Standards Association Selection, use and care of respirators.

NIOSH - National Institute for Occupational Safety and Health in the USA

IRS - Internal Responsibility System



MARKINGS AND SIGNAGE CHECKLIST

Overview

As our economy is slowly reopening and with consumers shopping for groceries or picking up home improvement supplies, managing traffic flow and maintaining physical distancing in your business can be a challenge. Controls such as physical barriers, signage and floor markings have already been implemented and many Ontarians have experienced this new shopping experience.

Despite our best efforts, some retailers have experienced issues with Ontarians walking the wrong way or missing instructions. Poorly placed signs, unfamiliar symbols and complicated instructions may be confusing for Ontarians and result in non-compliance.

Some customers may already be familiar with your store, while others may not know where to find the item(s) they are looking for. So it is important to take these things into consideration in order to affect customer behaviour and be successful in maintaining social/physical distancing.

1. Conduct an Assessment

- Complete a risk assessment which will help with determining the best location for your signage and barrier planning. It should encompass the various cues in your business such as signage, layout, sounds, surface textures, colours and lighting levels.
- Obtain a floor plan. Decide on one or more preferred path(s) of travel to ensure customers are able to access the necessary area(s) of the store minimizing places where they need to cross paths with others. Take into consideration, easy routes if people need to revisit an area of the store they have already been.
- Consider posting this floor plan with directions of travel required as customers enter.
- Determine whether your temporary signs conflict with the messaging on any existing signs. If necessary, cover up or remove conflicting or confusing signage.
- Remove barriers to ensure clear lines of sight and ensure signage indicating directions of travel are visible.
- Determine if you able to alter the layout of your location to direct customers to follow their preferred path(s) of travel minimizing places where they need to cross paths with others.
- Ensure intersections are large enough to allow people to wait until it is clear to proceed.
- Consider providing customers with a “legend” to orient them to the different symbols you have placed throughout your business and what they mean.
- If your business uses carts, consider a policy that everyone uses a cart which creates a barrier while walking.
- Space product on shelves with some distance, as people will naturally separate into those pods. It is important to ensure customers can still see beyond the shelves so they can maintain a general awareness of where they are in the space.
- Consider relocating high demand items so they are not placed together in order to space customers out and avoid congregating.



1. Conduct an Assessment

- Businesses should be reminding customers about their social distancing responsibilities. Consider providing instructions prior to entry into the store and via your paging system. Relying on the customer's awareness and willingness to follow markers without communication may result in non-compliance.
- Whether you've posted signs, implemented floor markings or provided verbal instructions, it is important that these communication tools are applied consistently in all of your locations. When customers visit different locations and are faced with the same set of rules and instructions, customers will be more likely to stick and produce compliant behavior. Consider providing a script for your locations to follow to ensure consistent messaging.

2. Sign Design Suggestions

- Decide on the type of sign such as one that displays information or directions. Mixing the two may cause confusion.
- Does the sign or instructions provide clear information on what the customer is supposed to do? Providing clear rules and setting expectations is important for following instructions.
- Consider mounting signs at a consistent height, such that all the centre of the sign is between 1500 to 2000 mm from the ground; in combination with floor markings this will provide customers with two places to notice signs and comply with the desired action.
- Signs should have a glare-free surface, and need to be placed in well-lit areas (i.e., min 200 lux). Darker areas may mean signs may go unnoticed.
- Include appropriate pictograms wherever possible. Best practice is to use universally accepted symbols.
- Use high-contrast colours for text and background - black or dark blue on a white or yellow background, or white/yellow text on a black/dark blue background.
- Printed material is most readable in black and white. If using coloured text, restrict it to things like titles, headlines or highlighted material.
- For any instructions, keep your text large, preferably between 12 and 18 points, to ensure directional/informational signage print is legible from normal viewing distance(s). Note: Avoid complicated or decorative fonts. Choose standard fonts with easily recognizable upper and lower case characters. Arial and Verdana are good choices.
- Provide instructions in multiple languages. Using universally accepted symbols will assist those whose primary language is something other than English or French.
- Make sure instructions are clear and to the point. Lengthy text and complicated instructions will lead to non-compliance. Consider numbering instructions if you wish that they be carried out in order.



3. Floor Marking Suggestions

- Have a consistent floor marking colour system. Use high-contrast colours, such as universal colour coding. For example, red for 'do not enter' or 'stop'. Green for 'enter'. This is dependent on the colour of your existing floor. Note: Use as few colours as possible to minimize confusion.
- Floor markings such as arrows and pictograms should be large enough to be noticed and placed in areas where customers have to make decisions (e.g. enter or exit and/or expected path of travel).
- Consider 'do not enter' or 'wrong way' aisle signs at or prior to entry into the aisle as well as direction of travel markings within the aisle.
- Use symbols such as a red 'hand' or 'two feet' wherever possible in addition to clear instructions such as 'wait here'.
- Place pedestrian walkways throughout your location using tape with a minimum tape width of 50 mm to direct customers. Walkways should be approximately 812 mm in width.
- Consider taping walkways with markings staggered 6 feet apart for areas where customers wait for services such as a parts or deli counter.
- Provide various options for customers to 'cut off' unwanted areas while minimizing areas where 'head on' traffic would meet. For example, provide symbols on the floor with clear instructions such as "Wait Here" or "Stop". Appropriate pictograms should be used wherever possible.

4. Physical Barriers

- Complete a risk assessment to determine potential contact points that are within the 6 foot guidelines and provide barriers.
- Consider floor markings and signs so customers are aware of where to stand behind the polycarbonate barrier.
- Polycarbonate barriers should be designed and placed so that customers are positioned directly behind the barrier.
- The barrier should be tall enough to ensure at minimum it covers 90% of the population. From the floor this measured height is 1850mm. This is to ensure that most people heads will not be above the barrier.
- If possible keep items like credit card machines on the side of the barrier closest to the customer.
- Where possible the width of the polycarbonate barrier should cover the entire work envelope of the employee. This is to protect the employee in case the customer does not stand in the right spot and/or coughs or sneezes when moving to the designated area.



5. Accessibility Considerations

With safeguards in place to protect customers and staff, the signs and barriers may create unintentional accessibility issues. Persons with disabilities should be provided with equality of access to information and communications around COVID-19. Many recommendations listed in this document considers, respects and incorporates the interests and needs of persons with disabilities. Listed below are additional suggestions and resources. For more information on accessibility requirements, you can visit:

<https://www.ontario.ca/page/accessibility-laws>

<https://www.ontario.ca/page/accessible-workplaces>

<https://www.ontario.ca/page/accessible-ontario>

<https://www.ontario.ca/page/accessibility-ontario-information-businesses>

-
- Include detailed information for customers with hearing disabilities.
-
- Use clear language or pictures for customers with intellectual disabilities.
-
- Have large print and good colour contrast for customers with visual impairments.
-
- Include Braille for customers who are blind.
-
- Include information in an accessible format via your company website or social media.
-

References

- Canadian National Institute for the Blind (CNIB) (2020). Clear Print Guide. Retrieved from <http://www.cnib.ca/sites/default/files/2018-07/CNIB%20Clear%20Print%20Guide.pdf>
- Government of Ontario. (2016). Guidelines for Barrier-Free Design of Ontario Government Facilities. Retrieved from: <https://www.infrastructureontario.ca/Standards-and-Guidelines/>

Special thanks to:

- Dr. John L. Lewis, Associate Professor School of Planning, University of Waterloo
- Julia Lewis, CNIB Frontier Accessibility
- The Government of Ontario
- WSPS Ergonomists

For additional pandemic resources such as job aids, business resources please visit www.wsps.ca.



Every worker.
Healthy and safe.
Every day.



QMS Certificate No: 52950

Our ISO 9001:2015 Quality Management System sets us apart and signifies our commitment to quality

Workplace Safety & Prevention Services™ is the largest health and safety association in Ontario, responsible for more than 167,000 member firms across the agricultural, industrial/manufacturing and service sectors.

CONNECT WITH US



5110 Creebank Road
Mississauga, ON L4W 0A1
1 877 494 WSPS (9777)
T 905 614 1400 | F 905 614 1414
E customercare@wsp.ca
WSPS.CA

