COVID-19 and Droplet Borne Viruses Risk Identification and Exposure Control Plan Template

Purpose
The purpose of this document is to eliminate or minimize the risk of occupational exposure to employees from COVID-19 and other droplet transmitted viruses. This document can become the basis of your Exposure Control Plan (ECP). In addition to risk identification, assessment, and selection of control measures that this document provides a complete ECP for COVID-19 and includes:

- A statement of purpose
- An assessment of, and information about COVID-19 and the exposure hazard for workers
- Roles and responsibilities of the of the Employer, Supervisor and Worker
- Documentation of training

See Appendix A and B for more information about these items and sample templates.

This document is intended to be used in conjunction with the Joint BCGEU/BCPSA resource document entitled “Guide to Prevention and Control of Infectious Diseases in the Workplace”.

Review of the Exposure Control Plan and credible sources
COVID-19 is a new virus with information becoming available frequently, consequently the Employer should review the ECP as new information becomes available. Be sure to use the credible sources:

- MyHR content
  - COVID-19 and the Workplace
  - COVID-19 Supervisor FAQs
- BC Centre for Disease Control
- HealthLink BC
- WorkSafeBC
- Public Health Agency of Canada
Mode of COVID-19 Transmission

COVID-19 is transmitted by large droplets which may be generated when an infected person coughs or sneezes. Droplets travel a short distance through the air (less than 2 meters) and can be deposited on inanimate surfaces or in the eyes, nose, or mouth. Scenarios with an increased risk include a person who has:

- Close contact (within 2 metres) with a COVID-19 case experiencing respiratory symptoms (e.g., sneezing, coughing) is at risk of being exposed to potentially infective respiratory droplets.
- Direct physical contact (e.g. touching contaminated skin/hands) with a person with COVID-19 is at risk of infection, via the transfer of the virus.
- Contact with an inanimate object, such as contaminated surfaces and objects, which can serve as the vehicle for transmission of COVID-19 viruses, is at risk of infection. This includes contamination Blood and Bodily Fluids (BBF) - follow your workplace specific BBF protocols for clean up (calling 1-877-222-3112 WSI or CBRE usual the process for larger spill/messes).

A low risk of contracting COVID-19 from exposure to feces has been established. Workplaces that have identified a risk of exposure to feces will follow the controls in their blood and bodily fluids exposure control plan to reduce likelihood of contracting the disease.

Signs and Symptoms of COVID-19

Common symptoms are fever, tiredness and a dry cough. Some patients may have aches and pains, nasal congestion, runny nose, sore throat, vomiting or diarrhea. These symptoms are usually mild and begin gradually. They are similar to a cold or flu and may take up to 14 days to appear.

Risk Identification and Assessment

A “risk” is the chance of injury or occupational disease occurring. “Risk identification” is the process of analyzing the condition which could create a chance for injury or disease. A risk assessment takes into account:

- The chance of the occupational disease occurring
- Who is at risk of exposure
- The severity of the disease or injury
- Control measure to minimize the risk – safe work procedures

Risk identification and assessment begins with an understanding of how droplet borne virus are transmitted as described above. When identifying and assessing risks, some factors to consider are:

- What work methods, procedure or activities may result in exposure?
- Which workers have a higher risk of exposure because of the clients with whom they may have contact?
The WorkSafeBC *Occupational Health and Safety Regulation* (OHSR) 5.54 requires that employers eliminate or control occupational exposure to infectious disease. The *Standard Precautions* indicated on this page apply to all workers at all workplaces. With increased risk, i.e. moderate and high, additional controls may be necessary.

In addition, there is a sample chart, Table 3 on page 9, with select control measures for tasks/activities that staff perform. Each activity can be rated for risk using the sample criteria in step one. List the activities and rate the risk of exposure. A typical risk assessment for COVID-19 should consider each activity and include the following headings:

- Task
- Risk level of Task/Activity
- Name of staff affected
- Job title
- Control measures
- Date staff educated are trained.

Be sure to ask staff and the Joint Occupational Health and Safety Committee (JOHSC) for their input.

**Step 1: Identify the Risks and Routes of Exposure**

Examine the tasks that staff at your workplace performs. Certain job activities and tasks may have a higher potential exposure risk to COVID-19 than others. The following table provides examples to assist in the workplace risk assessment process. These are examples and by no means, an exhaustive list.

Consult with the workplace JOHSC and front-line workers to establish the activities in your workplace that may lead to exposure.

**Standard Precautions:**

Standard Precautions are a group of infection-prevention practices that apply to all workers. Standard Precautions for COVID-19 or any flu like illness include Handwashing, Cough & Sneeze Etiquette, staying at home when sick and **self-isolation if required or directed to do so.**
Table 1 Risk Assessment Matrix for Potential Occupational Exposure to COVID-19

This list is not exhaustive, include your own workplace scenarios using these as a guide to risk level.

<table>
<thead>
<tr>
<th>Low Risk</th>
<th>Moderate Risk</th>
<th>High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Worksite Description</strong></td>
<td><strong>Worksite Description</strong></td>
<td><strong>Worksite Description</strong></td>
</tr>
<tr>
<td>Workplace exposure unlikely</td>
<td>Workplace exposure possible</td>
<td>Increased risk of workplace exposure</td>
</tr>
<tr>
<td>Typically have no contact with potentially infectious people e.g. in a worksite with restricted or minimal public access</td>
<td>May be exposed to potentially infectious people in the workplace from time to time, i.e. meeting involving clients/public</td>
<td>Have direct close contact with infectious people or may have exposure to a known population that has an elevated risk</td>
</tr>
<tr>
<td><strong>Typical Tasks/Activities</strong></td>
<td><strong>Typical Tasks/Activities</strong></td>
<td><strong>Typical Tasks/Activities</strong></td>
</tr>
<tr>
<td>No or very limited face-to-face interaction with the public in the workplace. Occasional guests, couriers etc may visit the office.</td>
<td>Work in an office with limited admittance to the public but some co-workers do interact and work with the public on a regular basis</td>
<td>Work with the large number of the public for long durations on a daily basis as part of your regular duties</td>
</tr>
<tr>
<td>Have few face-to-face interactions with team members</td>
<td>Occasional travel to face-to-face meetings</td>
<td>Unavoidable close proximity with a client displaying symptoms.</td>
</tr>
<tr>
<td>Limited or no travel outside of the office. May visit other low risk offices on occasion.</td>
<td>Co-located with another Ministry that has workers that work directly with the public</td>
<td>Work in one of the following: social services setting, health clinic, outreach program, enforcement, social work, education, care homes</td>
</tr>
<tr>
<td></td>
<td>Interviewing several clients/public in your office each day</td>
<td>Work closely with at risk clients in their homes or at work providing direct care or assistance with some or all of activities of daily living, e.g. infants, homeless, immune suppressed, institutionalized</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rendering first aid services to symptomatic workers (note: symptomatic worker should not be in the workplace)</td>
</tr>
<tr>
<td><strong>Typical Jobs</strong></td>
<td><strong>Typical Jobs</strong></td>
<td><strong>Typical Jobs</strong></td>
</tr>
<tr>
<td>Clerical worker with limited public and client contact</td>
<td>Office based social services</td>
<td>Correctional Officer or Deputy Sheriffs who are in close physical contact to supervise, restrain, escort and search institutionalized inmates who may be ill</td>
</tr>
<tr>
<td>Front desk receptionist with physical barriers (e.g. Plexiglas) that would stop droplet transmission</td>
<td>Front desk receptionist who meets with public regularly</td>
<td>Community based social services workers who work with clients who may be ill</td>
</tr>
<tr>
<td>IT workers with limited client contact</td>
<td></td>
<td>Child protection social worker in the event of close physical contact with ill clients during home visits and during vehicle transport</td>
</tr>
<tr>
<td>Policy Analyst</td>
<td></td>
<td>Direct patient care health care staff</td>
</tr>
</tbody>
</table>
Step 2: Choose Appropriate Control Measures
Select control measures appropriate to the level of risk for the tasks/activities you identify for your workplace. All workplaces regardless of risk should ensure Standard Precautions are in place.

Engineering/Source Controls:
These control measures should be applied progressively as risk increases. Example: control measures for a high risk of exposure would include all low and moderate risk of exposure control too.

- Low risk of exposure (A closed public office with few visitors):
  - Provide dispensers of alcohol-based hand sanitizers at entrances to and exits from the workplace or soap and water if readily available.
  - Cleaning of personal workspace by the employee using regular household cleaners. Ensure handwashing or use of hand sanitizer after cleaning of workspace or use disposable gloves while cleaning.

- Moderate risk of exposure (an office with front desk and some workers interacting with public):
  - Remove reading material from waiting rooms to reduce potential contact exposure.
  - At offices where there is public access and where a designated waiting area is not available, identify an area where visitors/clients who are presenting symptoms can be appropriately distanced (ideally by two metres) from employees.
  - Ensure a distance (ideally two metres) between a visitor and an employee when meeting face to face.
  - Cleaning of common area by wiping horizontal and commonly touched surfaces with household cleaners or disinfectant if available. Use disposable gloves or ensure handwashing / use of hand sanitizer after cleaning of common surfaces.

- High risk of exposure (working with populations at elevated risk)
  - Implement alternative client service delivery methods where practicable, for example telephone, video conference and teleconference.
  - A physical barrier between the employee and the public such as a glass/acrylic glass partition.
  - Additional focused cleaning of the office if COVID-19 positive employee is identified. The call goes to WSI or CBRE from a person approved to submit a Minor Client Request (MCR). Call 1-877-222-3112.

Cleaning Guidance:
The BC CDC says that regular household cleaning products are effective against most viruses, and you can also use 1-part bleach to 9 parts water as an effective disinfectant. Be sure to read the instruction on the cleaners before use. Some cleaners, such as bleach solutions, will require the uses of gloves and should have good ventilation. Always wash hands or use hand sanitizer after cleaning.
Administrative Controls:

Standard Precautions for COVID-19 in the Workplace

Standard Precautions are a group of infection-prevention practices that applies to all workers, regardless of suspected or confirmed. Standard Precautions for COVID-19 or any flu like illness include Cough and Sneeze Etiquette and Hand washing and staying home when sick. Standard Precautions for COVID-19 or any flu like illness include Handwashing, Cough & Sneeze Etiquette, staying at home when sick and self-isolation if required or directed to do so.

Cough and Sneeze Etiquette:

Our workers are expected to follow cough/sneeze etiquette, which is a combination of measures that minimizes the transmission of diseases via droplet or airborne routes. Cough/sneeze etiquette includes the following components:

- Stay home when sick
- Educate workers in control measures, including hand washing.
- Post signs prominently to instruct Cough and Sneeze Etiquette (see linked posters below).
- Cover your mouth and nose with a sleeve or tissue when coughing or sneezing.
- Use tissues to contain secretions and dispose of them promptly in a waste container.
- Turn your head away from others when coughing or sneezing.
- Do not shake hands, use an elbow bump.
- Wash your hands often, and always after coughing, sneezing, or blowing your nose. If soap and water are not available, use an alcohol-based hand sanitizer.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.

Hand washing

Hand washing is one of the best ways to minimize the risk of infection. Proper hand washing helps prevent the transfer of infectious material from the hands to other parts of the body — particularly the eyes, nose, and mouth — or to other surfaces that are touched.

Wash your hands immediately:

- When arriving at your work area and when you leave a work area, and often throughout the day
- After handling materials that may be contaminated
- Before eating, drinking, smoking, handling contact lenses, or applying makeup
Handwashing Procedure:
Wash with soap and water for at least 20 seconds, or, if soap and water are not available, use an alcohol-based hand sanitizer.

1. Press hands palm to palm.
2. Press each palm over back of opposing hand.
3. Interlace fingers, palm to palm.
4. Interlock fingers.
5. Rotate each thumb in palm.
6. Rotate fingertips in palm.

Resources on handwashing:
- HealthLinkBC File #85: Hand Washing: Help Stop the Spread of Germs
- WorkSafeBC Video: Disease Prevention: It's in Your Hands

Posting information:
Ensure posters and information sheets are prominently displayed throughout the workplace:
- MyHR – About Coronavirus Disease (COVID-19)
- CCOHS – Prevent the Spread pdf
- CCOHS – Get the upper hand on germs pdf

Personal Protective Equipment:
- There has been no general recommendation for everyone to wear Personal Protective Equipment (PPE) such as surgical masks and N95 respirators. The BC Centre for Disease Control has recommended the use of PPE in specific situations such as healthcare professionals involved in patient care and when collecting biological samples. See the COVID-19 Supervisor FAQs, on MyHR, for more information

A Worker has COVID-19 or Flu like symptoms
Worker with COVID-19 or Flu symptoms should not be at the workplace. To know when a worker can come back to the workplace consult your MyHR COVID-19 FAQ’s.
Exposure Control Measures Based on Risk Level

The table 2 is used to determine the appropriate controls for the risk level of task defined in table 1.

### Table 2- Exposure Control Measures Based on Risk Level

<table>
<thead>
<tr>
<th>Control Measures</th>
<th>Low Risk</th>
<th>Moderate Risk</th>
<th>High Risk</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Workplace exposure</strong> unlikely</td>
<td>Workplace exposure possible May be exposed to potentially infectious people in the workplace from time to time. e.g. working with large number of general public or clients</td>
<td>Increased risk of workplace exposure May have direct close contact with infectious people or may have exposure to a known population that has an elevated risk e.g. working in a health care facility</td>
<td></td>
</tr>
<tr>
<td><strong>Standard Precautions</strong></td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td><strong>Hand sanitizer</strong></td>
<td>When washing facilities are not available</td>
<td>When washing facilities are not available</td>
<td>When washing facilities are not available</td>
</tr>
<tr>
<td><strong>Clean hard surfaces</strong></td>
<td>Cleaning of personal workspace by the employee using regular household cleaners</td>
<td>Cleaning of common area by wiping horizontal and commonly touched surfaces with household cleaner or disinfectant.</td>
<td>Clean surfaces between clients and any time after uncovered sneezing coughing with disinfectant.</td>
</tr>
<tr>
<td><strong>Pre-Screen Clients</strong></td>
<td>N/A</td>
<td>If dealing with clients who are at elevated risk of infection, then meet away from main area or alternate service delivery</td>
<td>Yes, equip clients with masks if symptomatic or alternate service delivery as and when available</td>
</tr>
<tr>
<td><strong>Meet clients away from main area where 2-meter distance can be maintained</strong></td>
<td>N/A</td>
<td>If client is visibly ill coughing and appears to have symptoms consistent with COVID-19</td>
<td>Yes or alternate service</td>
</tr>
<tr>
<td><strong>Alternate service delivery to avoid contact with clients/public where possible</strong></td>
<td>N/A</td>
<td>Possibly if dealing with clients who are at elevated risk of client contact</td>
<td>Possibly - avoid direct face to face client contact</td>
</tr>
<tr>
<td><strong>Use of disposable Gloves</strong></td>
<td>No</td>
<td>No</td>
<td>Possibly Consult with BCPSA Safety Specialist</td>
</tr>
<tr>
<td><strong>Use of disposable clothing</strong></td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
<tr>
<td><strong>Use of masks</strong></td>
<td>No</td>
<td>No</td>
<td></td>
</tr>
</tbody>
</table>

Increasing Precautionary Measures
**Step 3: Document, Train and Implement**

Document the activities (and risk) with the names and job titles of the workers who may be exposed, and the selected control measures. Consult with your staff and JOHSC to ensure you have all activities documented. Train staff in the control measures (and document the training date) and purchase any necessary supplies, and implement your control measures. See Appendix B for blank table template. An example is provided below:

**Table 3 – Example: COVID-19 Control Measures and Training Log for Front Line Service Office XYZ**

<table>
<thead>
<tr>
<th>Tasks/Activity</th>
<th>Risk Level</th>
<th>Who are Exposed/Performing the Activity?</th>
<th>Control Measure</th>
<th>Training Completed dd/mm/yr</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Office and Administrative tasks with no public contact</strong></td>
<td>Low</td>
<td>John Doe, Jane Smith, James Dean, Sean Cassidy</td>
<td>Policy Analyst, Finance Controller, HR Assistant, Director</td>
<td>Standard Precautions</td>
</tr>
<tr>
<td><strong>Front counter- working with public and clients</strong></td>
<td>Medium</td>
<td>James Brown, Patti Peppermint</td>
<td>Receptionist, Office Administrator</td>
<td>Regular scheduled office cleaning, Clean client areas hard surfaces</td>
</tr>
<tr>
<td><strong>Travelling and giving public presentations</strong></td>
<td>Medium</td>
<td>Leanne Smyth</td>
<td>Information Officer</td>
<td>Wash your hands often, Carry hand disinfectant disinfect and use before and after riding public transit and before eating</td>
</tr>
<tr>
<td><strong>Meeting clients in long term care facilities</strong></td>
<td>High</td>
<td>Janice Joplin, Keith Sun</td>
<td>Client Service Team</td>
<td>whenever possible alternate service delivery when known exposure at care home, Wash your hands often, Carry hand disinfectant and use before and after riding public transit and before eating, Abide by long term care home’s exposure plan when on site</td>
</tr>
</tbody>
</table>

Last Updated by: Name Here  
Date: dd/mm/yr
Definitions

**Exposure Control Plan:** comprehensive safe work procedures and measures that address the risk of exposure and integrate multiple measures to control and prevent exposure. Some measures include engineering controls, administrative controls, personal protective equipment, training and written work procedures.

**Infection:** the entry and development or multiplication of a pathogen in the body of a living organism and multiplies at a rate sufficient to maintain its numbers with or without disease in the host.

**Infectious disease control:** a process to eliminate or minimize the exposure and transmission of pathogens to prevent infection.

**COVID-19 (novel corona virus):** Viral infection transmitted from droplets in coughs and sneezes. Common symptoms are fever, tiredness and a dry cough. Some patients may have aches and pains, nasal congestion, runny nose, sore throat or vomiting and diarrhea. These symptoms are usually mild and begin gradually. They are similar to a cold or flu and may take up to 14 days to appear. The virus is spread from person to person through:

- Droplets that form when a person sneezes or coughs.
- Contact with objects such as handkerchiefs that have been in contact with fluids from an infected person’s nose or throat.
- Direct contact, such as shaking hands
- Surfaces and objects that have been touched or handled by an infected person

**Occupational exposure:** is the reasonably anticipated harmful contact with potentially infectious/ bio-hazardous material or blood that may result from the performance of an employee’s duties.

**Safe work procedures:** methods of controlling exposure that do not require specialized equipment. Example: Standard Precautions including Cough and Sneeze Etiquette and Hand Washing to control exposure to a droplet carried virus like COVID-19 or the flu.

**Standard Precautions:** a group of infection-prevention practices that applies to all workers, regardless of suspected or confirmed. The Standard Precautions for COVID-19 or any flu like illness include Cough and Sneeze Etiquette and Hand washing.
Appendix A - Sample Exposure Control Plan Wording

**Note**

This is a template and each working document must be customized to the Ministry’s individual needs.

Statement of Purpose

WORKPLACE OR MINISTRY is committed to providing a safe and healthy workplace for all of our staff. A combination of measures will be utilized to minimize worker exposure to COVID-19 and droplet transmitted viruses, including the most effective control technologies available. Our work procedures will protect not only our workers, but also other workers or public who enter our facilities. All employees must follow the procedures outlined in this plan to prevent or reduce exposure to COVID-19 and droplet transmitted viruses.

Responsibilities

As the Employer, Ministry XYZ is responsible for:

- Ensuring that a written exposure control plan, established by a qualified person, is available to employees, and addresses the occupational exposure risks to COVID-19 and droplet transmitted viruses in the workplace, and review the ECP’s effectiveness as new information becomes available on COVID-19 or an annual basis.

- Ensuring that engineering controls and safe work procedures suitable to the identified exposure risks are established to minimize or eliminate an employee’s potential for exposure to communicable diseases.

- Ensuring that the materials and resources, required to implement and maintain this ECP, are provided where and when they are required.

- Ensuring supervisors and employees are provided with sufficient education to facilitate a good understanding of this ECP and how to eliminate or minimize the exposure risk to communicable diseases.

- Maintaining required records and documentation.
Responsibilities (continued)

The **Supervisor** is responsible for:

- Ensuring that all employees under his/her direction who may have potential occupational exposure to COVID-19 and droplet transmitted viruses are aware of the risks of exposure and how to eliminate or reduce those risks.

- Ensuring that employees are made aware of all work activities that could result in a potential occupational exposure to COVID-19 and droplet transmitted viruses as determined by a risk assessment.

- Ensuring that employees receive specific education to recognize signs of potential COVID-19 and droplet transmitted viruses that they may encounter in their worksite. Document this education.

- Reviewing, if necessary, with Occupational Health Programs whether any biological testing is available and should be provided to employees for infectious disease.

- Ensuring that suitable written procedures are established and conveyed to employees to eliminate or reduce the risk of exposure to individuals with communicable diseases.

Directing the work in a manner that ensures the risk to employees is minimized and adequately controlled.

The **Employee** is responsible for:

- Personal Prevention Practices (e.g. coughing in to sleeve, regular hand washing, etc.)

- Participating in any required risk assessment process to determine potential occupational exposure to individuals that may have communicable diseases.

- Familiarity with the contents of this ECP and for following safe work procedures designed to eliminate or minimize the risk of exposure.

- Participating in any required education initiatives aimed at raising awareness for reducing the risk of occupational exposure.

- Learning about potential COVID-19 and droplet transmitted viruses e.g. how they are transmitted, how to prevent transmission.

- Following established work procedures as directed by the employer or supervisor.

- Reporting any unsafe conditions or acts to the supervisor.

- Knowing how and when to report occupational exposure incidents.

The **Joint Occupational Health and Safety Committee** is responsible for:

Participating, reviewing and making recommendations to the employer on the prevention of transmission of communicable diseases.
Documentation and records

The Ministry of XYZ will keep records of employee educational sessions, potential exposures, incident reports and first aid records. Testing records are confidential and will be kept by Public Health and BCPSA Occupational Health Programs.

Review

Review the ECP’s effectiveness as new information becomes available on COVID-19 or an annual basis. In consultation with the Employee Safety Representative, this ECP will be reviewed on at least an annual basis.

Approval

The Employee Safety Representative has been consulted in the development of this Exposure Control Plan and it is approved for use at this workplace.

Supervisor
Ministry of XYZ

Employee Safety Rep
Ministry of XYZ

Date
## Appendix B – Training Record Template

Use this table of as a record of training on the ECP

<table>
<thead>
<tr>
<th>Tasks/Activity</th>
<th>Risk Level</th>
<th>Who are Exposed/ Performing the Activity?</th>
<th>Control Measure</th>
<th>Training Completed dd/mm/yr</th>
</tr>
</thead>
<tbody>
<tr>
<td>Include low risk tasks (e.g. Office and Administrative tasks with no public contact)</td>
<td>Low</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Included a line for each medium risk tasks (e.g. Front counter-working with public and clients)</td>
<td>Medium</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Included a line for each medium risk tasks (e.g. Travelling and giving public presentations to large crowds)</td>
<td>Medium</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Included a line for each medium risk tasks (e.g. Meeting clients in long term care facilities)</td>
<td>High</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Standard Precautions Training For All Staff

Last Updated by: Name Here  
Date: dd/mm/yr