COVID-19 Exposure Control & Safety Plan

JULY 23, 2020
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DISCLAIMER

This document reflects our best knowledge at the time of writing and will be continually updated to incorporate new learnings as they surface.

The COVID-19 pandemic is a rapidly evolving situation; information in this document will be updated as it becomes available.

For up-to-date information on prevention and risks, please see the

- Health Canada COVID-19 webpage
- BC Centre for Disease Control (BCCDC) for COVID-19 health information in BC.
- For a real-time map of Canadian COVID-19 cases and provincial public health notices, see the COVID-19 Canada webpage.
- Office of the Provincial Health Officer – COVID-19 Orders, Notices & Guidance, and link to BC’s response including sector-specific guidelines.
OVERVIEW

Royal Roads University (RRU) is committed to providing a safe and healthy workplace for all employees. In relation to coronavirus (COVID-19) the following Exposure Control Plan (ECP) and Safety Plan will prioritize measures to protect the health and safety of RRU staff and faculty while doing their work. All employees must follow the procedures described in this plan to prevent or reduce their exposure to COVID-19.

COVID-19 comes from a large family of viruses found mostly in animals. If found in humans, diseases can range from a common cold to severe disease such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).

British Columbia Centre for Disease Control (BCCDC) has made it possible for one to assess their conditions, symptoms determine if further assessment is required. Many characteristics of COVID-19 remain unknown, and cases can range from mild to severe.

PURPOSE

The purpose of this ECP and Safety Plan is to protect employees, contractors and students from harmful exposures to the COVID-19 virus, to reduce the risk of infection in the event of an exposure, and to comply with the WorkSafeBC Occupational Health and Safety Regulation 5.54 and 6.3, Exposure Control Plan.

This control plan has been developed to:

- **Establish a framework to assess the risks** in the workplace for Royal Roads University employees
- **Identify (and implement) controls and protocols to prevent harmful COVID-19 exposure** to RRU employees
- **Provide direction and expectations via responsibilities, policies and procedures to prevent and manage exposures in the workplace**
- **Ensure a system of reporting and resolving areas of concern** on COVID-19 is available for the RRU community
- **Provide information and training on COVID-19**, including associated symptoms, transmission and prevention/control measures

RRU will follow direction and controls as specified by the WorkSafeBC, the BC Centre for Disease Control (BCCDC), the BC Ministry of Health, and the Provincial or Island Medical Health Officer while continuing to monitor and liaise with these authorities on changes that may impact the institution. While the BCCDC communicates with the Ministry of Health and additional partners, RRU communication will ensure the correct information is communicated to employees and students. RRU will also be prepared to respond to health concerns and provide employees with the correct protective equipment for relative situations.
DEFINITIONS

*Coronavirus* – a type of common virus that infects humans, typically leading to an upper respiratory infection (URI)

*Severe Acute Respiratory Syndrome (SARS)* – A severe and contagious viral infection of the lungs with unknown etiology, characterized by high fever, dry cough, and breathing difficulties

*Occupational Exposure to COVID-19* – Employees who could reasonably be anticipated to be at risk of harmful contact with a person who has or is suspected to have COVID-19.

*Management* – responsible for implementation of procedures and process

*Supervisor* – A RRU employee who instructs, directs, and oversees employees and/or students in the performance of their duties and activities

*Employee* – A person employed at RRU full-time, part-time or casual.

*Contractor* – associate faculty, contractors, consultants and partners engaged to work with and on behalf of Royal Roads University.

*Student* – A person enrolled in a full-time or part-time program or any courses in RRU

*Personal Protective Equipment (PPE)*- PPE used for COVID-19 are medical masks, respiratory protective equipment, face shields, body suits, gloves and boots as required. PPE controls are generally used as the last line of defense when engineering or administrative controls are not sufficient.

APPLICABLE LEGISLATION AND REFERENCE MATERIALS

- Provincial Health Officer – [COVID-19 Orders, Notices and Guidance](#)
- BC Centre for Disease Control- [BC Centre for Disease Control](#)
- Public Health Agency of Canada- [Coronavirus Disease (COVID-19)](#)
- World Health Organization- [Coronavirus disease (COVID-19) Pandemic](#)
- WorkSafe BC:
  - [COVID-19 Information and Resources](#)
  - [Occupational Health and Safety Regulation](#) 5.54 and 6.3
  - [COVID-19 in the workplace](#)
- Royal Roads University- [Royal Roads University's response to COVID-19](#)
KEY STAKEHOLDER/PERSONNEL

The following departments have been involved in providing feedback to the development of this Exposure Control & Safety Plan:

- Operations & Resilience
- Communications
- Joint Occupational Health and Safety Committee
- Campus Services
- Human Resources

EXTERNAL STAKEHOLDER AND AGENCIES

- BC Centre for Disease Control
- BC Ministry of Health, Provincial Health Office (PHO)
- BC Ministry of Advanced Education, Skills and Training
- Emergency Management BC (EMBC)
- Government of Canada, Official Global Travel Advisory
- Public Health Agency of Canada
- World Health Organization
- Local health officials (Island Health, Medical Health Officer, Health Protection and Environmental Services, etc.)
- BC Post-Secondary Emergency Planners network
- WorkSafe BC

ROLES AND RESPONSIBILITIES

Royal Roads University

- Lead the overall RRU response to COVID-19
- Provide for the health and safety of all employees, students, visitors and contractors
- Ensure RRU is compliant with municipal, provincial, federal and medical authorities. Follow provincial guidelines as provided.
- Comply the BC Occupational Health & Safety Regulation and all applicable orders.
- Remedy workplace conditions that are hazardous to the health or safety of RRU employees.
- Ensure RRU puts in place appropriate controls, processes and resources (safety supplies and training) to support operational and administrative requirements
- Support the Exposure Control Plan by providing education and training on prevention of COVID-19 is given to employees by their managers/ supervisors
- Provide direction on medical services and first aid for health monitoring
- Ensure that a copy of the Exposure Control Plan is available to employees.
Ensure employees are made aware of their rights the BC Occupational Health & Safety Regulation.

Consult and cooperate with the joint committee representatives for Royal Roads University

Actively promote and monitor personal self care actions.

Actively promote and implement the core measures for managing social interaction in congregate social areas (kitchens, staff room, canteens, shared public spaces).

**Human Resources**

Provide clear policies to enable and ensure that individuals who have symptoms of a cold, flu, or COVID-19 should not come into the workplace. Implement sick day policies that accommodate individual staff being off sick more often or working safely at home during these illnesses.

Develop routine screening/questions of staff for symptoms checking.

Support and accommodate higher-risk populations including those 65+ and those with underlying medical conditions.

Provide information, advice and training to staff:

1. Risk of exposure and signs and symptoms to watch for
2. Safe Work Procedures
3. How to report exposure to, or symptoms of, illness of concern
4. Collaboration with Campus Services and Operations & Resilience on proper use of personal protective equipment (PPE) if required
5. Provide information and advice to the university regarding employer responsibilities, oversight of employee leave policy, employee rights for safe work conditions and appropriate channels to address concerns.

Support information, training and policy/procedures to ensure a respectful workplace; equity, diversity and inclusion; and mental health supports.

**Operations and Resilience**

Coordinate pandemic response at institutional level.

Monitor public health information.

Identify and implement appropriate campus control measures; where appropriate and practical increase use of temporary physical barriers.

Collaborate with campus stakeholders to identify front line staff who may have a heightened need for personal protection (i.e. masks, engineered controls).

Coordinate information gathering regarding risk and risk management (i.e. travel, campus visitors, events, etc.)
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- **Occupational Health and Safety:**
  - Work with managers and supervisors to conduct and document a Hazard and Risk Assessment and advise on appropriate controls.
  - Maintain inventory and stock of Personal Protective Equipment (PPE)
  - Develop and maintain an effective COVID-19 Exposure Control Plan
  - Ensure compliance with this Exposure Control Plan, including supporting the development of Safe Work Procedures where relevant.
  - Provide general health and safety advice and assistance. Keep records of fit testing, exposure reports and first aid.
  - Act as an advisory resource for preventing transmission of coronavirus.
  - Arrange ongoing coronavirus awareness and education for employees.

- **First Aid Services:**
  - Provide advice on preventing/reducing transition of coronavirus as per OFAA protocols for use during the COVID-19 pandemic.
  - Refer patients who have developed signs or symptoms of COVID-19 to medical practitioners.
  - File and keep relevant medical records.
  - Notify RRU Designate (Human Resources Consultant for employees or CARE team for students) in the event of COVID-19 symptoms.
  - Follow protocols for preventing transmission.

**Joint Occupational Health and Safety Committee**
- Support review and implementation of the Exposure Control Plan.
- Identify situations that may be unhealthy or unsafe for workers and advise on effective systems for responding to those situations.

**Communications Office**
- Manage and monitor external communication regarding pandemic response, exposure control plan and safety plan. This includes but is not limited to media relations, social media, news stories on the Royal Roads News and Events site, posting to the Royal Roads COVID-19 web page, etc.
- Manage/advise on internal information sharing in cooperation with other university departments such as Human Resources, Operations and Resilience, Campus Services, etc. This work includes posting or managing posts to Crossroads, facilitating community-wide email messaging, review of documents as required, etc.
- Advise the EOC/executive and other departments on issue/ risk management as required.
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Campus Services
- Require and sustain higher levels of frequent cleaning of “high touch” areas.
- Provide hand sanitizer dispensers at entrances or around workplaces.
- Monitor evolving requirements for custodial services, on campus accommodation and Guest Services.
- Develop protocols for student accommodations and front desk operations.
- Procedures and risk management regarding external visitors.
- Maintain adequate inventory of appropriate cleaning products and supplies to ensure operational continuity.
- Ensure custodial cleaning is in line with provincial standards (i.e. BC Centre for Disease Control - Environmental Cleaning and Disinfectants for Clinic Settings, Appendix A).

Managers/Supervisors
- Ensure the health and safety of all workers under their direct supervision.
- Using a risk assessment matrix, document and assess the risk(s) related to the COVID-19 virus and ensure the health and safety of all the positions under their direct supervision
  - Direct work in a way that eliminates or minimizes the risk to employees.
  - Monitor the workplace to ensure risk controls are implemented, safeguards are used, precautions are taken, and work procedures are followed.
- Be knowledgeable about BC Occupational Health & Safety Regulation that apply to the work being supervised.
- Ensure that awareness and information resources are shared with employees under their direct supervision.
- Provide training, develop Safe Work Practices (SWPs), and provide PPE and other equipment as necessary.
- Ensure this Exposure Control Plan is available for employees to access.
- Consult and cooperate with the joint occupational health and safety committee representatives.

RRU Employees & Contractors
- Be alert to hazards. Report them immediately to your supervisor or employer (this includes COVID-19 exposure hazards).
- Comply BC Occupational Health & Safety Regulation and applicable orders.
- Follow safe work procedures and act safely in the workplace at all times.
- Report risks or issues of concern to supervisors. Understand how exposure can occur and when and how to report exposure incidents
- Use the protective clothing, devices, and equipment provided. Wear them properly.
• Co-operate with joint occupational health and safety committees, worker health and safety representatives, WorkSafeBC prevention officers, and anybody with health and safety duties.
• Read and understand information and training provided; attend awareness and education sessions as provided. Ask questions and follow up with supervisors to ensure understanding and adherence.
• Stay informed through trusted information sources including Island Health, BCCDC, PHAC and WHO.
• Report COVID-19 symptoms to manager, contact 8-1-1 as appropriate and follow the directions and treatment advice of health care providers, Island Health and/or the Provincial MHO.
• Practice good personal hygiene and prevention practices.

RISK IDENTIFICATION, ASSESSMENT, AND CONTROL

Transmission of COVID-19

COVID-19 appears to spread most easily through close contact with an infected person. Coronavirus is transmitted via liquid droplets when a person coughs or sneezes. The virus can enter through these droplets through the eyes, nose or throat if you are in close contact1. The virus is not something that comes in through the skin; COVID-19 can be spread by touch if a person has used their hands to cover their mouth or nose when they cough or sneeze. Please review the Public Health Agency of Canada poster (Appendix B).

According to the BC Centre for Disease Control, the virus is not known to be airborne (e.g. transmitted through the particles floating in the air). However, epidemiological and experimental evidence implicates airborne transmission of COVID-19 via aerosols2 as a potential route for the spreading of the disease3 (see Figure 1 below). The World Health Organization’s Risk Communication Package for Healthcare Facilities says that COVID-19 spreads most easily “through close contact with an infected person. When someone who has COVID-19 coughs or sneezes, small droplets [aerosols] are released and, if you are too close, you can breathe in the virus.”

Droplet Contact versus Airborne Transmission

• **Droplet Contact:** Some diseases can be transferred by large infected droplets contacting surfaces of the eye, nose, or mouth. For example, large droplets that may be visible to the

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2 **Aerosols** are defined as tiny particles or droplets suspended in air.
naked eye are generated when a person sneezes or coughs. These droplets typically spread only one to two metres and are too large to float in the air (i.e. airborne) and quickly fall to the ground. Influenza and SARS are two examples of diseases capable of being transmitted from droplet contact. **Currently, health experts believe that COVID-19 can be transmitted in this way.**

- **Airborne transmission:** This occurs when much smaller evaporated droplets or dust particles containing the microorganism float in the air for long periods of time. Transmission occurs when others breathe the microorganism into their throat or lungs. **Currently, health experts believe that COVID-19 cannot be transmitted through airborne transmission**\(^4\).

- Contesting the above statement from BCCDC, **emerging science results show that the airborne transmission route is highly virulent and dominant for the spread of COVID-19**\(^5\). Because of this discrepancy in professional opinion, Royal Roads University will adopt the precautionary principle.

- **The precautionary principle,** as applied to a novel, highly transmissible virus such as this coronavirus, with a significant public health impact, requires governments and employers to begin with the highest level of protection, not the lowest, and then reduce the level of protection as the science emerges to justify this measure.

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**Figure 1:** *Transmission of COVID-19 (Zang et al.)* Human atomization of viruses arises from coughing or sneezing of an infected person, producing virus-containing droplets and aerosols. Virus transmission from person to person occurs through direct/indirect contact and airborne aerosol/droplet routes.


\(^5\) Zang et al.
Risk Assessment

The risk of transmission is subject to two variables: contact intensity (how close you are to someone and for how long); and number of contacts (how many people are in the same setting at the same time). See Figure 1. RRU’s can reduce transmission risk by taking on a range of actions to reduce both contact intensity and the number of contacts:

- Physical distancing measures – to reduce density of people
- Engineering controls – physical barriers, increased ventilation
- Administrative controls – rules and guidelines
- Non-medical masks

The following risk assessment table is adapted from WorkSafeBC Occupational Health and Safety Regulation Guideline G6.34-6. Using this guideline as a reference, we will determine the risk level of exposure to our workers and, therefore, the preventative control measures required.

Should there be a probable or confirmed case of COVID-19 within the RRU community, RRU will follow the specific direction of medical authority and direct the response. This may include: risk assessment, changes to campus posture (i.e. building access controls and cleaning), and communications strategies. See Appendix C for the level of risk and risk controls in place for these workers.
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Table 1: Risk assessment

<table>
<thead>
<tr>
<th>Levels</th>
<th>Low Risk</th>
<th>Moderate risk</th>
<th>High risk</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Workers who typically have no contact with people.</td>
<td>Workers who may be exposed to people from time to time in relatively large, well-ventilated workspaces</td>
<td>Workers who may have contact with people in small, poorly ventilated workspaces</td>
</tr>
<tr>
<td>Hand Hygiene</td>
<td>Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)</td>
<td>Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)</td>
<td>Yes (washing with soap and water, using an alcohol-based hand rub, or using hand wipes that contain effective disinfectant)</td>
</tr>
<tr>
<td>Disposable gloves</td>
<td>Not required</td>
<td>Not required, unless handling contaminated objects on a regular basis</td>
<td>Yes, in some cases, such as when working directly with infected patients.</td>
</tr>
<tr>
<td>Aprons, gowns, or similar body protection</td>
<td>Not required</td>
<td>Not required</td>
<td>Yes, in some cases, such as when working directly with infected patients.</td>
</tr>
<tr>
<td>Eye protection – goggles or face shield</td>
<td>Not required</td>
<td>Not required</td>
<td>Yes, in some cases, such as when working directly with infected patients.</td>
</tr>
<tr>
<td>Airway protection – respirators</td>
<td>Not required</td>
<td>Not required</td>
<td>Yes, minimum N95 respirator or equivalent.</td>
</tr>
</tbody>
</table>

Controls

Royal Roads University and its employees will implement a combination of protocols and measures at different levels, as described in this document. This includes new procedures related to the workplace and to ensure compliance with guidance and orders issued by the Provincial Health Officer and local health authorities. Controls include environmental, administrative, personal measures and the use of PPE. A summary of control measures relevant is included as Appendix D and E.

Hierarchy of Controls

There are many infection prevention and exposure control measures for communicable disease that can be taken to reduce the transmission of COVID-19. Control measures at the top are more effective and protective than those at the bottom. By implementing a combination of measures at each level, the risk of COVID-19 is substantially reduced. The exposure control plan requires RRU to apply infectious disease controls in the following order of priority.
Elimination or Substitution

These controls remove the risk of contracting COVID-19 in the workplace. This includes policies and procedures that limit the number of people in the workplace at any one time including physical distancing and eliminating face to face contact by accommodating employees remote work options, flexible schedules, and alternative means of communication, such as video conferencing. This also includes closing or restricting spaces (i.e. buildings, rooms or gardens) where physical distancing guidelines cannot be met.

Please refer to the following elimination/substitution controls in place at RRU:

- Flexible Work Arrangements Policy
- Temporary Remote Work Arrangement Guidelines
- Types of Leave at RRU Policy

Engineering Controls

These controls will modify the work place to create safe space. This includes distance controls (2 meters or greater) and barriers in applicable areas of campus. RRU will also apply plexiglass protection for front counter staff where 2 meters is not possible, such as university information front desk, campus store, habitat, café and the gym. See Figure 2, regarding physical distancing from the BC Ministry of Health, below.
**Ventilation:** Ventilation is an engineering control that can ensure a clean air supply and help reduce airborne concentrations of virus and filter other microbes. When possible, classrooms, laboratories, libraries, workshops, offices, and the cafeteria at RRU will be sufficiently ventilated ensuring clean air supply.

**Administrative Controls**

These controls are procedures or training applied to decrease the risk of COVID-19 transmission, including:

- Posted occupancy limits for shared spaces
- Increasing cleaning and disinfection frequencies for shared work surfaces and equipment and tools, including shared vehicles (see Appendix A).
- Controlling the flow and direction of traffic through one-way doors or walkways to keep people physically distanced
- COVID-19 training covering the safe distance (2m) controlling human to human distance as well as personal hygiene (i.e. hand washing and cough/sneeze etiquette)
- Avoiding unnecessary entering of closed buildings, workspaces and offices.
- Changes to work schedules and practices, and decreased density individuals
- Utilizing the sign-in/sign-out protocol in all buildings.
• Safe Work Practices (SWPs) - both universal (i.e. personal hygiene) and specific to unique roles, business areas, or functions (see below for more on this).

Personal Protective Equipment (PPE)

Personal protective equipment (PPE) will be used in high risk situations, such as working in situations where appropriate physical distancing cannot be met.

PPE and Employees

• PPE, such as masks, eye protection and gloves, are not required beyond those used by staff as part of regular precautions for the hazards normally encountered in their regular course of work.
• PPE will be used when other controls (including physical distancing, handwashing, staying at home when sick and engineered solutions) are not sufficient.
• RRU will ensure that masks are selected and used appropriately, following the WorkSafe BC guide for selecting and using masks.
• Employees requiring the use of PPE will be educated on the safe procedures for their use. Instruction will be provided about the proper way and when to use masks.

Masks

• B.C.’s provincial health officer has not recommended the widespread use of face masks.
• However, masks have an important role to play in preventing the spread of COVID-19, especially for healthcare providers and for people that have COVID-19. This is because masks act as a barrier and help stop the spread of droplets from a person’s mouth and nose when talking, laughing, yelling, singing, coughing, or sneezing. Science indicates that face covering prevents both airborne transmission by blocking atomization and inhalation of virus-bearing aerosols and contact transmission by blocking viral shedding of droplets6.
• Wearing a mask should be combined with other important preventative measures such as frequent hand washing and physical distancing. Using only a mask is not enough to prevent the spread of COVID-19.
• For staff, faculty, students, visitors and others, wearing a mask is a personal choice:
  o RRU will not be providing masks to guests or visitors.
  o Refer to PHO’s message about the use of these masks and the continued need to exercise physical distancing and other hygiene measures if one chooses to where a mask.
• It is important to treat people wearing masks with respect.
• N95 respirators are one type of respiratory protective equipment covering the mouth and nose. The N95 mask will contain droplets resulting from coughing and sneezing and will help control the spread of infectious material. Medical masks and N95 respirators

6 Zhang et al.
will be reserved for health care workers and may be supplied for some employees based on a risk assessment.

- Cloth masks will also be available in certain scenarios.
- Masks can give users a false sense of security and can increase the number of times a user touches their face.
- More information about COVID-related mask use is available from the BC CDC here.

**Gloves**

- Gloves are **not required for most RRU employees** to protect against COVID-19.
- Other measures, such as physical distancing and good hygiene practices are more effective in preventing the risk of transmission.
- Gloves should, however, continue to be worn by first aid providers and are recommended when cleaning and disinfecting frequently touched objects or surfaces.

**Safe Work Practices**

Safe Work Practices (SWPs) are both universal (i.e. personal hygiene) and specific to unique roles, business areas, or functions. RRU’s SWPs provide employees with instructions on how to carry out specific tasks and how to protect themselves against known hazards. Following SWP’s help minimize risks. SWPs are developed, reviewed and maintained by qualified people (i.e. managers and supervisors), with assistance from Occupational Health and Safety if required.

**Personal Care and Hygiene**

Good personal hygiene is the key in reducing the risk of COVID-19 transmission. Following advice from the World Health Organization, there are [basic protective measures against coronavirus](https://www.who.int) that everyone can take.

All employees are expected to understand and follow guidelines for personal care and hygiene:

- No handshaking
- Wash hands often with soap and water for 20 seconds (see hand hygiene below)
- Avoid touching eyes, nose or mouth
- Cough/sneeze into elbow or sleeve; immediately dispose of tissues and wash hands.
- Clean individual high touch surfaces such as electronics, computer keyboards and phones frequently
- Practice physical distancing – maintain at least two meters distance between yourself and others you are working with. Use a non-medical mask or face covering in situations where reasonable physical distancing cannot be maintained.
- Do not share eating utensils
- Avoid direct contact with ill people
- Stay home when sick (see “Health Monitoring” below). Keep away from others until those symptoms have completely disappeared.
• If you are at greater risk (>60, compromised immune system, underlying chronic medical conditions) get informed about risk, assess your own risk tolerance, think through and apply extra precautions and heightened vigilance.

**Hand Hygiene**

Routine hand washing, coughing and sneezing etiquette, and not touching your face will be the prevention of transmission and infection. Hand washing will reduce the chances of infectious transfer from hands to various body parts – specifically the eyes, nose and mouth – or to other surfaces that are touched. Hand washing will be done with soap and water for 20 seconds. If soap is unavailable, use an alcohol-based hand rub to clean your hands.

Wash hands upon entering a new building or workplace, touching common use items (i.e. photocopiers, doorways, etc.)

*Figure 4: Hand Hygiene, BC Centres for Disease Control*
Additional Safe Work Practices

Additional safe work practices will continue to be developed while RRU assesses various COVID-19 risk responses. The practices will be department specific and determined, to some extent, by the work being done. Development will include relevant parties. Examples include:

- Vehicle Usage Standard Operating Procedures
- Working Alone Standard Operating Procedures (under development)
- Protocols for the use of PPE, including masks (see “Personal Protective Equipment” section above)

EXTERNAL AND INTERNAL INFORMATION SHARING

Royal Roads University will share the information in this plan and associated policy, guidelines, and procedures. Clear communication includes both the use of digital communication (i.e. email and website) and the placement of visual hard-copy communication materials at main bulletin boards.

Social media and news communication (on Royal Roads News and Events and to news media if required) will be led by Communications, working in cooperation with other university departments.

In addition, orientation and training for employees and supervisors will ensure that everyone is well informed of their responsibilities and resources available.

If there is a presumed or confirmed case of COVID-19 at RRU, communications will be filtered through the COVID-19 Internal Procedures Team (IPT) team as per the internal COVID-19 communications protocol.

SURVEILLANCE AND REPORTING

Early reporting and epidemiological surveillance are essential in preventing and limiting the spread of COVID-19.

- People with a fever exceeding 38.0°C (100. ℉), and any of the following respiratory symptoms: shortness of breath, coughing or difficulty breathing, headache, muscle aches, sore throat and fatigue will report to their family doctor or local health authority immediately and seek medical advice; call 811 and they will provide advice on how to proceed
- Individuals will notify family doctor or Medical Services of when and where they travelled and if there was contact with anyone with COVID-19 symptoms
- Any suspected COVID-19 cases will be reported immediately as per the Internal COVID-19 Communications Protocol.
- RRU will report all confirmed COVID-19 cases to local health authority immediately
HEALTH MONITORING & SELF ASSESSMENTS

Everyone has a responsibility to stay home and self-isolate when sick and until their symptoms have resolved.

Symptoms of COVID-19

The symptoms of COVID-19 are similar to other respiratory illnesses including the flu and common cold. Symptoms include: fever, chills, cough, shortness of breath, sore throat and painful swallowing, stuffy or runny nose, loss of sense of smell, headache, muscle aches, fatigue or loss of appetite.

Symptoms can range from mild to severe. Sometimes people with COVID-19 have mild illness, but their symptoms may suddenly worsen in a few days.

Required Daily Screening and Self-Assessments

Staff and students must assess themselves daily for symptoms of common cold, influenza, or COVID-19 prior to entering the campus or any RRU workplace. A personal health assessment can be conducted using the BC COVID 19 Health Assessment tool. This self-assessment provides a tool to self-screen symptoms and other risks such as travel, providing care or having close contact with a person with suspected or confirmed COVID-19.

Users have the option to access the daily questionnaire via:
1. download BC COVID-19 app from either the Apple or Google Play store
2. use the online tool directly at: https://bc.thrive.health/
3. phone 8-1-1 and talk through the question set with a representative
4. Where connectivity makes the above unreasonable, a paper-based checklist may be used (see Appendix F).

The first three methods ensure the user receives immediate current PHO direction depending on the answers they provide.

If the individual answers “yes” to any question in the assessment, they MUST NOT attend the site for at least 10 days. They should immediately communicate this status to their instructor or supervisor by email or phone.

Those unsure of if they, or a student, should self-isolate should also be directed to use the BC COVID-19 Self-Assessment Tool.

- If concerned, they can contact 8-1-1, or the local public health unit to seek further input.
- They can also be advised to contact a family physician or nurse practitioner to be assessed for COVID-19 and other infectious respiratory diseases.
What to do if you are sick

- If you do become ill and suspect it may be COVID-19, **do not attend work**. Sick employees can return to work when symptoms cease unless otherwise advised by the provincial health authorities.

- At this time, a doctor’s note is **not required** to substantiate illness related to COVID-19. If your illness or disability is not related to a flu type illness and absence is expected in excess of three (3) consecutive working days, please check with your Human Resources Consultant for medical documentation required. We want to ensure that we are able to properly support you to manage your health issues and put in place an appropriate return-to-work plan.

- If you have a fever, cough and/or difficulty breathing, seek medical attention. If it is not an emergency, call by telephone in advance and follow the directions of your local health authority. Calling in advance will allow your health care provider to quickly direct you to the right health facility. This will also protect you and help prevent spread of viruses and other infections.

**Reporting illness**

An employee or student with a probable or confirmed case for COVID-19 is expected to notify RRU. It is RRU’s expectation that they will report to RRU if:

- they test positive for COVID-19; or
- they are experiencing symptoms consistent with COVID-19. Symptoms include a fever exceeding 38.0°C (100. ℉), and any of the following: shortness of breath, coughing or difficulty breathing, headache, muscle aches, sore throat and fatigue, or
- someone in their household or with whom they have had close contact tests positive for COVID-19 or is experiencing symptoms consistent with COVID-19

**Employee Reporting**

If you develop symptoms of COVID-19, you will need to:

- Contact your supervisor
- Contact Human Resources
- Self-isolate for a minimum of 10 days so you do not potentially spread the disease to others. Sick employees can return to work when symptoms cease unless otherwise advised by the provincial health authorities.

**Note:** If you have tested positive for COVID-19, you will be required to self-isolate for a minimum of 14 days, track and report your symptoms, and be retested before being cleared to work.

Supervisors who are informed of a presumed or confirmed case of COVID-19 should close the impacted space and contact Campus Services to request additional cleaning/disinfection of the
area. Supervisors should be instructed to report any disclosed diagnosis or potential infection immediately to their Human Resources Consultant. They must maintain the confidentiality of any such report to avoid any potential violation of privacy laws. The Human Resources Consultant is the RRU COVID-19 Designate for employees and will follow up with employee.

**Student Reporting**

Students are asked to notify a member of the CARE Team at care@royalroads.ca or by calling Campus Security (250-391-2525) to request a CARE Team member call them back. The CARE Team member is the RRU COVID-19 Designate for students and will follow up with the student.

**Mental Health**

If stress or anxiety, regarding the COVID-19, is affecting your wellbeing the following resources are available: [https://www.royalroads.ca/news-events/covid-19](https://www.royalroads.ca/news-events/covid-19)

**EDUCATION AND TRAINING**

Education is crucial for awareness, early detection and prevention. RRU will provide COVID-19 education and training to employees; this will be in line with recent information from BCCDC and provincial health guidelines for the sector.

RRU share information about exposure control with employees through a variety of channels including the website, employee emails, and through line managers/supervisors.

Following education, employees and students will have full awareness and be able to answer the following questions:

1. What is COVID-19?
2. How can COVID-19 be transmitted?
3. What are the symptoms of COVID-19?
4. What precautions and protective measures are required to prevent COVID-19?
5. What should you do when you (or others) have suspicious symptoms?
6. Where can you obtain further information and help?

**RESPECTFUL & HEALTHY WORKPLACE**

The health and safety of our employees, students and the contractors with whom we do business is our top priority. Through the Joint Occupational Health and Safety Committee, training, and supervisory due diligence, the university strives to ensure a safe and healthy workplace.

This includes the respectful treatment of all employees, contractors and students in providing a safe campus in which to work and study, as well as ensuring safe working and learning conditions for our campus community. As such, all employees and contractors may expect and have the responsibility to contribute to a safe workplace and campus.
Respectful Workplace

Royal Roads University strives to create a respectful, fair and productive work environment for all. RRU is committed to providing a work environment free of bullying and harassment and discrimination. These behaviours will not be accepted or tolerated.

Our various identities may cause us to experience the challenges of COVID-19 differently. When people associate COVID-19 with a specific group, ethnic community or nationality, stigma and discrimination occurs. These narratives are reflected in acts of racism or xenophobia.

These behaviours can have a significant effect on the mental health of affected individuals. Stigma affects us all. It creates fear or anger towards people instead of the virus. It’s important for all of us to stand up and refute these narratives. A caring and compassionate institution, we have the opportunity to come together and support each other.

Possible Stigma Associated with COVID-19

- Wrongly implying that particular or ethnic groups are more susceptible to viruses.
- Wrongly assuming that some racial or ethnic groups are spreading the disease more than others, instead of recognizing that this is a global pandemic with community spread.

What Should I do if I Notice Problematic Behaviour?

- Model Appropriate Behaviour – Step in to reframe comments in the moment with an appropriate response.
- Give someone the chance to repeat or reframe what they said – Sometimes we notice our mistakes and need a chance to correct ourselves. Other times, we might need some education.
- Focus on Yourself — Don’t try to interpret what other people might be feeling or thinking. Focus on why or how it made you upset or insulted you.

What should I do if I got something wrong?

- Take a breath, be reflective and don’t argue – recognize that everyone makes mistakes, and it’s not a sign of bad character.
- Offer a genuine apology – reflect on what you said, acknowledge and apologize for the harm that was caused.
- Believe and receive, invite feedback.
- Be accountable.
- Move forward and commit to do better in the future and avoid engaging in the same problematic behaviour again.
- Use the experience to help others.
Microaggression is a term used to describe brief, verbal, or environmental humiliations, that communicate negative insults toward any group, particularly culturally marginalized groups.\footnote{https://en.wikipedia.org/wiki/Microaggression}

If you experience microagression:
- Protect your physical safety and emotional health. It is up to you to decide if and want you want to respond. If it is too much emotional labour, it is ok to walk away.
- Surround yourself with community. Connect with peers, community organizations, or even online networks to share your experiences.

Intervening in Microagression – five themes to remember as an active ally\footnote{Ambit Gender Diversity Consulting, Kingsley Strudwick}:
1. **Intention vs. Impact.** Even if there was no intention to cause harm, if harm was caused we need to take responsibility.
2. **Power, Privilege and Social Responsibility.** Due to inequities in power, violence is more likely to happen to people who are marginalized by people who hold privilege.
3. **Safety vs. Comfort.** Unsafe to intervene vs. feeling uncomfortable.
4. **Root in Consent.** If a person who is directly affected by a microaggression is present, take leadership from them on what they would like from you.
5. **Relationships of Ongoing Care.** Practicing bystander intervention is both about shortening our reaction time in challenging/violent moments, and about investing in relationships long term.

Find out more about Equity, Diversity and Inclusion at RRU here: https://humanresources.royalroads.ca/equity-diversity-and-inclusion-rru

Health & Wellness

As we deal with the many disruptions, changes and loss caused by the COVID-19 outbreak, it’s normal to feel a range of emotions, including anxiety, worry and fear. We are more physically disconnected from our usual communities and may be experiencing feelings of isolation.

Resources for staff:
- [Healthy U](#)
- [Employee & Family Assistance Program](#)
DOCUMENTATION & RECORD KEEPING

RRU will keep records of fit testing, exposure reports and first aid records.

Human Resources will keep records of education on COVID-19 and prevention. Copies can be sent to relevant parties upon request.

PROGRAM REVIEW

The Exposure Control Plan and Safety Plan will be subject to an ongoing review process in consideration of the following:

- The most updated information on COVID-19
- Effectiveness of the exposure control plan
- Documentation for awareness and education
Appendix A: RRU Cleaning Standards

Regular cleaning and disinfection are essential to preventing the transmission of COVID-19 from contaminated objects and surfaces. RRU cleaning standards are in alignment with the BCCDC’s Cleaning and Disinfectants for Public Settings document (see Figure 5.1 and 5.2 below).

This includes:

- General cleaning and disinfecting of the premises should occur at least once a day.
- Frequently-touched shared surfaces should be cleaned and disinfected at least twice a day. (e.g. door knobs, light switches, toilet handles, tables, desks, chairs, electronic devices, keyboards and toys)
- Clean and disinfect any surface that is visibly dirty.
- Use common, commercially-available detergents and disinfectant products and closely follow the instructions on the label.
- Limit items that are not easily cleaned (e.g. fabric or soft items).
- Empty garbage containers daily.
- Wear disposable gloves when cleaning blood or body fluids (e.g. runny nose, vomit, stool, urine).
- Wash hands before wearing and after removing gloves.

ADDITIONAL REQUIREMENTS

The following will also be implemented to reduce the risk of transmission:

- Providing paper hand towels.
- Disabling water fountains.
- Provision of cleaning products for common devices and materials used for the delivery of education (e.g. photocopiers, supply rooms, etc.).
- Washrooms should be cleaned at least twice a day keeping in line with the high touch surface area protocols.
Figure 5.1: BCCDC’s Cleaning and Disinfectants for Public Settings

Coronavirus COVID-19
BC Centre for Disease Control | BC Ministry of Health

CLEANING AND DISINFECTION FOR PUBLIC SETTINGS

Good cleaning and disinfection are essential to prevent the spread of COVID-19 in BC.

This document provides advice to public groups, transit, schools, universities, child care and other institutions in BC on cleaning for non-health care settings.

Cleaning: the physical removal of visible soiling (e.g. dust, soil, blood, mucus). Cleaning removes, rather than kills, viruses and bacteria. It is done with water, detergents, and steady friction from cleaning cloth.

Disinfection: the killing of viruses and bacteria. A disinfectant is only applied to objects; never on the human body.

All visibly soiled surfaces should be cleaned before disinfection.

Cleaning for the COVID-19 virus is the same as for other common viruses.

Cleaning products and disinfectants that are regularly used in households are strong enough to deactivate coronaviruses and prevent their spread.

Recommendations:

- General cleaning and disinfecting of surfaces should occur at least once a day.
- Clean and disinfect highly touched surfaces at least twice a day and when visibly dirty (e.g. door knobs, light switches, cupboard handles, grab bars, hand rails, tables, phones, bathrooms, keyboards).
- Remove items that cannot be easily cleaned (e.g. plush toys).

Cleaning: 2% household bleach solution or any of the following:

- For cleaning, water and detergent (e.g. liquid dishwashing soap), or common, commercially available cleaning wipes should be used, along with good physical cleaning practices (i.e. using strong action on surfaces).

Disinfection: 70% isopropyl alcohol or 0.5% hypochlorite solution.

For disinfection, common, commercially available disinfectants such as ready-to-use disinfecting wipes and pre-made solutions (no dilution needed) can be used. Use the figure and table below for guidance. Always follow the manufacturer's instructions printed on the bottle.

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.
Figure 5.2: BCCDC’s Cleaning and Disinfectants for Public Settings
Appendix B: About Coronavirus Disease, Public Health Agency of Canada
Appendix C: RRU Risk Assessment Chart

<table>
<thead>
<tr>
<th>Position</th>
<th>Level of Risk</th>
<th>Control Procedures</th>
</tr>
</thead>
<tbody>
<tr>
<td>Administration Counter Staff</td>
<td>Low to Moderate</td>
<td>Ongoing, effective hand hygiene. Physical distancing</td>
</tr>
<tr>
<td>Office workers</td>
<td>Low to Moderate</td>
<td>Ongoing, effective hand hygiene. Physical distancing</td>
</tr>
<tr>
<td>Faculty</td>
<td>Low to Moderate</td>
<td>Ongoing, effective hand hygiene. Physical distancing with applicable PPE.</td>
</tr>
<tr>
<td>Maintenance and Ground workers</td>
<td>Low</td>
<td>Ongoing, effective hand hygiene. Physical distancing with applicable PPE.</td>
</tr>
<tr>
<td>Managers</td>
<td>Low</td>
<td>Ongoing, effective hand hygiene. Physical distancing with applicable PPE.</td>
</tr>
<tr>
<td>First Aid Attendants</td>
<td>Moderate</td>
<td>Ongoing, effective hand hygiene. Physical distancing with applicable PPE.</td>
</tr>
<tr>
<td>Housekeeping (Housing)</td>
<td>Low to Moderate</td>
<td>Regular and effective hand hygiene, physical distancing, increased sanitization processes, personal protective equipment</td>
</tr>
<tr>
<td>Staff – working from home</td>
<td>Low</td>
<td>Frequent communication with supervision. Regular and effective hand hygiene, physical distancing, increased sanitization processes, personal protective equipment</td>
</tr>
</tbody>
</table>
Appendix D: Summary of Control Measures

1. **STAY HOME WHEN SICK**
   All children and staff with common cold, influenza, COVID-19, or other respiratory diseases must stay home and self-isolate.

2. **HAND HYGIENE**
   Everyone should wash their hands more often!
   Thorough hand washing with plain soap and water for at least 20 seconds is the most effective way to reduce the spread of illness.

3. **RESPIRATORY AND PERSONAL HYGIENE**
   Cover your coughs.
   Do not touch your face.
   No sharing of food, drinks, or personal items.

4. **PHYSICAL DISTANCING AND MINIMIZING PHYSICAL CONTACT**
   Spread children out to different areas.
   Take them outside more often.
   Stagger lunch times.
   Incorporate individual activities.
   Remind children, "Hands to Yourself!".

5. **CLEANING AND DISINFECTION**
   Clean and disinfect frequently touched surfaces at least twice a day.
   General cleaning of the centre should occur at least once a day.
   Use common cleaning and disinfectant products.

Source: COVID-19 Provincial Guidelines K-12 Sector, BC Ministry of Health
Appendix E: Offices: Protocols for returning to operation (WorkSafeBC)

[see attachment]
Appendix F: BC COVID-19 Self-Assessment Tool (daily screening & assessment, paper based)

If you need help or guidance in another language, please call 8-1-1. 8-1-1 has translation services in 130 languages.

This self-assessment tool, developed with the BC Ministry of Health, will help determine whether you may need further assessment for COVID-19 testing by a healthcare provider or at a local collection centre. You can complete this assessment for yourself, or on behalf of someone else. Older people and people with a weakened immune system or underlying medical conditions are considered at higher risk of severe disease.

<table>
<thead>
<tr>
<th>Screening Question</th>
<th>Please circle “yes” or “no”</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Are you experiencing any of the following:</strong></td>
<td></td>
</tr>
<tr>
<td>• Severe difficulty breathing (e.g. struggling to breathe or speaking in single words)</td>
<td>YES</td>
</tr>
<tr>
<td>• Severe chest pain</td>
<td>NO</td>
</tr>
<tr>
<td>• Having a very hard time waking up</td>
<td></td>
</tr>
<tr>
<td>• Feeling confused</td>
<td></td>
</tr>
<tr>
<td>• Losing consciousness</td>
<td></td>
</tr>
<tr>
<td><strong>Are you experiencing any of the following:</strong></td>
<td></td>
</tr>
<tr>
<td>• Mild to moderate shortness of breath</td>
<td>YES</td>
</tr>
<tr>
<td>• Inability to lie down because of difficulty breathing</td>
<td>NO</td>
</tr>
<tr>
<td>• Chronic health conditions that you are having difficulty managing because of difficulty breathing</td>
<td></td>
</tr>
<tr>
<td><strong>Are you experiencing cold, flu or COVID-19-like symptoms, even mild ones?</strong></td>
<td></td>
</tr>
<tr>
<td>Symptoms include: fever, chills, cough, shortness of breath, sore</td>
<td>YES</td>
</tr>
</tbody>
</table>


throat and painful swallowing, stuffy or runny nose, loss of sense of smell, headache, muscle aches, fatigue or loss of appetite.

| Have you travelled to any countries outside Canada (including the United States) within the last 14 days? | YES | NO |
| Did you provide care or have close contact with a person with confirmed COVID-19? | YES | NO |

Note: This means you would have been contacted by your health authority’s public health team.

If you answered “yes” to any of these questions, please get assessed for a COVID-19 test, and self-isolate for at least 10 days.

**Testing Instructions:**

Testing is recommended for anyone with cold, flu or COVID-19-like symptoms, even mild ones. They can now be assessed for COVID-19 testing by a healthcare provider or at a local collection centre.

Click on the links below for a list of collection centres in the province to find one near you. You can also call 8-1-1 to find the nearest centre or for directions in another language.

- Collection centre finder (Mobile and desktop)
- Collection centre finder for Internet Explorer users

**Self-Isolation Instructions:**

Self-isolate for a minimum of 10 days, so you do not potentially spread the disease to others. You may return to your regular activities when:

- At least 10 days have passed since your symptoms started, AND
- Your fever is gone without the use of fever-reducing medications (e.g. Tylenol, Advil), AND
- You are feeling better (e.g. improvement in cough, runny nose, sore throat, nausea, vomiting, diarrhea, fatigue).
Coughing may persist for several weeks, so coughing alone does not require you to continue to isolate.

Stay home and do not go to work, school or public places and do not use public transit, taxis or ride shares. Do not have visitors to your home. If you live with other people, avoid contact with others at home by staying and sleeping in a separate room and using a separate bathroom if possible. See these guides about isolation:

- Isolation if you are ill
- Guide for caregivers and household members

Cover your coughs and sneezes. When you feel a cough or sneeze coming on, cover your mouth and nose with a tissue. Don't have a tissue? Cough or sneeze into your upper sleeve or elbow, not your hands. Wash your hands right away after you sneeze, cough or touch used tissues or masks. Throw used tissues into a lined trash can in your room and tie up that trash bag before adding it with other household waste.

Wash your hands. Wash your hands often with soap and water for at least 20 seconds. It is best to dry your hands with a paper towel and throw it away after use. If you can't wash your hands, use an alcohol-based hand sanitizer. Avoid touching your eyes, nose, and mouth with unwashed hands. Learn more.

Do not share household items. Do not share dishes, cups, eating utensils, towels, bedding, or other shared belongings. After using these items, wash them with soap and water.

Flush the toilet with the lid down. COVID-19 virus may also be present in poop (stool or feces). Always wash your hands with soap and water after using the toilet.

General cleaning. Water and detergent (e.g., liquid dishwashing soap) or common household cleaning wipes should be used. Apply firm pressure while cleaning. Surfaces should be cleaned at least once a day. Next, use a store bought disinfectant or diluted bleach solution, one part bleach to 50 parts water (20ml of bleach to 1 litre of water), and allow the surface to remain wet for one minute. Clean surfaces that are touched often (e.g., counters, table tops, doorknobs, toilets, sinks, taps, etc.) at least twice a day.

Wear a face mask. When you are sick, wearing a face mask (surgical or procedure mask) helps to stop the spread of germs from you to others. Wear a face mask when you are in the same room with other people and when you get medical care. If your mask gets wet or dirty, change it and wash your hands right away. You and those you live with do not need to buy and wear other types of masks, such as an N-95 respirator mask.

Note that sometimes people with mild symptoms at the start of their COVID illness may suddenly worsen and require urgent medical care. Pay attention to how you are feeling. If it becomes harder to breathe, you can’t drink anything or feel much worse, seek urgent medical care at an urgent care clinic or emergency department.