



COVID-19 and the Hierarchy of Controls to Protect Lives

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Here are some questions that you should be asking of your employer to ensure that they are complying with the latest guidance from government agencies. Alongside government guidance, excellent resources are available from various institutions including unions and professional associations. **Remember that your employer has a duty to protect you from workplace hazards including those of COVID-19 exposure. You also have a duty to protect yourself!**

How does your employer's Infectious Disease Preparedness Response Plan protect you?

Some questions to consider...

Does my employer have a COVID-19 Infectious Disease Preparedness Response Plan?

Has my union and JH&SC been consulted, helped in the development and does it agree with the plan?

Has the plan been effectively communicated with everyone in the workplace?







Does the plan deal with concerns from vulnerable, immunocompromised employees?

How does the plan affect me?

- What is my role?
- How do I comply?
- Is my supervisor competent to manage compliance with the plan?
- Is workplace management seriously implementing the plan?
- Are visitors, patients, contractors and customers properly assessed by the plan?

The Infectious Disease Preparedness Response Plan must take direction and guidance from federal, provincial, territorial, regional and local health agencies. It must also use sound hazard control principles, **based on the hierarchy of controls**. **Elimination and Substitution, Engineering Controls, Administrative Controls, and Personal Protective Equipment** must be examined in the correct sequence to protect workers from the hazards of the COVID-19 virus. **Since science on COVID19 is uncertain, we MUST follow "the precautionary principle" and err on the side of caution.**

ELIMINATION AND SUBSTITUTION

There are no specific treatments for coronaviruses, and there is no vaccine that protects against coronaviruses.

ENGINEERING CONTROLS

Ventilation - Exhaust and Make up Air - Filtration systems

Has the workplace ventilation system been maintained/checked?

When was it last checked or serviced?

Is there an HVAC preventative maintenance schedule?

By whom was it checked?

Is the HVAC report available and has it been shared with the JH&SC or worker representative?

Is the ventilation system working to design specification?

Can the ventilation system be improved in the current COVID -19 situation?

Are there outstanding open items or recommendations that have been scheduled and not been completed?

Isolation, Separation and High Touch Control

Has my work area been physically changed so I can maintain a 2m physical isolation distance from my co-workers?

Are hands free sensors or devices being used in potential high touch areas in restrooms, on doors, on garbage receptacles?

Are doors all left open or even removed when appropriate to eliminate surface touching?

Are upgraded sanitization protocols clearly communicated, managed and being adhered to?





Are high risk areas where COVID-19 patients are being treated physically isolated and separated from the rest of the facility with restricted access?

Are these areas negatively pressured to protect those outside of them?

Are these areas properly guarded, secured and labelled to prevent inadvertent access?

Have separate entrances and exits as well as triage areas in health care workplaces, for those with suspected COVID-19 related symptoms, been established?

Do separate rooms for donning and doffing PPE exist to prevent cross contamination?

ADMINISTRATIVE CONTROLS

Training

Has everyone in your workplace been trained to understand your employer's Infectious Disease Preparedness Response Plan and fully understand their roles?

What supervision, training or instruction has been given to visitors, contractors and customers?

Have workers been medically assessed (fit tested) and trained in the use of Personal Protective Equipment (PPE)?

Limiting Access and Physical Distancing

Have workers exhibiting COVID-19 symptoms been ordered to stay home or leave the workplace?

How will other workers in close proximity or in contact with those "ordered to leave the workplace" be informed and isolated as required?

Have workers who have returned from outside of Canada been self isolated for 14 days?

Are only essential personnel allowed to enter the facility? (No unnecessary visitors, customers, vendors or contractors on site)

Are essential personnel being pre-screened for COVID-19 symptoms, travel or family exposure?

Are as many employees as possible working from home?

Is teleworking and video conferencing being utilized whenever possible or practical?

Are the physical distancing rules of 2m being implemented and adhered to?

Are routine shift hand-off meetings limited to just particular people or done virtually?

Have shifts been spread out to maintain lower numbers of workers in the facility at the same time?

Have shifts remained with the same people each day to limit worker exposure?

Have work crews been rescheduled to work on different days or part of the week?

Can shift start/stop times, break times, and lunchtimes be staggered to minimize congregation in break areas and at time clocks?

Can the workplace be zoned to prohibit employees from wandering into zones where they do not need to be to perform their jobs?





Hygiene Promotion

Are resources, like posters, in the work environment promoting personal hygiene?

Are tissues, hand soap, alcohol-based hand rubs containing at least 60 percent alcohol, disinfectants, and disposable towels for workers to clean their work surfaces being supplied?

Is regular hand washing or using of alcohol-based hand rubs being promoted?

Are proper handwashing signs posted throughout the workplace?

Are upgraded environmental, sanitization, housekeeping and laundry protocols (where applicable) clearly communicated, managed and being adhered to?

Is there a clear line of communication between workers and management to address concerns with hygiene in the workplace?

PERSONAL PROTECTIVE EQUIPMENT - PPE

(Last in the hierarchy of controls and must not take the place of other prevention strategies)

Is there adequate PPE available? Is it the correct type of PPE?

Examples of PPE (when appropriate) include:

- gloves
- goggles
- face shields
- face masks
- respiratory protection
- gowns
- long sleeve aprons

Have employees been adequately trained and are they competent to use the PPE properly?

PPE specific to occupations or job tasks may change depending on geographic location,

updated risk assessments for workers, and information on PPE effectiveness in preventing

the spread of COVID-19.

All types of PPE must be:

- Selected based upon the hazard to the worker
- Properly fitted and periodically refitted, as applicable (respirators)
- Consistently and properly worn when required
- Regularly inspected, maintained, and replaced, as necessary
- Properly removed, cleaned, and stored or disposed of, as applicable, to avoid contamination of self, others, or the environment.





Surgical Masks vs N95 Respirators

The use of surgical-type masks does not provide adequate protection from viral exposure. Minimal protection is usually granted by a N95 respirator. All workers who are fit-tested with N95 respirators need to receive training on all aspects of the PPE (fit testing, putting on, wearing, removal, disposal, etc.) **It should be noted that the surgical masks are primarily designed to protect the environment from the wearer, whereas the respirators are supposed to protect the wearer from the environment**.

Higher Grades of Respiratory PPE

There are even more protective respirators than the N95 type. These more protective respirators include R/P95, N/R/P99, or N/R/P100 filtering facepiece respirators; an air-purifying elastomeric respirator with appropriate filters or cartridges; powered air purifying respirator (PAPR) with high-efficiency particulate arrestance (HEPA) filter; or supplied air respirator (SAR). Again, a proper risk assessment, fit testing and training would be necessary in order to use these types of higher grade respiratory PPE devices.

Some Tips on Donning and Doffing PPE

Gloves

https://www.cdc.gov/vhf/ebola/pdf/poster-how-to-remove-gloves.pdf

N95 Disposable Respirator

https://www.cdc.gov/niosh/docs/2010-133/pdfs/2010-133.pdf

General PPE

https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf

https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-doffing-ppe-poster.pdf

https://www.medline.com/content/group-pages.jsp?contentId=21100004

https://www.nebraskamed.com/sites/default/files/documents/covid-19/PPE_infographic.pdf

Point of Care Risk Assessment

https://nshomesupport.cupe.ca/files/2020/03/pic1.png

Role of the JH&SC and Worker Safety Representatives

The role of JH&SC s and worker representatives does not change during the COVID-19 pandemic. The role is vital to ensuring that workers continue to be able to exercise their rights in the workplace, including the right to know about hazards, the right to participate in workplace health and safety and the right to refuse unsafe work.

The role of a properly functioning Internal Responsibility System (IRS) during this crisis cannot be undermined by management. Critical Injuries, Workplace illnesses (ex. COVID-19), Fatalities, Work Refusals, Workplace Inspections, Meetings, Program Consultations, Training Recommendations, Chemical Safety Investigations, WHMIS 2015 compliance auditing and other normal activities must continue to be conducted, albeit taking into account proper COVID-19 precautions. In essence the JH&SC should be as busy as ever! The applicable Ministries of Labour have not stopped working and are still available to answer any questions that you may have regarding COVID-19 or any other workplace health and safety issues. This document can help in the guidance of worker safety representatives in COVID-19 daily activities.





The Right to Refuse Unsafe Work

Workers in some sectors (for example, health care, retail and transportation) have a greater likelihood of exposure to viruses and other disease-causing agents. Employers have a general duty to take every precaution reasonable in the circumstances to protect workers from hazards in their workplaces. As indicated throughout this document, employers should already have effective plans in place for regular day-to-day interactions. Employers should notify employees if they have been subject to a plausible transmission risk of COVID-19 in the workplace.

Under occupational health and safety legislation, most employees have the right to refuse to work or to do particular work at a workplace, if the worker believes that there is a dangerous condition in the workplace or that the work constitutes a danger to other workers health and safety. Workers may seek to exercise this right if they reasonably believe they may be endangered by COVID-19 in the workplace. If a worker refuses to work, the employer and worker health & safety representative should follow already established work refusal procedures as they would for any other issue. Included in this process is the prohibition of reprisal by the employer against the refusing worker.

There is nothing more important than your health and safety. There is no job so important that it can't be done safely. There is no job or job promotion, no paycheque or bonus that is worth your life or health!

Sources

https://www.cdc.gov/coronavirus/2019-ncov/hcp/checklist-n95-strategy.html

https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-business-response.html

https://www.osha.gov/Publications/OSHA3990.pdf

https://www.cdc.gov/coronavirus/2019-ncov/hcp/healthcare-supply-ppe.html

https://www.cdc.gov/niosh/topics/hierarchy/default.html

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https://www.independent.co.uk/news/health/coronavirus-nhs-ppe-equipment-shortage-infection-doctors-a9410436. html

https://www.ncbi.nlm.nih.gov/pubmed/16490606

http://www.health.gov.on.ca/en/pro/programs/publichealth/coronavirus/2019_covid_joint_statement.aspx

https://www.cdc.gov/hai/pdfs/ppe/PPE-Sequence.pdf

https://www.albertahealthservices.ca/assets/Infofor/hp/if-hp-ipc-doffing-ppe-poster.pdf

https://www.medline.com/content/group-pages.jsp?contentId=21100004

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https://nshomesupport.cupe.ca/files/2020/03/pic1.png

Directive #5 for Hospitals within the meaning of the Public Hospitals Act