

COVID-19 Safety Pla

Employers must develop a COVID-19 Safety Plan. To develop your plan, follow the six-step process described at [COVID-19 and returning to safe operation](#).

This planning tool will guide you through the six-step process. Each step has checklists with items you need to address before resuming operations. You may use this document, or another document that meets your needs, to document your COVID-19 Safety Plan.

WorkSafeBC will not be reviewing or approving the plans of individual employers, but in accordance with the order of the [Provincial Health Officer](#), this plan must be posted at the worksite.

Step 1: Assess the risks at your workplace

The virus that causes COVID-19 spreads in several ways. It can spread in droplets when a person coughs or sneezes. It can also spread if you touch a contaminated surface and then touch your face.

The risk of person-to-person transmission increases the closer you come to other people, the more time you spend near them, and the more people you come near.

The risk of surface transmission increases when many people contact the same surface and when those contacts happen over short periods of time.

Involve workers when assessing your workplace

Identify areas where there may be risks, either through close physical proximity or through contaminated surfaces. The closer together workers are and the longer they are close to each other, the greater the risk.

- We have involved frontline workers, supervisors, and the joint health and safety committee (or worker health and safety representative, if applicable).
- We have identified areas where people gather, such as break rooms, production lines, and meeting rooms.
- We have identified job tasks and processes where workers are close to one another or members of the public. This can occur in your workplace, in worker vehicles, or at other work locations (if your workers travel offsite as part of their jobs).
- We have identified the tools, machinery, and equipment that workers share while working.
- We have identified surfaces that people touch often, such as doorknobs, elevator buttons, and light switches.

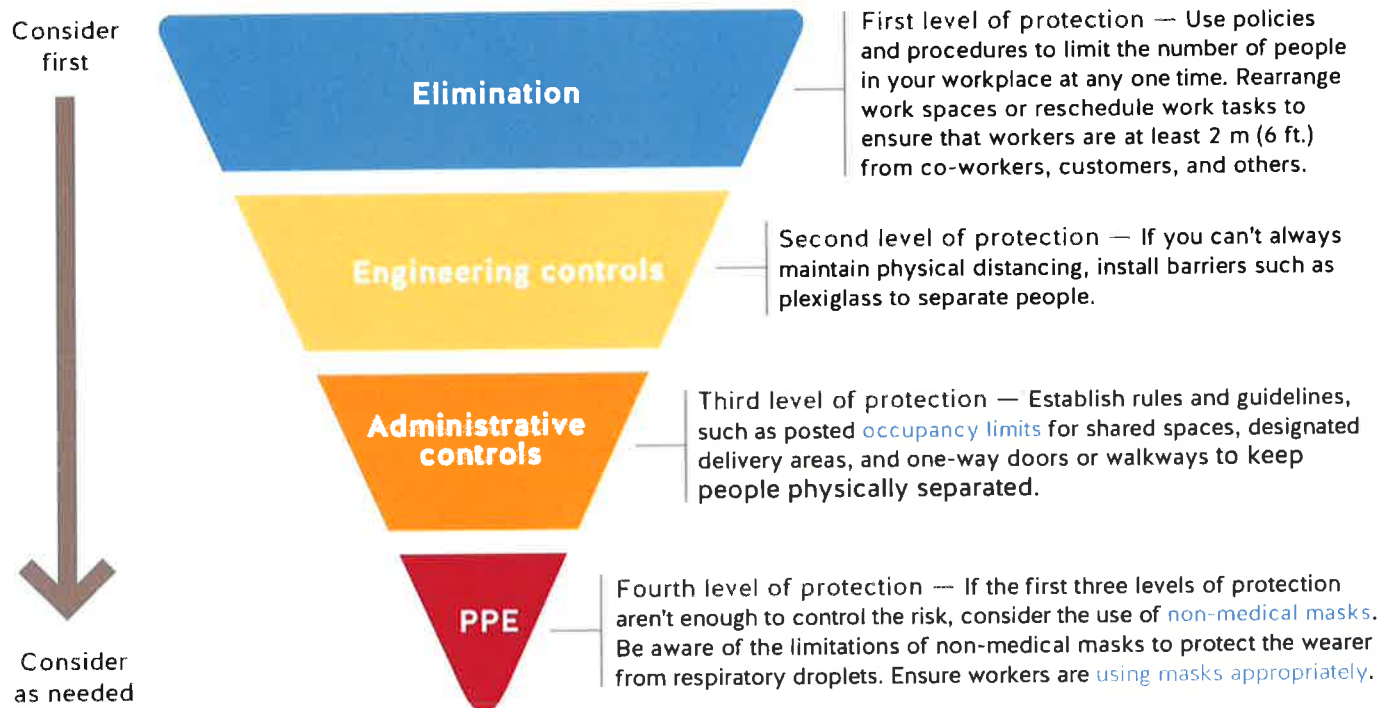
Step 2: Implement protocols to reduce the risks

Select and implement protocols to minimize the risks of transmission. Look to the following for information, input, and guidance:

- Review [industry-specific protocols](#) on worksafebc.com to determine whether any are relevant to your industry. Guidance for additional sectors will be posted as they become available. If protocols are developed specific to your sector, implement these to the extent that they are applicable to the risks at your workplace. You may need to identify and implement additional protocols if the posted protocols don't address all the risks to your workers.
- Frontline workers, supervisors, and the joint health and safety committee (or worker representative).
- [Orders, guidance, and notices](#) issued by the provincial health officer and relevant to your industry.
- Your health and safety association or other professional and industry associations.

Reduce the risk of person-to-person transmission

To reduce the risk of the virus spreading through droplets in the air, implement protocols to protect against your identified risks. Different protocols offer different levels of protection. Wherever possible, use the protocol that offers the highest level of protection. Consider controls from additional levels if the first level isn't practicable or does not completely control the risk. You might likely need to incorporate controls from various levels to address the risk at your workplace.



COVID-19 Safety Plan

First level protection (elimination): Limit the number of people at the workplace and ensure physical distance whenever possible

- We have established and posted an occupancy limit for our premises. Public Health has advised that the prohibition on gatherings of greater than 50 people refers to “one-time or episodic events” (weddings, public gatherings), and is therefore not intended to apply to workplaces. However, limiting the number of people in a workplace is an important way to ensure physical distancing is maintained. [Public Health has developed [guidance for the retail food and grocery store sector](#) that requires at least 5 square metres of unencumbered floor space per person (workers and customers). This allows for variation depending on the size of the facility, and may be a sensible approach for determining maximum capacity for employers from other sectors that do not have specific guidance on capacity from Public Health.]
- In order to reduce the number of people at the worksite, we have considered work-from-home arrangements, virtual meetings, rescheduling work tasks, and limiting the number of customers and visitors in the workplace.
- We have [established and posted occupancy limits](#) for common areas such as break rooms, meeting rooms, change rooms, washrooms, and elevators.
- We have implemented measures to keep workers and others at least 2 metres apart, wherever possible. Options include revising work schedules and reorganizing work tasks.

Measures in place

List your control measures for maintaining physical distance in your workplace, for example:

- Working offsite or remotely
- Changes to work schedules
- Changes to how tasks are done
- Occupancy limits for workers
- Limiting or prohibiting visitors
- Reducing the number of customers

If this information is in another document, identify that document here.

Second level protection (engineering): Barriers and partitions

- We have installed barriers where workers can't keep physically distant from co-workers, customers, or others.
- We have included barrier cleaning in our cleaning protocols.
- We have installed the barriers so they don't introduce other risks to workers (e.g., barriers installed inside a vehicle don't affect the safe operation of the vehicle).

Measures in place

Describe how barriers or partitions will be used in your workplace.
If this information is in another document, identify that document here.

Third level protection (administrative): Rules and guidelines

- We have identified rules and guidelines for how workers should conduct themselves.
- We have clearly communicated these rules and guidelines to workers through a combination of training and signage.

Measures in place

List the rules and guidelines that everyone in the workplace has to follow to reduce the risk of airborne transmission. This could include things like using one-way doors or walkways, using single-use (disposable) products, and wiping down equipment after use. Consider creating pods of workers who work together exclusively to minimize the risk of broad transmission throughout the workplace.

If this information is in another document, identify that document here.

COVID-19 Safety Plan

Fourth level protection: Using masks (optional measure in addition to other control measures)

- We have reviewed the information on [selecting and using masks](#) and [instructions on how to use a mask](#).
- We understand the limitations of masks to protect the wearer from respiratory droplets. We understand that masks should only be considered when other control measures cannot be implemented.
- We have trained workers in the proper use of masks.

Measures in place

Who will use masks?

What work tasks will require the use of masks?

How have workers been informed of the correct use of masks?

If this information is in another document, identify that document here.

COVID-19 Safety Plan

Reduce the risk of surface transmission through effective cleaning and hygiene practices

- We have reviewed the information on [cleaning and disinfecting](#) surfaces.
- Our workplace has enough handwashing facilities on site for all our workers. Handwashing locations are visible and easily accessed.
- We have policies that specify when workers must wash their hands and we have communicated good hygiene practices to workers. Frequent handwashing and good hygiene practices are essential to reduce the spread of the virus. [[Handwashing](#) and [Cover coughs and sneezes](#) posters are available at worksafebc.com.]
- We have implemented cleaning protocols for all common areas and surfaces — e.g., washrooms, tools, equipment, vehicle interiors, shared tables, desks, light switches, and door handles. This includes the frequency that these items must be cleaned (number of times per day) as well as the timing (before and after shift, after lunch, after use).
- Workers who are cleaning have adequate training and materials.
- We have removed unnecessary tools and equipment to simplify the cleaning process — e.g., coffee makers and shared utensils and plates

Cleaning protocols

Provide information about your cleaning plan. Specify who is responsible for cleaning, the cleaning schedule, and what the cleaning protocols will include (e.g., which surfaces, tools, equipment, and machines). If this information is in another document, identify that document here.

Step 3: Develop policies

Develop the necessary policies to manage your workplace, including policies around who can be at the workplace, how to address illness that arises at the workplace, and how workers can be kept safe in adjusted working conditions.

Our workplace policies ensure that workers and others showing symptoms of COVID-19 are prohibited from the workplace.

- Anyone who has had symptoms of COVID-19 in the last 10 days. Symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat, and new muscle aches or headache.
- Anyone directed by Public Health to self-isolate.
- Anyone who has arrived from outside of Canada or who has had contact with a confirmed COVID-19 case must [self-isolate for 14 days and monitor](#) for symptoms.
- Visitors are prohibited or limited in the workplace.
- First aid attendants have been provided [OFAA protocols](#) for use during the COVID-19 pandemic.
- We have a [working alone policy](#) in place (if needed).
- We have a [work from home policy](#) in place (if needed).
- Ensure workers have the training and strategies required to address the risk of violence that may arise as customers and members of the public adapt to restrictions or modifications to the workplace. Ensure an appropriate [violence prevention program](#) is in place.

Our policy addresses workers who may start to feel ill at work. It includes the following:

- Sick workers should report to first aid, even with mild symptoms.
- Sick workers should be asked to wash or sanitize their hands, provided with a mask, and isolated. Ask the worker to go straight home. [Consult the [BC COVID-19 Self-Assessment Tool](#), or call 811 for further guidance related to testing and self-isolation.]
- If the worker is severely ill (e.g., difficulty breathing, chest pain), call 911.
- Clean and disinfect any surfaces that the ill worker has come into contact with.

Step 4: Develop communication plans and training

You must ensure that everyone entering the workplace, including workers from other employers, knows how to keep themselves safe while at your workplace.

- We have a training plan to ensure everyone is trained in workplace policies and procedures.
- All workers have received the policies for staying home when sick.
- We have posted signage at the workplace, including occupancy limits and effective hygiene practices. [A customizable [occupancy limit poster](#) and [handwashing signage](#) are available on [worksafebc.com](#).]
- We have posted signage at the main entrance indicating who is restricted from entering the premises, including [visitors](#) and [workers](#) with symptoms.
- Supervisors have been trained on monitoring workers and the workplace to ensure policies and procedures are being followed.

Step 5: Monitor your workplace and update your plans as necessary

Things may change as your business operates. If you identify a new area of concern, or if it seems like something isn't working, take steps to update your policies and procedures. Involve workers in this process.

- We have a plan in place to monitor risks. We make changes to our policies and procedures as necessary.
- Workers know who to go to with health and safety concerns.
- When resolving safety issues, we will involve joint health and safety committees or worker health and safety representatives (or, in smaller workplaces, other workers).

Step 6: Assess and address risks from resuming operations

If your workplace has not been operating for a period of time during the COVID-19 pandemic, you may need to manage risks arising from restarting your business.

- We have a training plan for new staff.
- We have a training plan for staff taking on new roles or responsibilities.
- We have a training plan around changes to our business, such as new equipment, processes, or products.
- We have reviewed the start-up requirements for vehicles, equipment, and machinery that have been out of use.
- We have identified a safe process for clearing systems and lines of product that have been out of use.

Coronavirus Disease (COVID-19)

Guideline for Swimming Pools

Version 1
June 3, 2020

Developed by Regional Health Authorities,
Ministry of Health and the BC Centre for Disease Control



Key Principles Going Forward



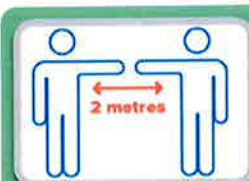
STAY HOME if you are SICK

Stay away from others if you are feeling ill, isolate at home, do not go to work.



PRATICE GOOD HYGIENE

Wash your hands often, avoid touching your face, cough/sneeze into your elbow or a tissue.



MAKE SPACE between PEOPLE

Maintain a distance of at least 2 metres from others and replace close contact greetings like handshakes, hugs or high fives with waves and smiles.



LEARN how to use PERSONAL PROTECTIVE EQUIPMENT as an ADDITIONAL control

Learn how to choose and use PPE correctly, know the limitations of PPE, and always have other controls in place.



MODIFY the ENVIRONMENT

Make your environment safer for interacting with others by reducing common touch surfaces, using non-porous barriers, or by changing room design.



INCREASE SANITATION

Disinfect common touch surfaces frequently using a chemical that will destroy the Coronavirus.



MANAGE INFORMATION

Stay informed, follow public health advice, keep records, and make sure information you communicate is clear, accurate and easy to find.

Guideline for Swimming Pools

Under [Phase 2 of British Columbia's Restart Plan](#), operation of swimming pools is allowed. However, the COVID-19 pandemic continues and in the absence of a vaccine, there is a continued need to reduce the risk of transmission through physical distancing, and ensuring essential hygienic practices and cleaning processes are followed.

Swimming and other water-related activities are excellent ways to get the physical activity needed for a healthy life. The use of swimming pools is considered a low risk activity as long as the pool is operated safely and is properly maintained. The biggest risk to swimmers and staff are the interactions in and around the pools, and steps can be taken to reduce these risks.

In all cases, it remains important for everyone to stay home if you are sick, to wash your hands often, to keep your distance, and to disinfect high touch surfaces often.

All [BC Pool Regulation](#) requirements remain unchanged and in place.

You will need to develop and implement a [COVID-19 Safety Plan](#), post a copy on your website (if you have one) and at your workplace so that it is readily available for review by anyone who may attend the site, including the public. A copy must also be available to Environmental Health Officers or WorkSafe BC Officers, upon request.

This document provides guidance for preventing transmission of COVID-19 to operators of swimming pools, and will support you in preparing your COVID-19 Safety Plan. It is based upon current knowledge and it should be understood that guidance is subject to change as new data becomes available and new developments arise with this new virus; furthermore, unique situations may require some discretion in adjusting these guidelines which are meant to be supportive, not prescriptive.

Pursuant to section 13 of the BC Pool Regulation, operators will also need to update their [Pool Safety Plan](#) to include the relevant COVID-19 considerations, as described in this guideline.

PART 1 of this guideline will provide general information about COVID-19 and highlight how different control measures can be more or less effective at preventing transmission of the virus.

PART 2 of this guideline is organized into a series of tip sheets:

- Employee Sickness
- Personal Hygiene
- Make Space Between People
- Personal Protective Equipment
- Modify the Environment
- Sanitation
- Managing Information
- Signage

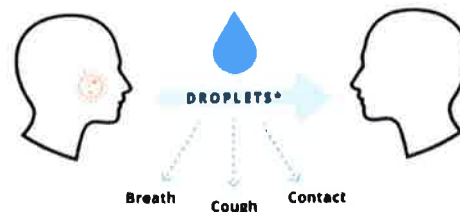
COVID-19 General Information

WHAT is COVID-19?

COVID-19 is a respiratory infection caused by a newly identified virus (SARS-CoV-2). The infection has symptoms similar to other respiratory illnesses, including the flu and common cold: cough, sneezing, fever, sore throat and difficulty breathing. Other symptoms can include fatigue, muscle aches, diarrhea, headache or lost sense of smell. While most people infected with COVID-19 experience only mild illness, severe illness can occur in some people, especially in those with weaker immune systems, the elderly and those with chronic medical conditions.

HOW COVID-19 Spreads

COVID-19 is spread through liquid droplets when an infected person coughs or sneezes. The virus in these droplets can enter the body directly through the eyes, nose or mouth of another person if they are in close contact with the person who coughed or sneezed. COVID-19 is not transmitted through viral particles floating in the air and is not something that can enter the body through the skin.



Resources:

- Video: [Transmission of the COVID-19 coronavirus](#)
- Video: [Cough & sneeze etiquette](#)

WHERE can I get more Information about COVID-19?

The province of British Columbia has created a phone service to provide non-medical information about COVID-19 which is available from 7:30 a.m. - 8 p.m. at 1-888-COVID19 (1-888-268-4319) or via text message at 604-630-0300.

More information on COVID-19 can also be found online:

- BC Centre for Disease Control
<http://www.bccdc.ca/health-info/diseases-conditions/covid-19>
- BC Provincial Health Officer – Orders, Notices, and Guidance
<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>
- WorkSafe BC – COVID-19 and the Workplace <https://www.worksafebc.com/en/about-us/news-events/announcements/2020/March/covid-19-and-the-workplace>

How to use this Guideline

This guideline contains suggested protocols for reducing the risks of Covid-19 transmission for public and commercial pools and hot tubs. Each facility must assess and understand their own risks when developing their COVID-19 Safety Plan, and then implement their protocols accordingly.

Understanding the Risk

The virus that causes COVID-19 spreads in several ways, including through droplets when a person coughs or sneezes, and from touching a contaminated surface before touching the face. Higher risk situations require adequate protocols to address the risk.

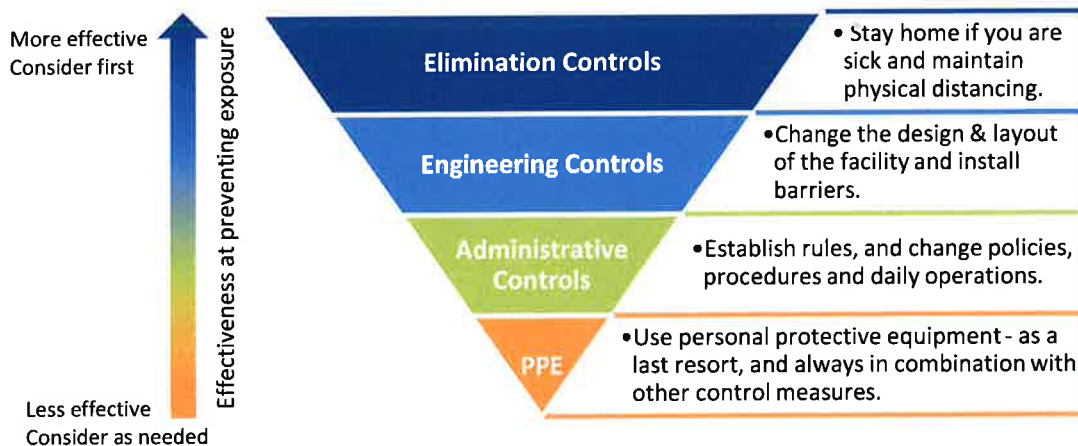
- The risk of person-to-person transmission can vary depending on the closer you come to other people, the amount of time you spend near them, and the number of people you come near. Physical distancing measures help mitigate this risk.
- The risk of surface transmission is increased when many people contact same surface, and when those contacts happen in short intervals of time. Effective cleaning and hygiene practices help mitigate this risk.

Selecting Protocols for your Pool

When selecting the appropriate combination of protocols for your workplace, it may be helpful to understand the relative impacts each can have on controlling the risk of transmission in your workplace. Some controls will be more difficult to implement but provide a greater level of protection, while other controls will be easier to implement but provide less overall protection.

Levels of Protection

Control measures throughout this document will be divided based on this model:



Elimination and engineering controls are designed to prevent people from coming into contact with an infectious person or contaminated surface in the first place and should be considered first. Following this model normally leads to the implementation of inherently safer systems, where the risk of illness exposure and/or transmission can be substantially reduced.

Important Points to Remember

There is no evidence that COVID-19 can be spread to humans through the pool water. Proper operation, maintenance, and disinfection of pools and hot tubs with chlorine or bromine, should inactivate the virus that causes COVID-19. Nevertheless, appropriate care must still be taken both in and outside the pool, to protect yourself and others.

Only operate your Pool if Adequate Controls can be maintained

Facilities should designate a person responsible for the pool during all operational hours. If staffing or equipment shortages create an environment where necessary control measures for your facility cannot be reasonably achieved, operators should consider closing the pool. Reliable and consistent oversight on the implementation of new policies and procedures must be in place to prevent the transmission of COVID-19.

Employees need Training

Employees and lifeguards must be trained on all new COVID-19 policies and procedures:

- Training sessions should be done in small groups or online if possible.
- Trainers should ensure all relevant guidance provided by [WorkSafe BC](#) and other associations (e.g. the [Royal Lifesaving Society of Canada](#)) is captured in the training.

Close Supervision and Emergency Situations

Physical distancing in an aquatic environment is not relevant under the following circumstances:

- When providing close supervision of children for whom one is responsible.
- When providing assistance to a person in distress.
- When providing first aid, or carrying out lifesaving activities.
- When providing assistance to those with disabilities.

Use Caution when applying Physical Distancing Markings

Physical distancing measures must not undermine important safety features:

- Markings on pool decks must not create a slipping hazard (e.g. no slippery tape).
- Markings on pool decks must not obstruct safety signs (e.g. depth marks, no diving).
- Care should be used when applying “2 metre” markings so as not to confuse physical distancing messaging with pool water depth.

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Guideline for Swimming Pools



Tip Sheet – Employee Sickness

Goal: To prevent sick employees from spreading the virus to the public by ensuring employees stay home if they are ill.

Elimination Controls

- Tell your employees if they are sick with any symptoms consistent with cold, influenza or COVID-19, even if symptoms are mild, they must remain at home, and contact their family physician/primary care provider or Health Link BC at 8-1-1.

Administrative Controls

- Thoughtfully plan your sick leave policy to create an environment where employees feel supported in staying home when they are sick, and communicate the policy to all staff.
- Have operational contingency plans in cases where employees must remain home when sick (e.g. modifying systems to operate with fewer employees).
- If while at work, an employee starts experiencing symptoms of respiratory illness consistent with COVID-19, even if symptoms are mild, ask the employee to don a mask, to leave work immediately, to go straight home, and to contact their a family physician/primary care provider or Health Link BC at 8-1-1 for further guidance.
- Ensure that objects and surfaces touched by sick employees who have gone home are cleaned and disinfected before being used by others.
- Sick employees should use the BC COVID-19 self-assessment tool.
- Anyone with symptoms can now be assessed and receive a COVID-19 test.
- Testing is not recommended for people who do not have symptoms.
- If an employee has a COVID-19 diagnosis, the local public health department will identify any co-workers who may have been exposed to the sick employee.
- The employer and employees should be reassured that if they haven't been contacted by public health then there is no issue or concern that was identified by public health.

Resources:

- [BC COVID-19 Self-Assessment Tool](#)

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Guideline for Swimming Pools



Tip Sheet – Personal Hygiene

Goal: To limit spread of the virus by promoting good personal hygiene including hand washing, hand sanitizing, and cough/sneeze etiquette.

Elimination Controls

- Replace physical greetings such as handshakes and hugs with non-contact greetings.

Engineering Controls

- Provide a supply of alcohol-based hand sanitizer at the entrance to the facility, pool enclosure and/or front check-in desk.
- Washrooms and showers must have liquid soap, paper towels and warm running water at all times.

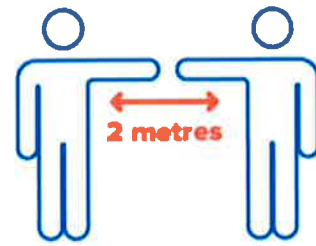
Administrative Controls

- Employees must wash their hands with soap and water at the start and end of their shift, before eating, after returning from a break, and when hands are visibly soiled.
- Hand sanitizing using an alcohol-based hand sanitizer should also be practiced frequently throughout the day, especially after touching people or their belongings.
- Employees must practice good hygiene throughout their shift including proper hand hygiene and cough/sneeze etiquette.
- Employees must avoid touching their face without washing hands first.
- There should be no sharing of cigarettes or vaping equipment.
- Educate employees about the virus so they know how to minimize its spread.
- Consider providing electronic COVID-19 resources to all employees.

Resources:

- Poster: [BCCDC Handwashing](#)
- Video: [Hand Washing](#)
- Video: [Cough and Sneeze Etiquette](#)
- Link: [BCCDC Vaping, Smoking and COVID-19](#)

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Guideline for Swimming Pools

Tip Sheet – Make Space between People

Goal: To increase space between people and avoid unnecessary contact to eliminate transmission of the virus through respiratory droplets.

Elimination Controls

- Reduce maximum bather loads to minimize the number of patrons in the pool at one time.
- A 2 metre “bubble” of space should be maintained around each patron using the pool or hot tub, unless they are from the same party.
- For large hot tubs, consider placing marks around the hot tub edge at 2 metre increments.
- Hot tubs with a diameter less than 2 metres must only be used by one person or family unit at a time.
- Mark 2 metre increments where crowds normally form (e.g. line-up at diving board/slides).
- Consider using one-way markers in deck spaces so people do not have to pass each other.
- Auxiliary areas where physical distancing is difficult or impossible should remain closed (e.g. saunas, steam rooms, exercise areas).
- Consider closing spectator areas unless seating can be arranged to maintain a minimum of 2 metres between people.
- If using pool deck furniture, place markers on the deck at 2 metre increments to indicate chair positioning, ensuring none are placed within the four-foot perimeter of the pool.
- Aquatic programs capable of consistently maintaining 2 metres of separation may be possible, at the discretion of the program manager.
- Length swimming may be allowed where a minimum 2 metre spacing can be consistently achieved among the lane occupants (or a maximum of 7 people per 25 m lane).
- Provide 2 metre separation between participants in fitness classes such as water aerobics.
- Swimming lessons which involve physical contact between the instructor and students (or between students) should be discouraged.

Resources:

- Video: [Why do we need to socially distance?](#)

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Guideline for Swimming Pools

Tip Sheet – Personal Protective Equipment

Goal: To understand the limitations of personal protective equipment and to ensure that when used, PPE is selected and used appropriately.

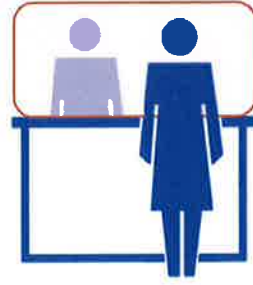
Personal Protective Equipment

- Personal protective equipment (mask, face shield, gloves & goggles) for employees conducting regular pool maintenance duties are not mandatory unless normally required for safety reasons (e.g. when handling pool chemicals).
- The use of non-medical masks may help prevent the risk of transmission from the wearer.
- Employees who choose to wear a non-medical mask must be aware of the following:
 - Masks can become contaminated on the outside when touched by hands so employees should avoid touching or adjusting them often.
 - Masks that become wet, soiled or damaged are less effective and must be replaced immediately.
 - Masks must be put on and taken off correctly, including not touching the front of the mask, and washing hands.
 - Cloth masks must be washed every day using the warmest water setting, and stored in a clean dry place to prevent contamination.
 - Never share masks with others.

Resources:

- WorkSafe BC: [Selecting and Using Masks](#)
- World Health Organization: [How to Put on, Use, and Take off a Mask](#)

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Guideline for Swimming Pools

Tip Sheet – Modify the Environment

Goal: Change the environment to reduce common touch points and make interacting with others safer.

Engineering Controls

Front Desks or Lobbies

- Install shields (e.g. plexiglass) at front desks and in lobbies to protect administrative staff when interacting with patrons and collecting payments.
- Wherever possible, install cashless payment methods at transaction counters.
- Increase floor space by removing unnecessary furniture and decorative items.

Changing Rooms

- Consider limiting use of changing room lockers to maintain 2 metres between in-use lockers; disable or remove locks from the nullified lockers.
- Consider assigning lockers to assist in keeping track of when they have been used and require cleaning.
- Use marker dots on the changing room benches to indicate 2 metre spacing for patrons to change.
- Equip the site with additional cleaning supplies (spray sanitizer and paper towels) so patrons can wipe down surfaces at their own discretion.
- If applicable, provide guests with single-use personal items (e.g. soap, shampoo).

On the Pool Deck

- Remove shared equipment such as pool toys.
- Organize moveable equipment where possible to create more open space,
- Remove unnecessary decorative items or furniture from the pool deck.

IMPORTANT:

Propping entry and changing room doors open is not recommended for pools because many doors and gates are critical for safety and to secure the pool enclosure, or for reasons of patron privacy (e.g. changing rooms).

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Tip Sheet - Sanitation

Goal: Increase cleaning and disinfection of common high touch points to prevent COVID-19 from spreading through contaminated surfaces.

Engineering Controls

- Consider having separate cleaning supplies for different areas of the facility.
- Provide multiple plastic lined waste containers to dispose of used tissues, wipes, gloves, and other cleaning materials.

Administrative Controls

- Increase the frequency of cleaning and disinfection of high-touch areas (door handles, faucets, bathrooms, handrails, chairs and tables in pool viewing areas).
- Create a checklist of all high-touch surfaces that must be cleaned, determine the frequency of cleaning and disinfection based on your facility's needs.
- Record when cleaning and disinfection has occurred.
- When cleaning bathrooms and changing rooms, if possible, avoid production of aerosols (e.g. spraying with hose or power-washer). Instead, use a mop or brush.
- Lockers and cubbies used by pool patrons to store personal belongings should be cleaned and disinfected between uses (consider providing wipes for this purpose).
- Towels provided for public use should be laundered on the hottest possible setting.

SELECTION and USE of DISINFECTANTS in an AQUATIC ENVIRONMENT

- Clean dirty surfaces with soap and water before disinfecting.
- Specialized disinfection products are not necessary, use regular disinfecting solutions found in your pool safety plan; chlorine-based products are recommended, avoid using quaternary ammonium as it can create chloramines.
- Follow manufacturer's instructions when using disinfectants.
- Make sure any person required to clean has received the appropriate training.

Resources:

- [Health Canada approved disinfectants for COVID-19](#)

- [BCCDC: Information on Cleaning and Disinfection](#)

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Tip Sheet – Managing Information

GOAL: To stay informed, follow public health advice, keep records, and make sure information you share is clear, accurate and easy to find.

Elimination Controls

- Public pools should keep a sign-in/sign-out sheet at the front desk so staff can track the number of patrons in the facility at one time.
- Commercial/strata pools should keep a sign-in/sign-out sheet at their entrances stating the maximum number of people allowed in the pool enclosure, so patrons can self-regulate.
- Commercial pools operated in conjunction with condos could provide sign-up sheets so members of the same household can book a private time slot to access the facilities.

Administrative Controls

- Have team members or a manager keep daily records of the people who worked together and retain these records for at least 30 days.
- Maintain up-to-date and consistent messaging on websites, in social media, emails, press releases, and during conversations with customers to ensure all details are aligned, timely and accurate.
- Encourage team members to provide regular feedback on any issues with COVID-19 prevention measures. Consider providing a means for employees to do this anonymously.

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Tip Sheet - Signage



Goal: To use signs in employee and public spaces to communicate important information about COVID-19 in a way that is clear and easy to understand.

Engineering Controls

- Place signs at entrances telling anyone entering not to enter if they are feeling ill.
- Post physical distancing signs in common areas.
- Post hand washing signs in washrooms and changing rooms.
- Post signage indicating the new reduced bather load(s) where applicable.
- Post additional pool rules signs:
 - Do not use the pool if you are sick or feel unwell.
 - Everyone needs to wash their hands with liquid soap and paper towel when entering the pool area. If liquid soap and paper towel are not available, use alcohol-based hand sanitizer that contains at least 60% alcohol.
 - Shower before and after using the pool.
 - Do not spit or blow your nose into the water.
 - Practice physical distancing by keeping 2 metres from one another.

TIPS for EFFECTIVE SIGNAGE:

- Communicate information in multiple languages and use diagrams or pictures.
- Ensure the font size on signage is large enough for everyone to read from a distance (i.e. if the person was standing 2 metres away from the sign).
- Put posters in plastic sleeves to protect them from water damage in wet areas or outside.
- Place important signage in conspicuous areas and away from other posted information so it is clearly visible (avoid posting signs by to product advertisements, coupon boards etc.).

Resources:

- Poster: [BCCDC Do Not Enter if Sick](#)
- Poster: [BCCDC Handwashing](#)
- Poster: [BCCDC Physical Distancing](#)
- Link: [Translated training materials and signage](#)

Guidance and Consideration for Children's Day Camps during COVID-19 Pandemic



Prepared by BC Recreation and Parks Association

June 2020



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INTRODUCTION

The BC Recreation and Parks Association's (BCRPA) members operate more than 500 indoor and outdoor facilities in every community of our province, generating over 80 million visits in a typical year.

Municipal summer day camps service hundreds of thousands of children each year, helping to support working families and providing safe, informative and fun activities for children throughout the summer months. BCRPA's position is that these day camps are essential to active, healthy and connected children and families. which is so desperately needed during these turbulent times.

Recognizing that this is a starting point, BCRPA will continue to provide opportunities across the province to collaborate through resource and best practices sharing, day camp staff onboarding training and by supporting the connection of our members.

GOALS OF THIS DOCUMENT

- To provide information, tools and considerations for local day camp decision-makers regarding safe operations that will limit transmission of COVID-19 within camp settings.
- To communicate a common approach that can be applied to the sector while meeting the broader guidelines and directives as set out by the BC Provincial Health Officer (PHO).
- To provide a template for those developing procedure manuals for their day camps.

PUBLIC HEALTH CONSIDERATIONS

BCRPA has kept informed of the Provincial Health Officer's (PHO) Orders, notices and guidance, recognizing that their responsibility is to monitor the health of the population across the province, while working with the BC Centre for Disease Control, and the provincial Medical Health Officers. During the COVID-19 pandemic, the PHO has established eight principles for preventing the transmission of COVID-19. These are:

1. Staying informed, being prepared and following public health advice;
2. Practising good hygiene – hand hygiene, avoid touching your face and respiratory etiquette;
3. Staying at home and away from others if you are feeling ill – with no exceptions – whether for school, work or socializing;
4. Maintaining physical distancing outside the household, e.g., no handshakes or hugs, keeping your number of contacts low and keeping a safe distance;
5. Making necessary contacts safer with appropriate controls, e.g., redesigning spaces;
6. Increasing cleaning of frequently touched surfaces at home and work;

7. Considering the use of non-medical masks in situations where physical distancing cannot be maintained, such as on transit or while shopping; and,
8. Continuing to minimize non-essential personal travel.¹

These principles have been reinforced in the Province’s BC’s Restart Plan, May 6², with the following chart:

Five Principles For Every Situation

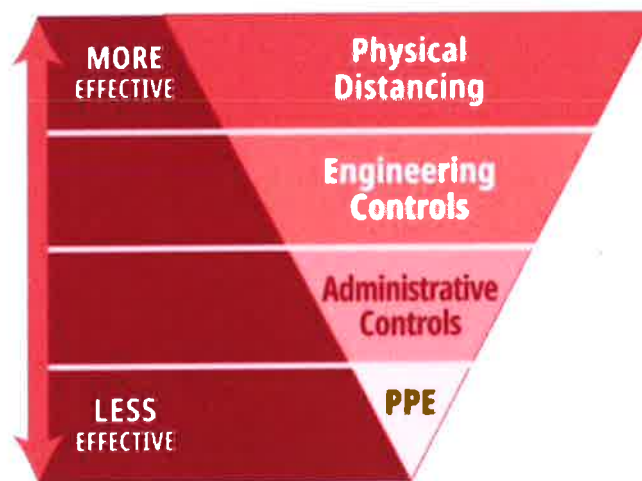
Personal Hygiene:	Stay Home if You Are Sick:	Environmental Hygiene:	Safe Social Interactions:	Physical Modifications:
<ul style="list-style-type: none"> Frequent handwashing Cough into your sleeve Wear a non-medical mask No handshaking 	<ul style="list-style-type: none"> Routine daily screening Anyone with any symptoms must stay away from others Returning travellers must self-isolate 	<ul style="list-style-type: none"> More frequent cleaning Enhance surface sanitation in high touch areas Touch-less technology 	<ul style="list-style-type: none"> Meet with small numbers of people Maintain distance between you and people Size of room: the bigger the better Outdoor over indoor 	<ul style="list-style-type: none"> Spacing within rooms or in transit Room design Plexiglass barriers Movement of people within spaces

The Restart Plan also includes the hierarchy of controls for COVID-19 which are fundamental to the information the recreation sector needs to restart operations.

Hierarchy of Controls For COVID-19

The hierarchy of controls is a framework for reducing transmission hazards. The most effective controls are at the top of the pyramid.

Source: Koehler, K, Rule A. Can a mask protect me? Putting homemade masks in the hierarchy of controls [Internet] 2020 April 2. Johns Hopkins Education and Research Center for Occupational Safety and Health.



¹ https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/gdx/bcs_restart_plan_web.pdf

² <https://www.energeticcity.ca/wp-content/uploads/2020/05/BC-Restart-Plan.pdf>

This document provides information and considerations for the day camp sector to support compliance with these principles and focuses on three main areas for both children and their families as well as staff.

1. Processes to restart safely;
2. Measures to keep people safe and avoid further outbreaks;
3. Guidance in the event that a case or an outbreak should occur.

To address these three considerations, strategies are provided for physical distancing controls, hand hygiene provisions, and touch point sanitization.

COVID-19: OVERVIEW

It is important for all recreation staff to know the following:

- Coronavirus is transmitted via larger liquid droplets when a person coughs or sneezes, but also potentially when they are talking in very close proximity to another person. The virus in these droplets then can enter the body of another person when that person breathes in the droplets. Also, droplet contact with mucous membranes in the eyes, nose or mouth via contact with contaminated hands or objects can also introduce the virus into the body.

This requires you to be in close contact – less than the physical distancing of 2 meters. This is referred to as ‘droplet’ transmission and is believed to be the primary way COVID-19 is transmitted.

- In addition, droplet transmission is much more likely when in close contact in an indoor setting.
- COVID-19 may also be transmitted through droplets in the environment if someone touches the contaminated area then touches their face or eyes without cleaning their hands. This speaks to the importance of regular hand cleaning and also the cleaning and disinfection of high touch areas in the environment.
- Thus far in the pandemic, COVID-19 has a very low infection rate in children; they seem to be at lower risk of developing symptoms.

COVID-19 Symptoms could include:

- Fever
- New cough
- Shortness of breath
- Sore throat
- Nasal congestion
- Headache
- Runny nose
- Diarrhea
- General feeling of being unwell

As understanding of the virus increases, the symptoms may periodically be updated. For current information, refer to the BCCDC website: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/symptoms>

Your risk of severe disease may be higher if you have a weakened immune system or underlying health conditions. This may be the case for:

- older people
- obese individuals
- people with chronic disease (e.g., diabetes, cancer, heart, renal or chronic lung disease)
- Some children

Actions to Protect your Health

- stay at home when sick, and remind parents that they should be monitoring their children's health and keeping children who are unwell at home
- washing your hands often with soap and water, including before meals, after using the bathroom, and when hands are visibly dirty
- sanitizing hands regularly throughout the day with alcohol-based hand sanitizer
- sneezing and cough into your sleeve
- avoid touching your eyes, nose or face
- avoid contact with people who are sick
- if traveling outside of Canada, stay home for 14 days after returning to Canada, and remind parents to do so as well.

CONSIDERATIONS FOR DAY CAMP STAFF

Procedures

All organizations intending to run summer day camps in 2020 must have procedures in place to conduct daily wellness checks, implement cleaning and disinfecting practices, and exclude children, parents and staff who are sick.

In addition to this document, please refer to BCRPA's [Guideline for Restarting Operations](#), and resources from the [BC Centre for Disease Control](#) (including COVID-19 Public Health Guidance for Child Care Settings) and WorkSafeBC (including <https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation/child-care>) for information in developing your procedures.

According to Provincial Government's [COVID-19 Public Health Guidance for K-12 School Settings](#), *"physical distancing is challenging in a K-12 school setting, particularly with younger students. As such, it is reasonable to establish different expectations for varying age levels and activities."*

The following considerations and procedures should be implemented where possible for day camp settings:

- Clearly communicate with parents and caregivers that they must assess their child daily for symptoms of common cold, influenza, COVID-19, or other infectious respiratory disease before sending them to camp. Alternatively, conduct daily checks at drop-off each morning by asking parents and caregivers to confirm their child(ren) do not have the aforementioned symptoms.
- Staff must assess themselves for symptoms of common cold, influenza or COVID-19 prior to attending camp.
- Clear procedure for participants and staff who have the symptoms of a cold, flu, or COVID-19. Those with COVID-19 symptoms should contact 811 or the call centre to inquire about testing.
- Avoid close greetings and regularly remind campers to keep "hands to yourself"
- Reduce the ratio of children to staff
- A staff person not overseeing a group of children can help to support sign-in and sign-out procedures to help maintain physical distancing in the reception area that may become choke point.
- A staff person available should a child feel unwell and need to be separated from the group until their parents arrive
- Outdoor programming wherever possible
- Each staff member to have access to tissues for children who may be sneezing or coughing and hand sanitizer.
- Stagger pick up and drop off times
- Encourage appropriate hand hygiene practices

Physical Distancing

Physical distancing involves taking steps to limit the number of people you come into close contact with (i.e. within 2 meters of another person) outside of your household. This is recommended to limit the spread of COVID-19 in the community.

Understandably, physical distancing is challenging in a childcare setting. At the same time, it is important that we do what we can to try to assist children. Use ideas that work for your setting like programming

for outside more often than inside, and staggering snack and lunch time so you can accommodate smaller groups with more space, etc.

Other steps that can be taken to support physical distancing may include:

- Provide activities that don't require physical interaction;
- Supervise smaller groups of children;
- Offer activities in an outdoor environment;
- When indoors, host activities in a sufficiently large space for the size of the group, provide separated work and play areas for each child;
- Provide access to hand hygiene stations.

BCRPA has created a series of webinars to support camp leaders with ideas for activities to keep children engaged and having fun while maintaining physical distance and not sharing equipment. There can be found at: <https://elearn.bcrpa.bc.ca/>

For more information about physical distancing, please visit: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/common-questions>, and <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/childcare-schools>

DAY CAMP OPERATIONS

Plain language text and picture signage is suggested to help everyone adhere to the following guidelines.

If at any time children have any symptoms, please request that the parent/caregiver take their child home and seek medical advice as necessary.

Upon arrival to the camp:

Greeting families and participants

- When congestion may be of concern, have a staff person who is not leading a group greet summer day camp children and parents with guidance on keeping a 2-metre distance (floor markings may also be helpful) while waiting their turn to register. If the camp is located indoors this should be done at the doors of the facility so that only camp leaders and participants are permitted indoors.
- Families should approach the staff person one by one, maintaining physical distance (two metres) from other families and from the staff person on duty.
- Where possible, sign-in and sign-out should be a verbal interaction to limit close physical contact among parents/caregivers and staff.

- It is suggested that families be provided a time range for drop off and pick up so that everyone is not arriving at the same time (i.e. 9-9:30am drop off, or surnames from A-M arrive at 9am and those with N-Z arrive at 9:15am).

Daily Screening

- Parent/caregiver should be asked by staff if they or their child/ren have any COVID-19 symptoms.
- Responses are recorded on sign-in sheet.
- Parent/caregiver says goodbye.
- OUTDOORS: Staff can assist child/ren with finding their camp leader who will have a designated area for their participants and a designated area for their backpacks with their lunches (shaded area).
- INDOORS: Staff can assist child/ren with placing their belongings in a designated area.
- INDOORS & OUTDOORS: Offer children frequent hand hygiene options; they should wash their hands at the hand washing station at the beginning of the day, after using the washroom, and prior to eating. Hand sanitizing should occur regularly throughout the day.

Daily Activities

- Attendance should be taken each day including any parents or caregivers who remain on site for any length of time. This will help with contact tracing should the need arise.
- Staff should consider carrying masks and gloves with them should they encounter situations where close contact is necessary (i.e. injury, etc.).
- BCRPA has professional development webinars for staff on activities that can be run while maintaining a 2 meter distance. See <https://elearn.bcrpa.bc.ca/>

WHEN TO STAY HOME

If any staff or children are sick, stay home.

It is common for children and staff to show other respiratory symptoms that are similar to COVID-19 and this is the reason that they would normally be asked to stay at home when they have a new cough, cold, or a fever. In the case of symptoms appearing, advise parents to call 811 and arrange for testing.

The most common symptoms of COVID-19 are provided by the BCCDC <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/about-covid-19/symptoms>

If a staff person starts showing symptoms of what could be a cold, influenza or COVID-19:

- An additional staff person must take over the duties immediately, and staff must be available to cover the remainder of the camp.
- They should go home right away and self-isolate for a minimum of 10 days.
- The space should be thoroughly cleaned and disinfected once the (sick) staff person has left the camp.

NOTE: Provincial health advice is to self-isolate for 10 days after first symptoms present themselves. If staff or campers have been notified by Public Health that they have been in contact with anyone who has tested positive, they should follow direction of Public Health staff and self-isolate until they have been cleared by Public Health, typically after 14 days.

ILLNESS PROTOCOL

If a child or staff member develops symptoms while at the program, they should be isolated away from the rest of the children and the parent or caregiver should be notified immediately to come and pick up the child.

If a child requires close contact and care, staff can continue to care for the child until the parent or caregiver is able to pick them up. Staff should wear a mask and eye protection during all interactions with the child and should avoid contact with the child's respiratory secretions. Staff should perform hand hygiene (washing or sanitizing their hands) before donning a mask, before and after removing the mask, and before and after touching any items used by the child.

Consideration: Staff may wish to have a change of clothes available should they have any concerns that the virus transferred onto their clothing while caring for the sick child before returning to the other campers.

Items used by the child while isolated should be cleaned and disinfected after the child has been picked up.

If a child or staff member tests positive, public health will contact and instruct families or staff as necessary. Camps may be asked to participate with and facilitate Public Health Officials in identifying all contacts; public health will determine at-risk contacts and reach out to them regarding self-isolation. Camps can contact their Public Health Authority for advice on communications and to determine if there is a risk to that individual or others at camp; public health may work with the camp activities operators to notify those at risk. Mass communications by the camp, or messaging to potential contacts, should be discussed with public health. Camps should also have a policy in place regarding decisions on the need and breadth of closing the camp should an outbreak occur.

IMPORTANCE OF HAND HYGIENE

Proper handwashing remains the most important strategy to stay healthy. Wash hands with soap and water often – for at least 20 seconds. Where possible wash hands when arriving at camp and when leaving. Use hand sanitizer when soap and water are not available. Handwashing practices and procedures should include:

- Posting proper handwashing posters throughout the camp setting.
- Having hand sanitizers in all rooms and in all entrance ways. If possible, a hand sink (with soap and paper towels) at an entrance way is an asset.
- Having tissues readily available for nose blowing as well as a plastic-lined garbage container to dispose of them.
- Requiring all staff and participants to wash hands properly upon arrival to camp and keep hands sanitized throughout the day.

Six steps to properly wash hands are:

- 1) Wet hands with warm running water.
- 2) Apply a small amount of liquid soap.
- 3) Rub hands together for at least 20 seconds (sing ABC's). Rub palms, backs of hands, between fingers and under finger nails and create a lather.
- 4) Rinse off all soap with running water.
- 5) Dry hands with a clean, disposable towel.
- 6) Discard the used towel in the waste container.

Staff and children should always wash their hands:

- 1) When they arrive at camp and before they go home.
- 2) Before eating and drinking.
- 3) After using the toilet.
- 4) After playing outside or handling pets.
- 5) After sneezing or coughing into hands.
- 6) Whenever hands are visibly dirty or have been touching surfaces touched by others.

Please also ensure to:

- Cough or sneeze into a sleeve/elbow.
- Be careful about touching objects and then touching faces (especially eyes, nose and mouth). Wash your hands prior to touching your face.

CLEANING AND DISINFECTING

COVID-19 spreads by respiratory droplets of an infected person to others with whom they have close contact such as people who live in the same household or provide care. It can survive for varying lengths of time on different surfaces, and decreases with the passage of time; there is a very low risk of transmission hours or days after contamination. The virus can be killed by cleaning and disinfection. The following measures should be taken to reduce the risk of transmission of respiratory illnesses, including COVID-19.

What is helpful to know:

- 1) Commonly used cleaners and disinfectants are effective against COVID-19. Use only disinfectants that have a Drug Identification Number (DIN). A DIN is an 8-digit number given by Health Canada that confirms it is approved for use in Canada.
- 2) Frequently touched surfaces are most likely to be contaminated.
- 3) Check the expiry date of products you use and always follow manufacturer's instructions.
- 4) Playgrounds are not expected to be disinfected. The provincial statement on playgrounds in [Public Health Guidance for K-12 School Settings](#) and state: "Reassure children and parents that playgrounds are a safe environment, and encourage appropriate hand hygiene practices before, during, and after outdoor play."

Cleaning Products: the difference between cleaners and disinfectants

1) Cleaners:

- Break down grease and remove organic material from the surface.
- Are used separately before using disinfectants.
- Can be purchased with cleaner and disinfectant combined in a single product.

2) Disinfectants:

- Have chemicals that kill most germs.
- Are applied after the surfaces have been cleaned.
- Have a drug identification number (DIN).

3) Disinfectant Wipes:

- Have combined cleaners and disinfectants in one solution.
- May quickly dry out, if not stored properly in their air tight container, due to their fast drying properties. Should be discarded if they become dry.
- Are not recommended for heavily soiled surfaces.

Preparing cleaning and disinfectant products for use:

- Where possible, use a pre-mixed solution that contains both a detergent for cleaning and a disinfectant.
- Wear any other personal protective equipment recommended by the manufacturer.

For further information on cleaning and disinfecting please view the webinar by BCRPA and RFABC:

<https://elearn.bcrpa.bc.ca/#CLEAN>

Things to consider:

- Outdoor camps will have fewer touch points in general.
- Clean and disinfect high-touch surfaces twice daily as recommended in the [Public Health Guidance for K-12 School Settings](#), such as worktops, chairs, tables, light switches, door knobs and frames, cabinet handles, phones, shelves and equipment.
- Ensure the camp is well-stocked with hand washing supplies at all times (e.g. soap, disposable towels, a minimum of 60% alcohol-based hand sanitizer, etc.).
- Increase the frequency in hand cleaning for all staff and participants, before and after touching equipment, using the washrooms and eating or drinking.
- Use water, household detergents and common disinfectant products as this is sufficient for cleaning and disinfection.

ACTIVITY PACKS

If the camp will be using supplies for crafts, each child should have their own activity pack to keep at camp. Each activity pack should be stored by camp leaders somewhere. At the end of the week those items that can't be disinfected can go home with the child so there is a new kit for the following week with new children.

FOOD AND MEALTIMES

Parents and caregivers are solely responsible for bringing all of their child/ren's food to camp, including water for the duration of camp. Parents and caregivers should be encouraged to bring thermos

containers and/or insulated lunch bags all of which will be kept in children's backpacks until lunch and/or snack times.

Camp leaders should double check with the parents and caregivers when they are dropping off their children that they have sufficient water and food for the day.

The following food practices should be followed consistently:

- Wash hands thoroughly before and after eating.
- Do not have communal meals/snacks- food must not be shared.
- Use individual plates, cutlery and serving utensils only (if applicable).
- Do not touch anyone else's food. If food falls onto a table or floor, clean it up and discard it in the garbage.
- Practice physical distancing (staff and children sit two metres apart) while eating food.
- A staff member should clean and disinfect any tables or chairs at the end of the camp.
- After meals or snacks, children should put all their food away in their backpack and wash their hands.

CRISIS MANAGEMENT

All staff should have access to or carry a mask and gloves in case they are required to care for a sick or injured child. First aid kits carried by staff should also contain equipment to perform resuscitation in a safe manner.

It is important to remember that children who are injured or feeling unwell still need comforting by a caring adult. If a leader is concerned that they may have been exposed to droplets when caring for a sick child it is advised that they contact 811 for health advice.

THE RECREATION & PARKS SECTOR GUIDELINE FOR RESTARTING OPERATIONS

COVID-19: Recovery Through Recreation & Parks



RECOVERY THROUGH RECREATION AND PARKS

BC's recreation and parks sector focusses on two foundations:

- The health and wellbeing of individuals – physically, mentally, emotionally, and creatively.
- The health and wellbeing of communities – connecting people, including the most isolated, and helping them to feel a part of something bigger than themselves.

Never before has this mandate been more clearly valued and needed, and never before has the sector's role been more important, than it is right now as the world recovers from the devastation of the COVID-19 pandemic.

Operating more than 500 indoor and outdoor facilities in every community in our province, the sector generates over 80 million visits in a typical year; touching more individuals than any other elective public service. BCRPA members report a 60% increase in parks usage during pandemic times, as people reach outdoors for social connections, physical activity, general respite from isolation and the devastating effects of inactivity.

BCRPA's position is that recreation and parks services are essential to active, healthy and connected communities and citizens. They contribute enormously to the resilience of our province during these turbulent times. The ability to get into parks and to engage in recreation and physical activity protects and supports public physical and mental health.

Recognizing that this Guideline is a starting point, BCRPA will continue to provide opportunities across the Province to collaborate through resource and best practices sharing, and by supporting the connection of members.

May 20, 2020

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1 INTRODUCTION

The provincial government has tasked the British Columbia Recreation and Parks Association (BCRPA) to develop a set of guidelines for how the public recreation and parks sector (“the sector”) can operate safely during the pandemic. In response, we assembled sector leaders across BC to plan a safe and coordinated restart of recreation services province-wide.

The Recreation and Parks Sector Guideline for Restarting Operations (The Guideline) provides a framework for local and regional governments (“local governments”) to apply to the provision of recreation and parks services in the pandemic, and is to be used to develop policies, plans and procedures specific to each organization. Each local and regional government has its own balance of risk, resources, capacity, and public demand to weigh in deciding about their timeline and process for re-opening facilities and offering services.

The impacts of COVID-19 have resulted in a variety of closures done through an abundance of caution in response to the Provincial Health Office (PHO) requirement of physical distancing. Municipal and regional parks did not completely close; all public indoor recreation facilities closed mid-March; most outdoor recreation amenities closed but are now reopening for casual use where physical distancing and other PHO recommendations can be maintained.

The closures were immediate, and restarting is complex and must be done carefully. This Guideline offers considerations for agencies as they make decisions about restarting and operating recreation safely.



The Canadian Parks and Recreation Association defines recreation as “the experience that results from freely chosen participation in physical, social, intellectual, creative and spiritual pursuits that enhance individual and community wellbeing.” Physical activities include individual, group, and team endeavours undertaken that contribute to our physical and mental health.

2 GOALS OF THE GUIDELINE

- ▶ To provide information, tools, and strategies for local government decision-making regarding safe operations that will limit transmission of COVID-19 within the recreation and parks sector.
- ▶ To communicate a common approach that can be applied for the sector in Phases 1 through 3 of BC's Restart Plan, and that reflects a collaborative effort among the sector's key partners and agencies.
- ▶ To provide strategies for service areas which are flexible and adaptable to the varied needs of local governments, and a continuum of steps for communities to follow in restarting recreation and parks services (both the expansion and possibly retraction, depending upon the progress of the pandemic).
- ▶ To align the above goals with broader PHO guidelines and directives.



3 PUBLIC HEALTH OFFICE CONSIDERATIONS

BCRPA has kept informed of the Public Health Officer (PHO) orders, notices and guidance. The sector is aware of the guiding principles to reduce the transmission of COVID-19, and representatives of the sector meet weekly to discuss the impacts, challenges, and solutions for safely running our services in a pandemic. Our deliberations have been informed by our national organization, the Canadian Parks and Recreation Association, and the provincial recreation associations in its federation. We have also been in discussion with our stakeholder provincial agencies associated with recreation and parks.

BCRPA and its members recognize that the responsibility of the PHO is to monitor the health of the population across the province, while working with the Centre for Disease Control and Prevention, and BC's Medical Health Officers. As such, during the COVID-19 pandemic, the PHO has established eight [principles](#) for preventing the transmission of the disease:

The Province reinforced these principles in its [BC's Restart Plan, May 6](#), with this chart:

Five Principles For Every Situation

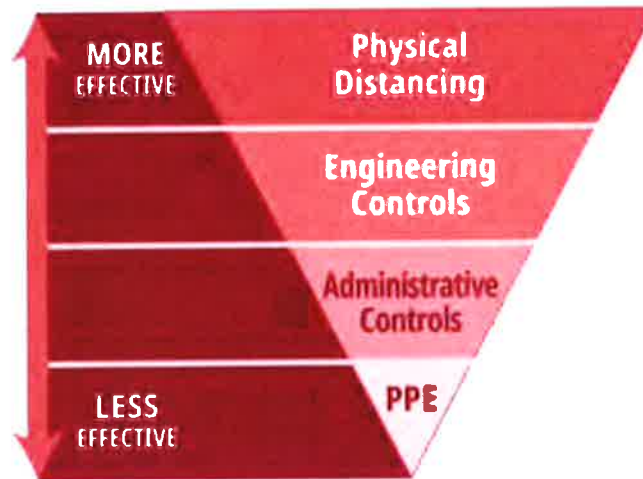
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<ul style="list-style-type: none"> • Frequent handwashing • Cough into your sleeve • Wear a non-medical mask • No handshaking 	<ul style="list-style-type: none"> • Routine daily screening • Anyone with any symptoms must stay away from others • Returning travellers must self-isolate 	<ul style="list-style-type: none"> • More frequent cleaning • Enhance surface sanitation in high touch areas • Touch-less technology 	<ul style="list-style-type: none"> • Meet with small numbers of people • Maintain distance between you and people • Size of room: the bigger the better • Outdoor over indoor 	<ul style="list-style-type: none"> • Spacing within rooms or in transit • Room design • Plexiglass barriers • Movement of people within spaces

The Restart Plan also includes the hierarchy of controls for COVID-19 which are fundamental to the information the recreation sector needs to restart operations.

Hierarchy of Controls For COVID-19

The hierarchy of controls is a framework for reducing transmission hazards. The most effective controls are at the top of the pyramid.

Source: Koehler, K, Rule A. Can a mask protect me? Putting homemade masks in the hierarchy of controls. [Internet]. 2020 April 2. Johns Hopkins Education and Research Center for Occupational Safety and Health.



This Recreation and Parks Sector Guideline for Restarting Operations provides recommendations for the recreation sector to comply with these principles, and as directed by the Province, focuses on three main considerations for both patrons and employees:

1. processes to restart safely;
2. measures to keep people safe to avoid further outbreaks;
3. a plan in the event that a case or an outbreak should occur.

To address these three considerations, this Guideline will provide strategies for **physical distancing controls, hand hygiene provisions, and touch point sanitization.**

4 RECREATION AND PARKS RISK REVIEW PROCESS

The risk review process related to COVID-19 for operations of public recreation is represented in this diagram. The decision by local governments to restart, or delay restart of services due to COVID-19 factors, will be based on these risk review principles.

Each of the five areas in this diagram are detailed in [Appendix 1, Recreation and Parks Risk Review Process](#).

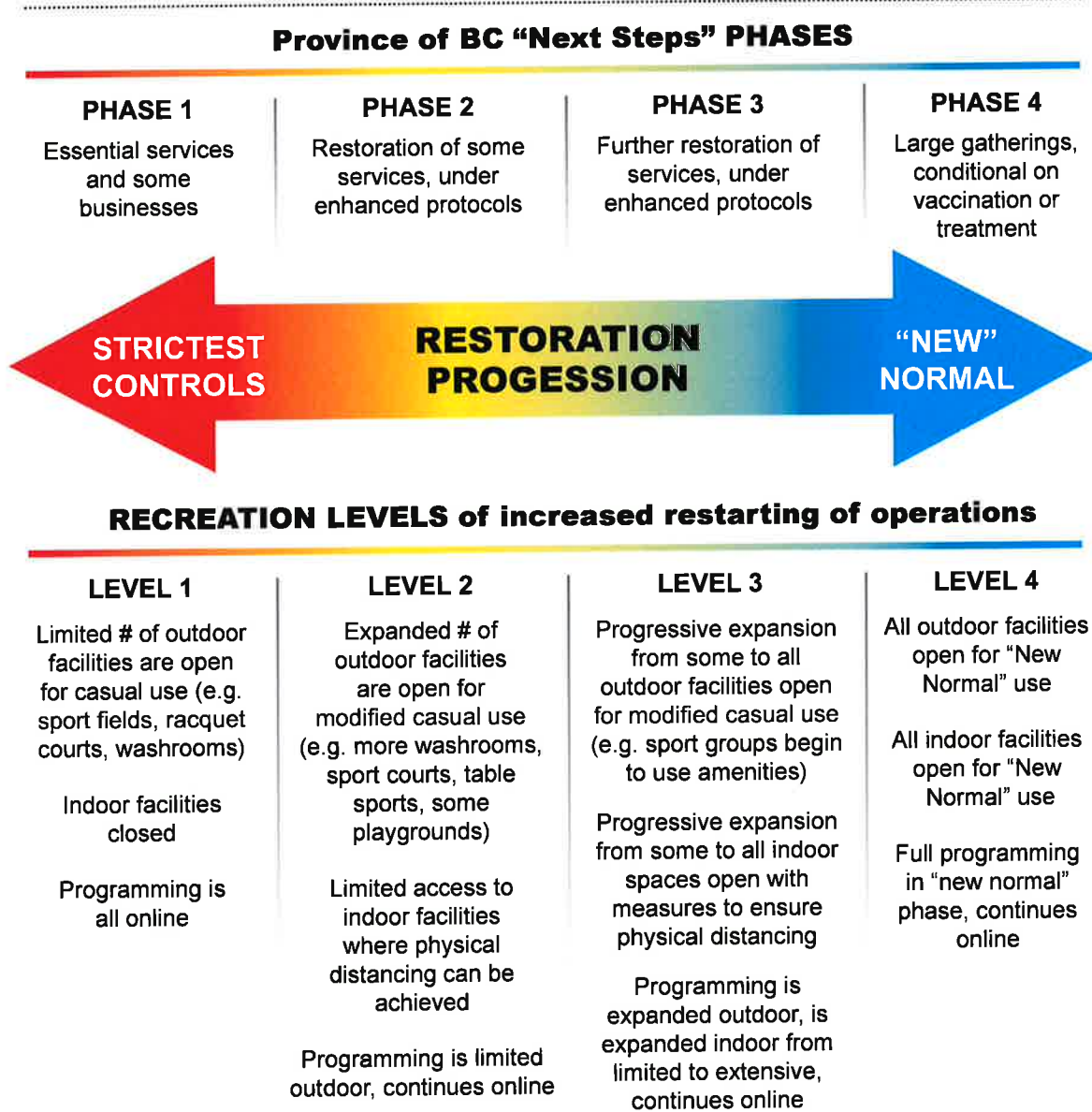


PROGRESSION PLANNING GUIDELINES

The planning framework below is a layered plan that broadly outlines progressive steps forward. The first layer is phases of BC's "Next Steps" Plan; the second layer is a recreation level system designed to enable fluid movement from one level to another. Refer to [Appendix 1, Recreation and Parks Risk Review Process](#) for detailed descriptions.

This Guideline recognizes that it is up to each local government to decide how to provide its services and operations as it scales from level to level. The pace of the transition from level one to level four over time will be unique for each local government. Conditions may arise that require movement forward and back between levels as recreation expands and contracts in response to the many complex conditions in the pandemic period.

PROGRESSIVE PLANNING FRAMEWORK



5 SERVICE AREA SPECIFIC MEASURES

Recreation services are provided through indoor and outdoor recreation facilities and amenities. Identifying commonalities allows organizations to ensure the safety of spaces and activities as a 'new normal' is created.

The intent is to provide guidelines for these commonalities, not to be fully prescriptive, as each local government is different and has its own unique considerations. [Appendix 2. Service Area Specific Measures](#) is a planning template that outlines the commonalities around measures to keep people safe and to avoid further outbreaks with a focus on identifying mitigation procedures.

Considerations for commonalities can be evaluated based on the Province's Five Principles concept (referred in section 3, above).

Each local government will create a plan to reopen facilities, parks and programs based upon this guideline. The following commonalities should be considered for recreation service areas when determining the process to restart an activity, program, or green space safely:

- Creating physical distancing – two metres
- Determining maximum capacity based on five metre radius distancing calculations & unencumbered floor space
- Providing engineered and administrative controls
- Providing non-medical PPE for employees to be used as established in facility policies
- Providing employee training for COVID-19 protocols, measures, and prevention policies
- Ensuring enhanced cleaning and disinfecting
- Creating and following a schedule for enhanced cleaning
- Providing the ability for frequent handwashing or sanitizing
- Ensuring clear and consistent signage/messaging for the public and employees regarding facility and amenity COVID-19 transmission mitigation policies and procedures (date, logo, physical distancing and hand hygiene expectations, special instructions, etc.)
- Providing self-isolation containment area for employees and patrons showing symptoms of illness while waiting for transportation to a medical centre or home
- Following and ensuring Provincial and Local Health Authority practices are being met
- Insuring user groups have a COVID-19 safe practices plan (e.g. Provincial Sports Organization/Local Sports Organization)
- Ensuring that the facility's local government policies are being followed

All these common factors can be applied to assessing activities or space in terms of:

1. How each commonality is to be factored into the planning and delivery;
2. Consideration of patrons' needs, safety, responsibilities;
3. Consideration of employee needs and safety, as well as employer responsibilities, and;
4. The mitigations to be in put into place.

Common service areas include:

OUTDOOR

- Parks and open green spaces
- Trails
- Park amenities including: skateboard parks, bike parks, off leash dog park
- Playgrounds and outdoor gym equipment
- Sports courts (e.g. basketball, racket)
- Sports fields
- Track facilities
- Swimming pools, spray parks, beaches, and waterfronts
- Picnic tables and shelters
- Washrooms
- Golf/disc golf
- Camp-grounds
- Picnic shelters
- Boat Launch
- Cemeteries

INDOOR

- Community Centres (includes amenities activity areas such as fitness, gym, gymnasium, common areas, etc.)
- Swimming Pools
- Ice Arenas



6 SITUATIONS REQUIRING NON-COMMON APPROACHES

While there is significant commonality among local and regional governments that provide recreation and parks programs there are also significant differences. Before re-opening any program or facility consider carefully all of the commonalities and then consider all those elements that make your services unique. Also consider how you will manage those unique situations as they arise.

Refer to [*Appendix 3 Non-Common Approaches*](#) for a list of items that may not have been considered by your employees or user groups.



PUBLIC ENGAGEMENT

Community engagement builds community confidence and is imperative to ensure the public is informed of their local government's plans and actions. Keeping the public informed about what their local government is doing to help keep them safe and active, as well as what is expected of them, will reinforce their trust, reduce the spread of misinformation and lack of compliance, and will alleviate general anxiety and confusion.

Communication should be transparent about the factors used in decision-making, and when and where possible, the decision-making process itself, and the stakeholders involved. Local governments should acknowledge where uncertainty exists and provide information about what measures are being taken to reduce that uncertainty.

Each municipality and regional district will utilize their communication resources and platforms to ensure accurate, consistent and timely information is distributed and made available and that feedback and input can be received.

Content of messages should focus on changes in service delivery. Questions beyond the scope of the local government should be referred to federal, provincial, and local health authorities, unless they have been instructed, or received permission, to provide information on their behalf.

Each service area will have its own set of guidelines with respect to usage and conduct. These will need to be part of user and leasehold agreements, reflected in signage posted in and around use areas, noted on websites, etc.

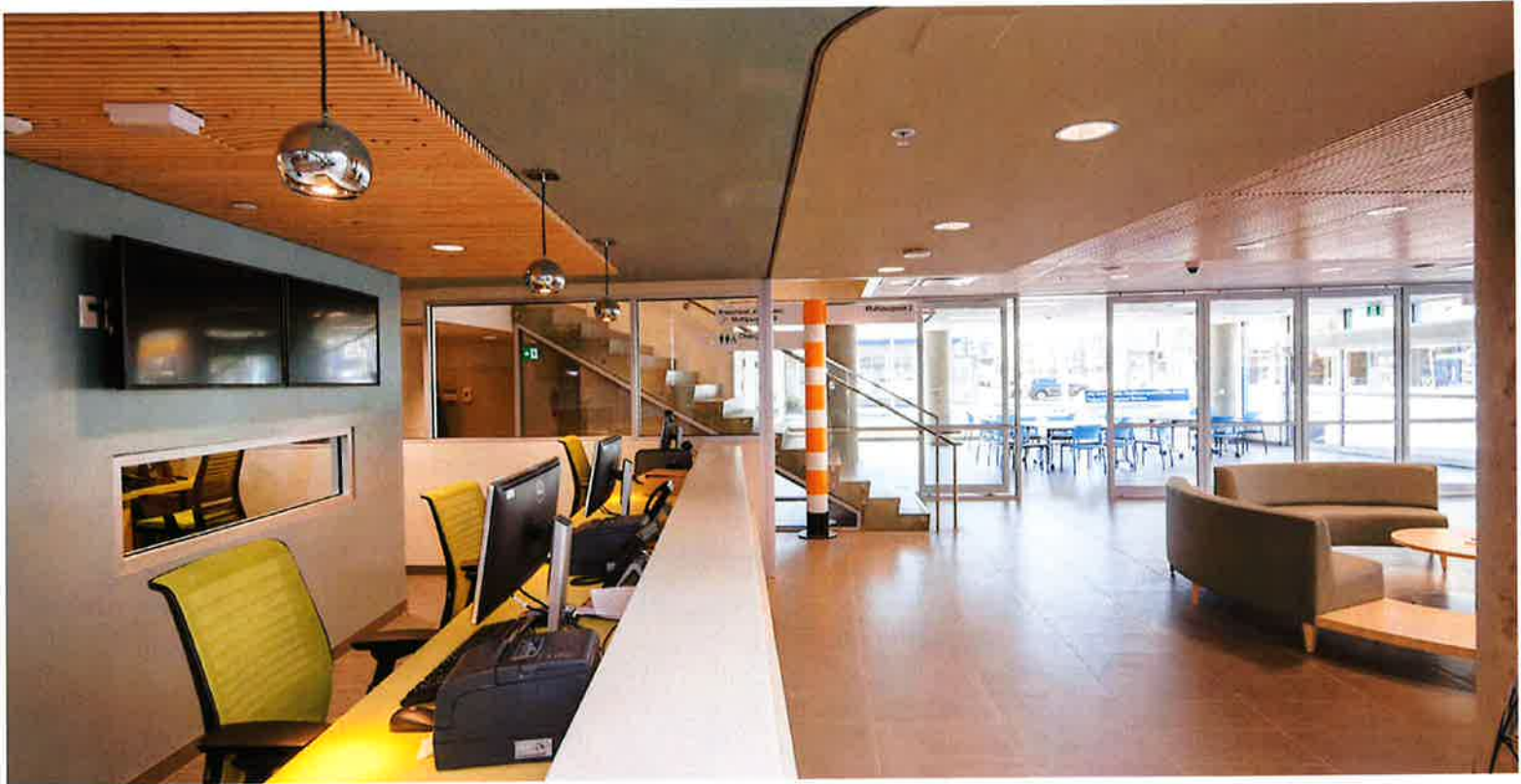
Provide employees and the public with reliable and up-to-date information from the BC Provincial Government through the [BCCDC](#), and the Canada Federal Government through the [Public Health Agency](#). Also provide relevant training and supervision for employees.

Information about COVID-19 is evolving, but what we know from the PHO, is that droplet transmission is much more likely when in close contact in an indoor setting. Transmission is less likely in an outdoor setting where there is more space for people to keep physically distanced.

COVID-19 can also be transmitted through droplets in the environment if someone touches a contaminated area then touches their face or eyes without first cleaning their hands. This speaks to the importance of regularly cleaning one's hands and also the cleaning of high touch areas in the environment.

However, whether indoors or outdoors, physical distancing and avoidance of high-touch surfaces will reduce the risk of transmission.

BCRPA will continue to keep the sector informed and its members connected through the sharing of best practices, restart resources, and member connectedness. bcrpa.bc.ca



EMPLOYEES AND PATRONS WITH SYMPTOMS

As per WorkSafeBC, part of the safe return to operations includes the development of a [COVID-19 Safety Plan](#). The COVID-19 Safety Plan is a requirement by the PHO and must be completed and posted at the worksite. This document along with guidance provided by WorkSafeBC will assist employers in developing their plan. An element of this plan is to establish policies regarding who can be at the workplace, and how to address illness that arises at the workplace. See section 9 for details.

Encourage employees and volunteers to use the British Columbia [COVID-19 Self-Assessment Tool](#).

8 USER GROUPS AND LEASEHOLDERS

Most municipalities lease or rent their facilities to third party user groups such as sport and community organizations. All user groups are required to have a COVID-19 Exposure Control Plan that clearly demonstrates how activities will be provided to align with the directives of the Provincial Health Office, local authorities, and other relevant regulators (ie WorkSafeBC). The purpose of this control plan is to identify the specific control measures that will be taken in order to mitigate the risk of virus transmission, the party responsible for ensuring compliance within the user group, and include but is not limited to, a plan on managing physical distancing, common touch areas, and flow of participants.

Each local sport organization is expected to follow its Provincial Sport Organization's Return to Sport plan approved by its Board of Directors and in reference to the guidelines provided for the sport sector by viaSport. Other user groups are expected to have a similar plan outlining its safe practices to reduce transmission of COVID-19.

In consultation with a local government's insurer (in most cases, this is the Municipal Insurance Association of BC), the recreation facility user group agreement should be amended to include new provisions for COVID-19 transmission mitigation expectations.

A checklist is provided in [Appendix 4 Exposure Control Planning](#) intended to offer guidance on requirements and key measures, but may be tailored by a facility owner based on their local context. The checklist was designed for considerations regarding user groups, but is equally applicable to local government considerations for programs and services.



LOCAL GOVERNMENT LIABILITY

At the time of publishing this Guideline, there is no contagion insurance coverage being offered by insurers. Furthermore, most insurance policies will not cover any claims relating to communicable diseases or pandemics, including Directors and Officers Insurance. Many policies will exclude pandemic coverage.

In the case of a claim, the Municipal Insurance Association of BC has noted that while it may be difficult to establish causation for transmission from contaminated surfaces, local governments will certainly be the subject of these claims. Local governments could consider requiring waivers from adults and informed consent from parents or guardians of children and youth as a means of limiting their liability, but these strategies may not adequately protect local governments. In order to enable local governments to continue to provide valuable services for their communities, the immunity from transmission claims granted to essential service providers, including local governments, in Ministerial order No. M094 under the Emergency Programs Act should be extended until the pandemic is declared over.

It is important to have a detailed reopening plan that sets out policies and procedures that comply with public health and WorkSafe orders, requirements and guidance. The reopening plan should be approved by the council or board, which will constitute a legal policy for the purpose of establishing the policy defense.

9 EMPLOYEE & VOLUNTEER SAFETY

All employers in BC have a legal obligation to ensure a healthy and safe workplace. Organizations that rely on volunteers also need to take steps to ensure their safety; the worker safety guidelines also provide support for their safety considerations.

Workers should know and understand their workplace health and safety responsibilities — and those of others. Workers have three key rights:

- the right to know about hazards in the workplace;
- the right to participate in health and safety activities in the workplace; and
- the right to refuse unsafe work.

A requirement for resuming operations following work interruptions related to COVID-19 is that all employers must develop a COVID-19 Safety Plan. To develop your plan, follow the six-step process outlined by WorkSafeBC in its [COVID-19 Safety Plan](#). It is recommended that in order for these plans to be as effective as possible, provisions be made to include worker participation as well as regular review and modification as required.

WorkSafeBC has produced documentation outlining how to return to safe operations, including specific guidelines [for parks and recreation](#). These guidelines include:

- Who should come into the workplace
- Physical distancing and other preventative measures
- Cleaning and hygiene
- Documentation and training, and
- Worker transportation

Specific to parks and recreation the guidelines address:

- Preparing your workplace,
- Shared workspaces,
- Public interface,
- Facility cleaning, and
- Visitor management

The details for each of these guidelines are in [Appendix 5 WorkSafeBC Protocols for Parks](#).





Workers in the workplace may also be affected by the anxiety and uncertainty created by the COVID-19 outbreak. It's important to remember that mental health is just as important as physical health, and that measures need to be taken to support mental well-being. [The Returning to Safe Operations document](#) also contains helpful resources that can assist with maintaining mental health in the workplace during this time.

The BC Municipal Safety Association (BCMSA) has supported the preparation of this Recreation Sector Guideline for Restarting Operations. BCMSA has developed a template for local governments to use as they prepare site specific plans which is included as a resource template in [Appendix 6 Return to Safe Operations Due Diligence Template](#).

In addition to the training guidelines provided by WorkSafeBC and BCMSA, the Lifesaving Society of BC has also created a [Guidelines for Re-opening Pools](#) published May 19, 2020 which establishes protocols and training to support aquatic operations.

10 CONCLUSION

COVID-19 has changed the way British Columbians live and interact with each other and the world. Adjusting to this change, and the heightened need to adhere to health protection measures, requires a carefully considered and detailed approach. This Guideline will help local governments navigate the complexities and nuances of service to and space for their communities in and after the pandemic, maintaining community health and wellbeing as the primary focus.

As a new threat, COVID-19 is still a largely unknown virus and, as such, measures and reactions will continue to be modified as research and our experience with it evolves. For this reason, it is imperative that the Provincial government continue its partnership with the BCRPA to help guide the recreation sector through and past the pandemic, utilizing the BCRPA as the agency capable of facilitating a coordinated and collaborative approach to restoring recreation in our respective communities.

This Guideline is founded upon the understanding that each local government has its own balance of risk, resources, capacity, and public demand to weigh in decisions about re-opening facilities and offering services. As a result, this Guideline is flexible and scalable to allow local governments to use it as necessary.

Although not specifically addressed in the operational sections of this Guideline, it must be stated that reopening and restarting recreation and parks calls for contemplative decision making that elevates the needs and dignity of the most vulnerable community members, as well as the type of access and supports they require to support a healthy lifestyle. We must acknowledge that as a result of this global crisis, our vulnerable communities will evolve to include more people who may not have otherwise been at risk; the numbers of people with mental and physical health issues has the potential to grow dramatically.



As this Guideline is put into practice, it will ensure all British Columbians are transitioned through this pandemic with the necessary care, support and consideration when engaging in recreation.

GUIDELINE DEVELOPMENT

BCRPA would like to acknowledge and thank the following individuals, groups and organizations for their contributions to this document. Contributions have been made through BCRPA's informal regional and province-wide sector senior leaders meetings conducted throughout April and May, co-hosted webinars, and discussions with key stakeholders.

- ▶ **BCRPA Recreation and Parks Guideline Task Force**
 - Trisha Davison, Trail, President BCRPA
 - Donnie Rosa, Coquitlam, President-Elect BCRPA
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 - David Geronazzo, Prince Rupert
 - Jim Gabriel, Kelowna
 - Joe Chirico, Central Kootenay Regional District
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 - Steve Kellock, New Westminster
 - Thomas Soulliere, Victoria

- ▶ **Contributors**
 - BCRPA members, including Brian Johnston (Guideline quality control) and Darryl Condon (HCMA document design)
 - Province of BC, Provincial Health Office, Ministry of Tourism, Arts and Culture
 - WorkSafeBC
 - Recreation Facilities Association of BC
 - Lifesaving Society – BC & Yukon
 - viaSport
 - Municipal Insurance Agency of BC
 - BC Municipal Safety Association
 - SportBC

The knowledge in this Guideline is based on the following reliable sources:

▶ BC Provincial Government

[BC's Restart Plan](#)

[BC's Key Steps to Safely Operating Your Business or Organization](#)

▶ BC Centre for Disease Control

[About COVID-19](#)

[CDC Guide for Recreation Facilities](#)

[Cleaning Guidelines](#)

[CDC COVID-19 Symptom Self-Assessment Tool](#)

[Government of Canada COVID-19 Prevention and Risks](#)

[COVID-19 Guidance to the Accommodation Sector](#)

[COVID-19 Signage and Posters](#)

▶ WorkSafeBC

[WorksafeBC COVID-19 Returning to Safe Operations - Parks](#)

[WorksafeBC's Municipalities and COVID-19 safety](#)

[WorksafeBC's Returning to Safe Operation](#)

[Worksafe cleaning](#)

In addition to these authorities, each local government will also be referring to the directives established by their regional health authorities:

[Fraser Health](#)

[Interior Health](#)

[Island Health](#)

[Northern Health](#)

[Vancouver Coastal Health](#)

Appendix 1 – Section 4, Risk Review Process

Appendix 2 – Section 5, Service Area Specific Measures, Planning Template

Appendix 3 – Section 6, Non-Common Approaches

Appendix 4 – Section 8, Exposure Control Planning

Appendix 5 – Section 9, WorkSafeBC Protocol for Parks

Appendix 6 – Section 9, Returning to Safe Operation Due Diligence Template



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APPENDIX 1 – SECTION 4

Recreation and Parks Risk Review Process

This Appendix supports Section 4 of the Recreation and Parks Sector Guideline for Restarting Operations.

A – HEALTH & SAFETY

There is a united commitment across the recreation sector to put the health and safety of our communities, our patrons, and our employees as our top priority. Recreation facilities indoors and outdoors provide access to the breadth of activities British Columbians enjoy and which are fundamental to individual and community well-being.

There are various governing agencies that oversee, establish best practices, and regulate the services offered through local governments. These agencies have been taken into consideration in developing this Guidelines, and will continue to be consulted as plans unfold to restart the sector.

Enhanced health & safety measures include:

► Keep People Safe

- *Policies & procedures* - to ensure employees and patrons who are unwell stay home.
- *Public Awareness* – to provide information that helps educate recreation patrons on provincial health restrictions and recommended safe practices – physical distancing, hand hygiene, respiratory etiquette.
- *Adhere to Provincial Health Orders & Guidelines* – physical distancing and mass social gathering limitations.
- *Enhance cleaning & disinfecting* protocols as guided by [WorkSafeBC](#) and the [BC Centre for Disease Control](#)
- *Physical distancing worksite modifications* – office workstation spacing, sneeze guards, hand hygiene stations, operating practices, create appropriate safe work practices, etc.
- *Adjust service offerings and capacity* to allow for physical distancing based on site feasibility.
- *Safe return of organized sport* - partnering with viaSport and SportBC on the sport organizations' return to sport plans for each activity led by a Provincial Sport Organization (PSO), Local Sport Organization (LSO), or league.
- *Safe facility operations* – consulting the Recreation Facilities Association of BC
- Take specific *guidance from local health authorities* as needed.

► Institute Risk Mitigation for Facilities

- *Undertake facility adjustments, reconfiguration, and/or repurposing* to ensure physical distancing.
- *Implement changes advised by certifying agencies* – Lifesaving Society, Technical Safety BC, WorkSafeBC, and Red Cross.
- *“Go slow to go fast”* – methodically restart services at a pace that allows each local government to continuously monitor, evaluate and adjust operations to ensure safe

practices.

- *Follow the PHO instruction to stay home when sick, and to have a facility protocol to discourage those who are sick or symptomatic from presenting on-site.*
- *Develop administrative systems and practices for programs whereby contact tracing would be available should an outbreak occur.*
- *Consult with the Municipal Insurance Association of BC ([MIABC](#)) on best practices for liability in municipal operations.*

► **Actively Communicate**

- *Participate in BCRPA led provincial, regional, and service specific meetings with recreation practitioners across the province to maintain a coordinated approach to restarting, and to share best practices for problem-solving as the sector progresses through the phases of recovery.*
- *Provide public education through signage, press releases, and social media that encourages appropriate conduct and emphasizes personal responsibility.*
- *Proactively communicate with user groups outlining expectations with respect to their individual COVID-19 mitigation of transmission plans, and participant behaviours.*
- *Keep patrons and employees updated regarding efforts to slow transmission of the virus; communicate online and at all facilities and amenities.*

► **Train Employees** (details in section 9, Employee and Volunteer Safety)

- *Develop and train all employees on COVID-19 exposure control plans & new procedures.*
- *Provide the [BCCDC COVID-19 Symptom Self-Assessment Tool](#) and the help line 1-888-COVID19*

► **Outbreak Mitigation and Recovery** (details in section 4)

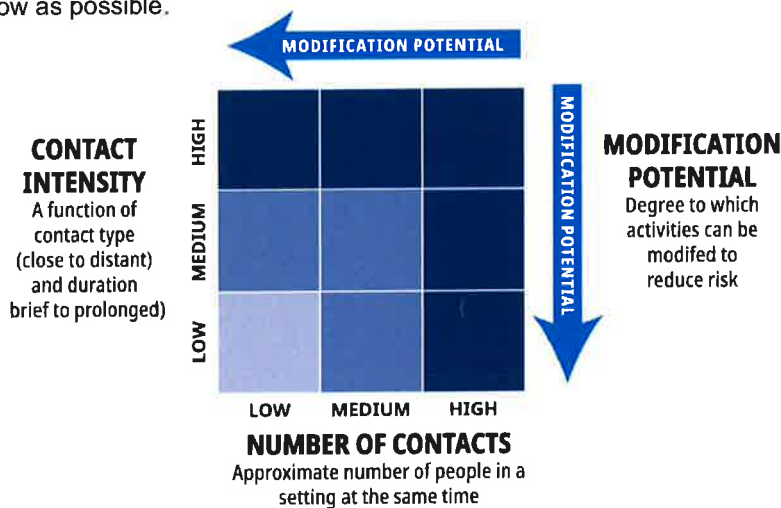
- *If a case or outbreak is suspected, call 911 if it is an emergency, or 811 for health advice*
- *Report any suspected case(s) of COVID-19 like illness among patrons or employees to the local Health Authority Medical Health Officer.*
- *If a case or outbreak is confirmed, follow the orders of the local Health Authority*
- *Enhance cleaning and infection control measures to reduce risk of transmission in your facility.*
- *Ensure Self-isolation for employees who have symptoms of COVID-19 for a minimum of 14 days*

B – RISK REVIEW & CONSIDERATIONS

The recreation sector has a responsibility to reduce the transmission risk of COVID-19 at our indoor and outdoor spaces and services by reducing the contact intensity and number of contacts encountered by users and reducing the risk of transmission for each contact, all while providing opportunities to recreate and improve wellbeing. In a recreation setting, this is primarily accomplished by:

- managing public space to offer physical distancing throughout the facility and during programmed activities,
- providing opportunities for hand washing/sanitizing,
- providing sanitization of high touch point areas, and
- adhering to Public Health Orders on maximum number for single event gathering.

The considerations for the processes and provisions for reducing transmission are guided by the risk rating cited in the [BC's Restart Plan](#). By assessing the two variables of contact intensity and number of contacts, the risk can be rated as low, medium, or high. All three levels of risk are subject to physical distancing and controls (engineering, administrative, PPE) to keep risks as low as possible.



Based on the current physical distancing requirements of 2 metres between individuals, and that reopening will occur in a thoughtful and progressive manner, the recreation sector has translated this into the following principles:

- Focus on outdoor activities more than indoor activities
- Focus on outdoor unstructured usage before program-based activities
- Focus on low risk (e.g. individual) activities before higher risk (e.g. group) activities
- Focus on indoor controlled usage
- Focus on skill development before competition
- Focus on local community before extending to neighbouring communities (and only when the PHO advises that extending the geographical range is acceptable)

While local governments offer similar recreation services across the province, factors that influence how a community rates and is able to mitigate the risk of a service can vary greatly. This could mean that a service restarts in one community but does not get restarted at the same

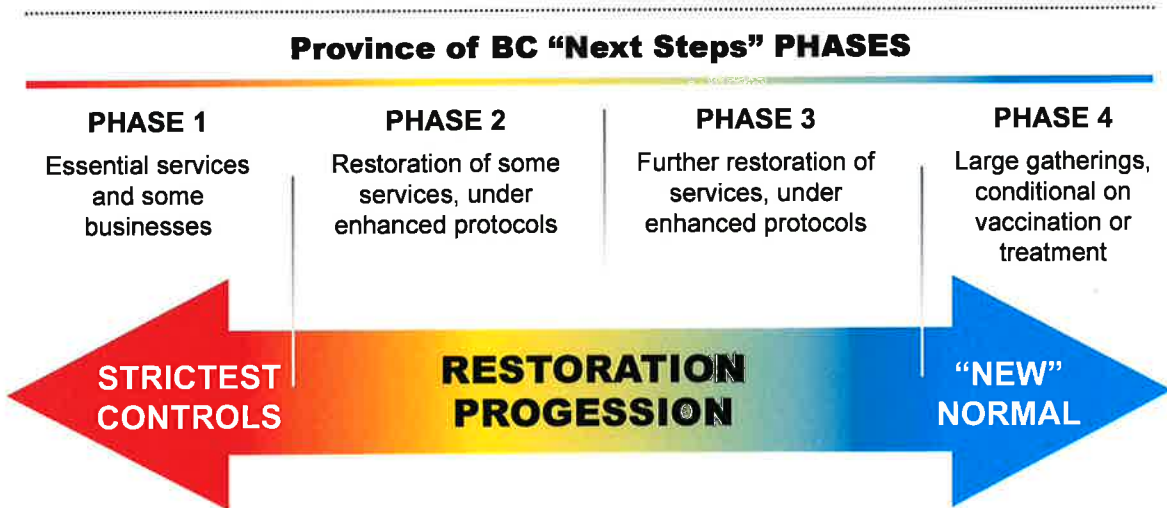
time in another community.

PROGRESSION PLANNING GUIDELINES

The planning framework below is a layered plan that broadly outlines progressive steps forward. The first layer is phases of [BC's "Next Steps" Plan](#); the second layer is a recreation level system designed to enable fluid movement between levels.

This Guideline recognizes that it is up to each local government to decide how to provide its services and operations as it scales from level to level. The pace of the transition from level one to level four over time will be unique for each local government. Conditions may arise that require movement forward and back between levels as recreation expands and contracts in response to the many complex conditions in the pandemic period.

PROGRESSIVE PLANNING FRAMEWORK



RECREATION LEVELS of increased restarting of operations

LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4
Limited # of outdoor facilities are open for casual use (e.g. sport fields, racquet courts, washrooms) Indoor facilities closed Programming is all online	Expanded # of outdoor facilities are open for modified casual use (e.g. more washrooms, sport courts, table sports, some playgrounds) Limited access to indoor facilities where physical distancing can be achieved Programming is limited outdoor, continues online	Progressive expansion from some to all outdoor facilities open for modified casual use (e.g. sport groups begin to use amenities) Progressive expansion from some to all indoor spaces open with measures to ensure physical distancing Programming is expanded outdoor, is expanded indoor from limited to extensive, continues online	All outdoor facilities open for "New Normal" use All indoor facilities open for "New Normal" use Full programming in "new normal" phase, continues online

C – Local Government Strategies and Guidelines

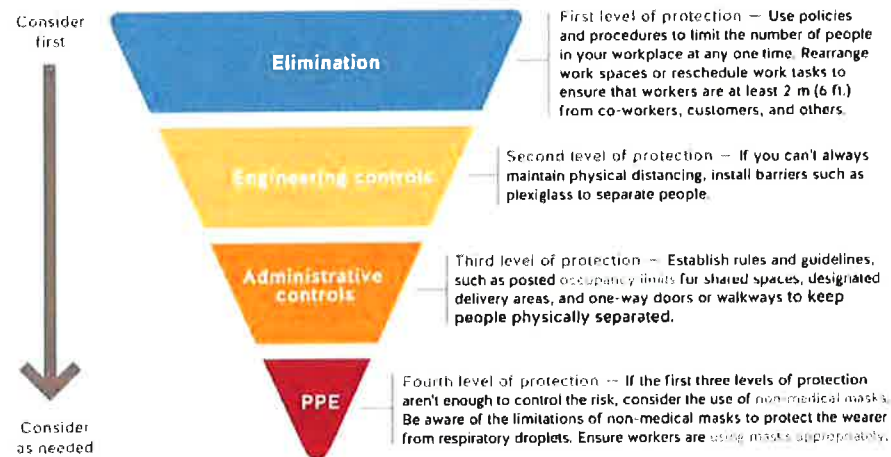
The strategies for reducing transmission risks of COVID-19 will impact all recreation operations in different ways. How each community adapts their unique indoor and outdoor spaces, programming, and support services will vary yet based on the same goals.

For the sector, the three primary focus areas for limiting the spread of coronavirus are:

Physical Distancing Controls	Hand Hygiene Provisions	Touch Point Sanitization
------------------------------	-------------------------	--------------------------

1. **Physical Distancing Controls** – This is the most fundamental health measure in decreasing the transmission of COVID-19. The essential implementation of this health measure is to provide at least two metres of space between people where possible.

Where physical distancing is not possible, use engineering and administrative controls, including non-medical personal protective equipment (PPE) as recommended for workplaces in [WorkSafeBC's protocol levels](#).



- The first level is the Elimination of exposure which means ensuring a two metre distance between people. This could include physical distancing guides such as:
 - staying home when sick,
 - signage,
 - staff ambassadors,
 - delineated movement pathways (e.g. cones, ropes, floor markers, one-way flow arrows, one-patron limit at staffed stations like registration desk),
 - alternating access to amenities (e.g. close every other urinal/change stall),
 - managing occupancy limits.

APPENDIX 1 – SECTION 4 continued

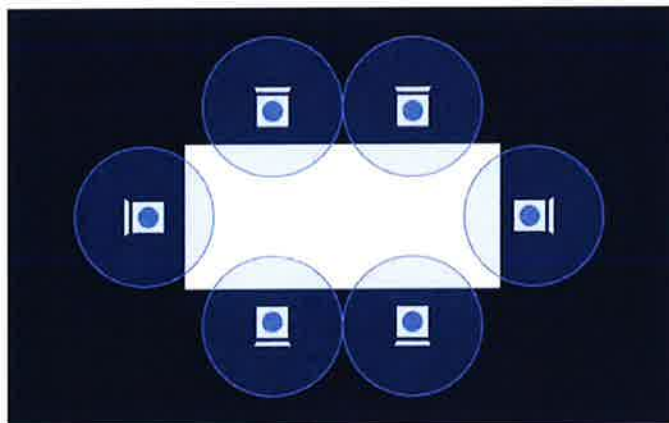
- The second level is the use of Engineering controls for circumstances where the two metre distance cannot be maintained, utilizing barriers such as plexiglass to separate people.
- The third level is the use of Administrative controls which includes signage, implementing one-way passages, touchless or low touch registration procedures, online service options, and reminders to not linger.
- The fourth level is use of PPE (face covering, gloves), in combination with measures taken in level two and three listed above.

PHYSICAL DISTANCING SPACE CALCULATION

To ensure a two metre distance between people, planning of indoor and outdoor space for activities must be calculated. The PHO has stressed that outdoors is safer than indoors for exposure to the virus. The planning required will be greater for indoor spaces and outdoor space amenities (playgrounds, court/sport spaces, skateparks), as the contact intensity and the number of contacts increase in indoor settings and when participants are in motion. Each recreation facility must conduct a risk assessment to identify how physical distancing will be implemented and will impact the use of a particular space.

Traditionally occupancy limits of a space are based upon practical considerations such as fire safety requirements, the number tables and chairs that fit in a space, or the movement area requirements of an activity. To ensure physical distancing, facility owners must consider how many people can fit in a space with adequate physical distancing for active versus static activity. The new physical distancing requirements will in all cases reduce the capacity of a space. Guidelines are:

- **Static activities** – Calculate space capacity by allowing a 1 metre radius around each person (a 1.3 metre radius from the centre of each person allows two metres between individuals) as is demonstrated in this illustration. Typically, this will reduce room occupancy by approximately 50%



APPENDIX 1 – SECTION 4 continued

- Active activities (e.g. aerobics) – Calculate space capacity by allowing a 2-5 metre radius depending on the activity. For example, if a typical activity required a two metre radius pre-pandemic, that same activity would now require a three metre radius.

Spacing Guide

- 2 metre minimum distance between people
 - 1 metre radius per person for static activities – see diagram above
 - 2 metre radius or more per person for active activities
 - 5 metre square distance per person suggested to calculate occupancy for ensuring 2 metre distance can be maintained between people
- Total occupancy – [The COVID-19 Guidance to Retail Food and Grocery Stores](#) recommends a five square metre unencumbered floor space (floor space minus fittings, displays, etc.) per person when calculating the occupancy of a store. We recommend this guidance also be applied to recreation facilities.
 - Unstructured activities – This type of programming includes activities like public swims, skating, skateboarding and racquet court use. These are the activities that will require participants to self-manage the most. Guidelines to determine capacity are:
 - Calculate the radius of the activity to ensure a two metre distance can be maintained between participants, recognizing this will typically require spacing of up to five metre radius. Refer to the space calculations above.
 - If the activity attracts on-lookers or a queue for participation, space could be designated for this purpose and clear indicators such as signage and/or markings on the ground will reinforce physical distancing requirements.
 - Fitness/Workout Equipment Spaces

Fitness rooms are often designed to minimize space occupied by each patron. As these rooms often do not have space to adequately spread out equipment to allow for physical distancing, new strategies may be considered:

 - Using the same calculations for rooms, all equipment must provide for a two metre separation between people. For equipment where the user's relative position is static (e.g. treadmill, bikes) assume a one metre radius around where the person is situated and a larger radius around equipment where the person's relative position is moving (e.g. rowing machine). If this cannot be accomplished, equipment should be removed or closed to allow adequate spacing between equipment that is in use.
 - If a facility has under-used rooms or spaces not required for circulation, some equipment could be moved for use in those spaces. Equipment that requires less supervision for safety should be considered first to move to these new-use spaces.

WorkSafeBC guidelines are now available for [private gyms and fitness centres](#).

APPENDIX 1 – SECTION 4 continued

- Circulation Hallways, Entrances, Exits, Trails, or Pathways Spaces

The PHO has stated that transmission of the virus in transitory passing is a low risk. Administrative controls such as markings on the ground and signage can be used to guide patrons and employees to be courteous and avoid lingering.

- If pathways are narrow and busy, consider one-way directions.
- If one-way direction is not possible, consider signage to emphasize that the person coming into the space make way for the person leaving by stepping aside.

- Structured Activities

Organizations such as sport and other user groups must establish a common understanding with recreation facility management on how the spaces are planned to be used safely with physical distancing measures. Each local government will determine whether any additional physical distancing administrative or engineering controls are the responsibility of the user group or the host recreation facility. The host recreation facility reserves the right to refuse spectators due to physical distancing concerns.

- Gathering limit

The [PHO order banning mass gatherings](#) over 50 people, which is expected to be enforced through the BC Restart Plan's Phase One through Three, is specific to social gatherings that are singular, one-time events where people are engaged in one common activity. While the spirit of the order applies in all circumstances, according to the [BCCDC](#) the adherence to the 50 person limit does not apply to recreational activities where the size of space enables appropriate physical distancing between people. [The Guidance to Retail Food and Grocery Stores](#) cites guidelines that are applicable to the recreation sector: "*The mass gathering Order does not apply to grocery stores. It applies to one time or episodic events which could result in people gathering closely together. Nevertheless, the spirit of the order with respect to physical distancing should be followed. This means that, for example, in large grocery stores where it is feasible to have more than 50 people, while still following appropriate physical distancing, it is acceptable to have over 50 people present at one time.*"

The recreation sector application of the order is as follows:

- Special events larger than 50 will not occur. The mass gathering order eliminates large event rentals and programs such as community meetings, weddings, holiday parties, and fundraising dinners.
- Gatherings of fewer than 50 people for a singular event may be hosted in recreation spaces indoor or outdoor, provided that strict physical distancing measures are in place.
- For facilities that may accommodate more than 50 people for activities that are not episodic, space calculations (see above) will guide the number of people in a space that will adhere to the physical distancing requirement. It is understood that if a space or facility cannot adhere to physical distancing requirements for a desired number of people then the number has to be reduced to that which will ensure two metres between individuals. For example, when multiple programs are taking place resulting there will be more than 50 patrons in the facility, and there must be controls in place to ensure each program space provides adequate physical distancing. Ingress and egress to that space must be managed in order to avoid any density of people in the lobby that does not allow adequate physical distancing.

Although these physical distancing measures may mean that space modifications to accommodate recreation activities, it is entirely possible to offer activities albeit the modifications will decrease participation numbers which typically will result in decreased revenue. As this will have different impacts depending on the community, each community must evaluate the impact of this financial change, and plan accordingly.

Hand Hygiene Provisions

Facility options for providing hand hygiene is very important for employees and patrons and is particularly important in indoor facilities. Ideally, patrons and employees are provided with easy access to places to wash their hands with soap and water. Where this is not possible, [hand sanitizing](#) options should be provided in convenient locations for indoor spaces. Installing hand sanitizers in outdoor spaces is recognizably less feasible; outdoor patrons are encouraged to provide their own hand sanitizers.

- Where possible, provide patrons of outdoor spaces access to indoor spaces for the purpose of hand washing.
- Ensure washrooms are always stocked with liquid soap, running water, and paper towels where touchless dryers are not provided.
- Request patrons to wash their hands before arriving at the facility.
- Encourage patrons to take personal responsibility in bringing their own hand sanitizer, particularly to spaces that do not have plentiful hand cleaning capabilities.
- Clarify with user groups their responsibility in providing hand sanitizers for their participants.
- Provide signage to remind patrons to exercise [public health standards](#) for hand hygiene, to refrain from touching their faces, and to follow respiratory etiquette (cough or sneeze into tissue or elbow).

Touch Point Sanitization

Cleaning and disinfecting practices and protocols have been developed by [WorkSafeBC](#), [BCCDC](#), [Health Canada](#), [Vancouver Coastal Health guide for Washrooms and Showers](#), and [webinar](#) jointly presented by BCRPA and RFABC on COVID-19 cleaning for recreation facilities.

- It is recognized that high contact surfaces need to be cleaned more regularly, especially in situations where there is a high likelihood that you may touch your face before cleaning your hands. BCCDC provides a [frequency guide](#). Follow the industry cleaning standards, and post the facility protocols so that patrons are aware of the frequency they can expect and the risks they will assume.
- Patrons will be instructed to not share their own equipment and to clean shared equipment before and after use.
- The most effective response will be to increase the opportunities for employees, users and visitors to wash their hands. Encourage use of soap and water access in washrooms, and strategically locate sanitizing stations for optimal access in each facility.

Signage & Communications

- Internal and external signage and communications on COVID-19 protocols related to facilities and specific service areas will be required.
- Best practice suggests signs contain information and graphics to convey such as:
 - maximum attendance or other definitions for typical activities (example: singles only for racquet sports)
 - time limits for use
 - recommendation that users to return at a different time if the facility/ space is busy,
 - encourage safe behaviour and adherence to physical distancing, hand hygiene, and respiratory etiquette (e.g. coughing into elbow), and
 - reminders to not linger in areas where physical distancing may be difficult to control.
- Ongoing public and employee education to reduce chances of complacency will be essential.

In the event of a Case or Outbreak

Should an outbreak occur, early detection of influenza-like-illness or gastrointestinal symptoms will facilitate the immediate implementation of effective control measures to limit the size and length of an outbreak. The [BC Hotel Association](#) recommended procedures for managing an exposure or potential exposure to COVID-19 and provides guidance that is applicable for recreation:

- If an employee is concerned they may have come into direct contact with an individual with COVID-19, they should monitor their own health. If they develop **symptoms of COVID-19** (fever over 38 degrees, cough, respiratory issues), employers must instruct the employee not to come to work, to self-isolate, and to visit [the BC Ministry of Health Self-Assessment Tool](#) for further guidance
- Make sure employees know they must report respiratory illness to their employer. If they develop symptoms (cough, fever, fatigue, sore throat, runny nose, difficulty breathing and/or shortness of breath), they must stay home. They must also visit [the BC Ministry of Health Self-Assessment Tool](#) and/or dial 811 and follow any guidance provided by public health.
- Employers should ensure any medical information about an employee is kept in a secure location. It may be necessary to advise other employees there has been a case of COVID-19 confirmed in the workplace. However, any disclosure should avoid identifying information and be limited to the extent it is necessary to take precautions to protect health and safety. Similarly, patron information must remain confidential if a case is confirmed.
- Post your sick policy for employees and patrons noting that illness will not be tolerated in the recreation setting. Those who are ill or symptomatic must stay home; those presenting with symptoms will be sent home.
- Identify the roles and responsibilities for employees if a case/outbreak is reported.
- Provide an isolation room on site in the event an employee or a patron falls ill.
- Develop and implement enhanced infection prevention control measures for managing ill employees or patrons.

D – Service Readiness Checklist

When assessing their risk, local governments will evaluate their various service offerings to determine their level of readiness to reestablish services. The following six areas of consideration offer a check-list of considerations:

1. Physical Distancing and Limiting Gatherings

- Does the space/facility/program allow for physical distancing of the public and employees?
- Does the space/facility/program allow for controlling maximum gathering requirements?
- Have you calculated the new capacities for each programmable facility component?
- Have policies or procedures been developed for the monitoring and educating patrons about physical distancing and gathering requirements?
- Have employees been trained on proper procedures for monitoring physical distancing?
- Do you have a communications plan for sharing information on physical distancing, gathering requirements and monitoring procedures?
- Has signage been posted reminding community members to physically distance, stay home when sick, avoid lingering, and limit gatherings?
- Do you have a contingency plan in the event that mitigation and gating measures need to be reinforced due to a resurgence in COVID-19 case counts?
- Have you adjusted our emergency evacuation protocols and mustering arrangements to consider physical distancing (recognizing that physical safety in an emergency is the primary concern)?

2. Cleaning and Disinfection Practices

- Can the space/facility/program materials be properly cleaned/disinfected regularly? The [BCCDC](#) offers guidance.
- Have maintenance plans/checklists outlining cleaning protocols and frequency been created to prepare employees for implementation?
- Have you established service levels to maintain the cleaning protocols and frequency your facility has planned?
- Have you secured cleaning/disinfection supplies (see [WorkSafeBC Guide](#)) and non-medical PPE for employees?
- Do you have a plan in place for securing additional cleaning/disinfection supplies within the supply chain?
- Have you trained employees on proper cleaning/disinfection?
- Do you need to provide hand sanitizer to users?
- Have you posted information for patrons on your cleaning and disinfection practices (e.g. how often spaces are cleaned)?
- Have you considered requiring patrons to clean equipment after use? If so, have you provided the required cleaning supplies?

3. Staff Capacity

- Do you have a staffing plan in place to reopen spaces/facilities/programs?
 - Does your staffing plan include re-orientation of employees who have been off the job for an extended period of time, and overall training of all employees to review all COVID related policies, expectations and opportunities for feedback?
- Do you need to repurpose employees (e.g. full time to staff seasonal operations; admin shifting to maintenance/sanitization roles, etc.)?
- Is there a plan in place for protecting vulnerable/high-risk employees?
 - Does the plan include training, supervision and support for any workers expected to monitor compliance with public and/or may encounter disgruntled patrons? Employers should review working alone and harassment policies and procedures.
- Is there a contingency plan in place in the event of losses in staff capacity?

4. Measures to Protect Employees and the Public

- Do you have a clearly stated policy that every employee adheres to regarding the absolute need to stay home if sick or experiencing [symptoms of COVID-19](#)?
- Have you identified for your employees when and what PPE is needed?
- Have you secured a supply chain for the necessary PPE?
- Have you trained employees on the proper use and disposal of PPE?
- Is there a clear understanding in place regarding hand washing/sanitizing frequency of employees?
- Do you have updated emergency contact information for employees?
- Have you updated your first aid protocols, supplies, and dedicated rooms?
- Are there any processes required for start-up that might introduce risks? Consider the impact of restarting machinery, tools and equipment, or clearing systems and lines of product that may have been left when your business was closed.

5. Site-Based Questions

Based on the specifics of your spaces, facilities and programs, have you created a plan for additional employees and user protective measures that may be required? This may include:

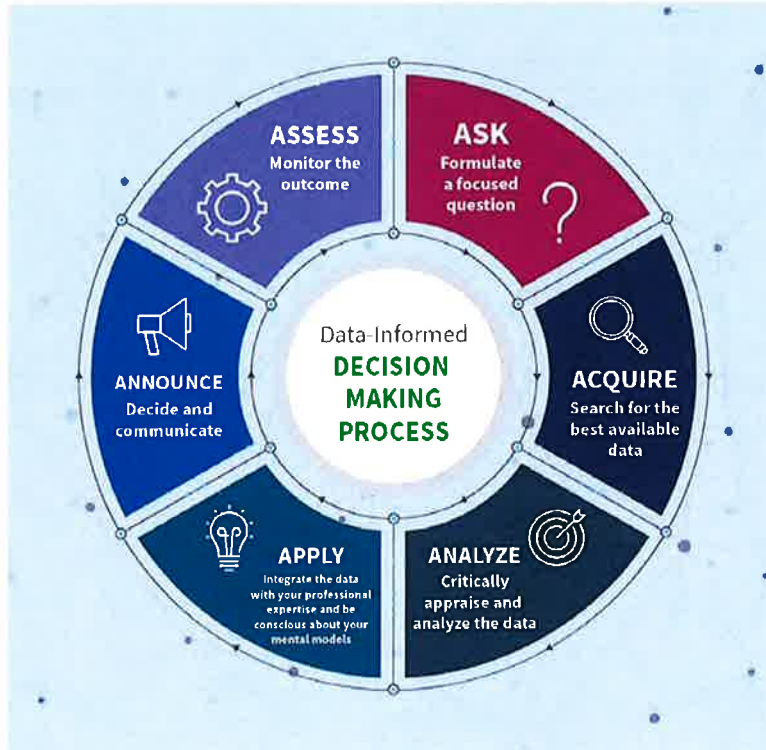
- Do you need/have updated emergency contact information for patrons?
- Do you have a plan to offer [health screenings](#) for employees? For patrons?
- Are you able to limit the number of patrons or stagger entry times?
- Can signage be installed reminding the public to physically distance, limit gatherings, stay home when sick, wear face coverings if necessary, and practice proper personal hygiene per CDC guidance?
- Will adjustments to equipment or office space be needed to meet physical distancing and/or reduce common touch points?
- Have you developed a drop-off system for childcare programs?
- Is there an isolation room on-site in the event someone falls ill during a program?
- If you are providing food, what policies are in place for food deliveries and distribution?
- Do you need additional organization vehicles?
- Will you need to install physical barriers to keep frontline employees safe?
- Do you have a plan should a case or outbreak occur on your site?

E – Monitor and Evaluate

As steps forward are taken, the goal is to keep moving forward while recognizing steps back may be necessary. Monitoring and evaluating may include:

- Change course as PHO orders and directives are announced
- Identify what is working well – seek feedback from patrons and employees
- Keep informed through recognized partnering agencies as they evaluate and adjust their practices
- Monitor incidences and solicit support from local health authority
- Expect fluidity of movement between levels as evaluation indicates
- Keeping informed through trusted sources such as the [BCRPA website](#).

The following decision-making model demonstrates an effective process:





APPENDIX 2 – SECTION 5 Service Area Specific Measures

This Appendix appears on the following page due to it's irregular size.

APPENDIX 3 – SECTION 6

Non-Common Approaches

This Appendix supports Section 6 of the Recreation and Parks Sector Guideline for Restarting Operations

Considerations for situations requiring non-common approaches (irregularities) can be evaluated based on the Province's Five Principles concept (referred to in section 3):

NON-COMMON SITUATIONS	Suggested Resolutions
Local Health Considerations	<p>Must follow regional health authority restriction that may differ from the other regional health authorities</p> <p>The availability of health care services is different in rural areas.</p> <p>A community may choose to continue more restrictive measures. This should be decided by the local government.</p>
Providing hand hygiene options is not always possible in outdoor venues	<p>Communicate to users through on-site signage and community websites the importance of hand hygiene, remind everyone to wash their hands before and after being in public outdoor settings, and to bring their own hand sanitizer</p>
Swimming in a chlorinated pool	<p>Communicate to the public that "There is no evidence that the virus that causes COVID-19 can be spread to people through the water in pools, hot tubs, spas, or water play areas. Proper operation and maintenance (including disinfection with chlorine and bromine) of these facilities should inactivate the virus in the water." BCCDC</p> <p>Communicate that all other physical distancing requirements remain.</p> <p>Could consider not providing public swimming and only structured programs such as swimming laps (s per guidance from Vancouver Coastal Health).</p> <p>Refer to Lifesaving Society COVID-19 guidelines of May 19, 2020</p>
Swimming in fresh water	<p>Communicate that ocean and fresh water recreational activity is low risk for infection of COVID-19 by</p> <p>Communicate that all other physical distancing requirements remain.</p>
Aquatics	<p>Lifeguards must have PPE supplies available, and must follow the Lifesaving Society COVID-19 guidelines</p>
Spitting	<p>Some team sports have a culture of spitting (e.g. baseball); work with leagues in your community to come to terms with the new normal (no spitting). Reconsider what is being sold at the concession (discontinue sunflower seeds).</p>

APPENDIX 3 – SECTION 6 continued

PROGRAMMING	Suggested Resolutions
Active play / sports and physical distancing	<p>Increase physical spacing to prevent inadvertent contact (running, basketball, cycling, lacrosse, trail users may all need to widen the gap).</p> <p>Follow best practices from viaSport and PSO's.</p>
Instructor / employee safety	<p>While employees working at reception can be located behind plexiglass shields, most instructors cannot.</p> <p>Use larger spaces and reduce participant numbers, mark off the floor and create a safe zone/ no-go zone for instructional employees.</p> <p>Consider limiting programming offerings if physical distancing cannot be maintained.</p>
Indoor events, programs and activities	<p>Move outdoors when possible and limit participation to enable physical distancing.</p>
Spectators/Parents	<p>If there is space for spectators/parents, communicate strict physical distancing requirements.</p> <p>If space does not allow for strict physical distancing do not allow spectators/parents. Communicate drop off and pickup procedures for participants.</p>

OUTDOOR RECREATION	Suggested Resolutions
Casual play, pick-up leagues, etc.	<p>Post the facility COVID-19 rules.</p>
Picnic areas: gazebos, picnic shelters, bandstands, picnic tables	<p>Where physical distancing may be challenging, remind patrons through signage of their personal responsibility to maintain a two metre distance from others.</p> <p>Consider removing or closing tables to meet physical distancing requirements.</p> <p>Post signage that tables are not to be moved or relocated in the park.</p>
Sports organizations	<p>Require all sports follow their PSO guidelines for COVID. If there is no corresponding PSO, organizations are to refer to viaSport guidelines for best practices.</p>
Sports Courts, Lacrosse, Tennis, etc.	<p>Communicate that participants:</p> <ul style="list-style-type: none"> • Use their own equipment, do not share equipment • Only be less than two metres physical distance with members of the same household • Physically distance two metres with people not in your household • Do not share water bottles • Limit participants playing at one time • Consider limiting the amount of playing time at high traffic locations • Consider directions to create a queue

APPENDIX 3 – SECTION 6 continued

OUTDOOR RECREATION	Suggested Resolutions
Benches, bleachers, dugouts	<p>These are generally fixed in place. Consider:</p> <ul style="list-style-type: none"> • If physically distancing is possible, marking places to sit and directional markings to access • If physical distancing is not possible, close off the area • Communicate with signage the need to physical distance
Golf Courses	<p>Seek direction from the Allied Golf Association COVID-19 Protection Best Practices.</p> <p>Consider only allowing on-line bookings</p> <p>Close locations and spaces where physical distancing rules cannot be met</p> <p>Provision of food will be determined by each municipality.</p>
Water fountains and water bottle filling stations	<ul style="list-style-type: none"> • Public drinking water is safe to drink, however the surfaces around the fountain including the spout, button/lever and nozzles could pose a risk for the transmission of COVID-19 and other germs. Find a way to communicate: <ul style="list-style-type: none"> ○ Don't place your mouth on the spout of the fountain or allow your water bottle to come into contact with the nozzle when refilling. ○ Test the water flow and let the water flow for 10 seconds to allow for fresh, clean water to come through prior to drinking. ○ If the fountain requires you to push a button or lever, clean the surface before and after, or use your elbow. ○ Clean your hands afterwards with an alcohol-based rub or wash them with soap and water. • Consider more frequent cleaning of drinking water fountains. • Consider leaving fountains closed if additional cleaning cannot be provided
Campgrounds	<ul style="list-style-type: none"> • Complete a risk assessment for the campground • Follow COVID-19 Guidance to the Hotel Sector • Refer to BC Parks Response to COVID-19

APPENDIX 3 – SECTION 6 continued

OPERATIONAL ISSUES	Suggested Resolutions
First aid for patrons in your facility	Follow protocols provided by governing bodies such as Red Cross and Lifesaving Society for COVID-19 protocols, and follow hygiene and distancing as guided by occupational first aid attendants in your workplace. Also see WorkSafeBC OFAA protocols .
Food Services	Follow British Columbia Restaurant and Foodservices Association Blueprint .
Contractor and Community Association Partnership Considerations	<p>Provide contractors/partners with the municipal WorkSafe exposure mitigation plans.</p> <p>Ensure the contractor/partner has a WorkSafeBC exposure mitigation plan.</p> <p>Have a site safety meeting to plan the work according to WorkSafeBC plans.</p>
Cash Handling	<p>Follow the organization's safe work procedure for exposure mitigation.</p> <p>While there will be varying exposure control plans, ensure that your employees are well-trained in your organization's control plans. Where possible, provide online payment options or tap.</p>
Indoor Touch Points	<p>Evaluate, create a list and an exposure control plan for all frequent touch points</p> <p>Include vending machines, key pads, bank machines, shared computers and other office equipment, POS locations, as well as the common switches, door handles, pay phone or public access phones, elevator buttons, indoor furnishings, etc.</p> <p>Consider propping open doors or installing motion sensor to reduce need to touch door handles, etc., while not contravening existing fire safety rules.</p>

APPENDIX 4 – SECTION 8 EXPOSURE CONTROL PLANNING

This Appendix supports Section 8 of the Recreation and Parks Sector Guideline for Restarting Operations

The checklist is was designed for considerations regarding user groups, but is equally applicable to local government considerations for programs and services.

KEY CONSIDERATIONS	USER GROUPS TO CONSIDER	LOCAL GOVERNMENT TO CONSIDERATIONS
Physical Distancing of at least 2m	<p>Procedures outlining how participants will maintain minimum distance; establish minimum distance based on type activity; may include a site plan.</p> <p>Procedures outlining how spectators will maintain physical distancing.</p> <p>Procedures for access and egress from facility including parking lots.</p>	<p>Provided: engineering and administrative controls for physical distancing.</p> <p>Will spectators be allowed?</p> <p>Are there potential congestion areas requiring additional controls?</p> <p>Whose responsibility are those controls?</p>
Frequent Hand Hygiene	<p>Procedures to promote hand hygiene, including advising users to wash hands before arrival and after play, to provide personal hand sanitizer.</p>	<p>Provided: Infrastructure to enable hand hygiene, including details on the location of washrooms or stations.</p> <p>Will hand sanitizer be provided in addition to standard infrastructure supplies?</p>
Cleaning and Disinfection	<p>Users will sanitize their own equipment and do so with their own cleaning supplies.</p>	<p>Products and procedures for surface touch points as well as high use areas will follow BCCDC and WorkSafeBC employee safety protocols.</p> <p>Post your cleaning schedule.</p>

APPENDIX 4 – SECTION 8 continued

KEY CONSIDERATIONS	USER GROUPS TO CONSIDER	LOCAL GOVERNMENT TO CONSIDERATIONS
Gatherings (group size determined by physical distancing requirement)	Confirmation of adherence to facility use area(s) maximum participant count for space being used.	Confirmation of facility use area(s) and maximum participant count for each space.
Participants Who Are Ill	Process for advising participants in advance about personal health and addressing individuals exhibiting signs of illness on site.	Have you provided information advising users about personal health and addressing individuals exhibiting signs of illness on site?
Sharing of Equipment	Procedures for managing equipment needs for participants to avoid sharing of items.	When equipment is supplied, provide expectations regarding user and municipal responsibilities for sanitization. Towels and other shared resources will not be provided.
Communication Plan	Evidence of communications to employees, volunteers, and participants to reinforce safety control measures.	Posting of policies and procedures for safety control measures.
Training of Employees/ Volunteers	Evidence of training for individuals leading or supporting activities, per industry requirements (ie WorkSafeBC, etc) New coaching/instructor guidelines.	Training policies and procedures for facility employees is available upon request.
Emergency Procedures	Updated procedures for first aid, medical assistance, PPE supplies, and protocol response to cases or outbreaks.	Updated facility emergency plans – first aid, PPE, response to fire alarms (mustering), and protocol response to cases or outbreaks of COVID-19 etc.

APPENDIX 5 – SECTION 9

WorkSafeBC PROTOCOLS FOR PARKS

This Appendix supports Section 9 of the Recreation and Parks Sector Guideline for Restarting Operations

1. PREPARE YOUR WORKPLACE

- Review and coordinate roles and responsibilities with all contractors, suppliers, and employees. Employers should develop procedures to ensure contractors are aware of your health and safety program requirements, including relevant COVID-19 related protocols and are following protocols of their own.
- For locations where parks employees are working from multi-ministry or regional offices, coordination is required to ensure plans align across locations.
- Review staffing levels and adjust as needed to ensure enhanced cleaning of high-touch areas and enhanced employee presence to manage park visitors.
- Determine the maximum number of people in each area or space to maintain physical distancing requirements. See the [COVID-19 Safety Plan](#) for guidance on establishing occupancy limits.
- In welcoming visitors, send out information through regular marketing channels and social media about limitations, rules, limited facilities, and service to manage expectations during partial openings.
- Provide signage and information regarding rules and process throughout the facility including park, beach, sport court, and general outdoor areas. Consider posting signage in other majority languages or provide pictograms.
- Consider enhanced measure to maintain the physical distancing requirement:
 - Control entry and exit points for visitors and workers
 - Manage the flow of people by implementing one-way walkways or marking off designated walking areas
- Consider creating cohorts of workers who work together and who do not interact with other cohorts. This will assist in reducing transmission throughout the workplace in the event that an employee becomes ill.
- Ensure workers who have been away, or are new to the workplace, are oriented as necessary so that all COVID-19 related procedures are explained and understood.
- Identify situations where personal protective equipment (PPE) will be required. Clarify who will provide PPE and train workers accordingly.
- Identify a process to regularly review and/or update protocols and include workers in your review process.

2. Shared workspaces

GENERAL WORKER PROTOCOLS

- Establish and [post occupancy limits](#) for office space, lunch rooms, vehicles and other common areas. Ensure physical distancing can be maintained.
- Limit in-person meetings and other gatherings and hold any meetings in larger open spaces.
- Establish hygiene practices that address the needs of the workplace that includes the requirement to [wash or sanitize hands](#) after coming into contact with public items.
- Post cleaning procedures and worker expectations in all common spaces.
- Before entering any shared space such as vehicle or office, wash hands or use hand sanitizer.
- Clarify procedures to wipe down or disinfect shared office equipment before use.
- Maintain at least a 2 metre distance from other workers. If the physical distancing requirement cannot be maintained, hold a meeting to address solutions.
- Consider holding meetings in small groups and maintain physical distancing. Hold meetings in open spaces or outside if possible.

VEHICLES

- Employers should assess the number of workers being transported or sharing vehicles at any given time and employ measures to ensure at least 2 metres of distance between workers is maintained.
- Whenever possible, workers should travel alone in their vehicles. Employers must implement all the necessary safeguards related to working alone or in isolation to ensure the safety of these workers.
- Measures that may be taken to ensure at least 2 metres of distance include the following:
 - Have workers sit one to a seat
 - Stagger riders to allow for maximum distance
 - Adjust the number of workers per trip and the overall number of trips needed to transport workers to a worksite
 - If possible, use larger vehicles or multiple vehicles
- Track who drives which vehicles and minimize changes in teams or vehicle assignments. Consider creating consistency in crews of workers using vehicles together and performing shifts or work tasks together.
- If it is not possible to ensure 2 metres of distance between workers in a vehicle through these measures, the employer must consider other control measures, such as PPE where appropriate.
- Employers must also implement a process that allows for physical distancing when loading and unloading buses or other vehicles. Workers waiting for loading and unloading should maintain physical distancing while remaining safely away from traffic.

- Employers should have handwashing facilities or sanitizing stations available to workers as they enter and exit the vehicle.
- Employers must ensure that high contact surfaces within the vehicle are routinely cleaned and disinfected. These include seatbelts, headrests, door handles, steering wheels, and hand holds.
- Incorporate end-of-shift vehicle wipe downs, include a method for tracking end of shift cleaning and provide workers with appropriate supplies, like soap and water, hand sanitizer, and disinfectant wipes.
- Helicopter, ATV, and boat use should be limited to essential use only.

STAFF ACCOMMODATION

- Complete a risk assessment and consider new strategies for shared staff accommodation, including housing people in groups of less than six and defining teams of workers who live and work together in exclusive groups. This will help reduce the risk of transmission to larger groups.
- The BC Centre for Disease Control has issued [Protecting workers at large industrial camps during the COVID-19 pandemic](#) that provides useful information for managing shared worker accommodations.
- Provide single room occupancy or ensure spacing of beds is adequate.
- Manage location of personal gear and care items to minimize exposure.
- In remote scenarios, established guidelines to limit employee interactions with communities whenever possible.
- Clarify and follow cleaning and disinfecting schedules.
- Establish rules for socializing locations to ensure physical distancing is maintained. Events must have fewer than 50 people to align with the public health officer's prohibition on mass gatherings. Hold these events outdoors whenever possible.

3. Public Interface

- Ensure any employees that are expected to manage groups of visitors are trained in protocols.
- Ensure employees have the support and strategies for dealing with visitors who may be unwilling or are unable to understand the approach to managing visitor volumes. This should include reviewing your violence risk assessment, policies and procedures, and training and reporting requirements under the Occupational Health and Safety Regulations for minimizing the risk of violence to workers.
- Provide signage and determine how crowd limits and spacing will be controlled, and who will be responsible. See the [COVID-19 Safety Plan](#) for guidance on establishing occupancy limits.

- Provide markers or indicators to ensure spacing:
 - Limit parking
 - Space out or limit bike valet or bike racks
 - Space out or limit the number of picnic tables, and put signage on table for the maximum number of people per table
- When working amongst members of the public, set up barriers or tape to delineate the worksite and to discourage the public from entering the area.

PARK ENTRY/RECEPTION

- Do not allow public access into offices.
- Provide physical barriers, such as glass, if the physical distancing requirement cannot be maintained.
- Try to limit the use of cash and limit the handling of credit cards and loyalty cards whenever possible, by allowing customers to scan or tap their cards and handle the card readers themselves. Encourage tap payment over pin pad use. Establish hygiene practices that address the needs of your workplace, and includes the requirement to wash or sanitize hands after handling cash.
- Provide hand sanitizer to the public and workers.
- Wipe down shared machinery between users (such as payment or ticketing machines).

CONCESSION STANDS

- Refer to guidance provided to [Restaurants, cafes, and pubs](#).
- Ensure there are sufficient employees to manage the volume of customers and associated line ups and food pick-up areas.

INTERPRETIVE CENTRES, AMPHITHEATRES, NATURE HOUSES

- Only provide these services when physical distancing measures can be maintained and provide enhanced cleaning.

SPORTS

- Employers should have COVID-19 related protocols for coaches who are workers. These protocols should include interacting with park employees and members of the public, and how to handle suspected cases of COVID-19.
- This should include clear guidance on the use of park spaces and equipment, including cleaning, disinfecting and storage of publically available sporting equipment and facilities.
- Lifeguard and other aquatic employee protocols will be available at a later date.

4. Facility Cleaning

- Work activities such as cleaning washrooms, change rooms, garbage, and recycling removal (waste management) must have protocols in place to limit risk of COVID-19 transmission. This includes training in and supervising of formal cleaning and disinfecting procedures.
- Identify, provide, and show location of cleaning products and when and how they will be used. Review and update WHMIS training and procedures.
- Provide hand sanitizing stations at all entryways for everyone to use.
- Provide physical distancing signage at washroom and change room entryways.
- Convert washrooms to individual use if possible, or limit number of people inside at any time.
- Provide and follow enhanced cleaning schedule and disinfection protocols for washrooms.

5. Visitor Management

- Develop emergency plans for crowd control and employee support in events such as:
 - Medical emergencies, including providing first aid to the public (consider vulnerable visitors)
 - Sudden over-crowding
- Coordinate emergency plans with local emergency responders and put special consideration to the remote nature of many of these worksites
- Ensure your staffing type and levels are adequate to manage aggressive or disgruntled customers. Develop compliance and enforcement procedures, including reviewing and updating working alone procedures as required.

APPENDIX 6 – SECTION 9

Return to Safe Operations Due Diligence Template

APPENDIX65, Return to Safe Operations Due Diligence Template

This Appendix supports Section 9 of the Recreation and Parks Sector Guideline for Restarting Operations



Insert your logo here

Return to Safe Operations Due Diligence Template

Below is information copied from the following WorkSafeBC webpage with that addition of information completed by (insert your organization here)

Municipalities and COVID-19 safety – from WorkSafeBC website on May 13, 2020

WorkSafeBC is working with workers, employers, and industry associations to ensure municipal worksites remain healthy and safe during the COVID-19 outbreak.

We are providing information to workers and employers through worksite inspections focusing on the controls that the employer can use to limit exposure, including maintaining distance between workers and ensuring adequate hygiene facilities. We are continuing to engage in inspection, consultation, and education activities within the sector to ensure everyone in the workplace is fulfilling their obligations.

For more information from WorkSafeBC, please see:

- [Preventing exposure to COVID-19 in the workplace](#): a guide that employers may use to assess the risks and controls in their workplace.
- [COVID-19 health and safety information](#): general information for all employers and workers about staying safe at work
- [Frequently asked questions](#): answers to questions from British Columbian workers and employers on how to maintain a healthy and safe workplace

RETURNING TO SAFE OPERATION

The B.C. government has announced a [phased approach for reopening B.C. businesses](#). We are partnering in the initiative by developing specific resources for industries as they prepare to reopen. Learn more by viewing our general guide on [COVID-19 and returning to safe operation](#) and answers to [frequently asked questions](#).

CONTROLLING THE RISK OF COVID-19 EXPOSURE

Employers must take all necessary precautions to minimize the risk of COVID-19 transmission and illness to themselves, workers, and others at the workplace.

Employers may consider some of the following advice or best practices to reduce the risk of worker exposure to COVID-19:

Background and general information: (Examples, activation of an EOC, COVID-19 information webpage on E-link, etc).

Who should come into the workplace	
Implement a procedure requiring anyone with symptoms of COVID-19 such as sore throat, fever, sneezing, or coughing to self-isolate at home for 10 days from onset of symptoms, as well as anyone advised by public health to self-isolate.	(Examples, Pandemic COVID 19 Response – Employee Leave, Employee Pandemic Leave, FAQs etc.)
Prioritize the work that needs to occur at the workplace for you to offer your services.	(Example, a list of essential and critical services)

Physical distancing and other preventative measures	
Stagger start times for workers to prevent crowding at locations.	(Examples, staggered start times, how they report to work – either going to the yard or site, etc.)
Eliminate in-person team meetings or modify them to incorporate technology such as conference calling and online meetings.	(Examples, conference calling options, in-person meetings taking place in large or open areas with sufficient physical distancing, some employees working from home, etc.)
Modify work processes and practices to encourage physical distancing between them and customers, clients, and other workers.	(Examples, closing all municipal facilities to the public, service by appointment only, etc.).
Provide instructions to workers on methods for maintaining physical distance from customers, clients, and other workers, such as not greeting others by shaking hands, or removing or modifying proof of delivery signature requirements and money collection requirements.	(Examples, safety talks, posters, procedures, etc.)

Cleaning and hygiene	
Ensure workers are provided with appropriate supplies, such as soap and water, hand sanitizer, disinfectant wipes, nitrile gloves and garbage bags, and sufficient washing facilities.	(Examples, critical supplies identified and inventories created, etc.)
Remind employees of effective personal hygiene practices. Add signage about best practices for personal hygiene for customers who may interact with your workers.	(Examples, Special Advisory, posters, signage, etc.)
Remove shared items where cross-contamination is possible (e.g., shared tools, coffee and water stations and snack bins).	(Example, using disposable products, etc.)
Enhance cleaning and disinfecting practices in high contact areas like door and cabinet handles, keyboards, light switches, steering wheels, and communications devices.	(Examples, Cleaning risk assessments, cleaning schedules, etc.)
Incorporate end-of-shift wipe downs for all shared spaces.	(Example, establish a system to identify computer workstations that have been cleaned and disinfected, etc.)

Documentation and training	
Train your employees on changes you've made to work policies, practices, and procedures due to the COVID-19 pandemic and keep records of that training.	(Example, establish corporate system.)
Ensure that workers can raise safety concerns. This may be through your joint health and safety committee.	Examples, ensure that employees have a plan to address COVID-19 concerns, set up a communication link etc.)

Worker transportation	
<p>Whenever possible, workers should travel alone in their vehicles in order to practice physical distancing. If that is the case, employers must implement all of the necessary safeguards related to working alone or in isolation, to ensure the safety of these workers.</p> <p>Measures that may be taken to ensure appropriate distance include having workers sit one to a seat, with riders staggered to allow maximum distance between them; adjusting the number of workers transported per trip; and increasing the total number of trips needed to transport workers to a worksite. These measures may mean using larger vehicles to ensure maximum spacing or using multiple vehicles.</p> <p>If it is not possible to ensure 2 metres of distance between workers in a vehicle through these measures, the employer must consider other control measures, such as PPE where appropriate.</p>	<p>(Examples, Changes to fleet use establishing one person per vehicle, assessing risk, need and benefits of installing non-rigid impervious barriers, etc.)</p>
<p>Employers must also implement a process that allows for physical distancing when loading and unloading vehicles. Workers waiting for loading/unloading should maintain physical distancing while remaining safely away from traffic.</p>	<p>(Example, social distancing plan for unloading/loading vehicles, etc.)</p>
<p>Employers should have hand washing facilities or sanitizing stations available to workers as they enter and exit the vehicle.</p>	<p>(Example, Alcohol based hand sanitizer be available, etc.)</p>
<p>Employers must ensure that high contact surfaces within the vehicle are routinely cleaned. These include seatbelts, headrests, door handles, steering wheels, and hand holds.</p>	<p>(Examples, Risk assessment for cleaning vehicles, etc.)</p>

Resolving concerns about unsafe work
<p>Workers have the right to refuse work if they believe it presents an undue hazard.</p> <p>An undue hazard is an “unwarranted, inappropriate, excessive, or disproportionate” hazard. For COVID-19, an “undue hazard” would be one where a worker’s job role places them at increased risk of exposure and adequate controls are not in place to protect them from that exposure.</p> <p>If the matter is not resolved, the worker and the supervisor or employer must contact WorkSafeBC. Once that occurs, a prevention officer will consult with workplace parties to determine whether there is an undue hazard and issue orders if necessary.</p> <p>For more information, see Occupational Health and Safety Guideline G3.12.</p>

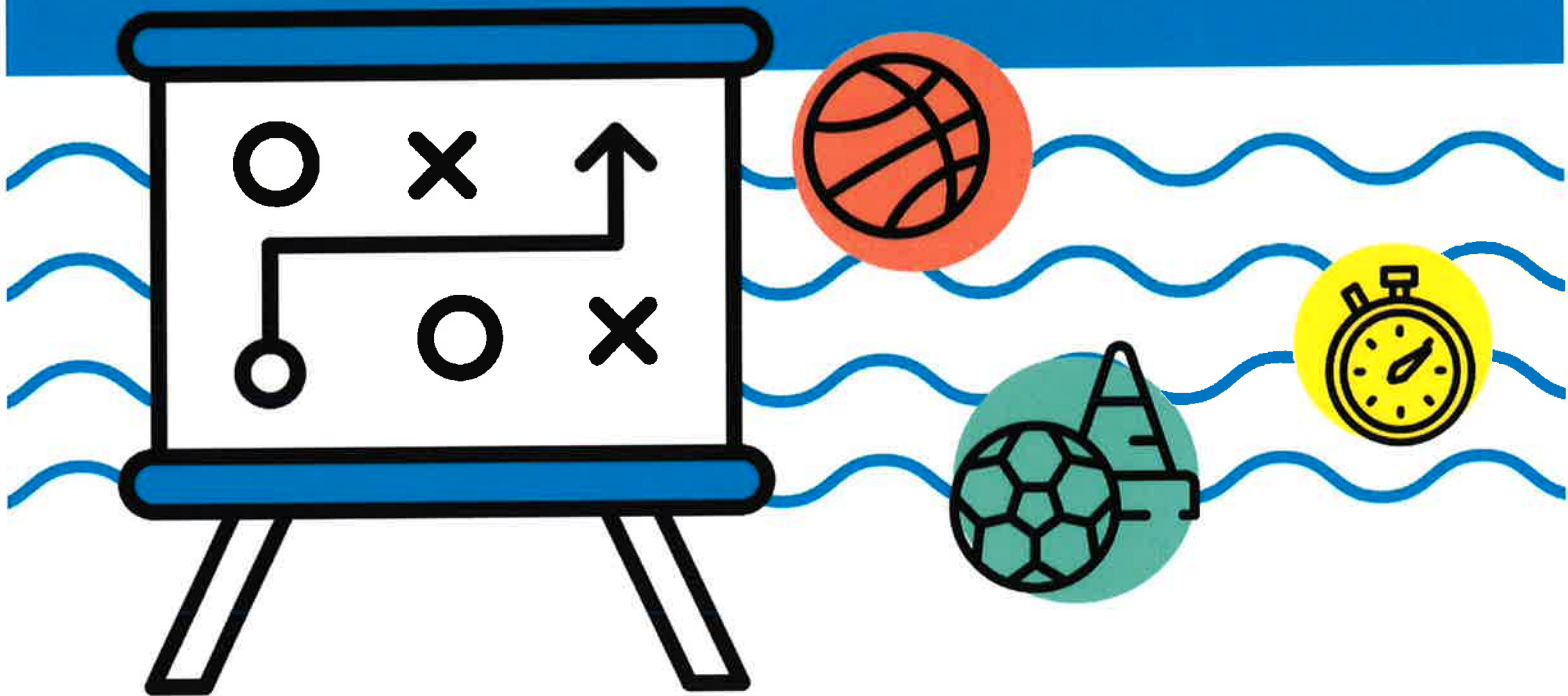
JUNE 22, 2020 - COW

See Item 6.A. - COVID 19 Risk Mitigation
Attachment V

viaSPORT
BRITISH COLUMBIA

Return to Sport

GUIDELINES FOR B.C.



This document contains current information. It was last revised June 11, 2020.

COVID-19 PROTECTION – RETURN TO SPORT GUIDELINES

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INTRODUCTION

On May 6, 2020 the Government of B.C. announced B.C.'s Restart Plan: Next Steps to Move Through the Pandemic¹. The goal outlined within this plan "is to slow the spread of COVID-19, protecting our most vulnerable and ensuring our health-care system can respond to increased demand while we develop a vaccine."

In Phase Two, some easing of restrictions will enable certain businesses and activities to open and operate within the orders of the Provincial Health Officer (PHO). This is not a return to normal, but rather to a "new normal" which will require everyone to modify their behavior, stay informed, apply protective measures and follow public health advice. Restarting is not mandatory – each organization must assess and decide for itself whether and when it is appropriate to restart operations.

Prior to restarting, every organization must have an explicit plan for the measures they will implement and maintain over the coming 12 to 18 months. These plans must be in compliance with orders and guidance from the PHO, and must be made available to the public either by posting on the wall of the organization's facility or on its website.

To help organizations in their planning, major stakeholders in each sector have been asked to create sector-specific guidance documents. viaSport has been asked by the Minister of Tourism, Arts and Culture, Lisa Beare, to develop this Return To Sport Guidelines document (the "RTS Guidelines") to support the provincial amateur sport sector in B.C. Prior to restarting, all provincial sport organizations and their clubs should use this RTS Guidelines to develop their own sport-specific Return to Sport plan and work towards careful and gradual restarting within their own communities.

The information in this document is current as of June 11, 2020.

viaSport would like to acknowledge and thank the following organizations for their contributions to this document:

- Province of B.C., Provincial Health Office, Ministry of Tourism, Arts and Culture
WorkSafeBC
- Recreation Facilities Association of BC
- Norton Rose Fulbright
- The viaSport MSO Leadership Council: BC Games Society, BC 55+ Games, BC Recreation and Parks Association, BC School Sports, BC Sports Hall of Fame, CSI-Pacific, I-SPARC, Sport BC and SportMed BC

Our work takes place on the unceded, traditional territory of the Musqueam, Squamish, and Tsleil-Waututh Nations.

¹ B.C.'s Restart Plan: Next Steps to Move Through the Pandemic:
https://www.scribd.com/document/460236402/B-C-s-Restart-Plan-Next-Steps-to-Move-Through-the-Pandemic#fullscreen&from_embed

PURPOSE

The purpose of this document is to support amateur sport organizations to develop their own explicit plans to guide the cautious, step-by-step safe return of their sport in B.C. during this pandemic. The RTS Guidelines provide general information on a number of topics, and includes links to additional information and resources that can support decision-making and communication with boards, clubs, members, and other sport partners.

The PHO's direction is that the RTS Guidelines should cover three things:

- 1 Processes to open safely
- 2 Measures to keep people safe to avoid further outbreaks
- 3 A plan in the event that a case or an outbreak should occur

In this process, one size does not fit all. Each sport has unique issues which need to be factored into their own Return to Sport Plan. Modifications and changes to standard practice will be required, and these modifications will need to be practical and tailored to the sport and the participants. However, while there can be some flexibility in how sport organizations develop their Return to Sport Plan and deliver a return to sport activities in communities, all sport activities in B.C. must operate within current provincial health restrictions in order to promote the safety of our communities. Every organization's Return to Sport Plan must include clear policies to ensure:

- no one with symptoms comes to work or to the sport activity, and staff are able to be off sick or work at home to enable self-isolation for ten days (at minimum)
- employees have fewer workplace contacts (shorter times, fewer people), through such measures as staggered shifts, smaller teams, occupancy limits, virtual meetings, continuing to work from home
- higher levels of frequent cleaning of 'high touch' areas of facilities and equipment, availability of hand sanitizer and encouraging good hygiene

Further, your plan must be based on an assessment of the risks present in your operation. This may involve consultation with employees, volunteers and participants. Your organization must train and adequately supervise employees and volunteers to ensure they implement the measures appropriately. Communications including signage and reminders should be used. Risks must be re-assessed and plans updated as needed, if circumstances change or as guidance is updated.

GOVERNANCE

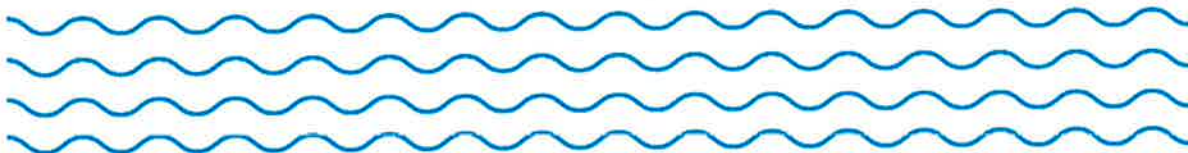
The Emergency Program Act (EPA) authorizes provincial and local levels of government to declare states of emergency and make decisions about community safety. The Ministry of Tourism, Arts and Culture works closely with viaSport BC to provide direction and oversight to the development and delivery of amateur sport in B.C. viaSport BC is a non-profit society that acts as an agent for the Ministry to enable the growth, governance, and stewardship of amateur sport in B.C. viaSport works closely with provincial and national sport partner organizations to align approaches, develop standards and policies, and follow the guidance of health officers to support the safety of sport participants, volunteers, coaches, suppliers, staff, and others within the eco-system. Provincial sport organizations are also independent non-profit societies that work with viaSport BC and their national sport federations to align and set policies and practices for their membership. Each provincial sport organization is overseen by a Board of Directors that approves policies and is responsible for the oversight of the organization. Members of provincial sport organizations are required to follow and implement such policies. During this pandemic, the adherence to, and implementation of, these return to sport policies and practices for all members of provincial sport organizations, including clubs, associations, and individual members, will help promote the safety of our communities. These proactive measures can help preserve community health.

PRINCIPLES

The following five principles from B.C.'s Restart Plan have been used to guide this document.

Five Principles For Every Situation

Personal Hygiene:	Stay Home if You Are Sick:	Environmental Hygiene:	Safe Social Interactions:	Physical Modifications:
<ul style="list-style-type: none"> • Frequent handwashing • Cough into your sleeve • Wear a non-medical mask • No handshaking 	<ul style="list-style-type: none"> • Routine daily screening • Anyone with any symptoms must stay away from others • Returning travellers must self-isolate 	<ul style="list-style-type: none"> • More frequent cleaning • Enhance surface sanitation in high touch areas • Touch-less technology 	<ul style="list-style-type: none"> • Meet with small numbers of people • Maintain distance between you and people • Size of room: the bigger the better • Outdoor over indoor 	<ul style="list-style-type: none"> • Spacing within rooms or in transit • Room design • Plexiglass barriers • Movement of people within spaces



RETURN TO SPORT

Sport and physical activity play an important role in the physical, psychological and emotional well-being of citizens in British Columbia. For this and other economic and social reasons we are all eager to resume sport activities. However, the health and safety of all participants and citizens for British Columbia must remain the number one priority.

For the purposes of this document “Sport” is defined *as any organized sport activity that involves a number of people doing a physical activity together in a structured way and is facilitated by a Provincial Sport Organization or Local Sport Organization.*

“Recreation” as defined by the Canadian Parks and Recreation Association is the experience that results from freely chosen participation in physical, social, intellectual, creative and spiritual pursuits that enhance individual and community wellbeing.” Physical activities would include those undertaken as leisure, fitness training and sport-related activities that are done at the discretion of the individual(e.g. – use of parks, hiking trails, public recreation facilities), either self-led or facilitated by recreation leaders and are not included within the context of this document.

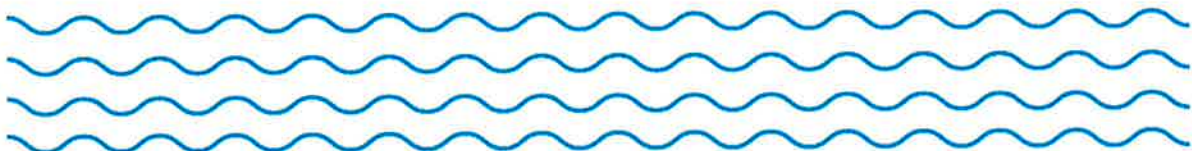
Refer to Appendix B for list of additional definitions pertinent to Return to Sport. As with all other activities, Return to Sport will require a gradual, thoughtful, phased approach. The provincial government plans to lift restrictions in phases, while closely monitoring population health patterns to minimize risk to British Columbians. At the time of release, we are in Phase Two with Phase Three following sometime between June and September. Organizations will need to be mindful of the phase that the province is in, and avoid moving too quickly to introduce activities (such as high-contact activities) prematurely.



Accordingly, in the short-term, modifications will need to be made to many sport activities in order to ensure that they meet provincial guidelines and are consistent with the limits inherent in Phase Two, and subsequently Phase Three, of the Restart Plan.

Refer to the section on Sport Programming for more information on activity types and how they can be phased in.

Please note resuming of sport activities may not be linear, increasing restrictions may be required in response to fluctuating numbers of COVID-19 cases in the province. Sport organizations need to be flexible to accommodate and respond to changes in community transmission and the changes in advice from the Provincial Health Officer.



COVID-19 AND TRANSMISSION

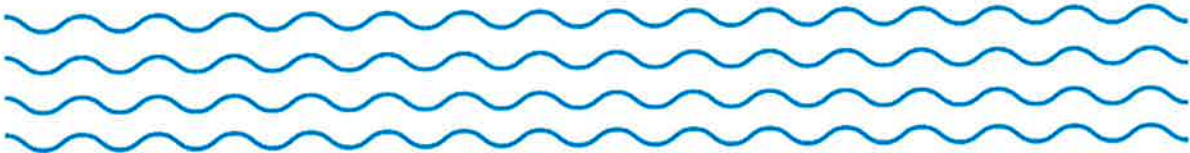
COVID-19 is transmitted via liquid droplets when a person coughs or sneezes but also potentially when they are talking in very close proximity to another person. The virus in these droplets then can enter the body of another person when that person breathes in the droplets or when the droplets touch the eyes, nose or throat of that person.

This requires you to be in close contact – less than the so-called physical distancing of three to six feet. This is referred to as ‘droplet’ transmission and is believed to be the primary way COVID-19 is transmitted.

COVID-19 can also be transmitted through droplets in the environment if someone touches a contaminated area then touches their face without cleaning their hands. The virus does not enter the body through skin, it enters through the eyes, nose or mouth when the person touches their face. Unfortunately, human beings touch their faces very often throughout the day, much more than they realize. This is why regular handwashing and cleaning of high-touch surfaces is so important.

For COVID-19 there are some emerging indications that there are people who can shed COVID-19 virus 24 to 48 hours prior to symptom onset, but at present, it is not known whether this is a significant risk factor for transmission.²

Droplet transmission is much more likely when in close contact in an indoor setting. Transmission is less likely in an outdoor setting, where there is more space for people to keep physically distanced. However, in the context of sports, even outdoors there can be risks from high-touch surfaces because many sports involve objects that are normally shared among players, coaches or volunteers (balls, equipment, etc.).



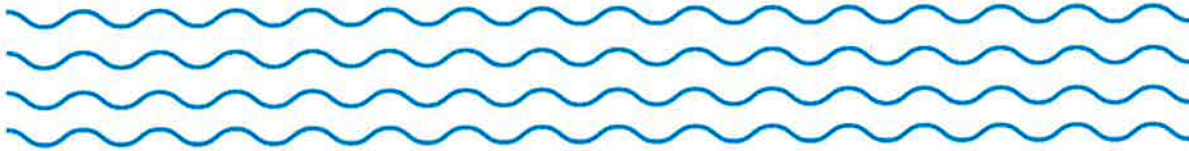
SYMPTOMS OF COVID-19

The symptoms of COVID-19 are similar to other respiratory illnesses, including the flu and the common cold. These 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 and loss of appetite.

² Go Forward Strategy Checklist available at: https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/gdx/go_forward_strategy_checklist_web.pdf?bcgovtm=20200506_GCPE_AM_COVID_9_NOTIFICATION_BCGOV_BCGOV_EN_BC_NOTIFICATION

People infected with COVID-19 may experience little or no symptoms, with illness ranging from mild to severe.

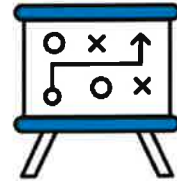
Some people are more vulnerable to developing severe illness or complications from COVID-19, including older people and those with chronic health conditions.³



RISK MANAGEMENT

When determining whether or not your sport or organization is ready to resume sport activities it is important to note that at the time of publishing this document most insurance policies will not cover any claims relating to communicable diseases or pandemics and that most policies, including Directors and Officers Insurance, now include specific pandemic exclusions.

On June 10, 2020 the provincial government announced a ministerial order⁴ that protects amateur sport organizations, their employees and volunteers from damages resulting directly or indirectly, from COVID-19. This liability protection will be in place as long as sport organizations follow applicable guidance, such as viaSport's Return to Sport protocols and public-health guidance. This order is in place for the duration of the Emergency Program Act. The risk mitigation practices below still all apply.



Role of the Board: The board of an organization is responsible for the oversight of risk. A board may delegate much of the work involved in managing risk, but cannot delegate its responsibility for oversight.

Risk Mitigation

- Reopening must be planned around assessing the risks and developing a sport specific Plan to take all necessary precautions to mitigate the risk of an individual being exposed to or infected with the virus.
- The Return to Sport Plan developed by your organization should be based on a risk assessment and analysis that considers the risks presented by the type of sport activities and the place where the sport activities occur, who is involved and their risk profile, and what measures can be implemented.
- The Return to Sport Plan must be made easily available to staff, volunteers, participants and other stakeholders, through the organization's website or posted in the facility.

³ COVID-19 Guidance for the Hotel Sector updated May 11, 2020
<https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-guidance-hotel-sector.pdf>

⁴ Ministerial Order: http://www.bclaws.ca/civix/document/id/mo/mo/2020_m183

- Staff, volunteers and participants should be trained on the Return to Sport Plan (as appropriate to age/role).
- The Return to Sport Plan must be consistent with the guidelines and directives set by government, WorkSafe BC and health authorities.
- Implementation of the Return to Sport Plan should be monitored and updated as necessary when circumstances or provincial guidance changes. Pending the membership affiliation of your sport, the respective boards have fiduciary responsibilities and are accountable for the decisions and work of the organization. Each board should understand and be comfortable with the level of risk the organization is taking on and approve the adoption of their organization's sport-specific Return to Sport Plan before implementation begins.
- It is strongly recommended that provincial sport organizations have their members including clubs, and/or local sport organizations acknowledge the risks associated with reopening and their agreement to follow the provincial sport organization's plan.
- Once approved, all activities sanctioned by that sport organization should follow their guidelines.
- Participants should be asked to sign a participant agreement acknowledging their acceptance of the risks (see sample form in Appendix D).
- Existing waivers, releases and/or participant agreements should be reviewed to confirm that they are broad enough to encompass COVID-19 related risks. Consider revising such documents to explicitly reference COVID-19 related risks. Further consider whether any such documents which were completed by participants before the COVID-19 pandemic should be completed again before activities resume.

B.C. health officials outline that the risk of transmission is subject to two variables that we need to modify to reduce transmission risk:

- Contact intensity – how close you are to someone and for how long
- Number of contacts – how many people are in the same setting at the same time

Modifying from high to low can be based on a range of controls. Different actions have differing levels of protection and whenever possible use the action that offers the most protection. The following are listed from highest level of protection to lowest

- Physical distancing measures – to reduce density of people, (number and duration of contacts)
- Engineering controls – physical barriers, increased ventilation, traffic flow
- Administrative controls – rules and guidelines
- Non-medical masks (and other PPE)

This document outlines how these strategies for can be applied within sport across four key areas: Facility Access, Facility Operations, Participants and Programming.

- For more information about how to conduct an assessment and develop a Plan, see COVID-19 Returning To Safe Operations: <https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation>

- PHO Orders: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>



FACILITY ACCESS AND USE

Public health officials have indicated that the use of outdoor facilities are generally safer as there is greater ventilation and ability to physical distance. This does not limit indoor sports from reopening but it does increase the risk factor and therefore adds further considerations related to facility operations

The Provincial Health Officer has banned gatherings of 50 or more. This ban is expected to remain in force until the end of the state of emergency.⁵ The ban applies to events which could result in people gathering closely together, but where the space is large enough to allow appropriate distancing between people, grocery store and recreational facility guidelines state it is acceptable to have more than 50 people in attendance. Indoors, it is generally recommended that facilities should have a minimum of five sq. metres of “unencumbered floor space” per person. “Unencumbered floor space” means total floor space minus the amount of space taken by built-in fittings, counters, closets etc.⁶ Please refer to your facility operator for further guidance on capacity.

Those that utilize outdoor facilities will need to consider:

- The ability to control group sizes and proximity within the outdoor environment.
- Booking procedures that may be in place with the municipality for use of fields, etc.
- Ability to safely access public areas such as beaches, open water, trails, etc. while ensuring COVID-19 measures in the sport organization’s plan can be applied

Those that utilize indoor facilities will need to look at:

- Whether it is possible to re-locate activities to the outdoors – if so, look into how to obtain a permit
- Whether they are the owner, operator or renter/user of the facility as this will have different implications and responsibilities related to it
- Additional municipal guidelines that may be in place
- Whether or not multiple groups/sports will be held within the same facility

BC Recreation and Parks Association Guideline outlines that user groups rented municipal facilities are required to have a COVID-19 Safety Plan that clearly demonstrates how activities will be provided to

⁵Mass Gatherings Order: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/reports-publications/covid-19-pho-class-order-mass-gatherings.pdf>

⁶ COVID-19 Guidance to Retail Food and Grocery Stores: https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/guidance_to_grocery_stores_april_25_final.pdf

align with the directives of the Provincial Health Officer, local authorities and other relevant regulators (i.e. WorkSafe BC).⁷

To mitigate risks related to the facility access the following controls should be considered in consultation with the facility owners:

1. Restricted Access
 - a. Limit access to those that are essential to the approved activities (e.g. participants, facility staff, coaches)
 - b. Parents and spectators may be allowed but would need to be factored into the maximum group size and must also adhere to physical distancing guidelines
2. Points of Access
 - a. Where appropriate, consider designated drop-off and pick-up spaces
 - b. Determine the number of access points and consider closing some in order to monitor how many people are entering the facility
 - c. Choose doors with an automatic function or prop doors to reduce contact with door handles
 - d. Consider how to manage the flow of people and put signage, directional limitations in place (e.g. all individuals must use one door for entry and a different door for exit, arrows or other directional instructions on the floor)
3. Pre-registration
 - a. Drop-in activities should be prohibited
 - b. Individuals should pre-register online or over the phone
4. Arrival and Departure
 - a. Set a time in which it is appropriate for participants to arrive in advance of their scheduled activity (example – participants should not arrive sooner than 20 minutes before the scheduled start time, and there should be sufficient space for physical distancing while lining up or waiting to begin)
 - b. At the end of their scheduled program/time slot participants must immediately leave the facility
 - c. Staggered start times to account for individuals moving in and out of the facility/playing area
5. Consider restricting or limiting use of different spaces within the facility/space in order to maintain physical distancing and proper cleaning protocols, including but not limited to:
 - a. Equipment storage areas
 - b. Locker rooms
 - c. Team benches or areas for gathering
 - d. Concessions or food and beverage services*
 - e. Pro-shop or retail spaces*
 - f. Spectator seating: if used, consider using signage or partially closing seating areas to ensure adequate physical distancing between individuals/groups.
 - g. Water fountains: close all water fountains except those used for filling water bottles. Do not allow individuals to drink directly from water fountain taps. Use signage to



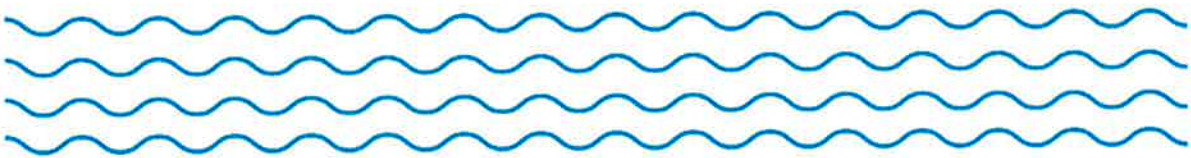
⁷ BCRPA Restarting Guidelines: <https://www.bcrpa.bc.ca/covidguideline>

discourage individuals from touching surfaces of fountains and consider placing hand sanitizer adjacent to support hygiene and reduce transmission risk.

*Any retail or food are subject to further guidelines. Go to the BC Centre of Disease Control for more information: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>

Signage within the facility is important to ensure that participants are aware of expectations related to use of the facility and best practices related to maximum capacity, physical distancing, personal hygiene and protection against COVID-19. See Appendix F for links to download posters.

It is important to ensure that facility plans can support sport-specific plans. Contact Recreation Facilities Association of BC: www.rfabc.com for additional resources and advice.



FACILITY OPERATIONS

Whether the sport organization is an owner, operator or renter/user of the facility, there will be different implications and responsibilities. An order of the PHO on May 17, 2020 was issued requiring employers to develop a COVID-19 Safety Plan.⁸ Refer to Appendix G for a COVID-19 Safety Plan Template.

STAFF AND VOLUNTEERS

Where the sport organization owns and operates a facility, “staffing” encompasses all facility staff (management, administration, maintenance, etc.).

If the sport organization is a renter or facility user, “staffing” may refer to sport program staff, such as coaches, volunteers, etc.

All employers in B.C. have a legal obligation to ensure a healthy and safe workplace for employees. Organizations that rely on volunteers also need to take steps to ensure the safety of volunteers.

Risk mitigation measures related to staffing:

1. Educate staff on public health information and expectations related to the implementation of the Return to Sport Plan.

⁸ PHO Order: https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/class_order_employers_covid-19_safety_plans_covid-19_may_14_final.pdf

2. Develop and implement an Illness Policy, that outlines procedures for staff and participants that may be experiencing symptoms and ensures no one attends work/practice/games when sick. See Appendix C for a sample.
3. Conduct routine daily symptom screenings for all staff, volunteers and participants. Wellness questionnaires and use of self-assessment tools are recommended. Download the BC COVID-19 App⁹ which includes a self-assessment tool.
4. Implement enhanced hygiene protocols:
 - a. Frequent and proper handwashing
 - b. Ensure adequate and accessible hand-washing facilities or sanitizer
 - c. Implement policies around when workers need to wash hands (upon arrival, before/after breaks, after touching common equipment)
 - d. Reminders to avoid touching eyes, nose and mouth
 - e. Reminders to use cough and sneeze etiquette: Cough and sneeze into your elbow.
5. Implement an enhanced cleaning protocol for common areas and common equipment. Ensure cleaners have adequate training and tools. (See next section for more details).
6. Implement measures for staff to maintain physical distancing
 - a. Consider adding barriers such as a clear protective shield at registration or check-in desks similar to those now seen in grocery stores.
 - b. Consider staggered shifts or breaks
 - c. Manage use of and interactions in shared spaces (kitchens, staff rooms, gyms, studios, training rooms, courts, other shared spaces), and ensure physical distance can be maintained in these spaces
 - d. Limit in-person meetings, training and staff engagements; work virtually where possible
 - e. Communicate where possible through email, text and/or phone
7. Ensure Personal Protective Equipment (gloves, masks, etc.) is on hand and available to staff. Where risk of exposure is high (cannot maintain social distancing), PPE should be required. Train staff on how to put masks and gloves on and off to avoid cross-contamination. Ensure that PPE is not used as a substitute for more effective safety measures (distancing, hygiene). Refer to WorkSafe BC on specifics related to use of PPE.
8. Minimize use of shared equipment
 - a. Identify 'high-touch' objects as part of the assessment
 - b. Minimize use of lockers, remove all non-essential items.
 - c. Minimize use of shared equipment (including computers, phones, printers, fridges, coffee makers, and sport equipment etc.).
 - d. Each staff person/volunteer should disinfect any shared equipment/surfaces they have come in contact with after each use.
9. Ensure staff and supervisors understand the Right to Refuse unsafe work and procedures are in place to respond to such concerns
10. Assign a Safety Representative to ensure implementation of safety protocols during sport programming.

⁹ BC COVID-19 Self Assessment Tool: <https://bc.thrive.health/covid19/en>

For further information on safety within the workplace refer to WorkSafe BC:

<https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation>

CLEANING PROTOCOLS

During the pandemic, enhanced cleaning protocols should be used to minimize transmission risk.

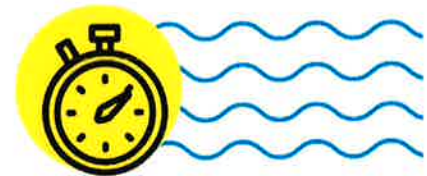
If the sport organization owns and operates a facility (an “Owner”) implementing enhanced, cleaning protocols are the responsibility of the Owner, who will have employees or contractors for these purposes.

If the sport organization is a renter or facility user, it is important to understand what protocols are in place at the facility in order to assess the level of risk involved in utilizing the facility. As a renter or user, your sport organization will need to be satisfied as to the sufficiency of the cleaning protocols in relation to the risks posed by your activities.

We encourage sport organizations and Owners to work cooperatively to support each other in ensuring that everyone understands the risks of their activities. For example, how do people who use the facility move through the spaces, use any equipment, and who are they? Are the participants children (likely to need lots of supervision and reminders about touching and hygiene, and more cleaning of walls, equipment and other items at child-height) or seniors or other groups more vulnerable to serious illness (this may trigger a need for additional enhanced cleaning protocols).

Recommendations:

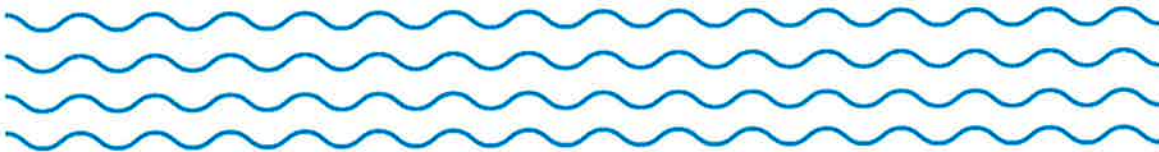
1. Develop a touch map that outlines high touch areas such as:
 - a. Doorknobs / door push bar / door handles / doorbells / intercoms
 - b. Counter tops / bar tops / work stations / desktops /drawers /shelves /cupboards
 - c. POS terminals / merchant terminals / handheld devices /land line phones
 - d. Countertop displays / display cases / bulletin boards
 - e. Handrails / light switches / thermostat controls
 - f. Elevators / escalators / stair railings
 - g. Sound system and TV channel remote controls
 - h. Chairs / guest seating areas / tabletops
 - i. Bathroom Counter tops / sinks / taps /
 - j. Toilets / stall doors / door handles and locks, shelves, hooks, waste disposals
 - k. Bathroom paper dispensers /soap dispensers / support bars / stools for children
 - l. Kitchen and prep areas / utensils / appliances
 - m. Chairs / benches/ risers
 - n. Staff seating / staff break area / water fountains
 - o. Pools / courts / nets / studios / games tables
 - p. Equipment / exercise machines / barres / mats / storage shelves etc.
 - q. Vending machines / public seating or tables
2. Increase the frequency of cleaning and disinfection of high-touch surfaces and high traffic areas.



- a. According to BCCDC¹⁰, general cleaning and disinfecting of surfaces should occur at least once per day. Surfaces that are highly touched should be cleaned at least twice per day.
3. Place hand sanitizer stands at entrances, in washrooms and other high traffic areas. Ensure that sanitizer stations are at an accessible height for all participants.
4. Wear disposable gloves when cleaning and disinfecting surfaces. Train staff on how to avoid cross-contamination when removing gloves.
5. Follow Health Canada Guidelines¹¹ on what products are approved for cleaning and disinfecting.
6. Ensure garbage bins are available for responsibly disposing of hygienic materials such as tissues and any PPE that is used in the course of activities.

For more information consult WorkSafe BC¹².

Cleaning protocols should also be established for sport specific equipment (see section related to sport programming).



PARTICIPANTS

When considering delivery of sport programming, organizations need to consider who their participants are, the size of the group, expectations of participants and the communication and enforcement of those expectations.

HEALTH OF PARTICIPANTS

Similar to expectations of staff, the following should be in place to protect the health of the participants.

1. Develop and implement an Illness Policy that outlines procedures for participants that may be experiencing symptoms. See Appendix C for a sample.
2. Conduct daily symptom screenings for all participants by having them answer a wellness questionnaire or complete a self-assessment¹³.

¹⁰ BC Centre for Disease Control Cleaning & Disinfecting: http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf

¹¹ Health Canada Disinfectants for use during COVID-19: <https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html>

¹² WorkSafe BC: [https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-cleaning-](https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-cleaning-disinfecting?lang=en&origin=s&returnurl=https%3A%2F%2Fwww.worksafebc.com%2Fen%2Fforms-resources%23sort%3D%2540computeditemdatefield343%2520descending%26f%3Alanguage-facet%3D%5BEnglish%5D%26tags%3DCovid-19%7Ca96b6c96607345c481bb8621425ea03f)

[disinfecting?lang=en&origin=s&returnurl=https%3A%2F%2Fwww.worksafebc.com%2Fen%2Fforms-resources%23sort%3D%2540computeditemdatefield343%2520descending%26f%3Alanguage-facet%3D%5BEnglish%5D%26tags%3DCovid-19%7Ca96b6c96607345c481bb8621425ea03f](https://www.worksafebc.com/en/resources/health-safety/information-sheets/covid-19-health-safety-cleaning-disinfecting?lang=en&origin=s&returnurl=https%3A%2F%2Fwww.worksafebc.com%2Fen%2Fforms-resources%23sort%3D%2540computeditemdatefield343%2520descending%26f%3Alanguage-facet%3D%5BEnglish%5D%26tags%3DCovid-19%7Ca96b6c96607345c481bb8621425ea03f)

¹³ BC COVID-19 Self Assessment Tool: <https://bc.thrive.health/covid19/en>

3. Have a zero tolerance policy for 'playing while sick' - ensure that participants do not participate if they are symptomatic.
4. Implement enhanced hygiene protocols:
 - a. Frequent and proper handwashing (Health Canada Guidelines¹⁴)
 - b. Avoid touching eyes, nose and mouth
 - c. Cough into your sleeve
5. Have participants sign a Participant Agreement or Waiver. See Appendix D for an example.



Reminders to participants:

You should not participate or come to the facility if:

- you don't feel well or are displaying symptoms of COVID-19
- someone in your household has COVID-19 or is showing symptoms of COVID-19
- you have traveled outside of Canada within the last 14 days
- someone in your household has traveled outside of Canada within the last 14 days

Consider your own risk - if you are at higher risk of experiencing serious illness from COVID-19, consider limiting or avoiding participation in the sport activities for the time being.

PARTICIPANT GROUPS

Additional considerations may be required for different population/participant groups as you are determining which programming to reopen.

Sport organizations should look at how they can support higher-risk populations, where possible. Individuals must be made aware of the risks to participation but the decision to participate is up to the individual. The exception is if the individual is displaying signs and symptoms of COVID-19.

Vulnerable populations may include¹⁵:

- older adults
- those with underlying medical conditions and/or compromised immune system
- individuals that experience barriers such as communication, transportation, economic

Possible examples may include:

- Dedicated time slots: Specifying use of the facility or programming times for those that are most vulnerable (as grocery stores are currently doing)
- Program modifications: offering low risk programming (reduced group sizes, no contact options, etc.)

¹⁴ Health Canada handwashing guidelines: <https://www.canada.ca/content/dam/phac-aspc/documents/services/diseases-maladies/reduce-spread-covid-19-wash-your-hands/eng-handwashing.pdf>

¹⁵ Health Canada Vulnerable Populations: <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/diseases-conditions/coronavirus/covid-19-vulnerable-populations/covid-19-vulnerable-populations-eng.pdf>

- **Physical assistance:** dedicated caregivers necessary to support an individual's participation should be considered within the individual's household or inner circle and may assist the participant with sport activities as required.
- **Communication:** Ensure information is easily accessible to participants by translating signage and communications into multiple languages as well as various formats (for those with visual/hearing impairments)
- **Economic barriers:** be cautious of the price of activities and explore options for payment plans, discounted rates, grants, etc.

GROUP SIZE

B.C.'s Public Health Officer has issued an order barring gatherings of 50 or more people. However, the organization will need to consider other factors to determine what is appropriate for their space to ensure the ability to maintain physical distancing.

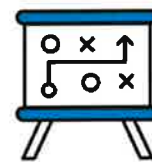
Maximum group size counts need to consider staff, coaches, participants, spectators, etc., and the size of the indoor or outdoor space is also a key factor. There must be sufficient space in the room to allow for physical distancing between people; this means that in a smaller room, occupancy limits may be much less than 49. Facilities have received guidelines on determining maximum capacity within their facilities, see reference to unencumbered floor space in section on Facility Access.

Sport organizations should consider the activities that they are looking to deliver and the appropriate group sizes in order to ensure proper physical distancing. They should also outline expectations related to coach to participant ratios. While these guidelines suggest reducing non-essential personnel other safety considerations such as the Rule of Two should be maintained so not to expose participants to other risk factors.

REGISTRATION

- Where feasible all participant registration should be done online, including collection of payment.
- Try to limit the use of cash and limit the handling of credit cards and loyalty cards wherever possible, by allowing customers to scan or tap their cards and handle the card readers themselves
- Program organizers should take attendance and keep a record of all participants in case of an outbreak (see Section on Outbreaks for further details).

COMMUNICATION TO PARTICIPANTS

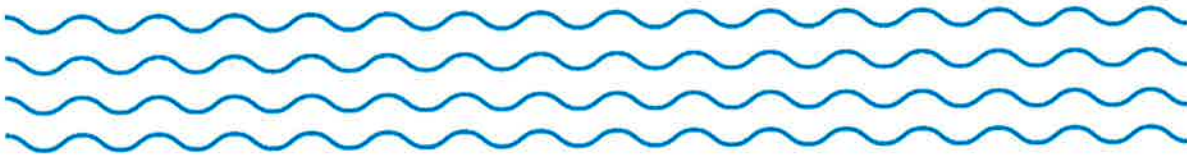


Ensuring safety measures are being met and adhered to depend on everyone being aware of, and understanding the health and sport specific guidelines. Communication of the guidelines to your participants and spectators is an important component of your Return to Sport Plan.

See Appendix E for a sample letter you can share that can be adapted for your sport.

Participants should be asked to sign a participant agreement acknowledging they have read the guidelines and understand their risk before participating. See Appendix D for a sample participant agreement specific to COVID-19 related risks.

It should also be communicated to participants that they are subject to removal from activities/facility use should they fail to comply with outlined protocols.



SPORT PROGRAMMING

We recognize that every sport is different and may have additional considerations or aspects that are unique to their sport. The following section outlines general guidelines that can be applied related to activity type and sport equipment.

Please refer to Appendix A for a chart of the types of activities that can be considered as we transition through the various return phases. You will notice a range of activities indicated that may be allowed within a given phase. It is however still the advice of public health officials to move ahead slowly, and systematically restart activities in a way that allows your organization and local health authorities to monitor, evaluate and adjust as needed. Accordingly, you may decide that your sport-specific plans should have more phases than are outlined in this chart

In order for your sport to resume organized activities, modifications may be required. Stay abreast of new and updated guidance by checking: <https://www.viasport.ca/return-sport>

ACTIVITY TYPE

In mid-May, B.C. entered into what is being referred to by the provincial government as Phase Two (2). In this phase, sport will be able to operate under enhanced protocols including:

1. Allow for participants to maintain physical distancing
 - Two meters apart from one another
 - Non-contact activities only
 - No handshaking, high fives, hugging, etc.
2. Look to reduce touch points with respect to equipment
 - See next section for further details



3. Focus on skill development or low risk activities
 - Activities should be those typically done in practice and/or training environments
 - Individuals will have had limited exposure to physical activity for the last 6+ weeks while confined to their homes. Ensure that activities consider their ability that day (not where they previously may have been) and have injury prevention top of mind
4. Remain community focused
 - Stay within the home sport community or club(s) where participants are members
 - Avoid cross-regional, inter-provincial or cross-country travel. Note that non-essential travel within B.C. and Canada is currently very strongly discouraged (this is expected to change later in the summer). International travel is subject to quarantine rules and raises other risks including unpredictable flight schedule changes and cancellations, and the potential for sudden changes to border controls.

Not in scope during this phase are:

- activities that cannot maintain physical distancing (including contact activities)
- activities that have a high risk of injury
- competitive activities that encourage large group gatherings
- large public events or gatherings of over 50 people
- activities that require travel

Examples of possible sport-specific modifications:

- For team sports – focus on drills and training exercises in small groups
- For contact sports – move to non-contact skills training in small groups or shadow sparring
- Use of side by side courts/lanes/sheets of ice – limit the number of people per court/lane/sheet of ice, create directional flow of traffic, consider use of only alternating lanes

For higher risk activities or programming where a sport decides that it is not feasible to reopen at this time based on the number of modifications required, online or at-home strategies could be considered.

EQUIPMENT

It is preferable that where possible equipment is not shared between individuals.

Regardless of what your sport is, you must think through the ways in which people engage with each other during the activity, the equipment or tools they use and how those activities are ordinarily carried out.

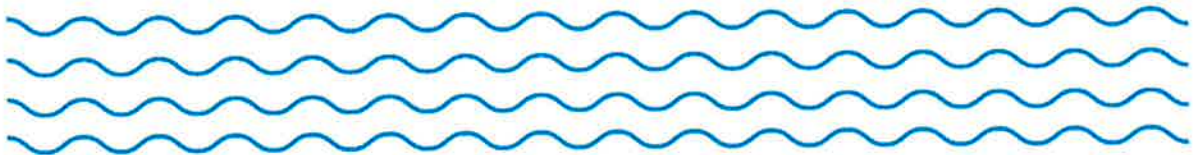
Some examples of equipment related mitigation techniques include:

- Closure of locker rooms will require participants to come dressed and ready to participate.
- Avoid loaning out equipment. If equipment is provided, ensure that equipment is disinfected after each use.
- Advise participants to bring their own water bottles and towels if required.

- Coaches should come prepared with their own practice plans, training tools, technology and avoid sharing with other coaches
- Assigning the coach or one individual to be responsible for all set-up and take down of equipment (such as nets, cones, etc.) to reduce the number of contact points.
- Consider the age and abilities of participants to ensure that your communications and safety training is properly targeted to your audience
- Based on the assessed risk, use of personal protective equipment may be considered.
- For sports that require equipment to be shared, additional cleaning protocols and risk mitigation techniques must be put in place to ensure safety of the participants. Some examples include but are not limited to:



- For weights: make cleaners available in the weight room and encourage all participants to clean off all surfaces prior to and after use
- For gymnastics: ensure participants avoid contact, sanitize equipment before and after use
- For sailing: assign individuals specific roles, minimize the number of people touching surfaces, sails or lines (to the extent that it is safe to do so) and sanitize at the beginning and the end of a class;
- For racquet sports: each player uses their own balls, clearly marked as their own. Whomever is serving uses their own balls. Other players can pass back the balls to the owner by only using their racquet.
- For golf: power carts are single rider only, unless you share the same household and have proof of same physical address.
- For artistic sports that require use of music: designate one person to operate the equipment for the duration of the practice and properly clean equipment after use; avoid choreography involving contact.



EMERGENCY RESPONSE

FIRST AID

In the event that first aid is required to be administered during an activity, all persons attending to the injured individual must first put on a mask and gloves.

A guide for employers and Occupational First Aid Attendants:

<https://www.worksafebc.com/en/resources/health-safety/information-sheets/ofaa-protocols-covid-19-pandemic?lang=en>

First aid protocols for an unresponsive person during COVID-19: <https://www.redcross.ca/training-and-certification/first-aid-tips-and-resources/first-aid-tips/first-aid-protocols-for-an-unresponsive-person-during-covid-19>

OUTBREAK PLAN¹⁶

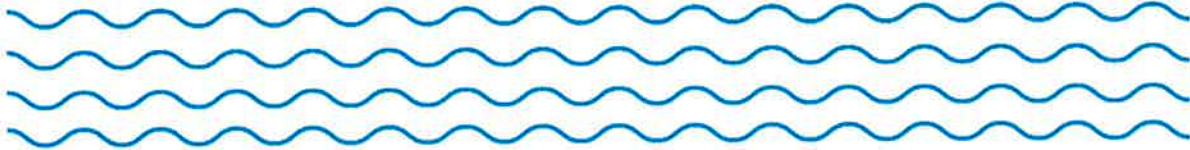
Early detection of symptoms will facilitate the immediate implementation of effective control measures. In addition, the early detection and immediate implementation of enhanced cleaning measures are two of the most important factors in limiting the size and length of an outbreak. An “outbreak” is two or more cases; a “case” is a single case of COVID-19.

1. Identify the roles and responsibilities of staff or volunteers if a case or outbreak is reported. Determine who within the organization has the authority to modify, restrict, postpone or cancel activities.
2. If staff (including volunteers) or a participant reports they are suspected or confirmed to have COVID-19 and have been at the workplace/activity place, implement enhanced cleaning measures to reduce risk of transmission. If you are not the facility operator, notify the facility right away.
3. Implement your illness policy and advise individuals to:
 - self-isolate
 - monitor their symptoms daily, report respiratory illness and not to return to activity for at least 10 days following the onset of fever, chills, cough, shortness of breath, sore throat and painful swallowing, stuffy or runny nose, loss of sense of smell, headache, muscle aches, fatigue and loss of appetite.
 - use the COVID-19 self-assessment tool at BC COVID-19 Self-Assessment Tool to help determine if further assessment or testing for COVID-19 is needed.
 - Individuals can contact 8-1-1 if further health advice is required and 9-1-1 if it is an emergency.
 - Individuals can learn more about how to manage their illness here: <http://www.bccdc.ca/healthinfo/diseases-conditions/covid-19/about-covid-19/if-you-are-sick>
4. In the event of a suspected case or outbreak of influenza-like-illness, immediately report and discuss the suspected outbreak with the Medical Health Officer (or delegate) at your local health authority. Implement your Illness Policy and your enhanced measures.
5. If your organization is contacted by a medical health officer in the course of contact tracing, cooperate with local health authorities.

For more information on cleaning and disinfecting: http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf

¹⁶ BC Hotel Association Guidelines: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/covid-19-pho-guidance-hotel-sector.pdf>

Regional Health Authorities: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/health-authorities/regional-health-authorities>



DISCLAIMER

The RTS Guidelines is intended to be used for the purposes set in this document. While we aim to provide relevant and timely information, because information known about the COVID-19 coronavirus and recommended health and safety measures can rapidly change no guarantee can be given as to the accuracy or completeness of any information provided in the RTS Guidelines.

It is important to note that the RTS Guidelines is not a legal document and is to be used as a guide only. It is not a substitute for actual legislation or orders of the PHO. In the event of an ambiguity or conflict between the RTS Guidelinse and the *Public Health Act*, regulations or orders thereunder, the Act, regulations and orders prevail. Each Provincial Sport Organization should comply with the requirements of the provincial and local government and health officials in terms of public gatherings and sporting events when determining when it is safe to return to activities. Nothing in this document is intended to provide legal advice. Do not rely on this document or treat it as legal advice.

This document contains links to third party web sites. Links are provided for convenience only and viaSport does not endorse the information contained in linked web sites nor guarantee its accuracy, timeliness or fitness for a particular purpose. The information in those links may be updated from time to time. We do not monitor those sites and are not responsible for updates. You should check back regularly to ensure your Plan is up to date.

Anyone using the RTS Guidelines does so at his or her own risk. viaSport BC shall not be responsible for any loss or damage of any kind arising directly or indirectly from the use of the RTS Guidelines including, without limitation, reliance on the completeness or accuracy of the information provided.



APPENDIX A – SPORT ACTIVITY CHART

	Strictest Controls Prior to May 19, 2020	Transition Measures Approx. May 19th to Sept	Progressively Loosen Future date TBC	New Normal Future date TBC
Restrictions In Place	<ul style="list-style-type: none"> Maintain Physical Distance (2m) No non-essential travel 	<ul style="list-style-type: none"> Maintain Physical Distance (2m) No non-essential travel No group gatherings over 50 people 	Refer to PHO and local health authorities	Refer to PHO and local health authorities
Enhanced Protocols	Increased hand hygiene	<ul style="list-style-type: none"> Increased hand hygiene Symptom Screening in place 	Increased hand hygiene	Increased hand hygiene
Facility	<ul style="list-style-type: none"> Outdoor or within home Facilities and playgrounds closed 	<ul style="list-style-type: none"> Outdoor is safest Indoor facilities slowly re-opening 	Outdoor/Indoor	Outdoor/Indoor
Participants	Individual activities	<ul style="list-style-type: none"> Small Groups No or limited spectators 	<ul style="list-style-type: none"> Groups sizes may increase Limited spectators 	<ul style="list-style-type: none"> Large groups allowed No restrictions on spectators
Non-contact Activities	<ul style="list-style-type: none"> Low risk outdoor activities can occur (biking, running, etc). Virtual activities 	<ul style="list-style-type: none"> Fundamental movement skills Modified training activities, drills 	Expansion of training activities	No restrictions on activity type
Contact Activities	Should not occur	<ul style="list-style-type: none"> Should not occur Contact sports should look for non-contact alternatives to training 	Introduction to pair or small group contact skills	No restrictions on activity type
Competition*	Should not occur	In club play or modified games may slowly be introduced	Interclub or regional game play may be considered	Provincial competitions and larger scale events may return
Equipment	No shared equipment	<ul style="list-style-type: none"> Minimal shared equipment Disinfect any shared equipment before, during and after use 	<ul style="list-style-type: none"> Some shared equipment Enhanced cleaning protocols in place 	Shared equipment

*Introduction of competitive activities should be in alignment with Sport Specific guidelines

APPENDIX B – DEFINITIONS

Return to Sport: Return to Sport refers to the process of developing and implementing guidelines for sport organizations to operate safely in B.C. during this pandemic. Return to Sport Plans will be unique to each sport and must follow Provincial Health Officer orders and recommendations. One set of guidelines will be created for each sport by the Provincial Sport Organization, and all club and PSO sanctioned activities should follow this set of guidelines.

Physical Distancing: According to the Provincial Health Officer, physical distancing requires keeping two metres (or at least two arms lengths) of space between individuals. It also includes staying at home when you're sick, even if symptoms are mild.

Provincial Health Officer (PHO): The Provincial Health Officer is the senior public health official for B.C., and is responsible for monitoring and reporting on the health of the population of B.C. This office works with the B.C. Centre for Disease Control and provides independent advice to the ministers and public officials on public health issues. The current PHO is Dr. Bonnie Henry.

Community Focused: Community focused sport activities take place within the home sport community or clubs where participants are members. This means avoiding cross-regional, inter-provincial or cross-country travel for sport.

Recreation" as defined by the Canadian Parks and Recreation Association is the experience that results from freely chosen participation in physical, social, intellectual, creative and spiritual pursuits that enhance individual and community wellbeing." Physical activities would include those undertaken as leisure, fitness training and sport-related activities that are done at the discretion of the individual (e.g. – use of parks, hiking trails, public recreation facilities), either self-led or facilitated by recreation leaders and are not included within the context of this document. Refer to Appendix B for list of additional definitions pertinent to Return to Sport.

Organized Sport Activities: involves a number of people doing something together in a structured way and is facilitated by a Provincial Sport Organization or Local Sport Organization.

Competitive activities: Competitive activities are formal, organized games, matches and tournaments between participants where scores are recorded and standings are kept.

Rule of Two: The goal of the Rule of Two is to ensure all interactions and communications are open, observable, and justifiable. Its purpose is to protect participants (especially minors) and coaches in potentially vulnerable situations by ensuring more than one adult is present. During the pandemic, compliance remains mandatory and organizations must ensure a coach is never alone and out of sight with a participant without another screened coach or screened adult (parent or volunteer) present.

APPENDIX C – ILLNESS POLICY

Sample Illness Policy (Adapted from Allied Golf Association of BC)

In this policy, “Team member” includes an employee, volunteer, participant or parent/spectator.

1. **Inform an individual in a position of authority (coach, team manager, program coordinator) immediately if, you feel any symptoms of COVID-19** such as fever, chills, cough, shortness of breath, sore throat and painful swallowing, stuffy or runny nose, loss of sense of smell, headache, muscle aches, fatigue and loss of appetite.
2. **Assessment**
 - a. Team members must review the self-assessment signage located throughout the facility each morning before their shift/practice/activity to attest that they are not feeling any of the COVID 19 symptoms.
 - b. Managers/coaches will visually monitor team members to assess any early warning signs as to the status of their health and to touch base on how they are regarding their personal safety throughout the workday/practice/activity.
 - c. If Team Members are unsure please have them use the self-assessment tool <https://bc.thrive.health/covid19/en> or through the COVID-19 BC Support App self-assessment tool.
3. **If a Team Member is feeling sick with COVID-19 symptoms**
 - a. They should remain at home and contact Health Link BC at 8-1-1.
 - b. If they feel sick and /or are showing symptoms while at work, they should be sent home immediately and have them contact 8-1-1 or a doctor for further guidance.
 - c. No Team Member may participate in a practice/activity if they are symptomatic.
4. **If a Team Member tests positive for COVID-19**
 - a. The Team Member will not be permitted to return to the workplace/practice/facility until they are free of the COVID-19 virus.
 - b. Any Team Members who work/play closely with the infected Team Member will also be removed from the workplace/practice/facility for at least 14 days to ensure the infection does not spread further.
 - c. Close off, clean and disinfect their work/practice/facility area immediately and any surfaces that could have potentially be infected/touched.
5. **If a Team Member has been tested and is waiting for the results of a COVID-19 Test**
 - a. As with the confirmed case, the Team Member must be removed from the workplace/practice/facility.
 - b. The Public Health Agency of Canada advises that any person who has even mild symptoms to stay home and call the public health authority of B.C.
 - c. Other Team Members who may have been exposed will be informed and removed from the workplace/practice/activity for at least 14 days or until the diagnosis of COVID-19 is ruled out by health authorities.
 - d. The workspace/practice/activity space will be closed off, cleaned, and disinfected immediately and any other surfaces that could have potentially been infected/touched.
6. **If a Team Member has come in to contact with someone who is confirmed to have COVID-19**

- a. Team Members must advise their employer/coach if they reasonably believe they have been exposed to COVID-19.
- b. Once the contact is confirmed, the Team Member will be removed from the workplace/practice/activity for at least 14 days or as otherwise directed by public health authorities. Team Members who may have come into close contact with the Team Member will also be removed from the workplace for at least 14 days.
- c. The workspace/activity area will be closed off, cleaned, and disinfected immediately and any other surfaces that could have potentially been infected/touched.

7. Quarantine or Self-Isolate if:

- a. Any Team Member who has travelled outside of Canada or the province within the last 14 days is not permitted to enter any part of the facility and must quarantine and self-isolate.
- b. Any Team Member with any symptoms of COVID-19 is not permitted to enter any part of the facility and must quarantine and self-isolate.
- c. Any Team Member from a household with someone showing symptoms of COVID-19 is not permitted to enter any part of the facility and must quarantine and self-isolate.
- d. Any Team Member who is in quarantine or self-isolating as a result of contact with an infected person or in families who are self-isolating, is not permitted to enter any part of the facility.

APPENDIX D – PARTICIPANT AGREEMENT

Sample Agreement

*Modify agreement as appropriate where the participant is a minor and the agreement is signed by a parent or guardian

Application - all athletes, coaches, members, volunteers, participants and family members of participants while in attendance at club activities (“Participants”)

All Participants of <NAME OF ORGANIZATION> agree to abide by the following points when entering club facilities and/or participating in club activities under the COVID-19 Response plan and RTP Protocol:

- I agree to symptom screening checks, and will let my club know if I have experienced any of the symptoms in the last 14 days.
- I agree to stay home if feeling sick, and remain home for 14 days if experiencing COVID-19 symptoms.
- I agree to sanitize my hands upon entering and exiting the facility, with soap or sanitizer.
- I agree to sanitize the equipment I use throughout my practice with approved cleaning products provided by the club (shared and personal equipment).
- I agree to continue to follow social distancing protocols of staying at least 2m away from others.
- I agree to not share any equipment during practice times.
- I agree to abide by all of my Clubs COVID-19 Policies and Guidelines.
- I understand that if I do not abide by the aforementioned policies/guidelines, that I may be asked to leave the club for up to 14 days to help protect myself and others around me.
- I acknowledge that continued abuse of the policies and/or guidelines may result in suspension of my club membership temporarily.
- I acknowledge that there are risks associated with entering club facilities and/or participating in club activities, and that the measures taken by the club and participants, including those set out above and under the COVID-19 Response Plan and Return to Sport Protocols, will not entirely eliminate those risks.

Date:

Signature:

APPENDIX E – MEMBER COMMUNICATION

Email or letter template message: Return to our sport with respect to COVID-19

Dear <<PARTICIPANT, COACH, PARENT>>

As British Columbia public health authorities develop guidelines to lift some restrictions on gathering in a responsible way, <NAME OF PSO> has been working with viaSport and the Province of British Columbia to understand the recommendations our Chief Provincial Health Officer and how they best apply within sport.

The attached Return to Sport Plan has been developed for our sport in order to ensure:

- health and safety of all individuals is a priority
- activities are in alignment with provincial health recommendations
- modifications to activities are in place in order to reduce the risks to each sport organization and its participants
- our sport is united and aligned on a plan to reopen throughout the province

While we do hope things will return to normal in the not too distant future, currently this Return to Sport Plan will be the new normal until we are advised otherwise by public health authorities.

If you choose to participate, you must follow these rules:

- If you don't feel well or are displaying symptoms of COVID-19, you must stay home.
- If you have traveled outside of Canada, you are not permitted at the facility until you have self-isolated for a minimum of 14 days.
- If you live in a household with someone who has COVID-19 or is showing symptoms of COVID-19, please stay home.
- Wash your hands before participating
- Bring your own equipment, water bottle and hand sanitizer
- Comply with physical distancing measures at all time
- Avoid physical contact with others, including shaking hands, high fives, etc.
- Leave the field of play as quickly as possible after you finish

Our Return to Sport Plan is based on current public health guidance. While we are all doing our best to minimize the risk of exposure to COVID-19, while the virus circulates in our communities it is impossible to completely eliminate the risk. Each participant must make their own decision as to whether it is in their best interest to resume participation at this time. You must take into account your own circumstances and make the decision that is right for you. Should you choose to join us, we require your full cooperation with our Return to Sport Plan.

Sincerely,

APPENDIX F – REFERENCES

PROVINCE OF BRITISH COLUMBIA

B.C.'s Restart Plan: https://www.scribd.com/document/460236402/B-C-s-Restart-Plan-Next-Steps-to-Move-Through-the-Pandemic#fullscreen&from_embed

BC COVID-19 Go-Forward Management Strategy: https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/covid-19/bc_covid-19_go-forward_management_strategy_web.pdf?bcgovtm=20200506_GCPE_AM_COVID_9_NOTIFICATION_BC_GOV_BCGOV_EN_BC_NOTIFICATION

B.C. Go Forward Strategy Checklist: https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/emergency-preparedness-response-recovery/gdx/go_forward_strategy_checklist_web.pdf

PHO Orders: <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>

REGIONAL HEALTH AUTHORITIES

Fraser Health: <https://www.fraserhealth.ca/>

Interior Health: <https://www.interiorhealth.ca/Pages/default.aspx>

Island Health: <https://www.islandhealth.ca/>

Northern Health: <https://www.northernhealth.ca/>

Vancouver Coastal Health: <http://www.vch.ca/>

HEALTH RESOURCES

COVID-19 (B.C.) Provincial Support: <https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response-recovery/covid-19-provincial-support>

BC COVID-19 Self-Assessment Tool: <https://bc.thrive.health/covid19/en>

Health Canada Handwashing Guidelines: <https://www.canada.ca/content/dam/phac-aspc/documents/services/diseases-maladies/reduce-spread-covid-19-wash-your-hands/eng-handwashing.pdf>

Health Canada Personal Protective Equipment against COVID-19: <https://www.canada.ca/en/health-canada/services/drugs-health-products/medical-devices/covid19-personal-protective-equipment.html>

Health Canada List of Disinfectants for use against COVID-19: <https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html>

BCCDC Cleaning and Disinfecting: http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf

POSTERS

COVID-19 Protection: <http://www.bccdc.ca/Health-Info-Site/Documents/COVID19-Prevention.pdf>

Physical Distancing: http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_PhysicalDistancingPoster.pdf

Handwashing: http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID19_Handwashing%20Poster_MD%20offices.pdf

Do not enter if you are sick: http://www.bccdc.ca/Health-Info-Site/Documents/COVID19_DoNotEnterPoster.pdf

Vulnerable Populations: <https://www.canada.ca/content/dam/phac-aspc/documents/services/publications/diseases-conditions/coronavirus/covid-19-vulnerable-populations/covid-19-vulnerable-populations-eng.pdf>

Occupancy Limit: <https://www.worksafebc.com/en/resources/health-safety/posters/help-prevent-spread-covid-19-occupancy-limit?lang=en>

WORKSAFE BC RESOURCES

Returning To Safe Operations: <https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe-operation>

COVID-19 Safety Plan Template: <https://www.worksafebc.com/en/resources/health-safety/checklist/covid-19-safety-plan?lang=en>

SPORT AND RECREATION RESOURCES

Return to High Performance Sport Framework: <https://www.viasport.ca/sites/default/files/Canada%20-%20COVID-19%20Return%20to%20HP%20Sport%20Framework%20-%20May%202020.pdf>

BCCDC guidance for recreation facilities: <http://www.bccdc.ca/health-info/diseases-conditions/covid-19/community-settings/recreation-facilities>

BCRPA Sector Guidelines for Restarting Operations: <https://www.bcrpa.bc.ca/covidguideline>

APPENDIX G - COVID-19 SAFETY PLAN TEMPLATE

All organizations must develop a COVID-19 Safety Plan.

Find a digital, fillable version [here](#).

This tool can be used to guide you through the planning process. Currently, there is no standard document for your COVID-19 Safety Plan – you may use this document, or another document that meets your needs, to develop your plan. Other organizations have also developed templates to support Safety Plan development. For example, WorkSafe BC has developed a comprehensive tool all businesses can adapt. This COVID-19 Safety Plan template is adapted from WorkSafe BC to align with the sport sector.

viaSport will not be approving the plans of individual sport organizations, but in accordance with the order of the Provincial Health Officer, this plan must be posted by your organization.

Step 1: Assess the risks at your workplace

Identify areas where there may be risks, either through close physical proximity or through contaminated surfaces. The closer together individuals are and the longer they are close to each other, the greater the risk.

- We have identified areas where people gather
- We have identified situations and processes where individuals are close to one another or members of the public.
- We have identified the equipment that may be shared by individuals
- We have identified surfaces that people touch often

Step 2: Implement protocols to reduce the risks

Select and implement protocols to minimize the risks of transmission. Look to the following for information, input, and guidance:

- viaSport sector guidelines and your sport-specific guidelines.
You may need to identify and implement additional protocols if the posted protocols don't address all the risks to your workers.
- Orders, guidance, and notices issued by the provincial health officer and relevant to your industry. Updates will also be posted at www.viasport.ca
- Municipality or facility guidelines

First level protection (elimination): Limit the number of people and ensure physical distance whenever possible

- We have established maximum program numbers for our program that meets facility requirements
- We have established and posted occupancy limits for common areas such as meeting rooms, change rooms, washrooms, and elevators (if applicable).
- We have implemented measures to keep participants and others at least 2 metres apart, wherever possible.

Measures in place

List your control measures for maintaining physical distance in your environment. If this information is in another document, identify that document here.

Second level protection (engineering): Barriers and partitions

This section may only apply to facility owners and operators

- We have installed barriers where workers can't keep physically distant from co-workers, customers, or others.

Measures in place

Describe how barriers or partitions will be used in your environment (if appropriate). If this information is in another document, identify that document here.

Third level protection (administrative): Rules and guidelines

- We have identified rules and guidelines for how participants, coaches, volunteers, spectators should conduct themselves.
- We have clearly communicated these rules and guidelines through a combination of training and signage.

Measures in place

List the rules and guidelines that everyone is required to follow. This could include things like using one-way doors or walkways, no sharing of equipment, and wiping down equipment after use. If this information is in another document, identify that document here.

Fourth level protection: Using masks (optional measure in addition to other control measures)

- We have reviewed the information on selecting and using masks and instructions on how to use a mask.
- We understand the limitations of masks to protect the wearer from respiratory droplets. We understand that masks should only be considered when other control measures cannot be implemented.
- We have trained individuals on the proper use of masks (if applicable).

Measures in place

Who will use masks?

What work tasks will require the use of masks?

How have workers been informed of the correct use of masks?

If this information is in another document, identify that document here.

Reduce the risk of surface transmission through effective cleaning and hygiene practices

- We have reviewed the information on cleaning and disinfecting surfaces.
- Our sport facility has enough handwashing stations on site for our participants. Handwashing locations are visible and easily accessed.
- We have communicated good hygiene practices to participants, coaches, volunteers, etc.
- We have implemented cleaning protocols for all common areas and surfaces.
- Workers who are cleaning have adequate training and materials.
- We have removed unnecessary tools and equipment to simplify the cleaning process

Cleaning protocols

Provide information about your cleaning plan. Specify who is responsible for cleaning, the cleaning schedule, and what the cleaning protocols will include (e.g., which surfaces, tools, equipment, etc.). If this information is in another document, identify that document here.

Step 3: Develop policies

Develop the necessary policies to manage your sport.

Our policies ensure that workers and others showing symptoms of COVID-19 are prohibited from participating in sport activities

- Anyone who has had symptoms of COVID-19 in the last 10 days. Symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat, and new muscle aches or headache.
- Anyone directed by Public Health to self-isolate.
- Anyone who has arrived from outside of Canada or who has had contact with a confirmed COVID-19 case must self-isolate for 14 days and monitor for symptoms.
- Our policy addresses individuals who may start to feel while participating. It includes the following:
 - Sick individuals should report to first aid (or designated individual), even with mild symptoms.
 - Sick workers should be asked to wash or sanitize their hands, provided with a mask, and isolated. Ask the worker to go straight home. [Consult the BC COVID-19 Self-Assessment Tool, or call 811 for further guidance related to testing and self-isolation.]
- If the worker is severely ill (e.g., difficulty breathing, chest pain), call 911. Clean and disinfect any surfaces that the ill worker has come into contact with.

Step 4: Develop communication plans and training

You must ensure that everyone participating in the sport activity knows how to keep themselves safe while participating:

- We have a communication and training plan to ensure everyone is trained in policies and procedures.
- All participants have received the policies for staying home when sick.
- We have posted signage at the sport location, including occupancy limits and effective hygiene practices.
- We have posted signage indicating who is restricted from participating, including visitors and workers with symptoms.
- Coaches or safety volunteers have been trained on monitoring participants to ensure policies and procedures are being followed.

Step 5: Monitor and update your plans as necessary

Things may change as your business operates. If you identify a new area of concern, or if it seems like something isn't working, take steps to update your policies and procedures.

- We have a plan in place to monitor risks. We make changes to our policies and procedures as necessary.
- Individuals know who to go to with health and safety concerns.
- When resolving safety issues, we will involve designated health and safety representatives

Step 6: Assess and address risks from resuming operations

If your workplace has not been operating for a period of time during the COVID-19 pandemic, you may need to manage risks arising from restarting your programming/business.

- We have a training plan for new staff, coaches, volunteers.
- We have a training plan for staff, coaches, volunteers taking on new roles or responsibilities.
- We have a training plan around changes to our business/programming.
- We have identified a safe process for cleaning and removing things that have been out of use.

Be advised that personal information must not be included in the COVID-19 Safety Plan

Personal information is any recorded information that uniquely identifies a person, such as name, address, telephone number, age, sex, race, religion, sexual orientation, disability, fingerprints, or blood type. It includes information about a person's health care, educational, financial, criminal or employment history. Visit www.oipc.bc.ca/about/legislation/ for more information.

Sports and recreation.

Protocols for returning to operation

The following content was posted to WorkSafeBC's website on June 12, 2020. For the most current version, please visit [worksafebc.com](https://www.worksafebc.com).

Employers may benefit from reviewing other WorkSafeBC protocols if their workplace includes other work environments including [gyms and fitness centres](#), [office space](#), [retail services](#), or [food and drink services](#). Employers must also ensure they are abiding by any [orders, notices, or guidance issued by the provincial health officer](#), and the appropriate health authority, that are relevant to their workplace.

The protocols below provide guidance around occupational health and safety for sports and recreation activities where there are workers.

- Visit [viaSport](#) for rules and support on gameplay.
- Visit [BCRPA](#) for details on providing a safe indoor or outdoor recreation experience, and for support in accessing recreation facility use.

Developing a COVID-19 safety plan

Employers are required to develop a [COVID-19 Safety Plan](#) that outlines the policies, guidelines, and procedures they have put in place to reduce the risk of COVID-19 transmission. This plan follows the six steps outlined on [COVID-19 and returning to safe operation](#). Employers must involve frontline workers, joint health and safety committees, and supervisors in identifying protocols for their workplace.

Employers are not required to submit plans to WorkSafeBC for approval, but in accordance with the order of the [Provincial Health Officer](#), this plan **must be posted** at the worksite. During a WorkSafeBC inspection, we will ask employers about the steps they have taken to protect their workers or to see the plan if it has been developed.

One part of developing your COVID-19 Safety Plan is identifying protocols that everyone at the workplace must follow to keep workers safe. We've provided industry-specific protocols below to consider as you develop the plan for your workplace.

These protocols are not a list of requirements; however, they should be considered and implemented to the extent that they address the risks your workplace. You may need to identify and implement additional protocols if the protocols suggested here do not sufficiently address the risk to your workers.

Understanding the risk

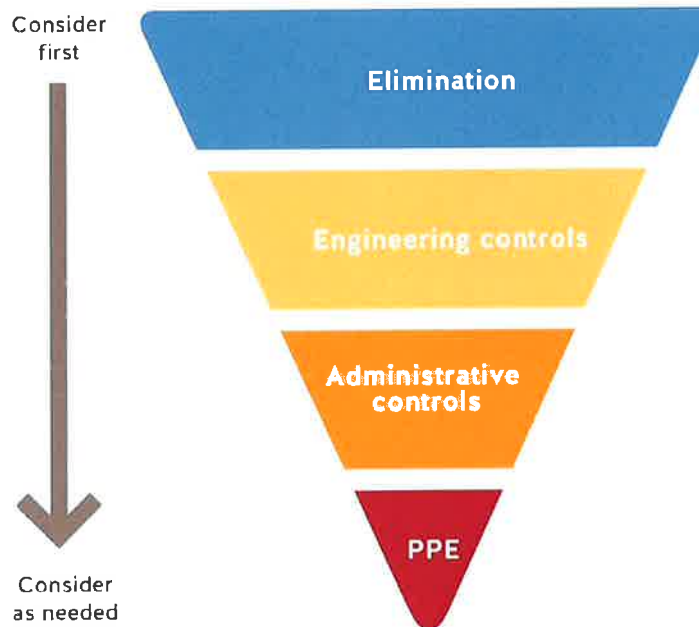
The virus that causes COVID-19 spreads in several ways, including through droplets when a person coughs or sneezes, and from touching a contaminated surface before touching the face. Higher risk situations require adequate protocols to address the risk.

- The risk of person-to-person transmission is increased the closer you come to other people, the amount of time you spend near them, and the number of people you come near. Physical distancing measures help mitigate this risk.

- The risk of surface transmission is increased when many people contact same surface, and when those contacts happen in short intervals of time. Effective cleaning and hygiene practices help mitigate this risk.

Selecting protocols for your workplace

Note that different protocols offer different protection. Wherever possible, use the protocols that offer the highest level of protection and add additional protocols as required.



First level protection (elimination): Use policies and procedures to keep people at a safe physical distance from one another. Limit the number of people in your workplace at any one time, and implement protocols to keep workers at least 2 metres from other workers, customers, and members of the public.

Second level protection (engineering controls): If you can't always maintain physical distancing, install [barriers](#) such as plexiglass to separate people.

Third level protection (administrative controls): Establish rules and guidelines, such as cleaning protocols, telling workers to not share tools, or implementing one-way doors or walkways.

Fourth level protection (PPE): If the first three levels of protection aren't enough to control the risk, consider the use of [non-medical masks](#). Be aware of the limitation of non-medical masks to protect the wearer from respiratory droplets. Ensure workers are [using masks appropriately](#).

Protocols for sports and recreation

General facility considerations

- Post **signage** to the facility to clearly communicate your policies on who can be at the workplace, which includes following the guidance of the provincial health officer and the BC CDC around self-isolation:
 - » anyone who has had symptoms of COVID-19 in the last 10 days must self-isolate at home; symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat and new muscle aches or headache.
 - » anyone under the direction of the provincial health officer to self-isolate must follow those instructions.
 - » anyone who has arrived from outside of Canada, or who is a contact of a confirmed COVID-19 case, to **self-isolate for 14 days and monitor** for symptoms.
- Facility owners and management must review expectations including roles and responsibilities with sport and user groups (provincial and local sports organization) to ensure safe use of spaces and adequate safety plans are in place. This should include clear guidance on the use of park spaces and equipment, including cleaning, disinfecting and storage of publicly available sporting equipment and facilities.
- **Establish and post occupancy limits** for the facility (patrons and staff) to accommodate physical distancing of 2 metres between individuals or family groups/units. The **COVID-19 Safety Plan** contains guidance about calculating an occupancy limit.
- Arrange spectator areas so that standing and seating areas provide at least 2 metres of physical distancing to be maintained between people. Note that the **provincial health officer's order prohibiting mass gatherings** applies to the fans and spectators at sporting events. In an arena with multiple areas of play, the order would apply to each area of play, not the facility as a whole. Players would typically not be included in the calculation since they are physically separated from fans and spectators.
- Post occupancy limits for shared work spaces such as break rooms and utility rooms. Consider rearranging these rooms to support the occupancy limit (for example, consider removing tables or chairs from break rooms).
- Ensure physical distancing can be maintained between workers, participants and the public throughout the workplace including the front desk, kiosks and rental shops. The configuration of some workplaces will not allow for physical distancing to be maintained – for example, the width of some reception desks will not ensure adequate distance. In these cases, consider other ways of maintaining distance, such as tape on the floor to indicate where guests should stand, or install a physical barrier to reduce the risk of transmission.
- Install physical markers on the floor, walls or other (cones, lines, stickers, wooden structures, etc.) that indicate appropriate 2 metre spacing distances for patrons waiting in line. If appropriate to the layout of the facility, consider implementing one-way hallways to reduce congestion.
- Implement hand hygiene policies and ensure they are communicated throughout the facility. Ensure handwashing or hand sanitizing stations are available throughout the facility.
- Provide clear and consistent signage/messaging for public and staff throughout the facility regarding COVID-19 transmission mitigation policies and procedures. Consider posting in languages other than English and/or communicating in other manners to accommodate visual and hearing impairments.

- Adjust emergency evacuation procedures and mustering arrangements to support physical distancing requirements in the case of building evacuation, fire etc.
- Some customers will need to pay with cash. For customers using credit cards and loyalty cards, have the customers scan or tap their cards and handle the card readers themselves where possible. Establish hygiene practices that include washing or sanitizing hands after handling cash or cards handled by the public.
- Where appropriate, consider propping open doors or installing motion sensors to reduce the need to touch door handles. Ensure fire code provisions are observed. If a pool is onsite, ensure none of the doors to the secure pool enclosure are propped open.
- Delivery personnel/suppliers should drop off goods at a designated delivery location. Limit the exchange of paperwork; use electronic signatures on contracts or delivery forms.

Staffing

General

- Clearly **communicate policies** to ensure workers understand who can be at the workplace, which includes following the guidance of the provincial health officer and the BC CDC around self-isolation:
 - » anyone who has had symptoms of COVID-19 in the last 10 days must self-isolate at home; symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat and new muscle aches or headache.
 - » anyone under the direction of the provincial health officer to self-isolate must follow those instructions.
 - » anyone who has arrived from outside of Canada, or who is a contact of a confirmed COVID-19 case, to **self-isolate for 14 days and monitor** for symptoms.
- If the employer operates multiple facilities, identify staff who work at different locations and consider methods to eliminate or reduce travel between sites.
- Where appropriate, create small work “pods” or crews that work together exclusively to minimize the number of interactions. Keep crews consistent across work shifts.

Instructors, coaches, and referees

- Refer to **viaSport** for guidance on gameplay and follow any related new protocols to support non-contact activities.
- Employers should have COVID-19 related protocols for coaches that includes the management of physical distance with athletes and members of the public.
- Instructors, coaches, and referees should **wash or sanitize their hands** at the start and end of shift and after taking breaks.
- Avoid drop-in lessons and keep the same group of athletes together for sessions in order to minimize turnover of learners.
- Physical distance of at least 2 metres between each athlete and coaches should be maintained.
- Coaching sessions and refereeing should be conducted in a manner that avoids touching clients. Consider using verbal cues while coaching or using technology to share instructional material and practice plans.
- For activities involving direct contact, ensure that hand hygiene is practiced using an alcohol-based hand rub or handwashing before and after contact.

- In situations where physical distancing cannot be maintained and workers have frequent contact with the public, consider the use of **non-surgical masks**. Ensure workers understand **proper use of masks**. Ensure garbage cans are available for the disposal of masks.

Cleaning and disinfecting

- Develop a **cleaning and disinfecting** plan that includes high-touchpoint areas and surfaces including washrooms, change rooms, showers, vending machines, key pads, bank machines, shared computers and other office equipment, and POS locations, as well as common switches, door handles, pay phone or public access phones, indoor furnishings, and rental equipment. Remove non-essential items (magazines, newspapers, toys) from common areas to facilitate cleaning.
- Develop and provide staff with training on cleaning plans and offer checklists outlining protocols and frequency.
- Personal protective equipment (e.g., mask, face shield, gloves and goggles, etc.) for workers conducting regular facility maintenance duties are not mandatory unless normally required for safety reasons.
- Control use of equipment to one group of users at a time and clean and disinfect between use.

First aid and emergencies

- Communicate that physical distancing remains a key control for preventing the spread of the virus.
- First aid attendants should follow **OFAA protocols** during the COVID-19 pandemic.
- See Pools section below for more information on lifeguarding.

Ice sheets and rinks

- If your facility is being reopened after a period of inactivity, ensure that all mechanical systems (including any relevant toxic process gas) are maintained, restarted properly, and operated in good condition.
- If bracelets (wristbands) are required, ask patrons to put them on themselves.
- Arrange spectator areas so that standing and seating areas provide at least 2 metres distance between patrons.
- Do not allow sharing of items that are difficult to clean, sanitize, or disinfect or that are meant to come in contact with the face. Ensure that any play equipment used in skating lessons is cleaned and disinfected regularly.
- Each worker should have their own equipment needed for each shift (e.g., radio, first aid fanny packs). Staff should not share helmets.
- Consider new paint lines or dots on the ice to support new rules of sport and encourage distancing requirements.
- Ensure staff are instructed to wash their hands after assisting someone on the ice.
- For ice rinks, additional shared equipment or touchpoints might include: Zamboni steering wheels and controls, spuder, shovels, hose and water valves, ice resurfacer, ice edger, tools shop, refrigeration control room, hockey nets, learn-to-skate equipment, timekeeper equipment (counters and score console) and music players.
- Rental equipment such as skates and helmets must be disinfected between users.
- Ensure ventilation systems are functioning as designed.

Pools

- There is no evidence that COVID-19 can be spread to humans through pool water. Proper operation, maintenance, and disinfection (e.g., with chlorine and bromine) of pools and hot tubs spas should inactivate the virus that causes COVID-19. Appropriate care should be taken, both in and outside the pool, to protect yourself and others.
- There is no special disinfection procedures to put in place for all equipment that are regularly in contact with chlorinated pool water (e.g., toys, railings, slides, etc.). Equipment that has been in contact with fresh or ocean water should be sanitized regularly.
- Control risks of water-related bacterial disease such as [Legionnaires' disease](#) due to prolonged shut down of water systems including drinking fountains, decorative fountains, hot tubs, steam rooms, etc.
- If your facility is recently returning to operation, ensure that all mechanical systems (including recirculation, filtration, and disinfection systems) are maintained, restarted properly, and operated in good condition.
- If bracelets (wrist bands) are required, ask patrons to put them on themselves.
- Do not allow sharing of items that are difficult to clean, sanitize, or disinfect or that are meant to come in contact with the face (e.g., goggles, nose clips, and snorkels).
- Place physical markers on the floor or walls (cones, lines, stickers, wooden structures, etc.) that indicate appropriate two-metre spacing distances for patrons waiting in line. If appropriate to the layout of the facility, consider implementing one-way hallways to reduce congestion. Markings on pool decks must not create a slipping hazard (e.g., no slippery tape) and must not obstruct safety signs (e.g., depth marks, no diving). Care must be taken not to confuse distancing signage with depth marking signage.
- Ensure that the pool apron is sprayed down regularly.
- Lifeguards should have their own personal equipment needed for each shift (e.g., rescue tube, first aid fanny packs). Clean and disinfect rescue equipment (e.g., rescue tube, rescue can, rescue pole, ring buoys) at the end of the day or during an exchange between lifeguards.
- For diving boards, waterslides, rope swings, wading pools and splash pads, install physical markers on the floor or walls (e.g., lines, stickers, cones, etc.) to indicate the distance of 2 metres between patrons in lines.
- Personal Protective Equipment (e.g., mask, face shield, gloves & goggles etc.) for workers conducting regular pool maintenance duties are not mandatory unless normally required for safety reasons (e.g., when handling pool chemicals).

Lifeguarding

- Communicate that physical distancing requirements still remain.
- Specific protocols should be developed for all rescues to ensure lifeguard interventions are not a source COVID-19 transmission.
- Refer to [Lifesaving Society BC/Yukon Staff Resuscitation & First Aid Recommendations](#).
- First aid attendants should follow [OFAA protocols](#) during the COVID-19 pandemic.

Additional resources

- Vancouver Coastal Health Guideline for [Swimming Pools](#)
- [Recreation Facilities Association](#)
- [viaSport](#)
- [BC Recreation and Parks Association](#)
- [Lifesaving Society](#)

For more information

The information on this page is based on current recommendations and may change. For the latest guidance, please see the health information from the [British Columbia Centre for Disease Control](#) and the latest news from the [government of British Columbia](#).

If you have a question or concern

Workers and employers with questions or concerns about workplace exposure to COVID-19 can call WorkSafeBC's Prevention Information Line at 604.276.3100 in the Lower Mainland (toll-free within B.C. at 1.888.621.SAFE). You'll be able to speak to a prevention officer to get answers to your questions, and if required, a prevention officer will be assigned to assess the health and safety risk at your workplace.

Translated resources

Our key COVID-19 related resources are also available in [Chinese \(simplified\)](#), [Chinese \(traditional\)](#), [French](#), [Punjabi](#), [Spanish](#) and [Vietnamese](#).

Resources

[COVID-19 Safety Plan](#)

Employers are required to develop a COVID-19 Safety Plan that outlines the policies, guidelines, and procedures they have put in place to reduce the risk of COVID-19 transmission. This tool will guide...

[COVID-19 health and safety: Selecting and using masks](#)

Employers and workers may choose to use masks as part of safe work practices for COVID-19. This information sheet outlines the limitations of masks as a protective measure, and describes how to select...

[Help prevent the spread of COVID-19: How to use a mask](#)

This poster illustrates the steps to follow to put on and take off a mask safely. Additional...

[COVID-19 health and safety: Designing effective barriers](#)

To help prevent the spread of the virus that causes COVID-19, employers must implement measures to reduce the risk of person-to-person transmission. This resource will help you decide when to use barriers...

[See more resources](#)

JUNE 22, 2020 - COW

See Item 6.A. - COVID 19 Risk Mitigation
Attachment VII



BC **MUNICIPAL**
SAFETY Association

MUNICIPAL BEST PRACTICES
GUIDELINES
V6

Update: May 27, 2020

Abstract

This document outlines essential safety protocols that municipalities may adopt as they restart or expand operations during the COVID-19 pandemic

Amendment Record Sheet

Date	Reason for Change	How communicated
May 19, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline - V1	<ul style="list-style-type: none"> • Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/ • Email BCMSA Yahoo User Group
May 20, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline - V2 <ul style="list-style-type: none"> • Formatting 	<ul style="list-style-type: none"> • Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/ • Email BCMSA Yahoo User Group
May 21, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline – V3 <ul style="list-style-type: none"> • Additional information in 3.2 Parks and Recreation re: Aquatic facilities, restrooms. Reference to Lifesaving Society BC & Yukon Branch Guidelines for Reopening BC's Pools & Waterfronts • Identified that if municipality has a comprehensive exposure control plan, a separate Safety Plan is not required • Amended Section: 2.2.1 Workplace Wellness/Sick Leave Policy • Appendix F: COVID-19 Screening Tool, removed wording in the bold text, “or any members of your household” • Added an amendment record sheet 	<ul style="list-style-type: none"> • Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/ • Email BCMSA Yahoo User Group
May 21, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline – V4 <ul style="list-style-type: none"> • Amended physical distancing section 2.4 to clarify space requirements • Revised abstract on cover to say “may” instead of “should” • Added link to WorkSafeBC publication “Designing effective barriers” 	<ul style="list-style-type: none"> • Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/
May 26, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline – V5 <ul style="list-style-type: none"> • Added to Aquatics reopening with additional information from WorkSafe BC • Added WorkSafeBC posters as appendices I through K; moved Due Diligence to appendix L 	<ul style="list-style-type: none"> • Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/ • Email BCMSA Yahoo User Group

May 27, 2020	Municipal COVID-19 Health and Safety Best Practice Guideline – V6 <ul style="list-style-type: none">• Added Appendix L: Best Practice – Physical Distancing in an Office Environment• Added Appendix M: #1 COVID-19 Department Risk Assessment and Safety Plan Template• Added Appendix N: #2 COVID-19 Department Risk Assessment and Safety Plan Template	<ul style="list-style-type: none">• Posted on BCMSA website: www.bcmsa.ca/resources/pandemic-exposure-control/• Email BCMSA Yahoo User Group
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Municipal Best Practices Guidelines

1.0 Overview

1.1 Purpose

Municipalities resuming operations following work interruptions related to COVID-19 must develop a COVID-19 safety plan. This document provides practical advice and guidelines to ensure safe operations for workers, as municipalities seek to reopen or expand their operations during the COVID-19 pandemic.

An Exposure Control Plan meets the WorkSafeBC requirements to protect the health and safety of workers. ([See section 1.6](#))

1.2 Public Health Directives

The Provincial Health Officer is the senior public health official for BC and is responsible for monitoring the health of the population across the province, providing independent advice to the ministers and public officials on public health issues.

The responsibilities of the Provincial Health Officer (PHO) are outlined in the *Public Health Act* and include the following:

- provide independent advice to the ministers and public officials on public health issues;
- monitor the health of the population of BC and advise on public health issues and on the need for legislation, policies and practices;
- recommend actions to improve the health and wellness of the population of BC;
- deliver reports that are in the public interest on the health of the population and on government's progress in achieving population health targets;
- establish standards of practice for and conduct performance reviews of Medical Health Officers; and
- work with the BC Centre for Disease Control and Prevention and BC's Medical Health Officers across the province to fulfill their legislated mandates on disease control and health protection.

1.3 WorkSafeBC Directives (*Workers Compensation Act/OHS Regulation Requirements*)

WorkSafeBC is a provincial agency dedicated to promoting safe and healthy workplaces across BC. They partner with workers and employers to prevent work-related injury, disease, and disability. Their services include education, prevention, compensation and support for injured workers, and no-fault insurance to protect employers and workers.

WorkSafeBC helps businesses meet their obligations under the *Workers Compensation Act* and the Occupational Health and Safety Regulation. All employers in British Columbia have an obligation under the *Act* to ensure the health and safety of workers and other parties at their workplace. With respect to COVID-19, that responsibility includes protecting workers by following the orders issued by the office of the provincial health officer, guidance provided by the BC Centre for Disease Control and the latest news released from the government. In addition, employers must implement policies and procedures to protect workers from the risk of exposure to COVID-19.

WorkSafeBC has provided a template for a [COVID-19 Safety Plan](#). Municipalities may choose to use this, or any other format they choose, as long as it meets the key requirements:

1. Assess the risks
2. Implement protocols
3. Develop policies
4. Develop communication plans and training
5. Monitor workplace and update plans as necessary
6. Assess and address risks from resuming operations

As noted above, these are all elements of an exposure control plan.

An example of a completed safety plan, entitled Return to Work plan, is in [Appendix A](#). The corresponding Safe Work Procedure is in [Appendix B](#).

Employers should consider how best to communicate to workers about potential exposure to COVID-19 in the workplace. A system should be introduced so workers (including joint health and safety committee representatives and worker representatives) are able to inform management of concerns related to being exposed to COVID-19 in the workplace. Open communication is key to finding out about specific tasks that concern workers as well as gaining input on appropriate control measures to keep workers safe.

Workers should know and understand their workplace health and safety responsibilities — and those of others. Workers have three key rights:

- the right to know about hazards in the workplace;
- the right to participate in health and safety activities in the workplace; and
- the right to refuse unsafe work.

1.4 Right to refuse unsafe work

Workers in BC have the right to refuse work if they believe it presents an undue hazard. An undue hazard is an “unwarranted, inappropriate, excessive, or disproportionate” risk, above and beyond the potential exposure a general member of the public would face through regular, day-to-day activity. In these circumstances, the worker should follow some specific steps within their workplace to resolve the issue. The worker should report any undue hazard to their supervisor for investigation. Each refusal of unsafe work is dealt with on a case-by-case basis. If the issue is not resolved between the worker and the supervisor, the joint occupational health and safety committee is notified of the concern and an investigation is conducted. If the matter is not resolved, the worker and the supervisor or employer must contact WorkSafeBC and a prevention officer will then investigate and take steps to find a workable solution for all involved.

If entering the workplace, workers should:

- Comply with the employer’s instructions around minimizing exposure to COVID-19.
- Wash their hands frequently, and/or use hand sanitizer.
- Take steps to minimize exposure to COVID-19 while away from work.

1.5 Recognize Hazards/Assess Risks

Every municipal workplace is unique. Employers must regularly assess all the hazards within their operations, taking appropriate steps to eliminate or control the associated risk. This process is referred to as a risk assessment.

Within municipalities, there are many routine situations where staff will have contact with customers, coworkers and the physical environment itself (surfaces, doors, equipment etc.). These encounters could give rise to contact with COVID-19, if not controlled adequately.

All municipalities must think about the risks in their workplace and take steps to control them. Such controls will include adhering to current public health orders, if applicable, public health advice, as well as implementing best practices to keep your employees and customers safe.

A Risk Assessment table, adapted from WorkSafeBC Safety Regulation Guideline G6.34-6, is in [Appendix C](#). A position-based risk assessment is in [Appendix D](#). Employers may choose to use these tables as a reference when completing their own risk assessments. Many more risk assessment tools are available on the [BCMSA](#) website.

We have outlined some best practices that employers should consider when implementing COVID-19 related controls in the workplace. When selecting a safeguard or a combination of safeguards, always start at the top of the hierarchy shown below to control the hazards. Choose a less effective safeguard only when more effective solutions are impracticable and continuously monitor to ensure they are providing the best level of protection to workers.

The hierarchy of controls (in order of their effectiveness):

Elimination or substitution: Has the employer fully considered eliminating or postponing work tasks that may create a risk of exposure to COVID-19? Are there opportunities to work from home or can work processes be changed to eliminate or reduce contact with others?

Engineering controls: Are engineering controls, such as physical barriers, practicable?

Administrative controls: Has the employer fully considered how work practices can be altered to minimize exposure, such as physical distancing or enhanced cleaning protocols?

Personal protective equipment (PPE): This last form of protection should only be considered after careful consideration of the previous control measures. The use of gloves and face masks may be considered where none of the above controls are possible/effective. If gloves and masks are used, proper usage guidelines should be followed. See [Appendix E](#) for possible PPE.

1.6 Exposure Control Plan

Formal exposure control plans are required for municipalities, as occupational exposure to COVID-19 could be reasonably anticipated for some employees.

The exposure control plan must incorporate the following elements:

- (a) a statement of purpose and responsibilities;
- (b) risk identification, assessment and control;
- (c) education and training;
- (d) written work procedures;
- (e) hygiene facilities and decontamination procedures;
- (f) health monitoring, when required;
- (g) documentation.

The plan must be reviewed at least annually and updated as necessary by the employer, in consultation with the joint committee or the worker health and safety representative, as applicable. Sample exposure control plans can be found on the [BCMSA](#) website.

Employers must also undertake regular inspections of the workplace and remedy unsafe or harmful conditions without delay. With respect to potential COVID-19 exposures:

- Employers should ensure that physical distancing is maintained wherever possible
- Review work procedures to ensure appropriate distancing
- Identify potential means of transmission on surfaces and minimize worker contact with those surfaces
- Employers must stay informed of all public health orders, directions, and requirements, and take appropriate action in their workplace to prevent transmission of the virus.

1.7 Return to Work Occupational Health & Safety Training

Upon returning to work after a period of absence where hazards of the work may have changed, workers must receive refresher orientation training from their employer. Therefore, everyone returning to work after a reduction in work due to COVID-19 must receive a refresher orientation. Every worker must be informed of new or revised procedures to eliminate or reduce potential for exposure to COVID-19.

Training must be

- Specific to the workplace and, in addition to acting as a refresher, it should also include any new arrangements or controls developed in response to the COVID-19 pandemic
- Should explain essential health and safety information, such as worker rights and responsibilities, work rules, hazards and safe work procedures
- Information around specific COVID-19 protocols or procedures, including
 - Rules around physical distancing
 - Hand washing
 - Reporting COVID-19 symptoms
 - General cleaning procedures to ensure a consistent approach by all

2.0 General Operating Guidelines

2.1 General Practices

While every workplace is different, and practices may vary depending on the location and nature of the department, there are some general guidelines that apply:

- Maintain good personal and environmental hygiene
- Ensure good ventilation
- Maintain proper function of washrooms, drains and pipes.
- Cover nose and mouth with tissue paper while sneezing or coughing, dispose of tissue and wash hands immediately. (see poster in [Appendix I](#))
- Maintain physical distancing (at least 2 meters)

- Keep hands clean and wash hands properly:
 - before touching eyes, nose and mouth if there is a need to do so
 - after handling objects soiled by respiratory or other body secretions
 - after touching high contact surfaces or equipment, such as escalator handrails, elevator control panels or door handles
- People with symptoms of COVID-19 should self-isolate and contact their doctor or 8-1-1. Anyone with these symptoms are not to be in the workplace. The BCMSA COVID-19 screening tool may be used to identify these situations. ([Appendix F](#))
- People returning from outside the province/country should follow public health guidelines after the trip, are currently required to self-isolate for a minimum of 14 days.

2.2 Employee Policies

Employees Must

- Practice physical distancing by working at least 2 meters apart from co-workers whenever possible
- Continue to follow all other safe work procedures. If it is unsafe to work, talk to a supervisor, joint health and safety committee or worker representative, and/or union, if present
- Stay home if they are sick or might be sick. Use the BC Ministry of Health tool for [self-assessment](#).
- Avoid touching their face
- Wash their hands for a minimum of 20 seconds at the start of their shift, before eating or drinking, after touching shared items, after using the washroom, after using a tissue, after handling cash or credit/debit cards, after touching common items, after each delivery (if contact was made) and at the end of their shift. Remove jewelry while washing. (see [Appendix G](#))

2.2.1 Workplace Wellness/Sick Leave Policy

Employers should ensure that workers do not come to work if they are displaying symptoms of COVID-19. This includes workers who fall into the below categories:

- Anyone with COVID-19-like symptoms such as a sore throat, fever, sneezing, or coughing must self-isolate at home for a minimum of 10 days from onset of symptoms, until their symptoms are completely resolved. Anyone with these symptoms should call 8-1-1 and possibly be tested for COVID-19. The BCMSA COVID-19 Screening tool may be used by supervisors or Human Resources ([Appendix F](#))
- Workers who have travelled internationally. In these cases, they must remain away from the workplace and self-isolate for at least 14 days.
- Workers who live in the same household as a confirmed or clinical COVID-19 case who is self-isolating.

If workers report having COVID-19-like symptoms while at work:

- Send them home to recover for the prescribed self-isolation period. Advise them to call 8-1-1 for direction.
- Clean and disinfect their work station and any areas or tools that they were using as part of their job.
- Follow any directions from public health with regard to detailed cleaning, temporary closure and trace contacting.

Employers should ensure that these policies are communicated to their managers, supervisors, and workers and they must have a process for communicating with workers who may fall into one of the categories of those who should not come to work.

Employers must ensure they have clear policies that address the following:

- Expectations from employees when they report to work (e.g. washing hands, abiding by distancing protocols, wearing PPE, undergoing COVID-19 screening)
- What employees do when they feel sick (e.g. reporting procedures)
- Sick leave entitlement

2.3 Customer Policies

Messaging to Customers

- If you have underlying medical conditions, it is recommended that you not visit our municipal hall or facilities
- Anyone displaying symptoms of COVID-19, which primarily displays as a persistent cough, will not be permitted on the premises. If you are sick, please stay home
- If you have travelled outside Canada, you are not permitted on our premises until you have self-isolated for a minimum of 14 days
- If you are displaying symptoms of COVID-19 or you live in a household where someone is showing symptoms of COVID-19, please stay home
- Physical distancing is required at all times (minimum of 2 meters)
- Failure to observe physical distancing risks the closure of the facility, and as such, you will be asked to leave the premises
- Washrooms on the premises are disinfected frequently; hand sanitizers are located at (identify the location, recommend at a minimum, the entrance to the facility)
- If your request can be handled over the phone, please call the appropriate department for assistance rather than attending the municipal hall in person
- We ask that any financial transactions be conducted electronically and not in cash

2.4 Physical Distancing

2.4.1 Physical Distancing for Employees

There are various ways to determine space considerations to allow for appropriate physical distancing, depending on circumstances.

Involving your joint health and safety committee (or worker representative) in brainstorming physical distancing measures that could work in the spaces they work in. Have your joint committee consider the interactions they have with others, solicit input from the team and encourage all workers to promote the approved physical distancing measures. Spread the message that the most considerate thing your workers can do for their co-workers and customers is to keep a distance of two meters between themselves and the people they work with. Encourage workers to use a standard greeting with each other that is positive but reminds others to keep a safe distance.

Considerations for Physical Distancing

Types	Description
Physical Distancing	<ul style="list-style-type: none"> Allow for 2 meters (6 feet) of physical distance between workers or between workers and public or public and public.
Indoor Employee Space	<ul style="list-style-type: none"> Where employees will not be moving around or need to navigate around obstacles, allow for 3.3 square meters (36 square feet) of unencumbered space per person to calculate occupancy
Indoor Employee/Public Space	<ul style="list-style-type: none"> calculate the total unencumbered square meters available and divide that by 5, to allow for 5 square meters (54 square feet) of space per person. The resulting figure is the maximum occupancy for that space.
Events Numbers	<ul style="list-style-type: none"> The maximum number of participants is fifty (50), including workers and public, ensuring adequate space is available.

There are many ways that employers can organize work to ensure that physical distance between workers is maintained. Some options may include:

- revising work schedules or implementing work-from-home policies for some staff to limit the number of workers on site at a given time
- staggering start and end times if crowding at entry and exit locations means the physical distancing requirement of at least 2 meters cannot be maintained.
- designating doors for entry and exit to prevent workers and others from coming into proximity with one another.
- establishing and posting occupancy limits on elevators, rooms and other small spaces, using the calculation shown previously (Appendix J)
- Identify the maximum number of people (including staff) and communicate and enforce this limit
- reducing in-person meetings and other gatherings
- using tape to mark off areas where workers can and cannot walk, or to mark off areas where workers may walk only in one direction (such as down an aisle or narrow corridor)
- posting signage to remind workers to maintain their distance when interacting
- postponing, re-arranging, or planning work tasks in such a way that workers are not required to work in proximity to one another
- using machines or other equipment to assist with job tasks usually performed by two workers, such as lifting or carrying heavy objects
- managing worker transportation so that two workers are not required to travel in a single vehicle
- Restrict eating to a clearly identified and dedicated area with handwashing stations, cleaning and disinfecting supplies, and adequate space to maintain the physical distancing requirement.
- Designating additional rooms as break areas
- Eliminating food sharing stations
- Limiting the number of workers allowed in common areas at any one time. Consider staggered break times to reduce large gatherings and encourage workers to take breaks at their own desk or outside. Limit or stagger workers entering change areas or rooms with assigned lockers.

- distancing the tables in lunchrooms, limiting the number of chairs, placing “x’s” on tables where people should not sit, or installing barriers at the tables made from plexiglass, acrylic, polycarbonate, or similar materials. See WorkSafeBC publication “[Designing effective barriers](#)”.
- If breaching the physical distancing requirement is unavoidable, plan the work task and provide instructions to workers to ensure that time spent in close proximity is minimized.

The aim is to do everything possible to limit in-person interactions, while finding new and more protective ways to operate within the physical infrastructure of the workplace. With this in mind, everyone in the workplace must adhere to the following:

- do not come to work if you are sick
- report to work committed to abiding with physical distancing processes
- continue to follow all existing safe work procedures in the workplace
- wash and sanitize hands regularly, cough/sneeze into tissue or upper sleeve or elbow (not your hands)
- avoid physical contact with others
- if you notice that another employee is not abiding by the physical distancing policy, you must report it to a supervisor
- reconfigure the workplace to maintain appropriate distance between workers

2.4.2 Physical Distancing During Worker Transportation

If workers are travelling by road vehicle, the following control measures should be considered:

- Employers should limit the number of workers being transported at any one given time and employ measures to ensure distance between workers is maintained. This could include adjusting the number of workers transported, adding physical barriers between workers, blocking seats and using larger or multiple vehicles. Distancing is also important when loading and unloading.
- Employers should have hand-washing facilities or sanitizing stations available to workers as they enter and exit the vehicle.
- Whenever possible, workers should travel alone in their vehicles in order to practice physical distancing. (Consider working alone or in isolation controls, in this situation).
- If it is not possible to ensure 2 meters of distance between workers in a vehicle, the employer must consider other control measures, such as physical barriers where practicable and personal protective equipment (PPE) where appropriate.
- Employers must ensure that high-contact surfaces within the vehicle are routinely cleaned. These include seatbelts, headrests, door handles, gear shift levers, steering wheels and hand holds.
- Employers may consider installing a physical barrier, similar to a “sneeze guard,” in vehicles transporting workers. While this may be feasible in some vehicles depending on their size, type, and configuration, employers should be aware that modifying vehicles in any way may introduce additional hazards to the vehicle and occupants. Any barriers should be installed in such a way that they:
 - are not rigidly affixed to the vehicle, and
 - do not introduce hazards, such as restricting the drivers field of vision, means of escape in the event of an accident, or access to controls.

- Any changes to the passenger compartment and vehicle used for transportation of workers must still be consistent with requirements set out in the Occupational Health and Safety Regulation. Any barrier installed should be made of a material that can be cleaned and disinfected and should be regularly cleaned as part of the overall cleaning practices for the vehicle used to transport workers.

2.4.3 Physical Distancing for Customers

From a customer perspective, municipalities must implement physical distancing to reduce opportunities for interactions among large groups that could have prolonged close contact, such as during tax payment time. Practically this might mean limiting the number of patrons who enter your business and discontinuing service in areas where physical distancing cannot be practiced (e.g., counter service).

Ways in which businesses may achieve physical distancing among customers include the following:

- Use signs and markings to direct customers, to indicate appropriate distances to stand, to mark direction of travel, to designate entrances and exits, or to identify a drive-thru lane or pick up zone
- Promote one-way travel
- Limit the number of customers allowed into your city hall or facility. It is strongly recommended that there are five square meters of space per person. This unencumbered space would be floor space minus floor space used for change rooms, desks, etc. Identify the maximum number of people (including staff) and communicate and enforce this limit
- Provide a waiting area outdoors with markers to designate safe distances if it is safe to do so
- Install barriers at and between cash registers to prevent encroachment
- Install barriers between workers and customers made of plexiglass, acrylic, polycarbonate, or similar materials. See WorkSafeBC publication "[Designing effective barriers](#)"
- Mark the floor at 2 meter intervals to promote physical distancing in aisles and line ups
- Label certain tables and chairs unavailable for use, or remove entirely, to maintain appropriate distances between customers.

2.5 Sanitation & Hygiene

2.5.1 Hand Hygiene

Respiratory viruses like COVID-19 spread when mucus or droplets containing the virus get into your body through your eyes, nose or throat. Most often, this happens through your hands. Hands are also one of the most common ways that the virus spreads from one person to the next. During a global pandemic, one of the cheapest, easiest, and most important ways to prevent the spread of a virus is to wash your hands frequently with soap and water.

Below is a step-by-step process for effective handwashing, to remove all traces of the virus:

- Step 1: Wet hands with running water
- Step 2: Apply enough soap to cover wet hands
- Step 3: Scrub all surfaces of the hands – including back of hands, between fingers and under nails – for at least 20 seconds.
- Step 4: Rinse thoroughly with running water
- Step 5: Dry hands with a clean cloth or single-use towel
- Step 6: Use towel to turn off the faucet

Employers should ensure that materials for adhering to hand hygiene are available on their premises. Provide receptacles for used tissue paper disposal. Provide conveniently-located dispensers of alcohol-based hand sanitizer; where sinks are available, ensure that supplies for handwashing (i.e., liquid soap and disposable towels) are consistently available. Remove or cover hand air-drying stations.

A poster identifying hand hygiene is in [Appendix G](#).

2.5.2 Personal Protective Equipment

Personal Protective Equipment (PPE) is specialized clothing or equipment worn by an employee for protection against infectious materials. It should serve as a last resort that should not replace any other risk control and infection control measures. However, sufficient stock of PPE should be kept to ensure its provision to protect employees from exposure to infectious agents in the workplace. The common PPE used includes:

Surgical mask: Wear a surgical mask to protect mucous membranes of the nose and mouth during procedures that are likely to cause exposure to blood or body fluids. Non-surgical (cloth) masks do not protect the wearer but may prevent the wearer from exposing others to the virus.

Particulate respirator: Use a particulate respirator (e.g., N95 respirator) for first aid attendants/First Responders, or for maintenance work on ventilation or sewage systems.

Gloves: Wear disposable gloves when touching blood, body fluids, mucous membrane or contaminated items. Remove gloves promptly after use and perform hand hygiene immediately. Gloves do not replace hand hygiene.

Gown, apron or impervious disposable coveralls: Worn to protect skin or trunk and to prevent soiling of clothing during procedures that are likely to generate splashes or sprays of blood, body fluids, secretions, or excretions. Wear a coverall for conducting high pressure water spraying during ventilation system or sewer system maintenance or when substantial whole-body contamination is anticipated. Remove soiled garment as promptly as possible and perform hand hygiene to avoid transfer of microorganisms to other people or environments.

Goggles / Face shield: Wear goggles / face shield to protect the mucous membrane of the eyes when carrying out procedures that are likely to generate splashes or sprays of blood or body fluids of the person (e.g., changing dust filters of the ventilation system, working in sewer system, or for first aid attendants). Wear goggles / face shield when conducting high pressure water spraying for sanitary sewer system maintenance. Ordinary spectacles do not provide adequate protection. Goggles / face shield should be changed after procedure or whenever contaminated. Reusable goggles / face shield should be washed and decontaminated in accordance with manufacturer's instructions.

2.5.3 Environmental Hygiene & Decontamination

Current evidence suggests that COVID-19 may remain viable for hours to days on surfaces made from a variety of different materials. The thorough cleaning of surfaces and structures, followed by disinfection, is therefore a best practice measure for prevention of COVID-19.

As of the date of this document, the BC Center for Disease Control recommends the following:

For disinfection purposes, common household disinfectants such as ready-to-use disinfecting wipes and pre-made solutions (no dilution needed) can be used. Always follow the manufacturer's instructions printed on the bottle or on the Safety Data Sheet. Ensure that the disinfectant product has a Drug

Identification Number (DIN) on its label. Look for that number on Health Canada's [list of approved products](#). If your product is not on this list, it has not been approved for this use.

Always follow product instructions for dilution, contact time and safe use. All visibly dirty surfaces should be cleaned with water and detergent before disinfecting (unless otherwise stated on the product label).

Always ensure that the disinfectant you use is approved for use in a food processing or food service application, if applicable. Some disinfectants can be toxic and are unsuitable for food premises or food contact surfaces.

If you do not have access to pre-made disinfection products, the following bleach concentrations should be applied, taking great care when mixing. Ensure WHMIS labelling requirements are followed.

Surface disinfection: Chlorine (household bleach – sodium hypochlorite, 5.25%) should be applied at a concentration of 1-part bleach to 100 parts water (10 ml bleach per litre water). This concentration should be used for disinfecting surfaces (e.g., hand railings, grab handles, door knobs, cupboard handles). Make fresh daily and allow surface to air dry naturally.

Disinfecting surfaces contaminated with body fluids: Chlorine (household bleach - sodium hypochlorite, 5.25%) should be applied at a concentration of 1 part bleach to 50 parts water (20 ml bleach per litre water). This concentration should be used for disinfecting surfaces contaminated with body fluids and waste like vomit, diarrhea, mucus, or feces (after cleaning with soap and water first). Make fresh daily and allow surface to air dry naturally.

Quaternary Ammonium Compounds (QUATs), noted as 'alkyl dimethyl ammonium chlorides' on the product label, may be used for disinfecting surfaces (e.g., floors, walls, furnishings).

Cleaning equipment should be designated for particular areas and colour coding may assist in the identification of specific equipment that is used for specific tasks. Ensure WHMIS criteria is met for labeling, use, and review of Safety Data Sheets, and that incompatible substances are not mixed.

2.6 Employee & Customer Communications

2.6.1 Employee Communications

Effective communications to employees are an important element of a good workplace. It assumes even greater significance at times of crisis. The current situation is constantly evolving, and employees are having to deal with multiple personal and professional changes. Ensuring employees are kept informed, and fully understand, expectations around hygiene, municipal policies, safe work practices and protocols to be followed will not only ensure better compliance but will also go a long way in obtaining employee commitment. Face to face communication can take place if proper physical distancing measures are observed but other options for communications should also be utilized, such as emails, posters, virtual meetings, short videos etc.

Ensure workers' mental as well as physical health is maintained. Communicate to all workers how to contact your Employee and Family Assistance Program. The [Canadian Mental Health Association](#) has resources which may be of help.

2.6.2 Customer/public Communications

Municipalities must develop standard communications that they can share with customers visiting, or planning to visit, their premises. This communication should include

- A message welcoming them to the premises
- Specifics about current operation environment (e.g. provincial health directives that apply)
- Expectations outlined in the customer policies section above
- An overview of all the efforts that you are undertaking to ensure customer health & safety

This communication should be available in English and other languages as appropriate and should be featured on the municipal website, signage at the premises and be included in any social media information.

3.0 Potential Controls

The following information contains potential controls/recommended best practices for five main employee groups in municipalities. Each municipality must follow the hierarchy of controls to establish the greatest level of worker safety possible and include these controls in their COVID-19 Safety Plan.

3.1 Administration/Office staff

3.1.1 Worker to Worker

- Ensure workers who have been away, or are new to the workplace, are oriented as necessary so that all COVID-19 related procedures are explained and understood.
- Where possible, communicate using telephone, text message, email, or other communication technology instead of face to face.
- Workplaces should stagger start and end times if crowding at entry and exit locations means the physical distancing requirement of at least 2 meters cannot be maintained.
- Consider designating doors for entry and exit to prevent workers and others from coming into proximity with one another.
- Ensure touch-free hand sanitizer is available to workers as they enter the building and counter staff who deal with the public have hand sanitizer available for just their use.
- Post signage banning access to the workplace to those who are exhibiting symptoms of COVID-19.
- Ensure cleaning products are readily available, monitored daily and restocked daily as required.
- Ensure high touch surfaces such as counters, handles, control switches are cleaned a minimum of twice per day with regular household cleaning products, disposable wipes or a diluted bleach solution. Follow the directions on the product label.
- Maintain a record of cleaning and disinfecting completed.
- Consider the use of thin micro-shields on computer keyboard, computer mouse, point of sale machines and any other equipment that must be shared. Each worker to be issued their own shields and be responsible for proper use and cleaning.
- Consider cleaning and disinfecting eating areas every hour.
- Ensure that whatever changes you make to the usage of communal areas is clearly communicated to workers.

- Limit the number of workers allowed in common areas at any one time. Consider staggered break times to reduce large gatherings and encourage workers to take breaks at their own desk or outside. Limit or stagger workers entering change areas or rooms with assigned lockers.
- Consider distancing the tables in lunchrooms, limiting the number of chairs, placing “x’s” on tables where people should not sit, or installing dividers at the tables made from plexiglass, acrylic, polycarbonate or similar materials. See WorkSafeBC publication “[Designing effective barriers](#)”
- If breaching the physical distancing requirement is unavoidable, plan the work task and provide instructions to workers to ensure that time spent in close proximity is minimized.
- When face to face meetings cannot be avoided, consider requiring staff to wear cloth face masks.
- Restrict eating to a clearly identified and dedicated area with handwashing stations, cleaning and disinfectant supplies, and adequate space to maintain the physical distancing requirement.
- Require workers to bring their own dishes and utensils.
- Refrain from providing and consuming communal foods.
- Allow communal doors to remain open throughout the workday to reduce contact with door handles.
- Instruct workers to use their own equipment, such as pens, staplers, headsets, and computers.
- Minimize the number of people using previously shared office equipment or other items (photocopiers, coffee machines, microwave ovens, etc.). Shared equipment should be cleaned and disinfected after each use.
- Establish hygiene practices that address the needs of the workplace that includes the requirement to wash or sanitize hands after coming into contact with public items.
- Restrict travel between offices or work locations to critical business functions.
- Minimize the use of shared vehicles. If required, follow appropriate disinfection procedures before and after travel for vehicle surfaces such as the steering wheel, gear shift, and door handles.
- Consider requiring the use of cloth face mask in meetings
- First Aid Attendants should follow the WorkSafeBC Guideline “[OFAA Protocols during the COVID-19 Pandemic](#)”

3.1.2 Public to Worker

- Where possible, visits to the workplace (i.e. municipal hall) should be prearranged, staggered, and safety protocols should be communicated before entry into the workplace (e.g., email and/or signage posted to entrance). If possible, keep a record of visitors to the workplace should contact tracing be necessary.
- When booking appointments, visitors should be reminded to reschedule if they experience symptoms typical of COVID-19 or are placed on self-isolation.
- Minimize non-essential in-person interaction between workers and visitors (e.g., use of virtual meeting tools, email, or telephone).
- Visitors should attend appointments alone and minimize time spent in waiting area before their appointments (e.g., request visitors to wait in vehicles and text message or call when ready).
- Encourage taxpayers to make payments and grant applications online, or by mail.
- Discourage payment in cash.
- Post signage at the workplace to inform every one of the measures in place.

- Waiting areas should be arranged to maintain physical distancing requirement. Install barriers between staff and visitors made from plexiglass, acrylic, polycarbonate or similar materials. See WorkSafeBC Publication "[Designing effective barriers](#)"
- Place markings on the floor directing visitors where to stand when approaching front counters.
- Remove non-essential communal items, such as candy, magazines, and pamphlets.
- Beverages (coffee, tea, water) should not be offered at this time.
- Provide a safe place for visitors to dispose of used sanitizing wipes and other personal protective equipment.
- Ensure that delivery zones are clearly identified and limited to receivers and deliverers only.
- Arrange for suppliers and/or delivery persons to drop off goods at building entrance to avoid searching for departments within the premises.
- Request contactless delivery to maintain physical distancing requirement (e.g., delivery person leaves packages in a pre-arranged location). This option may be limited if signing or proof of receipt is required, or theft of items is possible before being retrieved by staff.

3.2 Parks and Recreation

3.2.1 Worker to Worker – indoor or outdoor spaces

- Review and coordinate roles and responsibilities with all contractors, suppliers, and staff. Employers should develop procedures to ensure contractors are aware of your health and safety program requirements, including relevant COVID-19 related protocols, and are following protocols of their own.
- For locations where parks staff are working from multi-ministry or regional offices, coordination is required to ensure plans align across locations.
- Limit the number of staff on shift to the number required.
- Stagger arrival and departure times.
- Assign staff to one facility only
- Limit the number of workers allowed in common areas at any one time. Consider staggered break times to reduce large gatherings and encourage workers to take breaks at their own desk or outside. Limit or stagger workers entering change areas or rooms with assigned lockers.
- Consider distancing the tables in lunchrooms, limiting the number of chairs, placing "x's" on tables where people should not sit, or installing dividers at the tables made from plexiglass, acrylic, polycarbonate or similar materials. See WorkSafeBC publication "[Designing effective barriers](#)"
- If breaching the physical distancing requirement is unavoidable, plan the work task and provide instructions to workers to ensure that time spent in close proximity is minimized.
- If face to face meetings cannot be avoided, consider requiring staff to wear cloth face masks.
- Restrict eating to a clearly identified and dedicated area with handwashing stations, cleaning and disinfectant supplies, and adequate space to maintain the physical distancing requirement.
- Consider having cleaning staff disinfect eating areas hourly.
- Require workers to bring their own dishes and utensils.
- Refrain from providing and consuming communal foods.
- Allow communal doors to remain open throughout the workday to reduce contact with door handles.
- If face to face meetings are unavoidable, consider holding them outdoors and maintain appropriate physical distance at all times.

- If meetings must occur indoors, limit face to face participation to only those absolutely required to be present. Ensure proper cleaning and disinfecting before and after meeting room use.
- Consider requiring all staff in meetings to wear non-surgical cloth face masks.
- Review staffing levels and adjust as needed to ensure enhanced cleaning of high-touch areas and enhanced staff presence to manage park visitors.
- Determine the maximum number of people in each area or space to maintain physical distancing requirements. See the COVID-19 Safety Plan template for guidance on establishing occupancy limits.
- In welcoming visitors, send out information through regular marketing channels and social media about limitations, rules, limited facilities, and service to manage expectations during partial openings.
- Provide signage and information regarding rules and process throughout the Parks and Recreation facilities including parks, beaches, sport courts, and general outdoor areas. Consider posting signage in other majority languages or provide pictograms.
- Consider enhanced measure to maintain the physical distancing requirement
- Control entry and exit points for visitors and workers
- Manage the flow of people by implementing one-way walkways or marking off designated walking areas
- Consider creating cohorts of workers who work together and who do not interact with other cohorts. This will assist in reducing transmission throughout the workplace in the event that a staff member becomes ill.
- Ensure workers who have been away, or are new to the workplace, are oriented as necessary so that all COVID-19 related procedures are explained and understood.
- Identify situations where personal protective equipment (PPE) will be required. Clarify who will provide PPE and train workers accordingly.
- Identify a process to regularly review and/or update protocols and include workers and the joint occupational health and safety committee in your review process.
- Establish and post occupancy limits for office spaces, lunchrooms, vehicles and other common areas. Ensure physical distancing can be maintained. It is recommended that five square meters of unencumbered space be available for each person (staff and public).
- Establish hygiene practices that address the needs of the workplace that includes the requirement to wash or sanitize hands after coming into contact with public items.
- Post cleaning procedures and worker expectations in all common spaces.
- Before entering any shared space such as vehicle or office, wash hands or use hand sanitizer.
- Clarify procedures to wipe down or disinfect shared office equipment before use.
- Consider the use of thin micro-shields on computer keyboards, computer mouse, point of sale machines and any other equipment that must be shared. Each worker to be issued their own shields and be responsible for proper use and cleaning.
- Maintain at least a 2 meter distance from other workers. If the physical distancing requirement cannot be maintained, hold a meeting to address solutions, which may include physical barriers.
- Employers should assess the number of workers being transported or sharing vehicles at any given time and employ measures to ensure at least 2 meters of distance between workers is maintained.

- Whenever possible, workers should travel alone in their vehicles. Employers must implement all the necessary safeguards related to working alone or in isolation to ensure the safety of these workers.
- Measures that may be taken to ensure at least 2 meters of distance include the following:
 - Have workers sit one to a seat
 - Stagger riders to allow for maximum distance
 - Adjust the number of workers per trip and the overall number of trips needed to transport workers to a worksite
 - If possible, use larger vehicles or multiple vehicles
 - Track who drives which vehicles and minimize changes in teams or vehicle assignments. Consider creating consistency in crews of workers using vehicles together and performing shifts or work tasks together.
- If it is not possible to ensure 2 meters of distance between workers in a vehicle through these measures, the employer must consider other control measures, such as physical barriers where practicable or PPE where appropriate.
- Employers must also implement a process that allows for physical distancing when loading and unloading vehicles. Workers waiting for loading and unloading should maintain physical distancing while remaining safely away from traffic.
- Employers should have handwashing facilities or sanitizing stations available to workers as they enter and exit the vehicle.
- Employers must ensure that high contact surfaces within the vehicle are routinely cleaned and disinfected. These include seatbelts, headrests, door handles, steering wheels, and handholds.
- Incorporate end-of-shift vehicle wipe downs, include a method for tracking end of shift cleaning and provide workers with appropriate supplies, like soap and water, hand sanitizer, and disinfectant wipes.
- Manage location of personal gear and care items to minimize exposure.
- Clarify and follow cleaning and disinfecting schedules.
- First Aid Attendants should follow the WorkSafeBC Guideline "[OFAA Protocols during the COVID-19 Pandemic](#)"

3.2.2 Public to Worker – outdoor spaces

- Ensure any workers that are expected to manage groups of visitors are trained in protocols.
- Ensure staff have the support and strategies for dealing with visitors who may be unwilling or are unable to understand the approach to managing visitor volumes. This should include reviewing your violence risk assessment, policies and procedures, and training and reporting requirements under the Occupational Health and Safety Regulations for minimizing the risk of violence to workers.
- Provide signage and determine how crowd limits and spacing will be controlled, and who will be responsible. During Phase 2 of business re-opening, the maximum number of persons allowed at a single event is 50, including staff.

- Provide markers or indicators to ensure spacing:
 - Limit parking
 - Space out or limit bike valet or bike racks
 - Space out or limit the number of picnic tables, and put signage on table for the maximum number of people per table
- When working amongst members of the public, set up barriers or tape to delineate the worksite and to discourage the public from entering the area.
- Ensure there is sufficient staff to manage the volume of customers and associated line ups and food pick-up areas.

3.2.3 Public to Worker – indoor spaces

As the Province navigates through and beyond Phase 2 of the provision of services during the COVID-19 pandemic, aquatic centers, fitness and recreation facilities may be re-opened. As information becomes available it will be added to this document.

The following information has been provided to allow municipalities to prepare for re-opening of indoor recreational spaces.

3.2.3.1 Aquatic Centers

At this time, there is no evidence that COVID-19 can be spread to humans through pool water. Proper operation, maintenance, and disinfection (e.g., with chlorine and bromine) of pools and hot tubs spas, should inactivate the virus that causes COVID-19. Appropriate care should be taken both in and outside the pool, to protect workers and public.

Prior to opening, ensure all mechanical systems (including, any relevant toxic process gas) are maintained, restarted properly and operated in good condition.

- If employer operates multiple facilities, identify staff that work at different locations and consider methods to eliminate or reduce travel between sites.
- Develop a staffing plan to reopen spaces/facilities/programs that takes into account additional cleaning, physical distancing and patron management to protect all staff in including those who may be vulnerable or high-risk.
- If workers will be responding to noncompliant or disgruntled patrons, ensure they are trained and supported in ways to do so
- Employees must wash their hands when arriving and leaving the aquatic facility, and before and after: eating, breaks, smoking, blowing one's nose, coughing, or sneezing, going to the toilet, being in contact with animals or pets, using shared equipment (e.g. water test kit)
- Minimize personal items and clothing brought in by workers. Store workers' items separately, with adequate space between each.
- When possible, operate with consistent work teams (same workers in shift work) to minimize the number of interactions.
- Each worker should have their own equipment needed for each shift (e.g. one rescue tube per lifeguard, first aid fanny packs).

- As there is currently no evidence that COVID-19 survives in treated pool water, there are no special disinfection procedures to put in place for equipment that is regularly in contact with disinfected water (toys, railings, slides, etc.).
- Develop and provide staff with training on cleaning plans and offer checklists outlining protocols and frequency. The [BCCDC](#) offers guidance. Also see WorkSafeBC [Cleaning and disinfecting guide](#)
- Employers should develop policies and provide on-site training to all cleaning staff prior to assigning cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE and how to properly dispose of PPE.
- Personal Protective Equipment (mask, face shield, gloves & goggles etc.) for workers conducting regular pool maintenance duties are not mandatory unless normally required for safety reasons (e.g. when handling pool chemicals). When eye protection is needed, use goggles or eye shields.
- Enhance cleaning and disinfecting of washrooms, change rooms and high touch areas.
- Clean and disinfect rescue equipment (rescue tube, rescue can, rescue pole, ring buoys at the end of the day) or during an exchange between lifeguards.
- After cleaning, leave the rescue equipment immersed in the water and store to dry overnight
- Control use of equipment to one group of users at a time and clean and disinfect between use.
- Create a list and control plan for all frequent touch points include vending machines, key pads, bank machines, shared computers and other office equipment, POS locations, as well as common switches, door handles, pay phone or public access phones, indoor furnishings, rental equipment etc.
- Plan for and procure adequate supplies of PPE for staff
- Provide clear and consistent signage/messaging for public and staff throughout the facility regarding COVID-19 transmission mitigation policies and procedures. Consider ESL needs.
- Establish self-isolation/containment area for staff or patrons showing symptoms of illness while waiting for transportation to a medical centre or home
- Be aware of, and follow, all applicable local government policies, Health Authority and Public Health guidance and orders. Adjust policies as directives change. Regional health authority restrictions may differ from region to region.
- Adjust emergency evacuation procedures and mustering arrangements to support physical distancing requirements in the case of building evacuation, fire etc.
- Train staff in emergency procedures a case or outbreak occur on your site
- Provide hand sanitizing station at entrance to facility and require public and staff to use it.
- Limit the number of patrons in the facility (patrons and staff), to allow for appropriate physical distancing of 2 meters between each person. It is strongly recommended that each facility have five square meters of unencumbered space per person. (See [Section 2.4](#))
- Consider areas of the facility where physical distancing may not be possible (i.e. hot tubs, saunas, etc.) and determine if opening these features are feasible.
- Designate and sign the direction of foot traffic; one way in and one way out, and one way circulation paths in corridors and stairs.
- Mark physical distance requirements on floors
- Arrange deck layout so standing and seating areas provide at least 2 meters distance between patrons
- Limit any nonessential visitors, volunteers and activities involving external groups or organizations
- Install barriers at front counters made of plexiglass, acrylic, polycarbonate or similar materials. See WorkSafeBC Publication "[Designing effective barriers](#)"
- Consider health screening of staff and visitors. See [Appendix F](#) for the BCMSA COVID-19 Screening Tool.
- Post signs at the entrance prohibiting entry to anyone with COVID-19 symptoms
- Maintain a list of persons in the facility in case contact tracing is required

- Consider the use of thin micro-shields on computer keyboard, computer mouse, point of sale machines and any other equipment that must be shared. Each worker to be issued their own shields and be responsible for proper cleaning.
- Consider requiring patrons to make appointments with 1.5 hour increments with a 30 minute time buffer in between to allow staff to clear the facility and conduct cleaning/sanitizing prior to allowing next group of users' entry and use.
- Members arriving early are prohibited from entering building until their reserved time and will be encouraged to wait in their vehicles.
- Members have to check in at desk
- No passes will be sold
- Remove non-essential items (magazines, newspapers, toys) from common areas
- If bracelets (wrist-bands) are required, use self-applied bracelets and provide waste containers for their disposal.
- Seniors will be encouraged to stay at home or consider a special time to be scheduled for Seniors only day
- Signs to identify equipment that needs cleaning/sanitizing or is cleaned/sanitized
- Equipment hard to sanitize will be prohibited
- Encourage patrons to shower at home prior to arriving at the facility
- Water fountains should be closed, communicate to patrons to bring their own water. If they are to remain open, ensure they are appropriately flushed after a facility shut down to reduce the possibility of Legionnaire's Disease or other water-borne illnesses
- Staff who have frequent contact with the public (cleaning public spaces, point of sale machine, first aid related emergencies) should utilize disposable gloves. Care must be taken to not cross contaminate other areas or work spaces when disposable gloves are utilized.
- Train and orient workers in appropriate PPE (gloves, mask, face shields, goggles, coveralls) when performing cleaning routines or administering first aid.
- Before putting on and after removing gloves staff should clean hands with soap and water following hygiene guidelines.
- Gloves that become worn or visibly contaminated should be replaced.
- Consider requiring staff to wear non-surgical cloth masks if they have frequent contact with the public and cannot maintain physical distance. Cloth masks are not to be worn in the water.
- When eye protection is needed, use goggles or eye shields
- After removing PPE, always wash hands with soap and water for a least 20 seconds, or use hand sanitizer containing minimum 70% alcohol.
- Launder towels and clothing in hottest water possible for the material and dry items completely.
- Label containers for used equipment that has not yet been cleaned.
- Protect shared furniture, equipment, towels, and clothing that has been cleaned and disinfected from becoming contaminated before use.
- Ensure ventilation systems of indoor spaces operate properly.
- Increase introduction and circulation of outdoor air as much as possible by opening windows and doors, using fans (provided fans do not blow from one patron onto another), or other methods. Do not open windows and doors if doing so poses a safety risk to staff, patrons, or swimmers.
- Assign specific workers to monitor handwashing, use of cloth face coverings or social distancing of others. Do not assign this to lifeguards who are actively lifeguarding.
- Ask parents to consider whether their children are capable of staying at least 2 meters apart

- from people they don't live with before taking them to a public aquatic venue.
- First Aid Attendants should follow the WorkSafeBC Guideline "[OFAA Protocols during the COVID-19 Pandemic](#)"
 - Communicate to first aid attendants that distance protocols still remain
 - Specific protocols should be developed for rescues to ensure lifeguard interventions are not a source of COVID-19 transmission
 - Install physical markers on the floor or walls (lines, stickers, cones, etc) to indicate appropriate physical distance of 2 meters between patrons at queues for diving boards and waterslides.
 - Clean all touch points on waterslides and diving boards regularly.
 - Conduct regular disinfection of common contact surfaces
 - Rope swings should be prohibited at this time as it is believed they carry a higher transmission risk.
 - Patrons should be encouraged to use their personal goggles to avoid mucus contamination; snorkels should be prohibited.
 - Maintaining physical distancing while giving swimming lessons can be challenging, especially with younger children. Consider providing lessons in groups similar to infant lessons so each participant is accompanied by a parent or family member, or not providing lessons to people who cannot swim or who require physical support.
 - Prioritize swimming and aquafit lessons classes to group levels where physical distancing measures can be easily implemented and followed.
 - Avoid drop in lessons and keep the same group together for sessions in order to minimize turnover of learners.

For additional information on reopening aquatic facilities, see [Lifesaving Society](#)

3.2.3.2 Gyms and Workout facilities

- Continually monitor current orders and best practices through the BCCDC, WorkSafeBC and BCMSA websites
- Limit the number of patrons in the facility at one time to allow for 2 meters of physical distance
- Provide hand cleaning or sanitizing station at the entrance to the facility
- Limit the amount of equipment in the facility to allow for 2 meters of physical distance between patrons; allow greater distancing for treadmills and other aerobic fitness equipment where a high exertion is common
- Aerobic fitness equipment can be arranged in an "X" pattern to provide greater distancing
- Physical barriers can also be helpful to create distancing or segregate exercise areas
- Consider developing online sign-up systems on a first come, first serve basis with set-duration (one hour) workout periods
- Consider creating specific hours for "reservation-only" admittance to limit access for older members
- Train gym personnel on distancing guidelines and ways to communicate them to patrons
- Use social media and other communication (signage/email/text lists) to educate patrons on the distancing guidelines and procedures
- Utilize self-check-in or place barrier/partition between front desk staff and members
- Consider offering planned circuit type workouts that facilitate distancing and allow for

- wiping/disinfection of equipment during recovery between exercises.
- Group exercise classes should only be offered if distancing requirements can be maintained and there is no person-to-person physical contact.
- Basketball courts and other areas where sports with physical contact occurs should remain closed.
- Staff should monitor physical distancing requirements in large whirlpools or swimming pools in outdoor or well-ventilated spaces and based on the size of the pool or whirlpool, limit the number of patrons.
- Personal trainers and staff assisting patrons with exercise should consider distancing. If distancing cannot be maintained, the use of non-medical face masks should be used by both patrons and staff.
- Water fountains must be closed, and patrons encouraged to bring their own water
- Juice bars and other food service areas must follow guidelines for restaurants
- Increase the number of wipe stations or hand cleaning facilities through the facility
- Get fresh air into the gym; open windows and doors if possible.
- Maximize fresh air through ventilation system.
- Maintain relative humidity at 40-60%
- Encourage outdoor activity and classes if feasible
- Ensure restroom is under negative pressure
- If fans, such as pedestal fans or hard mounted fans, are used in the gym, take steps to minimize air from fans blowing from one person directly at another. If fans are disabled or removed, ensure employees and patrons remain aware of, and take steps to prevent heat hazards.
- Provide disinfecting materials for patrons to disinfect equipment before and after exercise at each location/station/piece of equipment
- If feasible consider providing “ready to clean” tags that patrons can access and place on equipment after use. Trained staff can then ensure equipment is disinfected in a timely manner.
- Establish a disinfection routine for staff at regular intervals.
- Ensure disinfection protocols follow product instructions for application and contact time
- Contact surfaces should be disinfected frequently.
- Consider using a checklist or audit system to track how often cleaning is conducted.

3.2.3.3 Restrooms/Showers/Locker Rooms

- Doors to multi-stall restrooms should be able to be opened and closed without touching handles, if at all possible.
- Place a trash can by the door if the door cannot be opened without touching the handle
- For single restrooms, provide signage and materials (paper towels and trash cans) for individuals to use without touching the handles, and consider providing a key so disinfection measures can be better controlled.
- Place signs indicating that toilet lids (if present) should be closed before flushing.
- Place signs asking patrons and employees to wash hands before and after using the restroom.
- Provide paper towels in restrooms and disconnect or tape off hand air dryers.
- Only allow shower and locker room use if there are partitions, or place signage to maintain proper physical distancing. If partitions or proper distancing are not possible, these facilities should remain closed.

- Shoes should be worn in locker rooms/showers
- Double efforts to keep bathrooms/showers/locker rooms clean and properly disinfected frequently, every two to four hours.

Additional information specific to Parks and Recreation may be obtained through the following websites:

- [BC Municipal Safety Association](#)
- [BC Recreation and Parks Association](#)
- [American Industrial Hygiene Association](#)
- [Lifesaving Society BC and Yukon](#)

3.3 Engineering

3.3.1 Worker to Worker

- Ensure workers who have been away, or are new to the workplace, are oriented as necessary so that all COVID-19 related procedures are explained and understood.
- Review and coordinate roles and responsibilities with all contractors, suppliers, and staff. Employers should develop procedures to ensure contractors are aware of your health and safety program requirements, including relevant COVID-19 related protocols, and are following protocols of their own.
- For locations where engineering staff are working from multi-ministry or regional offices, coordination is required to ensure plans align across locations.
- Determine the maximum number of people in each area or space to maintain physical distancing requirements, i.e. 3-4 workers per 1000 square feet outdoors. In buildings, two square meters of unencumbered space per person should be established.
- Establish and post occupancy limits for office spaces, lunchrooms, vehicles and other common areas. Ensure physical distancing can be maintained.
- Maintain at least a 2 meter distance from other workers. If the physical distancing requirement cannot be maintained, hold a meeting to address solutions, which may include physical barriers, planning the work task so time spent in close proximity is minimized, or PPE.
- Consider the use of non-surgical face masks when physical distancing is not possible.
- Consider enhanced measures to maintain the physical distancing requirement:
 - Control entry and exit points for workers
 - Manage the flow of people by implementing one-way walkways or marking off designated walking areas
- Consider creating cohorts of workers who work together and who do not interact with other cohorts. This will assist in reducing transmission throughout the workplace in the event that a staff member becomes ill.
- Identify situations where personal protective equipment (PPE) will be required. Clarify who will provide PPE and train workers accordingly.
- Identify a process to regularly review and/or update protocols and include workers and the joint occupational health and safety committee in your review process.
- Limit in-person meetings and other gatherings and hold any completely necessary meetings in larger open spaces.
- Establish hygiene practices that address the needs of the workplace that includes the requirement to wash or sanitize hands after coming into contact with public items.

- Post cleaning procedures and worker expectations in all common spaces.
- Before entering any shared space such as vehicle or office, wash hands or use hand sanitizer.
- Provide hand sanitizer to each worker and instruct them to use it regularly.
- Clarify procedures to wipe down or disinfect shared equipment before use.
- Employers should assess the number of workers being transported or sharing vehicles at any given time and employ measures to ensure at least 2 meters of distance between workers is maintained.
- Whenever possible, workers should travel alone in their vehicles. Employers must implement all the necessary safeguards related to working alone or in isolation to ensure the safety of these workers.
- Measures that may be taken to ensure at least 2 meters of distance in vehicles include the following:
 - Have workers sit one to a seat
 - Stagger riders to allow for maximum distance (i.e. in crew cab vehicle, limit to two people, the driver and the passenger sitting on the far right of the back seat)
 - Adjust the number of workers per trip and the overall number of trips needed to transport workers to a worksite
 - If possible, use larger vehicles or multiple vehicles
 - Track who drives which vehicles and minimize changes in teams or vehicle assignments. Consider creating consistency in crews of workers using vehicles together and performing shifts or work tasks together.
- If it is not possible to ensure 2 meters of distance between workers in a vehicle through these measures, the employer must consider other control measures, such as physical barriers where practicable or PPE where appropriate.
- Maintain physical distancing when loading and unloading vehicles. Workers waiting for loading and unloading should maintain physical distancing while remaining safely away from traffic.
- Employers should have handwashing facilities or sanitizing stations available to workers as they enter and exit the vehicle.
- Employers must ensure that high contact surfaces within the vehicle are routinely cleaned and disinfected. These include seatbelts, headrests, door handles, steering wheels, and hand holds.
- Incorporate end-of-shift vehicle wipe downs, include a method for tracking end of shift cleaning and provide workers with appropriate supplies, like soap and water, hand sanitizer, and disinfectant wipes.
- Clarify and follow cleaning and disinfecting schedules.
- Eliminate shared food stations.
- Ensure workers use their own plates and cutlery.
- Limit the number of workers allowed in common areas at any one time. Consider staggered break times to reduce large gatherings and encourage workers to take breaks at their own desk or outside. Limit or stagger workers entering change areas or rooms with assigned lockers.
- Consider distancing the tables in lunchrooms, limiting the number of chairs, placing “x’s” on tables or benches where people should not sit, or installing barriers at the tables made of plexiglass, acrylic, polycarbonate or similar materials. See WorkSafeBC Publication “[Designing effective barriers](#)”

- First Aid Attendance should follow the WorkSafeBC Guideline “[OFAA Protocols during the COVID-19 Pandemic](#)”

3.3.2 Public to Worker

- When working amongst members of the public, set up barriers or tape to delineate the worksite and to discourage the public from entering the area.
- Ensure staff have the support and strategies for dealing with public who may be unwilling or are unable to understand the approach to managing physical distancing. This should include reviewing your violence risk assessment, policies and procedures, and training and reporting requirements under the Occupational Health and Safety Regulations for minimizing the risk of violence to workers.
- If possible, by-law and inspection staff should not enter any premises where other people are present. If this cannot be avoided, ensure physical distancing is maintained. Consider the use of PPE.
- Limit the number of workers who need to enter the premises, keeping in mind working alone or in isolation procedures and prevention of workplace violence protocols.

3.4 Fire Department

Fire Departments across the Province have not curtailed their operations, but this document provides some of the best practices currently in place to prevent exposure to COVID-19.

3.4.1 Worker to Worker

- All personnel will perform good hand hygiene including frequent hand washing and sanitizing of hands when entering and exiting the fire station
- No personnel will attend with symptoms of COVID-19 including fever, chills, cough, shortness of breath, sore throat and painful swallowing; they must self-isolate at home for a minimum of 10 days after the last symptom (see the [COVID-19 Screening Tool](#))
- Anyone under the direction of the provincial health officer to self-isolate must follow those instructions
- Anyone who has arrived from outside of Canada, or who is a contact of a confirmed COVID-19 case, to self-isolate for 14 days and monitor for symptoms
- Maintaining 2 meters physical distancing and not congregate prior, during or after training in training rooms, offices, apparatus bays, on apparatus or while donning or doffing PPE.
- Identify where members are to wait prior to the start of training
- Send home anyone who becomes sick during training
- Ensure their attendance at any training event is logged
- Communicate the procedure for cleaning apparatus and after use
- Communicate the procedure for use and cleaning high touch surfaces
- Communicate the procedure for use and cleaning of firefighting tools and PPE
- Provide clear direction for all personnel upon arrival for training; personnel are informed of the identified risks and mitigation(s) for the planned training prior to commencement

3.4.2 Public to worker

- Continue to follow Operational Guidelines to prevent exposure to blood or body fluids, including the use of appropriate personal protective equipment when physical distancing is not possible.
- Gather as much information as possible through Dispatch; check for risk factors associated with COVID-19, such as: fever, acute respiratory illness or new/worsening cough, travel outside Canada, or direct contact with someone who has travelled or has been suspected of having COVID-19.
- Direct contact can happen when treating individuals. Always follow routine practices and prevention measures, including:
 - Source control – Enhance screening procedures by assessing individuals beyond 2 metres, and put on appropriate PPE if positive results are noted or if screening results are uncertain.
 - Individual’s assessment - Only the required responders needed for care work should be within 2 metres of the individual. Other responders should remain 2 metres away from others. Ask the individual and any accompanying persons to wear a surgical mask. If this is not possible or not tolerated, ask the individual to cough or sneeze in their arm and to perform hand hygiene.
 - Hand hygiene – Clean hands with soap and water or alcohol-based hand sanitizers.
 - Contact and droplet precautions – When you are within 2 metres of an individual under investigation, wear turnout gear, gloves, a face shield, and an N95 respirator. Remove your eye or face shield after leaving the individual’s location. Perform hand hygiene and remove the N95 respirator using the straps. Always perform hand hygiene before, between, and after removing any pieces of PPE, and after leaving the individual.
 - Vulnerable community care – Be vigilant when entering facilities (e.g., nursing or retirement homes) associated with people who may have pre-existing conditions. Make sure responders do not have COVID-19 risk factors.

3.5 Library

3.5.1 Worker to Worker

- Coordinate the health and safety of workers, including volunteer staff
- Instruct workers to keep all flat surfaced countertops and desks clear of as many objects as possible for easier cleaning and disinfecting (e.g., admission counter, gift shop counter, staff and volunteer desks, simulator desk, kitchen counter, etc.)
- Consider the use of thin micro-shields on computer keyboard, computer mouse, point of sale machines and any other equipment that must be shared. Each worker to be issued their own shields and be responsible for proper use and cleaning.
- Consider how worker schedules can be staggered with customer capacity to decrease the amount of people in gathering areas
- Stagger worker lunch and coffee breaks
- Consider work at home and other remote options for workers, for example workers remotely monitoring security cameras
- Provide supervision and training to workers and volunteer staff
- Check and discard any supplies that have expired including any consumer and WHMIS regulated products (e.g., disinfectants, etc.)
- Have the workplace thoroughly cleaned prior to reopening.
- Reconfigure interiors and design public areas to maintain the physical distancing requirement for workers and visitors. (See [Section 2.4](#))

- Reduce the number of computer terminals
- Provide hand sanitizing stations at all facility entryways for everyone to use.
- Post COVID-19 protocols using signage for both workers and customers throughout facility.
- Wash your hands using good hygiene practices after touching common items.
- Consider creating cohorts of workers who work together and who do not interact with other cohorts. This will assist in reducing transmission throughout the workplace in the event that a staff member becomes ill.
- Do not allow workers to share tools, equipment and supplies (e.g. pens, paper, staplers, etc.)

3.5.2 Public to Worker

- Establish an occupancy limit for the library. (See [Section 2.4](#)) Create a plan to manage the number of workers, customers and visitors in the facility.
- Implement measures to restrict and control the number of people in the library at one time.
- Reconfigure interiors and design public areas to maintain the physical distancing requirement for workers and visitors. This may include:
 - Reducing the number of computer terminals
 - Reducing access to spaces
 - Removing chairs and tables
 - reducing space dedicated to books, magazines, and tables and chairs
- Ensure physical distancing is maintained during programs such as story time or workshops. Consider organizing digital programs.
- Manage the flow of people by implementing one-way walkways or marking off designated walking areas.
- Provide physical barriers, made of plexiglass, acrylic, polycarbonate or similar materials, at visitor information desks, loan out counters, and other locations where workers cannot maintain the physical distancing requirement.
- Control access to entry points for workers, customers, and deliveries. Consider having limited points of entry. If you have more than one door, considering designating doors for entry and exit.
- Provide touch-free hand sanitizing stations at the entrance(s).
- Inform customers and visitors of policies and procedure prior to entering facility e.g. post information on webpages
- Display visible signage and other indicators, such as floor decals and tape lines, to explain and enforce your policies on physical distancing, hand washing, and other requirements and recommendations
- Limit the hours of operation – or offer extended hours of operation
- Consider scheduled entry rather than walk in entry
- Establish one-way flow through public accessed areas to facilitate physical distancing
- Restrict or reduce visitors from attending the library and offer other services
 - Provide digital libraries and services such as virtual ebooks, digital audiobooks, eLending, and eLearning
 - Arrange in advance and schedule the pick-up of books for loan
 - Only allow returned book via an outside book drop
 - Provide drive-through pick-up and return of books
 - Schedule appointments and restrict walk ins
- Reconfigure interiors and design public areas to provide appropriate physical distancing for

workers and visitors by reducing the number of computers.

- Prohibit programs such as story time or workshops at the facility, especially for groups at higher risk such as seniors. Organize digitally where appropriate
- Close study spaces where people may spend a longer time in the company of others
- Remove shared items such as toys or virtual reality headsets from circulation
- Implement quarantine policies on returned books. Some strains of coronavirus can live up to five days on paper. (note: there are no definitive conclusions on how long COVID-19 can exist on paper)
- Provide disposable gloves to workers who are required to handle returned books and where frequent hand washing cannot be conducted
- Provide training on how to put on and remove disposable gloves or other PPE (see [Appendix H](#))
- Where two meters of distance cannot be maintained, consider requiring staff to wear cloth face masks.

4.0 Links and Resources

Below are links to relevant and useful information:

Back to Work Safely™
BC Center for Disease Control
BC Ministry of Health self-assessment for COVID-19
BC Municipal Safety Association
Canadian Center for Occupational Health and Safety
Canadian Mental Health Association
Lifesaving Society BC & Yukon Branch
Prevent the Spread (poster)
Take the Time to Wash Your Hands (poster)
WorkSafeBC Occupancy Limit poster
WorkSafeBC OFAA Protocols during the COVID-19 Pandemic
WorkSafeBC Publication “Designing effective barriers”
WorkSafeBC Template: COVID-19 safety plan

Appendix A: Sample Return to Work Plan

	Policy Title: Return to Work Plan During COVID-19 Pandemic	Policy No:
	Authority: CAO	Classification: Human Resources
	Date Adopted:	Motion No: N/A
Historical Changes:		

Special Background:

The [\(insert here\)](#) has developed a Return to Work Plan (Plan) now that the pandemic curve is flattening. This Plan represents the minimum standards that employers must meet based on the information from the Provincial Health Officer (PHO), the Ministry of Health, the Province of BC and WorkSafe BC. The [\(insert here\)](#) will continue to take direction from the advice of the PHO and the Provincial Government. How the [\(insert here\)](#) interacts with the public will change.

To develop this Plan, a hazard analysis was completed based on the "Hierarchy of Controls for COVID-19" as recommended by the PHO. This framework addresses Physical Distancing followed by Engineering Controls, Administrative Controls and lastly, Personal Protective Equipment (PPE) to reduce transmission. The application of these control measures will assist in mitigating potential hazards to maintain a safe workplace.

Hazard Analysis:

HAZARDS	CONTROL	MITIGATION
<p><i>CONSIDER: Health and safety, damage to people, property, equipment or program/the categories of hazards; biological, physical, chemical, and psycho-social.</i></p>		
<p>During the pandemic response, there is a risk of transmission whenever people come into contact with one another, share close physical space, and touch common surfaces.</p> <ul style="list-style-type: none"> • Physical: touching surfaces that are potentially contaminated with coronavirus particles • Biological: inadvertent exposure to a viral contagion or inadvertent contamination of a shared workspace or common area with easily transmissible viral particles 	Physical*	<ul style="list-style-type: none"> • Signage should be installed regarding physical distancing including visual cues ("step" stickers) for areas where customers are required to queue. • Common areas (public and employee) should be arranged to allow for physical distancing. • Alternative solutions to conducting business meetings should be considered • Cleaning/disinfecting procedures for workspace, shared workspaces and common areas including vehicles to reduce surfaces that may potentially be contaminated with coronavirus particles, should be considered

HAZARDS	CONTROL	MITIGATION
<p>Biological: inadvertent exposure to a viral contagion or inadvertent contamination of a shared workspace or common area with easily transmissible viral particles by an employee who is carrying or showing symptoms of COVID-19.</p>	<p>Engineering (i.e. Renovations)</p>	<ul style="list-style-type: none"> • Some workspaces may require physical barriers installed • Workspaces that are shared between two (2) or more employees may be re-arranged to accommodate physical distancing or may require further steps of action to ensure physical distancing • Provide means for the general public to provide payment with minimal or no contact with staff • Place hand sanitizer station near entrance doors, pay station and other high touch locations for customers and employees • Remove lids from garbage receptacles to allow “no-touch” disposal
<p>Pandemic-related hazards include:</p> <ul style="list-style-type: none"> • Physical: touching surfaces that are potentially contaminated with coronavirus particles • Biological: inadvertent exposure to a viral contagion or inadvertent contamination of a shared workspace or common area with easily transmissible viral particles • Chemical: exposure to disinfectants/nitrile or latex gloves/environmental sensitivities • Psycho-social: mental distress/anxiety 	<p>Administrative</p>	<p>Provide a Policy and/or a Procedure which address the following:</p> <ul style="list-style-type: none"> • Self-monitoring • Guidance on document handling • Cleaning/disinfecting procedures • Signage • Business Meeting Protocols (for both off-site and on-site) • Stress, anxiety and mental health awareness • Proper hygiene practices
<p>Biological and Chemical (as above)</p>	<p>Personal Protective Equipment (PPE)*</p>	<p>Note: information regarding use of PPE will be addressed by administrative policy and procedure</p>
<p>*Note: Fire fighters responding to emergencies for possible or confirmed COVID-19 emergencies will follow departmental directives, plans and BC Emergency Health Services (BCEHS) guidance. Fire fighters will also continue to wear PPE appropriate to the risk, and in accordance with BCEHS and PHO direction.</p>		

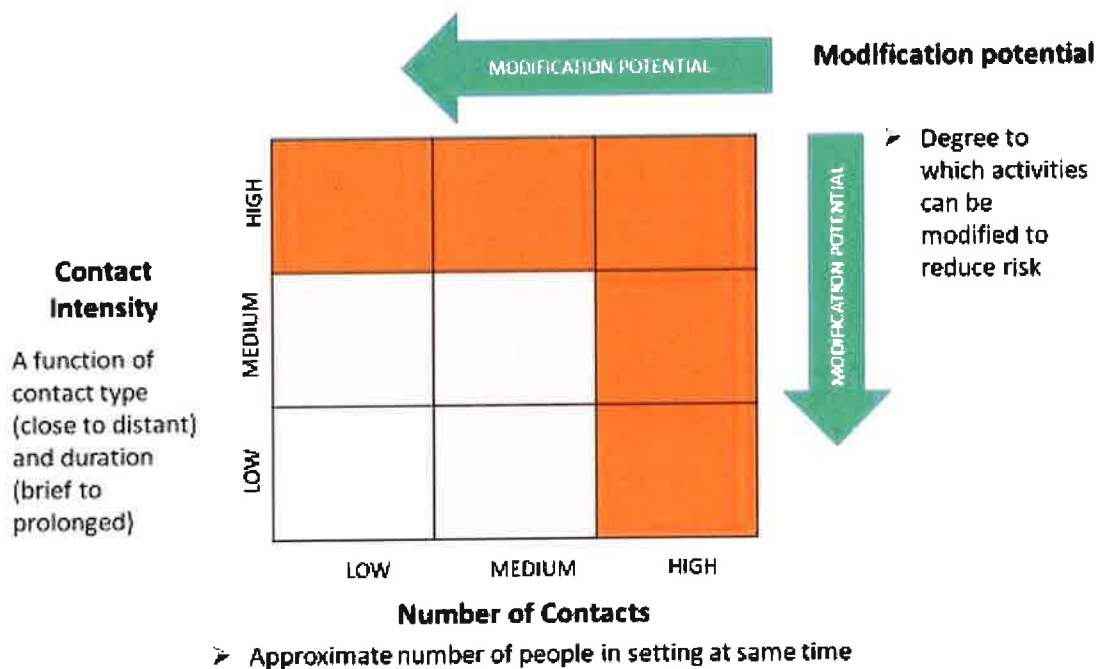
The (insert here) has focused on non-PPE controls being put in place, specifically physical distancing. Most (insert here) employees will not require PPE for protection against coronavirus unless they are in specific situations such as cleaning public washrooms or treating wastewater.

A large portion of the Plan relies on the implementation of the associated operating procedure which contains more details in respect to the controls listed in the table.

To address COVID-19 health and safety concerns in the workplace, the Chief Administrative Officer (CAO), or Managers as directed by the CAO, will be communicating updates in respect to the pandemic response and any changes to necessary steps or actions required.

Risk Matrix:

The risk of transmission in organizational settings and public institutions is subject to two variables that we need to modify to reduce transmission risk: contact intensity (how close you are to someone and for how long); number of contacts (how many people are in the same setting at the same time).



Modifying from high to low can be based on a range of actions:

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

Purpose:

To provide guidance for employees returning back to work during the COVID-19 worldwide pandemic.

Scope:

This policy applies to all employees, including exempt staff and Council, CUPE and IAFF members, committee members and volunteers.

Principles:

1. STAYING INFORMED

- a) Employees are encouraged to stay up-to-date and informed on the pandemic and follow public health advice, as information may change from time to time. Links can be found in the Related Publications section of this document.

2. SELF MONITORING:

- a) Pre-mitigation, including reporting and self-screening, will help to identify possible COVID-19 positive employees and proactively remove risks that they could inadvertently introduce coronavirus into the workplace.
- b) Employees with COVID-19 symptoms **must** stay home and not come to work for at least ten (10) days, or longer if symptoms have not resolved. As per Healthline BC, after your ten (10) to fourteen (14) day self-isolation, you may return to your regular activities if:
 - i. At least ten (10) days have passed since any symptoms started, and
 - ii. Your fever is gone without the use of fever-reducing medications (i.e. Tylenol, Advil), and
 - iii. You are feeling better (there is improvement in runny nose, sore throat, nausea, vomiting, diarrhea, fatigue). Coughing may go on for several weeks, so a cough alone does not mean you need to continue to self-monitor and self-isolate, or
 - iv. You were self-monitoring and never developed any symptoms.
- c) Employees **must** also stay at home when sick to avoid spreading illness to others, even if symptoms are not consistent with COVID-19, as you may be non-symptomatic.

3. PHYSICAL DISTANCING:

- a) Physical distancing reduces the potential of coronavirus being transmitted through airborne droplets. There is a possibility that even non-symptomatic carriers of coronavirus may transmit the virus in this manner, so physical distancing should always be observed, even in cases when people do not display symptoms of COVID-19.
- b) Access to (insert here) workplaces should be limited and alternative methods, such as video or conference calls, be used for conducting business to prevent close personal contact
- c) Lunchrooms, break rooms, boardroom, reception and common areas will be arranged to follow physical distancing practices. However, employees are discouraged from using these areas whenever possible.
- d) Employees should remain on their primary work floor and not visit other floors in the building unless absolutely necessary. Fire department staff should access the lounge and kitchen through the back stairwell. All other staff should access Council Chambers via the main stairwell. Use of the third floor kitchen and lounge is restricted to Fire Department staff.
- e) Whenever possible, employees should travel alone in vehicles to ensure physical distancing.
- f) Should a task require close personal contact, appropriate PPE and additional mitigation measures should be considered and discussed with your manager.
- g) Only essential business travel should be considered until further notice.
- h) If there are cases where, in a shared workspace, physical distancing cannot be maintained, a more comprehensive risk assessment should be undertaken in collaboration with the Joint Health and Safety Committee (JHSC). Consideration should be given to the type of task(s), and whether there are alternatives

4. PERSONAL HYGIENE (please refer to Operating Procedure OP-22):

- a) Employees should practice proper "hand hygiene" techniques often, as it is the single-most effective way of reducing the spread of infection.

- b) Proper *respiratory etiquette* should also be followed.
- c) Touching your face, including eyes, nose or mouth should be avoided and hands washed or sanitized following such touching.

5. ENHANCED CLEANING/DISINFECTING:

- a) Since janitorial services are provided (four (4) evenings a week for Municipal Hall and once weekly for Fire Halls 1 and 2); employees should disinfect common areas and other high touch surfaces before use.
- b) Employees should ensure regularly touched surfaces are disinfected frequently within their own workspace(s). Follow the proper procedural guidelines outlined in Operating Procedure OP-22.

6. SHARED WORKSPACES/EQUIPMENT INCLUDING VEHICLES:

- a) Employees are discouraged from sharing equipment (i.e. pens, phones, other tools).
- b) The need to share workspaces and equipment will be minimized.
- c) When it is necessary to use a common workstation or piece of equipment, such as photocopiers or cash registers, the surface should be disinfected before and after use. If you are in doubt about the cleanliness of an area or item, employees are encouraged to disinfect the area or item before and after use to reduce the risk of contamination.
- d) In the event of a potential COVID case in a shared workspace, workstation or with a person using shared equipment, the station/equipment should not be used until a *deep clean* can be performed which is to be delegated by the employee's manager. Follow the proper procedural guidelines outlined in the Operating Procedure OP-22. Employees affected by the deep clean will be accommodated to ensure safety during the cleaning period, which will be delegated by your manager.
- e) Limit the exchange of papers. If documents must be exchanged, follow the proper procedural guidelines outlined in the Operating Procedure OP-22.
- f) Employees who use municipal vehicles must ensure that high contact surfaces within the vehicle are routinely disinfected. Follow the proper procedural guidelines outlined in the Operating Procedure OP-22.

7. PERSONAL PROTECTION EQUIPMENT (PPE)

- a) Facial masks and gloves are not mandatory. Facial masks have been recommended for essential health service workers only. If an employee chooses to use a facial mask, they are responsible for supplying their own, for proper disposal or frequent cleaning of them, dependent on which type they choose to utilize.
- b) Gloves will be provided and while gloves may provide protection for your hands, they do not prevent of the transfer of coronavirus to other surfaces. Frequent hand washing is mandatory even when wearing gloves.
- c) Firefighters will adhere to PPE requirements as specified by BCEHS and shall include fit-tested N95 mask, face shield, and nitrile gloves at a minimum. If COVID-19 symptoms are present, responders shall also wear a non-permeable gown in addition to N95 mask, face shield, and nitrile gloves. Proper PPE donning and doffing procedures, and disposal of PPE shall be followed.

8. STRESS/ANXIETY/MENTAL HEALTH AWARENESS

- a) Practice self-care. emotional stress, anxiety or concern is natural under the present circumstances. Anyone who feels they are experiencing negative mental health implications should seek assistance as soon as possible.

Documentation and training:

- 1) The Head of Human Resources will train municipal hall employees on the policies, practices, and procedures due to the COVID-19 pandemic and keep records of that training.
- 2) The Fire Chief, or designate, will train Fire Department employees on the policies, practices, and procedures due to the COVID-19 pandemic and keep records of that training.
- 3) If employees have any concerns, they may discuss them with their managers or with the Joint Health and Safety Committee (JHSC).

Schedule for Returning to Work:

All employees are expected to return to the office and their regular work schedule on _____, 2020 unless they have an alternate agreement approved by their supervisor and CAO. Employees may have concerns with returning to work (i.e. family care, setup of office equipment or may require some other form of accommodation) and should contact their manager immediately to discuss return to work options.

Limited access to [\(insert here\)](#) Hall by the public is expected to commence _____, 2020 to accommodate tax payments and applications until necessary distancing and/or separation measures are in place.

References:

Policy Number:	
Policy Owner:	
Endorsed by:	
Final Approval:	
Date Approved:	
Review Date:	
Revision Date:	
Related Policies, Procedures, Schedules:	
Related Publications:	<ul style="list-style-type: none">• WorkSafeBC• BC Centre for Disease Control• Provincial Government of BC

Contact Information:

Position:

Appendix B: Sample Safe Work Procedure – Pandemic Response

Operating Procedure #

SUBJECT: Safe Work Procedure – Pandemic Response	SECTION: Human Resources
Issued by: Head of Human Resources	_____
Date Issued:	CAO signature

PURPOSE

This Operating Procedure is to provide guidance to employees on the respiratory etiquette on how to minimize the risks during the Return to Work directive while the province is still in a State of Emergency in response to the COVID-19 pandemic. The (insert here) will continue to take direction on initiatives from the Province of BC and at the direction of the Provincial Health Officer.

HAZARDS

During the pandemic response scenario, there is a risk of transmission whenever people come into contact with one another, share close physical space, and touch common surfaces. Pandemic-related hazards include:

1. **Physical:** touching surfaces that are potentially contaminated with virus particles
2. **Biological:** inadvertent exposure to a viral contagion or inadvertent contamination of a shared workspace with easily transmissible viral particles
3. **Chemical:** exposure to disinfectants/nitrile or latex gloves/environmental sensitivities
4. **Psycho-social:** mental distress/anxiety

EQUIPMENT AND MATERIAL

Type	Criteria/Recommendation
Disposable Antiseptic or Disinfectant Wipes	70% alcohol or more
Hand Sanitizer or Hand Rub	Alcohol-based hand rub (ABHR) approved by Health Canada or the Province of BC
Microfiber Cloth	n/a
Cleaning solution specific for computer screens	70% isopropyl alcohol / 30% water solution
Tissues	n/a
Disposable Gloves*	Latex or nitrile based

*for cleaning purposes only and not as PPE

PERSONAL PROTECTIVE EQUIPMENT (PPE)* – not mandatory

Type	Criteria/Recommendation
Facial Masks (disposable or washable)	N95 (paper) or cotton cloth material (hand-sewn)
Disposable Gloves**	Latex or nitrile based

*Emergency responders are to adhere to PPE requirements as specified by BCEHS

**only for those that require them for particular work duties


PROCEDURES

The Operating Procedure ensures that proper steps take place before, during, and after an employee’s shift during a pandemic response. Procedures include requirements for orientation and screening prior to working, actions while at work (hygiene, physical distancing, cleaning, and monitoring) and follow up after work has concluded each day.

MITIGATION STEP	TASK INSTRUCTIONS
	<p>Define how each step is to be performed safely, ensuring all hazards are addressed.</p>
SELF-MONITORING	<p>Before entering into a workplace or vehicle, and throughout the day, employees should self-monitor for symptoms associated with COVID-19 by using the BC Health COVID-19 Symptom Self-Assessment Tool located here: https://bc.thrive.health/ and answer the prompted questions, which include:</p> <ol style="list-style-type: none"> 1. Are you experiencing symptoms consistent with COVID-19 (refer to the link above for the most up to date list of symptoms)? 2. In the past fourteen (14) days have you been outside of Canada or BC? 3. In the past fourteen (14) days have you been in close contact with anyone who is symptomatic or has been diagnosed with COVID-19? <p>If you answer ‘yes’ to any of the above questions, employees must stay home or if at work, go home immediately and contact their manager for advice.</p> <p><i>(Note: As symptoms and information on the pandemic change, other questions may arise in the survey. Follow the advice provided after the survey has concluded and if advised to stay home, notify your manager immediately.)</i></p>
PHYSICAL DISTANCING*	<p>During all activities, maintain physical distancing from others, including co-workers and members of the public by:</p> <ol style="list-style-type: none"> 1. Remaining two (2)-metres or six (6)-feet apart; and 2. Not engaging in any physical contact, such as handshaking.
PERSONAL HYGIENE	<p>Handwashing</p> <p>Employees should either:</p> <ol style="list-style-type: none"> a) Wash your hands often with soap and water for at least 20 seconds; OR b) If soap and water are not available, alcohol-based hand sanitizer or rubs (ABHR) can be used to clean hands.

	<p><u>Respiratory</u></p> <p>Employees should either:</p> <ol style="list-style-type: none"> a) Turn their head away from others and cover their mouths with a sleeve (i.e. cough into elbow); OR b) Use a tissue when coughing or sneezing, and immediately after, discard tissue(s) into a garbage receptacle and wash hands
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**While Fire fighters are required to maintain physical distancing wherever possible, it is recognized that the nature of their job does not always allow for it.*

MITIGATION STEP	TASK INSTRUCTIONS
	<p><i>Define how each step is to be performed safely, ensuring all hazards are addressed.</i></p>
<p>CLEANING/ DISINFECTING</p> <p>Note:</p> <p>It is important to make the distinction between cleaning and disinfecting:</p> <p>Cleaning refers to the removal of germs, dirt, and impurities from surfaces. It does not kill germs, but by removing them, it lowers their numbers and the risk of spreading infection.</p> <p>Disinfecting refers to using chemicals, for example, Health Canada-registered disinfectants, to kill germs on surfaces.</p> <p>Deep Cleaning</p> <p>By disinfecting (kill germs) on a surface <i>after</i> cleaning (removal of germs), it can further lower the risk of spreading infection.</p>	<p><u>Workspaces and Equipment</u></p> <p>Employees should follow these steps at least twice daily (i.e. start and end of day) or more often when visibly soiled throughout the day:</p> <ol style="list-style-type: none"> 1. Wash your hands and then using hand sanitizer, disinfect your hands (and put on gloves if you choose to). 2. If surfaces are visibly dirty, they should be cleaned using a detergent or soap and water prior to disinfection (aka “deep clean”). 3. Use a disposable antiseptic wipe to disinfect hard non-porous surfaces by wiping the surfaces. These include, but are not limited to: <ul style="list-style-type: none"> • keyboard, mouse • phone, headset • desktop surfaces • chair seats and armrests • cabinet door, drawers • doorknobs, handles • light switches • photocopiers, cash registers and other shared equipment or surfaces 4. Carefully dispose of the wipe into a garbage receptacle immediately after use (and remove gloves and dispose of also if you have chosen to wear them). 5. Wash your hands with soap and water or an alcohol-based hand sanitizer. <div style="text-align: center;">  </div>

	<p><u>Soft (Porous) Surfaces</u></p> <ol style="list-style-type: none"> 1. For soft (porous) surfaces such as carpeted floor, fabric chairs, and drapes, remove visible contamination when present and clean with appropriate cleaners appropriate for use for the particular material of which it is made. 2. After cleaning, dispose of items (such as cleaning cloth) as appropriate in accordance with the manufacturer’s instructions. <p>Note: Never use a soiled or dirty cloth to clean any surface.</p>
<p>MITIGATION STEP</p>	<p>TASK INSTRUCTIONS</p> <p><i>Define how each step is to be performed safely, ensuring all hazards are addressed.</i></p>
<p>CLEANING/ DISINFECTING</p> <p><i>(Continued)</i></p>	<p><u>Vehicles</u></p> <p>Disinfect high-touch areas every time you enter and leave a commonly shared municipal owned vehicle using these steps, (remembering to wear gloves if you choose to following Step 1):</p> <ol style="list-style-type: none"> 1. Using hand sanitizer, disinfect your hands. 2. Using a disposable disinfectant wipe open the vehicle door. 3. Using the same disposable disinfectant wipe, clean the following non-porous surfaces: <ul style="list-style-type: none"> • Steering wheel • Seatbelt clasp • Door handles • Visor • Switches and knobs • Seat base and back • Other areas that are commonly touched 11. Carefully dispose of the wipe immediately after use (and remove gloves and dispose of also, if you have chosen to wear them). 12. Clean your hands with hand sanitizer. <div data-bbox="570 1346 1175 1761" data-label="Image"> </div>

	<p><u>Electronic Screens</u></p> <p>This process is for cell phone screens, tablets, touch screens, computer and TV monitors and other sensitive electronic products:</p> <ol style="list-style-type: none"> 1. Moisten a microfiber cloth with a mixture of 70% isopropyl alcohol / 30% water. The cloth should be damp, but not dripping wet. 2. Wipe down monitor or computer screen. 3. Dry surfaces thoroughly to avoid streaking or pooling of liquids.
MITIGATION STEP	<p>TASK INSTRUCTIONS</p> <p><i>Define how each step is to be performed safely, ensuring all hazards are addressed.</i></p>
	<p>Notes:</p> <ol style="list-style-type: none"> 1. Using any material other than a microfiber cloth could cause damage to the product. 2. Avoid using any of the following chemicals or products containing these chemicals: <ul style="list-style-type: none"> • Any chlorine-based cleaner, such as bleach • Peroxides (including hydrogen peroxide) • Solvents such as; acetone, paint thinner, benzene, methylene chloride or toluene • Ammonia (i.e. Windex) • Ethyl alcohol
SIGNAGE	<p>Each morning front-end employees will set out or ensure the following signage is in place:</p> <ol style="list-style-type: none"> a) Post clear signs outside the main doors indicating distancing requirements.
BUSINESS MEETING PROTOCOLS	<p>Employees should conduct business virtually as much as possible (i.e. conference calls, video conferences, email, telephone) with customers/clients and co-workers.</p> <ol style="list-style-type: none"> 1. Besides customers, limit business-related visitors to essential services only. This may include tradespeople, pest control or compliance officers. Schedule visits to eliminate people gathering in reception areas. 2. When booking appointments, employees are encouraged to remind customers to reschedule if they become sick or are placed on self-isolation.
STRESS, ANXIETY AND MENTAL HEALTH AWARENESS	<p>Anyone who feels they are experiencing negative mental health implications should seek assistance as soon as possible:</p> <ol style="list-style-type: none"> a) Review the COVID-19 materials from the (insert here)'s employed health assistance providers under the Resources section in SharePoint: AND/OR b) Contact the Employee Assistance Program (EFAP) hotline at 1-800-663-1142 AND/OR c) Contact the Head of Human Resources for more information or assistance.
DOCUMENT HANDLING	<ol style="list-style-type: none"> 1. Wash or disinfect their hands before and after contact. 2. Gloves can be used at the employee's discretion. Gloves should be properly disposed of and hands washed or sanitized after removing gloves.

PPE* (not required)	<p><u>Facial Masks</u></p> <p>Since, facial masks are <u>not</u> mandatory, if an employee chooses to wear one, they are responsible for proper disposal or frequent cleaning of them, dependent on which type they choose to utilize. Information for the care and disposal of facial masks can be found on the BC Centre for Disease Control website.</p> <ul style="list-style-type: none"> a) Fabric masks should be laundered after each day and dried on the highest temperature setting possible. They must be thoroughly dried before re-use. b) Paper masks should be disposed of after each day of use in accordance to the link above. <p><u>Disposable Gloves</u></p> <p>These are not required unless an employee is conducting first aid or carrying out duties that regularly require the use of them. Gloves are not to be used as replacement for proper and frequent hand hygiene. Wearing gloves may actually help spread the coronavirus as workers may unintentionally touch something or someone contaminated with the coronavirus with their gloved hand.</p>
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** Emergency responders are required to wear PPE in accordance with risk of task and as specified by BCEHS. If a staff member is required to wear a protective mask (N95 or greater), they must be fit tested in accordance with WorkSafeBC and tested annually in accordance with Occupational Health and Safety Regulation 8.4(2.1)*

Important Information:

The employee assumes responsibility and risk of infection if they do not follow the guidelines provided in this document.

Procedure Number:	
Procedure Owner:	
Endorsed by:	
Final Approval:	
Date Approved:	
Review Date:	
Revision Date:	
Amendments:	
Related Policies, Procedures, Schedules:	

Contact Person:

Contact Person:

Position:

Phone:

Email:

Appendix C: Risk assessment for pandemic influenza

The following risk assessment table is adapted from WorkSafeBC Occupational Health and Safety Regulation Guideline G6.34-6. Using this guideline as a reference, the employer can determine the risk level to workers, depending on their potential exposure in the workplace.

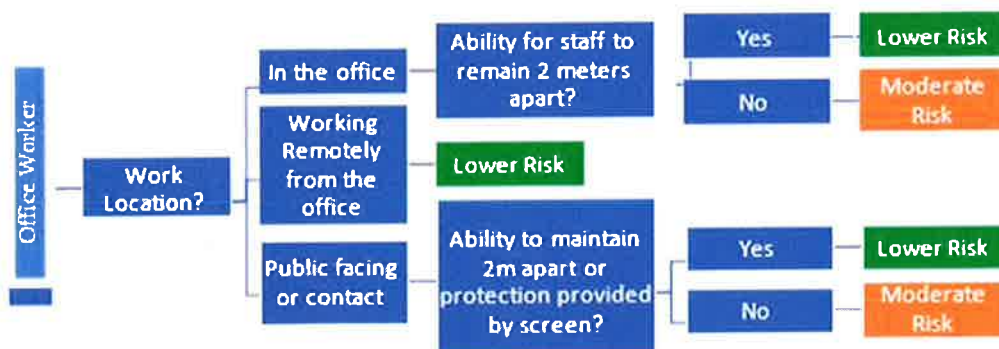
	Low Risk Workers who typically have no contact with people infected.	Moderate risk Workers who may be exposed to infected people from time to time in relatively large, well-ventilated workspaces	High risk Workers who may have contact with infected patients or with infected people in small, poorly ventilated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

Appendix D: Risk Assessment for Office and Field Workers

POSITION	LEVEL OF RISK	CONTROL PROCEDURES
Front Counter Staff Positions - Municipal Hall	Low to Moderate	Regular and effective hand hygiene
Parks & Recreation facilities Front Counter Clerks, Program Leaders, Instructors	Low to Moderate	Regular and effective hand hygiene
First Aid Attendants	Moderate	Regular and effective hand hygiene and PPE (depending on injury)
Firefighter/First Responders	High	Hand hygiene, disposable gloves, turnout gear, goggles and/or face shield, N95 respirator
Lifeguard	Moderate	Regular and effective hand hygiene
Supervisors	Low	Regular and effective hand hygiene
General Staff	Low	Regular and effective hand hygiene

OFFICE STAFF

Risk levels posed to office staff are dependent on the level of community transmission, where the workers are located (office or home), whether it is a front facing customer service office usually open to the public or a private office, and the size of staff in the office area. Figure 1 below identified risk levels based on different work type, location and capacity to allow for minimum of 2 meters distance apart.






FIELD STAFF





























































Risk levels posed to field staff are dependent on the level of community transmission, the work being performed, where the worker is located and the size of the work crew. Figure 2 below identified risk levels based on different types of work type, location, and capacity to allow for a minimum of 2 meters distance apart. Note that in addition to work location, an increased exposure to members of the public (by by-law or inspection staff, for instance) could increase the risk level, and an in-field risk assessment must be performed.

Fig. 2 Field Staff Risk Assessment



Appendix E: Personal Protective Equipment

-  Recommended
-  Optional
-  Not required

Hazard Risk Factors	Cloth Face Covering/Non-Medical Mask	Respirator N95 or better (fit tested)	Gloves	Eye Protection: Glasses, Face Shield, Physical Barrier	Apron/Gown/ Disposable Coverall
					
Close Proximity to Co-Workers	 Optional – if not able to maintain physical distancing			 Optional – if not able to maintain physical distancing	
Close Proximity to Public	 Optional – if not able to maintain physical distancing			 Optional – if not able to maintain physical distancing	
Close Proximity to Potential Inate Individual – Spitting/Coughing			 Optional		 Optional
Close Proximity to Sick Persons					
Caring for a Sick person					
Providing CPR/Procedure Producing Aerosolized Droplets on a Sick Person. Non medical mask must be placed on patient.					
Entering Private Residence	 Optional – if not able to maintain physical distancing, or upon resident request due to vulnerable person		 Optional – Hand Hygiene mandatory	 Optional – if not able to maintain physical distancing	 Optional
Cleaning Biohazard/ Splashing					
Cleaning Biohazard/ Non-splashing					
Handling Mail/ Packages/ Internal Paperwork			 Optional – Hand Hygiene preferred		
Customer Service Counters	 Optional – if not able to maintain physical distancing or physical barriers are not in place		 Optional if exchanging documents/ other materials with customers	 Optional – if not able to maintain physical distancing or physical barriers are not in place	

Appendix F: COVID-19 Screening Tool

COVID-19 Screening Tool

Name (Print) _____

Department _____

In-Person

Yes No

Telephone call

Yes No

Date _____

Time _____

If you have traveled outside of Canada (including the United States) within the past 14 days you are not permitted to enter the facility.

Are you experiencing any of the following symptoms with unknown cause?

- Fever
- Cough
- Shortness of breath
- Difficulty breathing
- Chills

<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no

Have you had contact with any person with these symptoms, or under investigation for COVID-19 in the last 14 days?

<input type="checkbox"/>	yes	<input type="checkbox"/>	no
--------------------------	-----	--------------------------	----

Office use only

In-person, the person being screened was:

- Unfit for work and sent home
- Sent to/back to work
- Advised to call 8-1-1 for guidance

<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no

On the telephone, the person being screened was:

- Instructed to stay at home
- Advised to call 8-1-1 for guidance
- Advised they can come to work

<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no
<input type="checkbox"/>	yes	<input type="checkbox"/>	no


Comments:

Screening completed by:

Print name


Signature

Position



Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health




Hand Hygiene

**SOAP OR ALCOHOL-BASED
HAND RUB: Which is best?**


▶


**Either will clean your hands:
use soap and water if hands
are visibly soiled.**





Remove hand and wrist jewellery


HOW TO HAND WASH


- 

1
Wet hands with warm (not hot or cold) running water
- 

2
Apply liquid or foam soap
- 


3
Lather soap covering all surfaces of hands for 20-30 seconds
- 


4
Rinse thoroughly under running water
- 


5
Pat hands dry thoroughly with paper towel
- 

6
Use paper towel to turn off the tap


HOW TO USE HAND RUB


- 

1
Ensure hands are visibly clean (if soiled, follow hand washing steps)
- 


2
Apply about a loonie-sized amount to your hands
- 

3
Rub all surfaces of your hand and wrist until completely dry (15-20 seconds)






Ministry of Health



BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.



Appendix H: Glove Donning and Removal

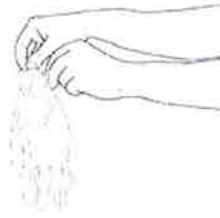
Technique for donning and removing non-sterile examination gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

I. HOW TO DON GLOVES:



1. Take out a glove from its original box



2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)



3. Don the first glove



4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist



5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand

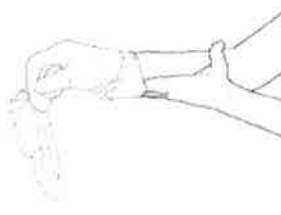


6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

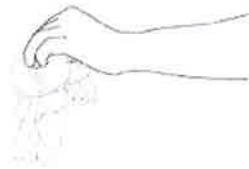
II. HOW TO REMOVE GLOVES:



1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out



2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove



3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

Help prevent the spread of COVID-19

Cover coughs and sneezes



Cough or sneeze into your sleeve, not your hands. Avoid touching your face with your hands.

Or



Cover your mouth and nose with a tissue and put your used tissue in a wastebasket.



Wash your hands with soap and water for at least 20 seconds.

Or



Clean hands with alcohol-based hand sanitizer.

Help prevent the spread of COVID-19

In order to reduce risk of exposure to the virus that causes COVID-19, we are limiting the number of people in this space.

Address/room/space:

Occupancy limit: people

Appendix K: WorkSafeBC Poster: How to use a mask

Help prevent the spread of COVID-19: How to use a mask

1 Wash your hands with soap and water for at least 20 seconds before touching the mask. If you don't have soap and water, use an alcohol-based hand sanitizer.

2 Inspect the mask to ensure it's not damaged.

3 Turn the mask so the coloured side is facing outward.

4 Put the mask over your face and if there is a metallic strip, press it to fit the bridge of your nose.

5 Put the loops around each of your ears, or tie the top and bottom straps.

6 Make sure your mouth and nose are covered and there are no gaps. Expand the mask by pulling the bottom of it under your chin.

7 Press the metallic strip again so it moulds to the shape of your nose, and wash your hands again.

8 Don't touch the mask while you're wearing it. If you do, wash your hands.

9 Don't wear the mask if it gets wet or dirty. Don't reuse the mask. Follow correct procedure for removing the mask.

Removing the mask

1 Wash your hands with soap and water or use an alcohol-based hand sanitizer.

2 Lean forward to remove your mask. Touch only the ear loops or ties, not the front of the mask.

3 Dispose of the mask safely.

4 Wash your hands. If required, follow the procedure for putting on a new mask.

Note: Graphics adapted from BC Centre for Disease Control (BC Ministry of Health), "How to wear a face mask."

worksafebc.com

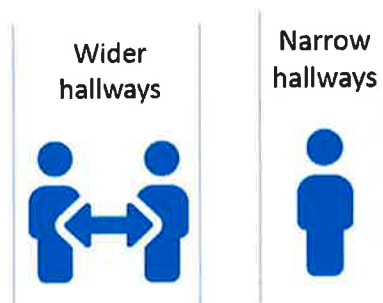
WORK SAFE BC

Appendix L: Best Practice – Physical Distancing in an Office Environment

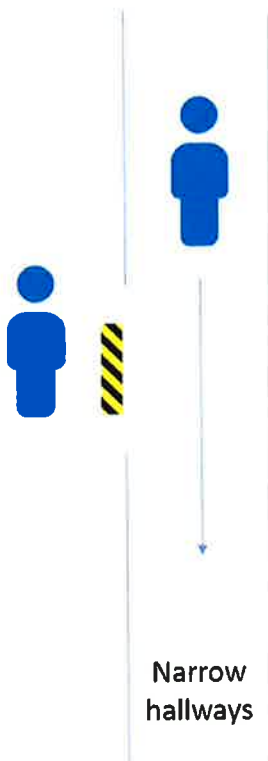
Physical distancing requires us to make changes to our everyday routines and to minimize close contact with others. This means keeping approximately 2 metres distance between ourselves and others (Source: WorkSafeBC).

Hallways, walkways and stairways

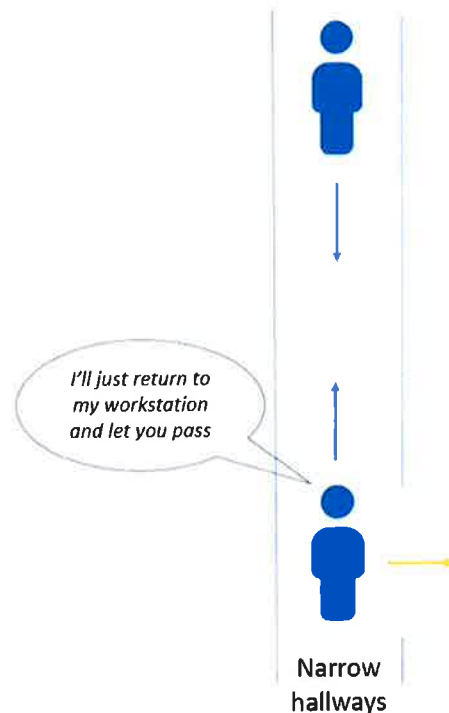
- Wider hallways allow two individuals to pass each other while maintaining physical distance. As noted above, we are to maintain approximately 2 metres distance between ourselves and others. This means that wider hallways can still accommodate two individuals even if there is not a full two metres separation, as long as individuals do not congregate. To avoid congregation and congestion in hallways, conversations should be moved to open areas (e.g. lobby, meeting room, outdoors). If this is not possible, the two individuals should move to the same side of the hallway, maintain physical distancing, and open the other side of the hallway or walkway for others to use.



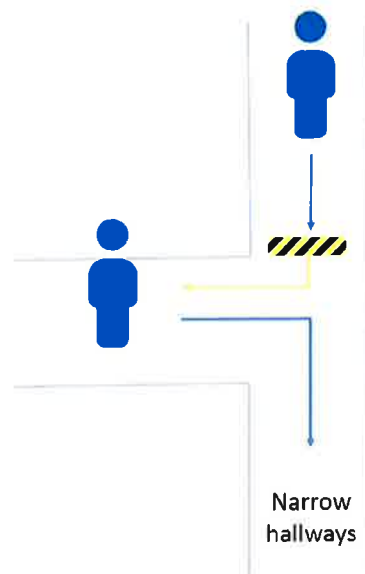
- Narrow hallways or walkways do not have sufficient space for two individuals to pass each other while maintaining physical distancing. If necessary, these hallways can be marked with a "1" using yellow and black floor tape, noting one person at a time.



- Staff exiting workstations or offices are encouraged to pause, look both ways and then proceed into hallways or walkway. Yellow and black floor tape can be placed at the end of workstations or offices as a reminder.
- In narrow hallways, where the path of two individuals cross, staff are encouraged to converse with their colleague to successfully navigate the hallway. This may mean one person backtracks to where they started or into an open area, providing the other person with the ability to pass.

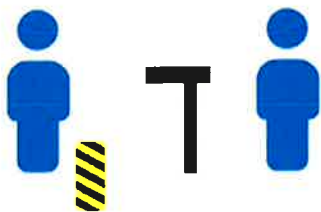


- If the path of two individuals cross at an “intersection” or corner, staff are asked to pause and wait for the other person to clear the area, prior to proceeding. In some situations, yellow and black floor tape can provide helpful visual cues.
- When using walkways adjacent to workstations, try to walk in a manner that provides the greatest physical distancing possible.
- A similar approach as outlined above for hallways and walkways is recommended for narrow stairways, however the use of yellow and black tape is not recommended on stairs.
- Staff are encouraged to work together rather than establishing a designated direction of travel in narrow hallways, walkways and stairways.
- When facilities re-open to citizens, there may be a need to establish a designated direction of travel considering that these individuals infrequently move through the facility.



Transaction counters and service points

- Depending on the service provided, some transaction counters and service points can operate with physical distancing and no other risk control measures. Yellow and black floor tape can provide helpful visual cues. If use of the transaction counter is required, the staff members may be able to maintain physical distancing by moving back, allowing the person to use the transaction counter. Verbal cues can be used to inform the person when they should approach the transaction counter.



Remember that physical distancing means keeping approximately 2 metres distance between ourselves and others and that outstretched arms provide approximately this distance. This means that staff can pass lightweight items (such as paper) to others using an outstretched arm as long as the item is received with an outstretched arm. For heavier items, staff are encouraged to place the item down, step back and verbally cue the other person to pick up the item.

- Some transaction counters and service points may require additional risk control measures such as transparent barriers or counter extensions. Barrier should be at least 207 cm (81.5”) in height is sufficient as it represents the nose height of the 95th percentile male plus the 30 cm (12”) breathing zone.
- Barriers need to be wide enough to account for the normal movement of both people.

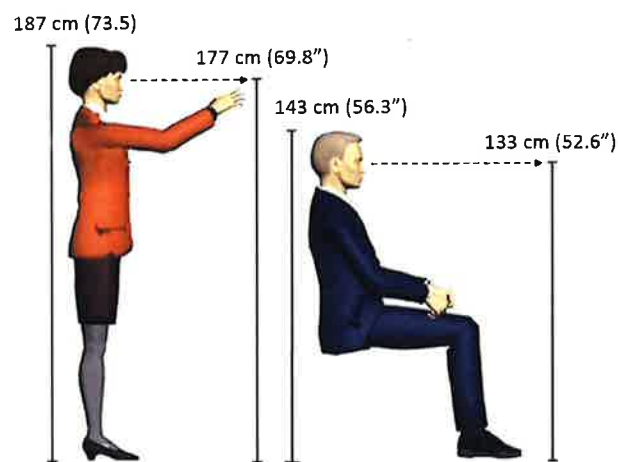
Workstations

- Physical distancing means keeping approximately 2 metres distance between ourselves and others. This distance should be measured from the head or facial area of one staff member to the head or facial area of another considering the areas that they are most likely to be working in (e.g. in front of computer or in areas of desk where paperwork is completed, handled or sorted).
- Less than approximately 2 metres can separate spaces if there is a partition or barrier that separates the workstations:



- If both individuals normally sit while working and there is not sufficient physical distancing, a partition or barrier between 133 cm (52.6") and 143 cm (56.3") in height is sufficient as it represents between eye height and top of head while sitting for the 95th percentile male.

Standing and sitting height of 95th percentile male (BIFMA)



- If one or both of the individuals stand(s) while working and there is not sufficient physical distancing,

a partition or barrier between 177 cm (69.8") and 187 cm (73.5") in height is sufficient as it represents between eye height and top of head while standing for the 95th percentile male.

- In areas where a walkway is adjacent to a workstation and where there is less than approximately 2 meters, the frequency and duration of foot traffic should be considered.
 - If foot traffic is infrequent (less than 15 minutes cumulative in the day), the partition or barrier can be at the sitting height noted above.
 - If foot traffic is frequent (greater than 15 minutes cumulative in the day), or if people tend to pause (e.g. to use a photocopier) or congregate, the partition or barrier should be at the standing height noted above.
 - For offices location on a corner where two hallways intersect or at the end of a series of workstations, foot traffic should be considered as above when determining the partition or barrier height.
 - The above takes into consideration risk information from BC Centre for Disease Control that describes walking by someone as a low risk or no risk activity.

For workstations that share a common entry point, a partition or barrier should be considered if there is less than approximately 2 metres between the entry point and the areas that staff are

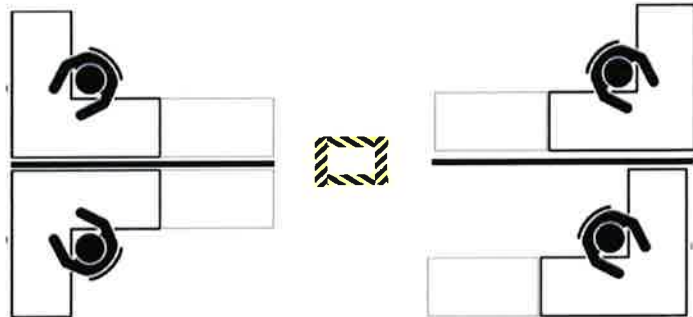
- distancing. Additionally, as discussed in the Hallways, walkways and stairways section above, staff are encouraged to converse with each other to successfully navigate the entry point. This may mean that one person slides within their workstation to allow the other person to enter. Foot traffic should be considered as above when determining the partition or barrier height. Alternately, it may be possible to reconfigure the workstations as discussed below.
- Staff should be encouraged to congregate in more open areas rather than in hallways, walkways or adjacent to workstations.

Configuration of workstations

Some workstation configurations provide unique challenges for physical distancing. Below we address some of these and provide potential solutions:

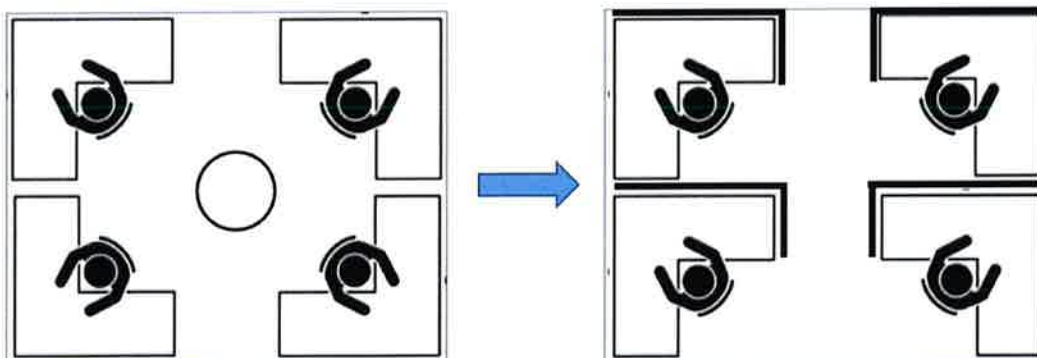
- Multiple workstations in one area and the need to converse.

Recommendation: to measure between workstations to determine the best place for standing. This spot can be designated by creating a box with yellow and black floor tape and be used for speaking with any of the individuals.



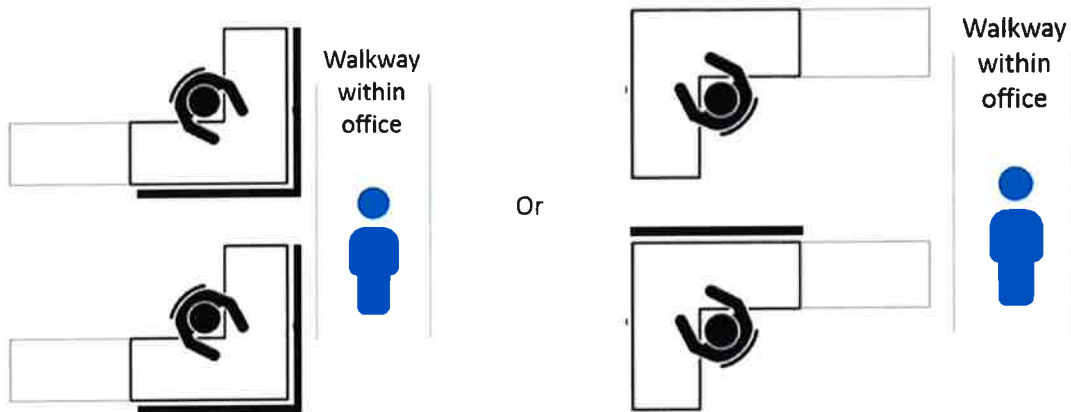
- Workstations configured with open communal space in middle.

Recommendation to see if furniture can be reconfigured to allow use of all workstations with the addition of barriers or partitions. This may require some furniture to be temporarily relocated



- Open workstations adjacent to walkway within office.

Recommendation to add barriers or partitions to create separation. Alternately, explore to see if workstations can be re-oriented to allow more distance between walkway and the areas that are most likely used for work (e.g. in front of computer or in areas of desk where paperwork is completed, handled or sorted).



- There are many other configurations and every effort should be made to use as many workstations as possible, while still adhering to physical distancing.
- Options to reconfigure workstations should consider physical distancing, ergonomics, work flow, access to common areas (e.g. photocopier), phone and data access points, emergency egress and any challenges posed by the reconfiguration.
- Reconfiguration could result in staff moving into different workstations or areas within the office environment. The impact on the frequency and duration of foot traffic and conversations in hallways and pathways (considering physical distancing) should be considered.
- For any workstations that are not being used, departments are asked to contact Facilities and/or Occupational Health and Safety to discuss options. This allows us to maximize the number of available workstations.

Common areas

- It may be beneficial to establish a 1-at-a-time approach for some common areas. Alternately someone can be designated to distribute materials
- Adding yellow and black floor tape to delineate these areas can be helpful.



Other considerations:

- Staff are reminded to wash their hands often with soap and water for at least 20 seconds. If soap and water is not available, alcohol based hand sanitizer can be used to clean hands as long as they are not visibly soiled.
- Staff are reminded to not touch their face, eyes, nose or mouth.
- Surfaces (including high touch surfaces) are cleaned and disinfected using a product approved by Health Canada or the BCCDC at the frequency determined by the Risk Assessment for Cleaning approved by the Emergency Operations Centre.
- Building ventilation should be considered so as to determine the best practices to support staff health and safety.
- Signage/visual cues and continued communication are needed to support physical distancing.

Questions regarding current workstation configurations should be referred to the Manager or Director for initial response. For additional information and assistance related to this Corporate Standard, please contact Occupational Health and Safety and/or Facilities.

This corporate standard has been created in the absence of other guidance from WorkSafeBC, BC Centre for Disease Control, Provincial Health Officer or Local Health Authority. If a similar document is published by an agency noted above, this document will be updated accordingly.

Appendix M: #1 COVID-19 Department Risk Assessment and Safety Plan Template

COVID-19 Exposure Safe Work Plan for XXXXXXXX

Background:

As the [insert here] is preparing to resume operations we must develop plans to reopen safely, which includes assessing the risk of COVID-19 transmission in the workplace, and developing measures to reduce these risks.

Purpose and Scope:

This Safety Plan has been developed to ensure the safe performance of cleaning when there is an infectious outbreak such as COVID-19 or other similar viruses. The procedures below will serve to eliminate, reduce and or control the hazards likely to be encountered by workers performing the related tasks.

COVID-19 Safety Plan:

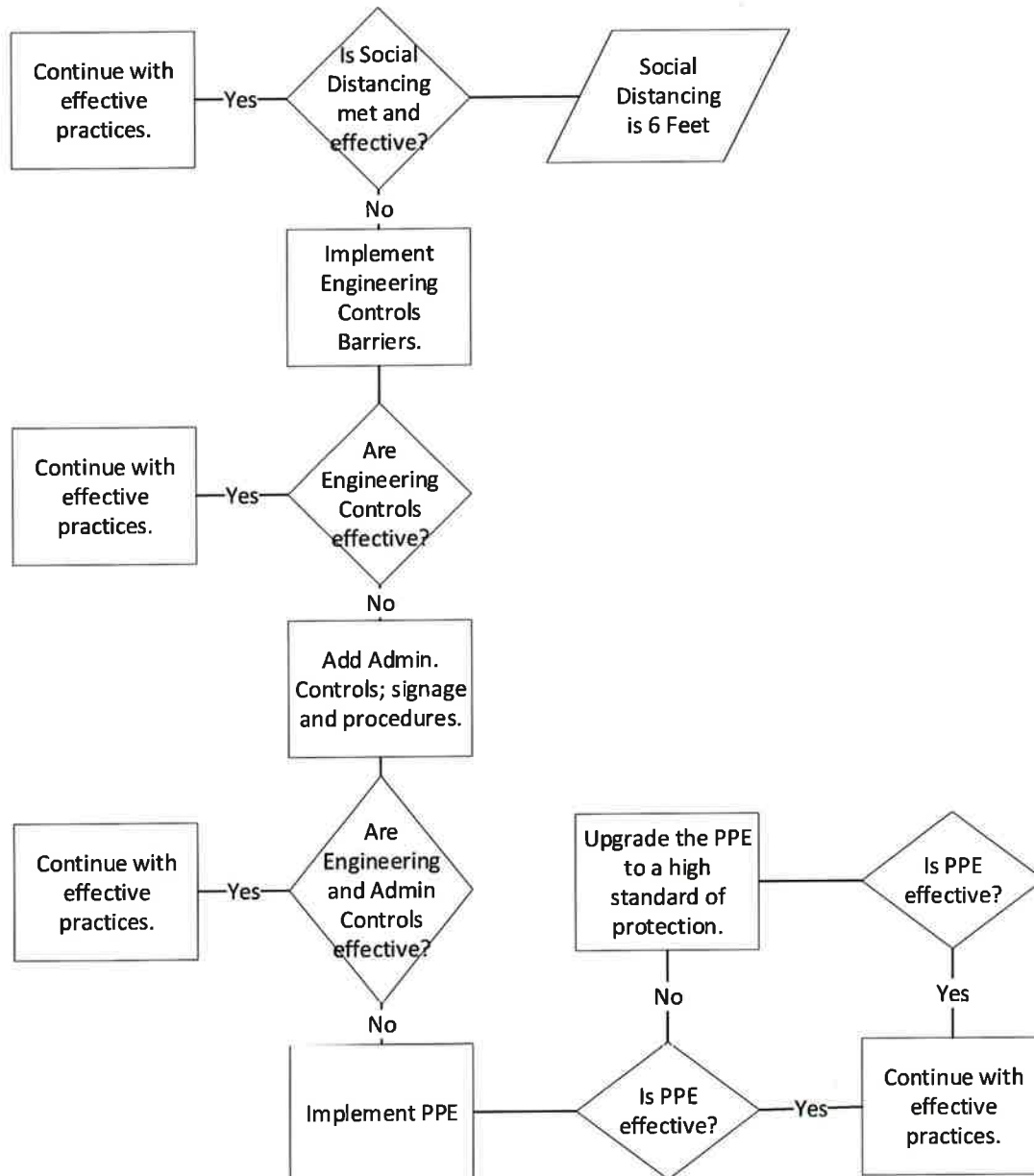
1. Assess Risk

The COVID 19 virus causes infections of the nose, throat and lungs. The virus is most commonly transmitted by an infected person through:

- Respiratory droplets generated when they cough or sneeze
- Close personal contact, such as touching or shaking hands
- Touching objects or surfaces with the virus on it, then touching your mouth, nose or eyes

Risk Assessments conducted by [insert here] identify areas where there may be risks to the COVID-19 virus. A risk assessment supports the development of Safe Work Procedures, which mitigate the risk level of the potential exposure.

The principles used to conduct the risk assessment were based upon the Occupational Health and Safety Hierarchies; Elimination by Physical Distancing, Engineering Controls, Administration Controls or Personal Protective Equipment. All people interactions were reviewed for their risk level and their effective controls to reduce the risk; these actions would involve conducting City business with staff-to-staff, staff to public, and staff in commercial or residential settings. Each work task was assigned a risk level without controls in place, and subsequently the effective controls to mitigate the risk.



COVID-19 Exposure – Standard Risk Assessment Flow Chart

Steps

1. Is it possible to Eliminate the exposure of COVID-19?
2. Are Engineering Controls effective? Example are Physical Barriers to prevent exposure.
3. Are Administrative Controls effective? Examples signage and procedures.
4. Are Personal Protective Equipment effective? Is the equipment correct for the tasks.

*If "Yes" continue with effective practices.

*If "No" continue with effective practices.

2. Implement Protocols and Safe Work Procedures to reduce the risks

To reduce the risk of the virus spreading, the following protocols may need to be implemented to protect against the risk of COVID-19.

Indicate which of the below protocols would be effective and required for your staff:

Elimination Measures in Place for maintaining physical distance:

- Staff working from home or remotely
- Staggered or changes to work schedules
- Designating doors for entry and exit to prevent workers and others from coming into proximity with one another
- Limiting, reducing or prohibiting visitors
- Reducing in-person meetings
- Identifying and establishing a maximum number of people for common areas such as break rooms, meeting rooms, washrooms, elevators, etc. .
- Other Measures: _____

Engineering Measures – Barriers and partitions

- Installing barriers (such as plexiglass) where workers can't keep physical distance from co-workers, customers or others
- Other Measures: _____

Administration Measures – Rules & Guidelines

- Staff have been informed to not come to work when sick
- Encouraging staff to regularly wash their hands through crew talks and signage (post signage on hand hygiene in common areas such as break room, washrooms, etc. .
- Encouraging and posting signage on how to cover coughs and sneezes.
- Passive screening for visitors (signage posted outside of the building asking those with COVID-19 symptoms to not enter)
- Encouraging staff to wipe down equipment after use
- Posting signs to identify areas of high traffic. Stop, yield, or one-way directional arrows may assist in maintaining physical distance.
- Encouraging staff to move aside and yield if they see another worker or visitor walking in their direction
- Where directional control is unavoidable, convex mirrors maybe used at blind corners to mitigate accidental contact
- Allow communal doors to remain open throughout the workday to reduce contact with door handles
- Managing transportation of a single worker to travel alone in their vehicles in order to practice physical distancing. If workers must share a vehicle and 2 meter physical distancing is not possible, workers will be required to wear a non-medical masks.
- Distancing the tables in lunchrooms, limiting the number of chairs, placing "x's" on tables where people should not sit
- Instruct workers to use their own equipment, such as pens, staplers, headsets, and computers

- Encouraging hygiene practices that address the needs of the workplace that includes washing or sanitizing hands after coming into contact with public items
- Other Measures: _____

Personal Protective Equipment (PPE)

If elimination, engineering, and administration measures not are effective or enough to control the risk, personal protective equipment maybe considered. Personal protective equipment may include non-medical masks, gloves, eye protective or an apron or disposable coverall.

- Certain tasks will require personal protective equipment
- Staff have been trained on the proper use, maintenance, and cleaning of the PPE
- Other Measures: _____

Cleaning Protocols

- High-contact touch surfaces are cleaned regularly (such as light switches, door handles/knobs, hand railings, push pads on doors, counters, arm rests on chairs, tables, paper towel dispensers, sanitizer handles, garbage can lids, fountains, buttons, soap dispensers, lunch/break tables, microwave/coffee buttons, etc.)
- Staff are encouraged to wipe down their equipment (desk, keyboard, mouse, phone, etc.) regularly

Key COVID-19 Spread Prevention Steps City Staff Servicing Public/Staff	
Subject:	Prevention Steps for City Staff Servicing the Public/Staff
Description:	<p>These prevention steps has been developed to ensure the safe performance for staff when there is an infective outbreaks such as COVID-19 or other similar viruses.</p> <p>These steps will serve to eliminate, reduce, and/or control the hazards likely to be encountered by workers performing the task.</p>
Equipment and Materials Required:	<p>Personal Protective Equipment:</p> <ul style="list-style-type: none"> • Disposable gloves if no sanitizer pump or soap and water readily available • Non-medical face masks – in situations where a physical distance of 2 meters is unable to be maintained and no barriers (i.e. Plexiglas): <p>Supplies:</p>

	<ul style="list-style-type: none"> • Plexiglas • Signage • Sanitizer pumps
<p>Prevention Steps and Safe Work Procedures:</p>	<p style="text-align: center;"><i>Prevention Steps:</i></p> <ol style="list-style-type: none"> 1. Physical distancing is the essential strategy for the control of any infectious diseases, especially if they are respiratory infections. That means staying home when you are sick and also keeping a safe distance, at least two meters or six feet away from someone else. This is one of the most effective methods we have for halting the spread. 2. Greeting each other with a wave instead of a handshake (ensuring that you are two meters away). 3. Wash your hands often with soap and water for at least 20 seconds. Alcohol-based sanitizer is also effective. 4. Avoid touching your eyes, nose, and mouth with unwashed hands or gloved hands. 5. Cover your cough or sneeze with a disposable tissue, then throw the tissue in the trash or use the crease of your elbow when you sneeze. 6. Avoid close contact with people who are sick. 7. Clean frequently touched objects and surfaces i.e. door handles, light switches, tables, keyboards, phones handles, etc. 8. Inform your supervisor if you have been tested for COVID-19 so that we can contact trace and inform others to self-isolate. 9. Stay home and self-isolate when you are sick or have flu like symptoms. 10. Avoid close contact meetings, use tools such as conference calls and virtual meetings. 11. Self-screen before you come to work. 12. Embrace change. Things are changing daily, you should expect regular communications from your supervisor and you will need to be prepared that you may be expected to change your routines.

	<p>Examples include:</p> <ul style="list-style-type: none"> • Enforcing physical distancing • Cleaning and disinfecting your tools and work surfaces after every use • Wellness questions being asked to ensure you are not sick before entering sites or random checks <p>Site Specific Safe Work Procedures:</p> <p>Insert department specific procedural steps</p>
<p>Preventative Measures in Place</p>	<ol style="list-style-type: none"> 1. Implementation of passive screening (elimination control). Patrons will be encouraged to self-assess their symptoms before they enter the building. Signage will be posted at the front door instructing patrons with COVID-19 symptoms or who have recently travelled outside of Canada that they should not come into the building. Instead they should go back to their car or home and call their physician for guidance. 2. Physical barriers including Plexiglas shields (engineering controls). Front counters will be equipped with Plexiglas to provide a barrier between a patron and yourself. 3. Signage encouraging physical distancing and hand hygiene (administrative controls). 4. Increased cleaning and disinfecting work areas.
<p>3. Communications and Training</p>	<p>Conduct documented Staff/Crew Safety talks to review updated procedures and processes with staff member.</p>
<p>4. Monitor, Assess and Address Risk</p>	<p>Managers, Supervisor and Staff will monitor, identify, report any new area of concern and take steps to update the procedures.</p>
<p>Effective Date:</p>	
<p>Created By:</p>	

3. Policies and Guidelines

The following policies and guidelines are in place in order to prevent the spread of COVID-19:

- Workers and visitors who is showing symptoms of COVID-19 are to remain home and seek the medical advice of their physician.
- Workers and visitors who have arrived from outside of Canada must self-isolate for 14 days.
- Workers and visitors directed by Public Health to self-isolate are to follow that advice and to remain at home
- Workers who are working from home are to adhere to the Working From Home Policy

4. Communication

Signage is posted outside of the facility indicating who is restricted from entering the premises, including visitors and workers with symptoms. Additional signage promoting physical distancing will be posted throughout the facility. The washrooms will have signs on the handwashing.

5. Monitoring

Things may change as we gradually re-open and increase our business roles. If need be, changes will be made to the Safety Plan and staff will be informed.

6. Assess and Address Risks from Resuming Operations

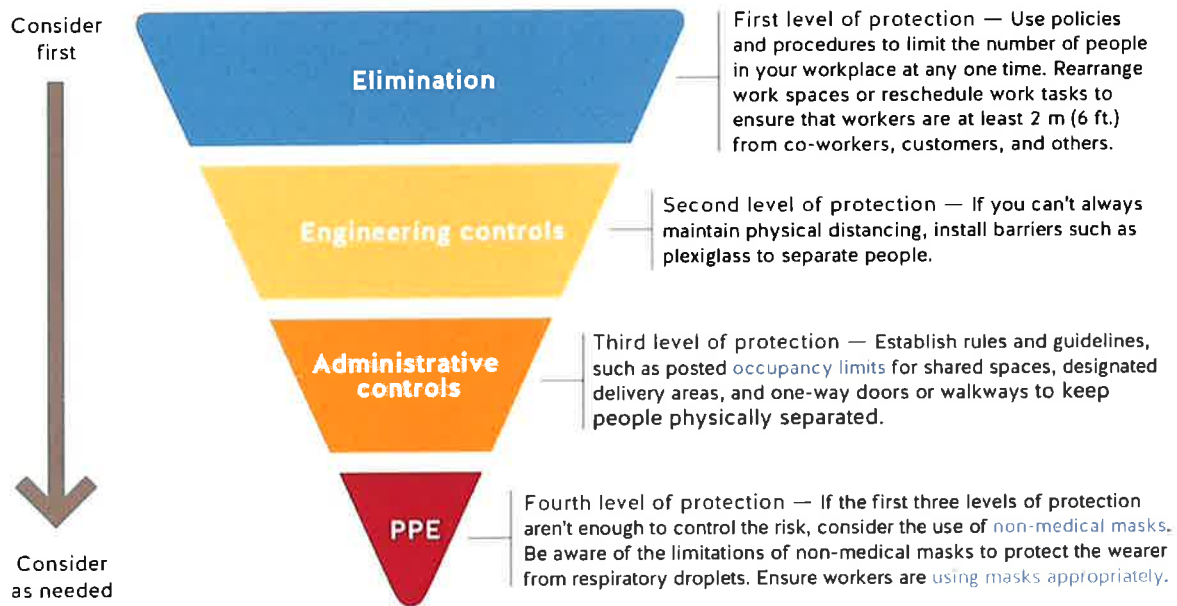
Staff affected by changes made to work processes will be trained and informed of the new procedures.

Staff concerns will be reviewed and addressed according to health and safety hierarchy.

Appendix N: #2 COVID-19 Department Risk Assessment and Safety Plan Template

As required by WorksafeBC and in accordance with orders issued by the office of the provincial health officer, the _____ will develop a COVID-19 Safety Plan as it resumes operations following work interruptions related to COVID-19. Each department will complete the attached document in order to develop this plan and ensure safe operations for workers and the public. The risk assessment and safety plan will identify the risks related to COVID-19 and outline the protocols (or controls) that will be put in place to address those risks.

The hierarchy of protocols that should be followed is displayed in the following graphic (WorksafeBC, COVID-19 Safety Plan document, 05/17/20):



Additional examples of protocols include:

- Ensuring physical distancing by:
 - Limiting the number of people in work areas / break rooms / common areas / etc. (employees and public)
 - Staggered work schedules: start/end and break times
 - Control of traffic flow (employees and public)
 - Re-arranging workstations, tables in break rooms, etc.
 - Re-organizing work tasks
 - Use of signage
 - Use of alternate entries to buildings or workspaces
 - Single-person travel in vehicles
 - Working from home arrangements
 - Holding meetings by appointment only
 - Reducing in-person meetings
- Use of physical barriers or partitions (include cleaning of barriers in cleaning protocols)
- Use of PPE
- Hand washing facilities and sanitizing supplies
- Cleaning and sanitizing protocols

Department:	
Date:	
Completed by:	;

Identify the potential risks related to COVID-19 that are present for your department and the protocols that will be put in place to minimize these risks.

Potential Risk: Exposure through being in close proximity to other employees		Protocols to be implemented (if required):
Identify locations where employees gather (break rooms, meeting rooms, etc.):	1) _____ 2) _____ 3) _____ 4) _____	<ul style="list-style-type: none"> • • • • • • • • • •
Identify job tasks and processes where workers are close to one another:	1) _____ 2) _____ 3) _____ 4) _____	<ul style="list-style-type: none"> • • • • • • • • • •

Potential Risk: Exposure through contact with tools, machinery and equipment		Protocols to be implemented (if required):
Identify tools, machinery and equipment that workers share while working:	1) _____ 2) _____ 3) _____ 4) _____	<ul style="list-style-type: none"> • • • • • • • • • •
Potential Risk: Exposure through interaction with / being in close proximity to members of the public		Protocols to be implemented (if required):
Identify job tasks and processes where workers are in close proximity to members of the public:	1) _____ 2) _____ 3) _____ 4) _____	<ul style="list-style-type: none"> • • • • • • • • • •

<p>Identify what materials may be exchanged during these job tasks and processes:</p>	<p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p>4) _____</p>	<ul style="list-style-type: none"> • • • • • • • • • •
<p>Potential Risk: Exposure through contact with “high-touch” surfaces</p>		<p>Protocols to be implemented (if required):</p>
<p>Identify surfaces that people touch often (doorknobs, elevator buttons, light switches, etc):</p>	<p>1) _____</p> <p>2) _____</p> <p>3) _____</p> <p>4) _____</p>	<ul style="list-style-type: none"> • • • • • • • • • •



(Insert Logo here)

Return to Safe Operations Due Diligence Document

Below is information copied from the following WorkSafeBC webpage with additional information completed by (insert your organization here)

Municipalities and COVID-19 safety – from WorkSafeBC website on May 13, 2020

WorkSafeBC is working with workers, employers, and industry associations to ensure municipal worksites remain healthy and safe during the COVID-19 outbreak.

We are providing information to workers and employers through worksite inspections focusing on the controls that the employer can use to limit exposure, including maintaining distance between workers and ensuring adequate hygiene facilities. We are continuing to engage in inspection, consultation, and education activities within the sector to ensure everyone in the workplace is fulfilling their obligations.

For more information from WorkSafeBC, please see:

- [Preventing exposure to COVID-19 in the workplace](#): a guide that employers may use to assess the risks and controls in their workplace.
- [COVID-19 health and safety information](#): general information for all employers and workers about staying safe at work
- [Frequently asked questions](#): answers to questions from British Columbian workers and employers on how to maintain a healthy and safe workplace

Returning to safe operationThe B.C. government has announced a [phased approach for reopening B.C. businesses](#). We are partnering in the initiative by developing specific resources for industries as they prepare to reopen. Learn more by viewing our general guide on [COVID-19 and returning to safe operation](#) and answers to [frequently asked questions](#).

Controlling the risk of COVID-19 exposure

Employers must take all necessary precautions to minimize the risk of COVID-19 transmission and illness to themselves, workers, and others at the workplace.

Employers may consider some of the following advice or best practices to reduce the risk of worker exposure to COVID-19:

Background and general information: (Examples, activation of an EOC, COVID-19 information webpage on E-link, etc).	
Who should come into the workplace	
<ul style="list-style-type: none"> Implement a policy requiring anyone with symptoms of COVID-19 such as sore throat, fever, sneezing, or coughing to self-isolate at home for 10 days from onset of symptoms, as well as anyone advised by public health to self-isolate. 	(Examples, Pandemic COVID 19 Response – Employee Leave, staff Pandemic Leave, FAQs etc.)
<ul style="list-style-type: none"> Prioritize the work that needs to occur at the workplace for you to offer your services. 	(Example, a list of essential and critical services)
Physical distancing and other preventative measures	
<ul style="list-style-type: none"> Stagger start times for workers to prevent crowding at locations. 	(Examples, staggered start times, how they report to work – either going to the yard or site, etc.)

<ul style="list-style-type: none"> • Eliminate in-person team meetings or modify them to incorporate technology such as conference calling and online meetings. 	<p>(Examples, conference calling options, in-person meetings taking place in large or open areas with sufficient physical distancing, some staff working from home, etc.)</p>
<ul style="list-style-type: none"> • Modify work processes and practices to encourage physical distancing between them and customers, clients, and other workers. 	<p>(Examples, closing all municipal facilities to the public, service by appointment only, etc.)</p>
<ul style="list-style-type: none"> • Provide instructions to workers on methods for maintaining physical distance from customers, clients, and other workers, such as not greeting others by shaking hands, or removing or modifying proof of delivery signature requirements and money collection requirements. 	<p>(Examples, safety talks, posters, procedures, etc.)</p>

Cleaning and hygiene	
<ul style="list-style-type: none"> • Ensure workers are provided with appropriate supplies, such as soap and water, hand sanitizer, disinfectant wipes, nitrile gloves and garbage bags, and sufficient washing facilities. 	(Examples, critical supplies identified and inventories created, etc.)
<ul style="list-style-type: none"> • Remind staff of effective personal hygiene practices. Add signage about best practices for personal hygiene for customers who may interact with your workers. 	(Examples, Special Advisory, posters, signage, etc.)
<ul style="list-style-type: none"> • Remove shared items where cross-contamination is possible (e.g., shared tools, coffee and water stations and snack bins). 	(Example, using disposable products, etc.)
<ul style="list-style-type: none"> • Enhance cleaning and disinfecting practices in high contact areas like door and cabinet handles, keyboards, light switches, steering wheels, and communications devices. 	(Examples, Cleaning risk assessments, cleaning schedules, etc.)

<ul style="list-style-type: none"> Incorporate end-of-shift wipe downs for all shared spaces. 	(Example, establish a system to identify computer workstations that have been cleaned and disinfected, etc.)
--	--

Documentation and training

<ul style="list-style-type: none"> Train your staff on changes you've made to work policies, practices, and procedures due to the COVID-19 pandemic and keep records of that training. 	(Example, establish corporate system.)
<ul style="list-style-type: none"> Ensure that workers can raise safety concerns. This may be through your joint health and safety committee. 	Examples, ensure that staff have a plan to address COVID-19 concerns, set up a communication link etc.)

Worker transportation

<ul style="list-style-type: none"> Whenever possible, workers should travel alone in their vehicles in order to practice physical distancing. If that is the case, employers must implement all of the necessary safeguards related to working alone or in isolation, to ensure the safety of these workers. Measures that may be taken to ensure appropriate distance include having workers sit one to a seat, with riders staggered to allow maximum distance between them; adjusting the number of workers transported per trip; and increasing the total number of trips needed to transport workers to a worksite. These measures may mean using larger vehicles to ensure maximum spacing or using multiple vehicles. If it is not possible to ensure 2 metres of distance between workers in a vehicle through these measures, the employer must consider other control measures, such as PPE where appropriate. 	(Examples, Changes to fleet use establishing one person per vehicle. assessing risk, need and benefits of installing non-rigid impervious barriers, etc.)
---	---

<ul style="list-style-type: none"> Employers must also implement a process that allows for physical distancing when loading and unloading vehicles. Workers waiting for loading/unloading should maintain physical distancing while remaining safely away from traffic. 	<p>(Example, social distancing plan for unloading/loading vehicles, etc.)</p>
<ul style="list-style-type: none"> Employers should have hand washing facilities or sanitizing stations available to workers as they enter and exit the vehicle. 	<p>(Example, Alcohol based hand sanitizer be available, etc.)</p>
<ul style="list-style-type: none"> Employers must ensure that high contact surfaces within the vehicle are routinely cleaned. These include seatbelts, headrests, door handles, steering wheels, and hand holds. 	<p>(Examples, Risk assessment for cleaning vehicles, etc.)</p>

Resolving concerns about unsafe work

<ul style="list-style-type: none"> Workers have the right to refuse work if they believe it presents an undue hazard. An undue hazard is an “unwarranted, inappropriate, excessive, or disproportionate” hazard. For COVID-19, an “undue hazard” would be one where a worker’s job role places them at increased risk of exposure and adequate controls are not in place to protect them from that exposure. If the matter is not resolved, the worker and the supervisor or employer must contact WorkSafeBC. Once that occurs, a prevention officer will consult with workplace parties to determine whether there is an undue hazard and issue orders if necessary. For more information, see Occupational Health and Safety Guideline G3.12. 	
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JUNE 22, 2020 - COW

See Item 6.A. - COVID 19 Risk Mitigation
Attachment VIII

Guidelines for Reopening BC & Yukon Pools and Waterfronts

Revised June 15, 2020

LIFESAVING SOCIETY
BC & Yukon Branch

LIFESAVING SOCIETY



LIFESAVING SOCIETY®

The Lifeguarding Experts



The Lifesaving Society Is

The national, not-for-profit, volunteer-based organization that has been training swimmers to be Lifesavers, Lifeguards, and Instructors in Canada since 1908 and in BC since 1911.

Dedicated to the prevention of incidents and the saving of life in aquatic environments across Canada.

A member of the Royal Life Saving Society Commonwealth organization and the Canadian representative in the International Life Saving Federation.

The Lifesaving Society Aims

- Promote public awareness and understanding of the responsibility every Canadian assumes when working or playing in an aquatic environment.
- Provide educational opportunities for preparing swimmers to be lifesavers and for training highly skilled lifeguards.
- Pursue research to enhance and support the continuing development of its programs and to maintain technical excellence.
- Provide consultation services for educational, recreational and health agencies in communities throughout the country.

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Guidelines for Reopening BC & Yukon Swimming Pools and Waterfronts

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National Board of Directors, National Management Team, National Safety Standards Commission

Document compilation provided by Lifesaving Society Canada - BC & Yukon Branch (112-3989 Henning Drive, Burnaby, BC V5C 6N5) www.lifesaving.bc.ca



COVID-19 - Recommendations for Reopening BC & Yukon Swimming Pools and Waterfronts

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Guidelines for Reopening BC & Yukon Swimming Pools and Waterfronts

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Disclaimer

These guidelines have been developed to assist owners, operators and lifesaving trainers to adapt their facility's operation to mitigate the risk to staff and public health posed by COVID-19.

These guidelines reflect the best available data at the time they were prepared and may require revision as new information becomes available. Examples used within the document do not guarantee the prevention of aquatic-related incidents or disease transmission and do not replace other strategies for promoting health & aquatic safety.

The Guidelines for Reopening BC & Yukon Swimming Pools and Waterfronts do not replace or supersede local, provincial/territorial or federal legislation or regulations or directives from the Ministry of Health and Provincial Health Officer.

Definitions

Aquatic facility: Any swimming pool, wading pool, waterpark, waterfront or similar location that is used for aquatic activities such as swimming, wading, diving or aquatic sports.

Aquatic Instructor or Coach: One who holds a current National Lifeguard certification together with a recognized aquatic instructor certification.

Aquatic sports: May include scuba diving and snorkeling, competitive swimming, lifesaving sport, diving, synchronized swimming, water polo etc.

Assistant Lifeguard: A person appointed by the owner or operator to assist a National Lifeguard in the supervision of bather safety at a swimming pool.

Cleaning: The removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs, but removing the germs decreases their number and therefore any risk of spreading infection.

Community facilities: Schools, recreation centres, swimming pools, daycare centres and businesses comprise most non-healthcare settings visited by the general public outside of a household.

Coronavirus: Coronaviruses are a large family of viruses which may cause illness in animals or humans. In humans, several coronaviruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). The most recently discovered coronavirus causes coronavirus disease COVID-19.

COVID-19: COVID-19 is the infectious disease caused by the most recently discovered coronavirus. This new virus and disease were unknown before the outbreak began in Wuhan, China, in December 2019. COVID-19 is now a pandemic affecting many countries globally.

Current: An award dated not more than two years from the date of certification, the exception being First Aid certifications which are 3 years from the date of certification.

Deck equipment: Equipment installed on the pool deck including starting platform, diving board, ladder, grab rail, lifeguard chair, etc.

Disinfecting: The use of chemicals, for example DIN (Drug Identification Number) registered disinfectants, to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs, but killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

Lifeguard: A person with a current Lifesaving Society National Lifeguard certification appointed by the owner or operator to maintain bather surveillance.

Operator: The trained individual designated by the owner to be responsible for the day to day operation of an aquatic facility.

Owner: The person or corporation who is the owner of an aquatic facility.

Recreational toys and games: Floating puzzles, floating mat, tube, sea serpent, ball, etc.

Recreational swim: Any period where bathers' activities in the pool are unstructured and where bathers are not under the direction or supervision of a coach or instructor. These times may include, but are not limited to events such as birthday parties, day camps, free swims, lane swims, open swims, public swims, rentals, teen swims, etc.

Rope swing: a rope connected to a structure over the water that is designed to swing users from a starting point out over a designated landing zone in the water, where the user releases and enters the water.

Safety supervision: Means the lifeguard is actively scanning their zone to ensure that bather in the swimming pool remain free from harm. While providing safety supervision lifeguards must be on the pool deck, vigilant, and at their station.

Swimming pool: An artificially constructed basin, whether indoor or outdoor, lined with concrete, fiberglass, vinyl, or similar material in which persons can swim, wade, or dive.

Training accessories: Accessories used for learning or training including paddles, kickboard, pull buoy.

Wading pool: an artificially constructed basin, whether indoor or outdoor, lined with concrete, fiberglass, vinyl or similar material that is intended for wading.

Waterfront: an outdoor, artificial or natural shoreline alongside a body of water, that may include docks or piers and may be used for aquatic activities such as swimming, wading, diving or aquatic sports.

Whirlpool: a pool, hot tub, or spa that is designed primarily for therapeutic or recreational use and is not drained, cleaned or refilled between use by successive users; it may utilize any combination of hydro jet circulation over the majority of the pool area, air induction, and cold or hot water.

COVID-19 Facility Operations: Recommendations for Progressive Reopening

Information

The COVID-19 pandemic has generated questions and concerns about potential exposure to the virus when aquatic facilities and waterfronts reopen.

The objective of this document is to assist owners and operators of aquatic facilities to minimize the risk of COVID-19 transmission to employees and patrons when facilities reopen by providing guidance to facility operators and lifeguards at swimming pools and waterfronts.

Owners and operators should also review Lifesaving Society Canada's national standards providing additional operational details to assist swimming pool and waterfront operators.¹

These guidelines are based on expert opinion and evidence-based research from many credible health organizations throughout Canada and globally. Recommendations should be adapted to meet local conditions of the disease burden as well as resource availability.

The Lifesaving Society continues to reassess the public health risk based on the best available evidence as the COVID-19 situation evolves. These recommendations will be updated as additional information becomes available.

Background

Aquatic recreational activities have many physical and mental health benefits for the population. In the context of climate change, swimming is an accessible cooling measure to better adapt to increasing and extreme heat conditions.

Swimming is the second most popular activity (after bicycling) in Canada among school-age children 5 to 12 years of age, thus contributing to the adoption and maintenance of healthy lifestyle habits. To take full advantage of its many benefits, it is imperative that the population be able to participate in aquatic activities in a safe manner and minimize potential health risks.

Under 1% of all fatal drownings in Canada occur in lifeguard supervised swimming locations. Aquatic facilities provide an essential public service at all times and especially during heat waves; opening them is part of many public health injury prevention plans. Therefore, as COVID-19 poses a public health threat, it is essential to address operational concerns for aquatic facilities while maintaining the prevention measures recommended by provincial/territorial public health authorities.

In the event of increasing summer temperatures and heat wave health advisories, in consultation with local health authorities, owners and operators of public aquatic facilities need to plan to open their pools and waterfronts to allow the public to cool off while continuing to adhere to all current COVID-19 precautions.

The Lifesaving Society advises owners, operators, lifeguards, aquatic instructors and coaches to follow the existing recommendations outlined on the World Health Organization (WHO) website. Refer to the Public Health Agency of Canada, the Centers for Disease Control and Prevention (CDC) recommendations and guidelines provided by provincial and territorial public health authorities.

Timeline

1. Determine when activity can resume according to provincial/territorial health authority recommendations. Consider the attached example of a Progressive Reopening Phases Model ([Appendix A, pg. 18](#)) in order to plan a progressive reopening of aquatic facilities.
2. Create a timeline with milestone steps ([Appendix B: Reopening Timeline Model, pg. 20](#)).
3. Stay in contact with the local aquatic community, clubs and partners to identify their needs.
4. Order pool chemicals, first aid equipment, personal protective equipment (PPE) and other goods as soon as possible to avoid shortage and delivery delay.
5. In coordination with provincial/territorial health authority, create an emergency plan for a possible outbreak, assess if community members are at higher risk for COVID-19 infection and plan accordingly.

Facility Staff

1. Owners and operators of aquatic facilities should have a detailed plan to manage the return to work for their employees to help ensure the workplace is not a source of COVID-19 transmission. The approach must be proactive and focus on the protection of the workers. Employers also have a responsibility to provide appropriate education and training to all facility employees.
2. Establish a daily operator's check list ([Appendix C: Daily Operator's Check List, pg. 21](#)).
3. Screen employees daily by asking common questions to ensure they do not have COVID-19 symptoms.
4. Follow your established employee sickness and return to work protocols.
5. Higher risk employees of severe illness from COVID-19 (e.g. older adults and people of any age who have serious underlying medical conditions) should inform the employer of their condition to determine if it is safe for them to resume work. Such individuals should not reintegrate into the workplace until their provincial/territorial health authority confirms it is safe to do so.
6. Develop human resource policies that are fully compliant with existing workplace health and safety regulations and labour codes.
 - a. Under health and safety legislation, employees retain the right to refuse work if they believe the workplace and their duties may cause them harm. For more information, consult the Canadian Centre for Occupational Health & Safety and provincial/territorial legislation and regulations.
 - b. Workplace health and safety committees have a legal obligation to participate in the development of any workplace prevention and preparation strategies dealing with the virus.
7. Communicate exceptional return to work policies to all facility and aquatic staff and ensure they follow them.
8. Employees must wash their hands when arriving and leaving the aquatic facility, and before and after:
 - a. eating
 - b. breaks
 - c. smoking
 - d. blowing one's nose, coughing, or sneezing
 - e. going to the toilet
 - f. being in contact with animals or pets
 - g. using shared equipment (e.g. water test kit)
 - h. providing routine care for another person who needs assistance

9. Personal items and clothing (backpacks, jackets, shoes, etc.) brought in by staff members should be kept to a minimum. Where staff must bring items in, they should be stored separately, with adequate space between each staff member's items (e.g. leave a hook between items on a coat rack, taped off spaces on the floor in a storage area, render bags available to store items, etc.).
10. Vacant lockers should be emptied, sanitized and sealed.
11. Enforce physical distancing of 2 metres at all times. Operators could stagger employees' time of arrival/departure and lunch breaks.
12. Prohibit events and meetings that require close contact; rather, use telephone or online conversations.
13. Utilize consistent work teams (same workers in shift work) to avoid increasing the number of interactions.

Employee Equipment

1. Equipment should not be shared between employees.
 - a. If possible, ensure that each employee has their own equipment needed for each shift (e.g. one rescue tube per lifeguard).
 - b. Ensure there is no sharing of equipment (pen, stopwatch, etc.), condiments and common use food dispensers (ketchup, mustard, salt, pepper, etc.).
 - c. Do not share cups, glasses, plates, utensils. Wash in hot water with soap.
 - d. Any equipment or tool that must be shared needs to be cleaned with soap and disinfected after each use and at the end of each shift.
2. Clean staff room table before and after each use.
 - a. The table should be covered with an easily washable surface (plastic or smooth surface).
 - b. The staff room, as well as its appliances and accessories (refrigerator, microwave, chairs, handles, etc.), must be cleaned every shift to avoid cross contamination.
3. Remove non-essential items (magazines, newspapers, trinkets) from common areas.
4. If possible, do not store equipment, first aid and resuscitation equipment, PPE or similar items in the lunchroom.
5. Deck/beach staff should change clothes before and after their shift.
 - a. Remove work clothes and/or bathing suit at the end of the shift.
 - b. Used clothes and/or bathing suit should be placed in a bag until cleaned.
 - c. Make bags available, if necessary.
 - d. Clean clothes using laundry soap and hot water.

Employee Personal Protective Equipment (PPE)

1. Where possible, ensure that each employee has the PPE needed for their shift and avoid sharing these. If this is not possible, disinfect the equipment between each exchange.
2. PPE recommendations vary for employees and is dependent on the duties they perform in the workplace. Use adequate PPE (gloves, mask, face shields, goggles, coveralls) when performing cleaning routines or administering first aid.

3. Where possible, designate a first aid responder equipped with more robust PPE equipment (e.g. gown, visor, etc.) to prevent undue delays in responding to first aid or resuscitation requirements caused by donning appropriate PPE.
4. When wearing gloves, avoid touching the face.
 - a. Follow the procedure prescribed by the World Health Organization (WHO) when removing gloves. ([Appendix D: WHO procedure to remove gloves, pg. 22](#))
 - b. Follow the procedure prescribed by the WHO in order to remove personal protective equipment (PPE) while avoiding contamination ([Appendix E: WHO procedure to remove PPE, pg. 23](#)).
5. Staff must not share personal first aid equipment (fanny packs).

Facility Admission

1. At the entrance, signs must inform all bathers that:
 - a. Patrons must not enter if they suspect they have COVID-19 or if they have any of the known COVID-19 symptoms.
 - b. Patrons must maintain physical distance of 2 metres from other patrons and staff.
 - c. Cough into your bent elbow, or into a tissue that you throw away immediately after use, then wash hands immediately.
2. On arrival, patrons must wash their hands with soap and water or hand sanitizer (70% alcohol or higher) for 20 seconds.
3. Screen patrons to ensure they do not have COVID-19 symptoms by asking common questions.
4. Where local protocols allow and where appropriate, have all employees' and patrons' temperature screened before admittance.
5. Signage could present the layout plan of the aquatic facility including specific COVID-19 measures such as a circulation path around the pool allowing patrons to familiarize themselves with it prior to entry.
6. Admission fee payment methods should allow for minimal contact between employees and patrons.
 - a. Install a physical barrier between the cashier and patron.
 - b. If a fee is charged, avoid cash transactions by accepting alternate payment methods.
 - c. If cash is accepted, specific procedures to prevent contamination need to be established (e.g. employee should wear gloves and/or wash hands before and after handling money).
7. If bracelets (wrist-brands) are required, the operator must use self-applied bracelets and provide waste containers for their disposal.
8. Employees located at an admission station should be protected by glass or plexiglass.
 - a. If this is not possible, provide a face shield and train employees to don and remove it safely.
 - b. If the employee is located at an outdoor admission station, sun protection must be provided (e.g. umbrella).
9. Depending on the expected level of use of the aquatic facility, some measures may need to be put in place to avoid crowd gathering or long waiting times, for example:
 - a. A reservation system.
 - b. Swim time limitations to allow other bathers to use the facility.
10. Additional signage should inform people to avoid aquatic facilities if they are at high risk for severe illness from COVID-19 based on provincial/territorial health authorities.

Facility Access

1. Provide facility access with one entry point and a separate exit point (Appendix G & H: Access and Circulation Layout Model).
 - a. If both entry and exit points are located at the same place, put measures in place to provide physical distancing of at least 2 metres, for example:
 - i. Assign employee to supervise entry and exits.
 - ii. Install signage to direct patrons to enter one at a time.
 - iii. Provide floor markings to guide patron travel in, through and out of the facility.
 - iv. Install a physical separation with a transparent material which can be cleaned and disinfected frequently (e.g. plexiglass) and of at least two (2) metres in height to separate the entry and exits allowing patrons to enter and exit simultaneously.
2. Install physical markers on the floor or walls (cones, lines, stickers, etc.) that indicate appropriate two metre spacing for patrons waiting in line at the cash desk or entrance.
3. Employees and patrons need to keep a personal face covering on until they enter the pool. Each personal face covering should be stored in a labelled disposable bag during activity and donned immediately after.
 - a. The mask must also be kept on at all times by those accompanying the user (parents of children, for example).
4. For outdoor aquatic facilities, access should be available without going through a building or changing room (e.g. using a service gate).
5. For indoor aquatic facilities, access should be via the shortest direct path to the aquatic facility.
 - a. Where possible, avoid access through change rooms (e.g. using a service door from the reception).
 - b. Bathers could arrive in their bathing suit and access to change rooms be limited to bathers who need to use the bathroom.
6. If a shower is available near the pool deck (without the need to enter the change room), consider advocating its use.
 - a. When no showers are available on the pool deck and to avoid circulation in the changing rooms, operators could encourage good pool hygiene by asking bathers to shower at home before and after facility use.
7. The occupancy rate of change rooms should be reduced to allow physical distancing. For example, only 1 in 2 lockers should be used and total change room occupancy should allow a minimum space of 5 square metres per person.
8. Operator should institute one-way traffic flow around the pool area using appropriate signage or other methods.

Deliveries

1. Operators should request that suppliers send the same delivery person to their facility for drop-offs.
2. Operators should require that all drop-offs from outside suppliers be accepted by the same employee.
3. Ideally, organize tasks so that delivery personnel and suppliers are able to drop goods at the entrance or at a designated delivery location of the facility to avoid the coming and going of workers from other companies on the premises.
4. Where possible, limit the exchange of paperwork to a minimum (e.g. electronic signature of contracts or delivery notes). When paper documents are required:
 - a. Place the documents on a clean surface to transmit and retrieve the documents respecting the distance of 2 metres between individuals.
 - b. Employee and delivery person do not use the same pen.
 - c. Provide pens in case delivery person does not have one.
 - d. Clean pens with a disinfectant wipe after use.

Communicating Physical Distancing Measures

1. Inform all employees of the physical distancing measures that are in place at the facility by way of memorandums, on employee social media groups and during training sessions.
2. Inform the public of the physical distance measures in place at the facility through all communication resources and social media to which they have access.
3. Post the signs and symptoms of COVID-19.
4. Update staff manuals and safety plans to include all physical distancing measures.
5. If applicable, inform and educate the public, parents and caregivers of their responsibility in maintaining physical distance.
6. Indicate on the entrance door to an area (e.g. pool lobby, change room), the maximum number of people allowed in the room at one time.
7. To ensure distancing measures are respected by employees and patrons, operators could consider adding staff, especially upon reopening as many adjustments should be expected.

Aquatic Facility and Amenities

Toilets

1. If a bathroom is available on the pool deck, encourage patrons to use it to avoid entry into other areas of the facility.
2. Ensure that a toilet is available to employees and patrons as well as a sink supplied with clean, temperate water.
 - a. Provide soap or another recommended cleaning substance.
 - b. Provide roll-up towels or paper towels (hand dryer could be less effective).
3. Signage should remind people of hand washing as well as the proper procedure ([Appendix F: WHO - How to Hand Wash Signage, pg. 25](#)).
4. Ensure that toilets are disinfected every two (2) to four (4) hours.

Diving Boards, Waterslides and Rope Swings

1. Install physical markers on the floor or walls (lines, stickers, cones, etc.) to indicate the distance of 2 metres between patrons at the queues.
2. Provide floor markings to guide patrons.
3. Clean all touch points on diving boards and waterslides as usual.
4. Provide signage to remind bathers to avoid putting their unwashed hands to their eyes, nose or mouth, especially after touching railings.
5. Rope swings represent a higher transmission risk and their use should be prohibited in early phases of reopening.

Wading Pools

1. Follow the same guidelines as for swimming pools.

Water Playgrounds (Splash Pads)

1. Even when operating with effective disinfection, maintenance or operating procedures, water playgrounds (splash pads) present higher risk of COVID-19 contamination due to:
 - a. Design and features that make it more difficult to maintain appropriate physical distancing.
 - b. The size and design of the facility creating a challenge to keep surfaces clean and disinfected.
 - c. The potential for the virus to be spread when patrons touch common surfaces, then touch their unwashed hands to eyes, nose or mouth.
 - d. The common use of fresh water with no added disinfectant (bromine or chlorine).
2. Only operate water playgrounds in accordance with provincial/territorial health authority recommendations.
3. Install a fence around the perimeter of the water playground to control access by identifying a separate entrance and exit.
4. During opening hours, always ensure the presence of an employee able to ensure access control and patron supervision.
5. Conduct regular disinfection of common contact surfaces, such as water play activation mechanisms, nozzles, rainbows, etc.
6. If using treated water for water playgrounds, maintain at least the same level of water quality as swimming pool water standards.
7. Adopt and follow all other guidelines as described in this document.

Water Parks

1. Even when operating with effective disinfection, maintenance or operating procedures, water parks present a higher risk of COVID-19 contamination due to:
 - a. Design and features that make it more difficult to maintain appropriate physical distancing.
 - b. The size and design of the facility creating a challenge to keep surfaces clean and disinfected.
 - c. The potential for the virus to be spread when patrons touch common surfaces, then touch their unwashed hands to eyes, nose or mouth.
2. Only operate water parks in accordance with provincial/territorial health authority recommendations.
3. Reduce bather loads to maintain physical distancing measures.
4. Prioritize and schedule the operation of features and installations where supervision and distancing measures are in place to allow easier cleaning and disinfection.
5. Adopt and follow all other guidelines as described in this document.

Whirlpools, Saunas and Steam Rooms

1. Even when operating with effective disinfection, maintenance or operating procedures, whirlpools (including hot tubs and spas), saunas and steam rooms present a higher risk of COVID-19 contamination due to:
 - a. Design and features that make it more difficult to maintain appropriate physical distancing.
 - b. The size and design of the facility creating a challenge to keep surfaces clean and disinfected.
 - c. The potential for the virus to be spread when patrons touch common surfaces then touch their unwashed hands to eyes, nose or mouth.
2. Only operate whirlpools, saunas and steam rooms in accordance with provincial/territorial health authority recommendations.
3. Reduce bather loads to maintain physical distancing measures.
4. Prioritize and schedule the operation of features and installations where supervision and distancing measures are in place to allow easier cleaning and disinfection.
5. Adopt and follow all other recommendations as described in this document.

Programming Aquatic Facilities

For all aquatic facilities, bather loads should be reduced to allow appropriate physical distancing. The operator needs to take in consideration the activities held and amenities available within their facility. Bather loads may increase in time based on provincial/territorial health authority recommendations.

General

1. For programmed activities, adopt and follow all other guidelines as described in this document.
2. Users should not spit, urinate or blow their nose in the water.
3. People at higher risk of COVID-19 should not participate in programmed activities until approved.
4. Participants should not share water bottles, towels, goggles or any other equipment.
5. Water bottles should be filled at home.
6. Patrons in need of assistance due to physical limitations should receive help from a family member.

Patron Equipment

1. Signage should inform bathers to not share water bottles, towels, goggles or any other equipment other than with family members.
2. The use of goggles should be encouraged to avoid mucus contamination.
3. Snorkels should be prohibited.
4. Following the first phase of reopening, only essential equipment should be available to patrons (e.g. PFDs).
5. All shared equipment (such as PFDs) must be disinfected between each user.
 - a. Leave equipment in the pool for a few minutes to allow for disinfection.
 - b. Submerge floating equipment or turn to ensure proper disinfection on both sides (e.g. PFDs).

Recreational Swimming

1. The owner and operator should prepare a plan for recreational swimming ([Appendix G: Recreational Swimming/Day Camps & Groups Organization Model, pg. 26](#)).
2. For all aquatic facilities, bather loads should be reduced to allow physical distancing. Operators need to consider activities held and amenities available. Bather loads may increase in time depending on provincial/territorial health authority recommendations.
 - a. For example, the total number of patrons on deck and in the water may not exceed the number obtained by allowing 7 m² of water surface per person, therefore a 25 metre pool with 6 lanes 2.5 metres wide each has a total of 375 m² (25 x 6 x 2.5). Bather admission cannot exceed 53 bathers (375 ÷ 7).

Lane/Lap Swimming

1. The owner and operator should prepare a plan for lane/lap swimming.
2. To maintain physical distancing of 2 metres, swimmers should swim in the middle of the lane only and return by the adjacent lane (e.g. swimming towards the deep area in lane #1 and coming back to the shallow area in lane #2). ([Appendix H: Lanes/Lap Swimming Organization Model, pg. 27](#)) Swimmers of the same family or household may swim together in one lane.
3. To maintain physical distancing of 2 metres, swimmers should swim in the middle of the lane (e.g. swimming towards the deep area in lane #1, returning in lane #2 (Appendix H)

Day Camps and Groups

1. The owner and operator should prepare a plan for day camps and groups ([Appendix G: Recreational Swimming/Day Camps and Groups Organization Model, pg. 26](#)).
2. Inform day camp and group supervisors of the facility's established physical distancing measures.
3. Inform the camp and group leader of their shared responsibility to maintain the facility's established physical distancing measures.
4. Participants should not share water bottles, towels, goggles or any other equipment with others.
5. When transporting participants to the aquatic facility, it is recommended to reduce the bus occupancy rate according to local guidelines.
6. Reduce the number of participants allowed in programs to adjust to the facility's revised bather load and the number of program leaders available for participant supervision.
7. Day camp and group supervisors should organize activities to encourage physical distancing between participants rather than free swimming.
8. All other local guidelines regarding day camps and groups must be followed.

Organized Activities

For all aquatic facilities, bather loads should be reduced to allow physical distancing. The operator needs to consider the activities held and amenities available in each facility. Bather loads may increase in time based on provincial/territorial health authority recommendations.

General

1. For organized activities, adopt and follow all other recommendations as described in this document.
2. Users should not spit, urinate, or blow their nose in the water.
3. Reduce group ratios to maintain distancing measures.
 - a. Reducing duration of lessons may allow operator to offer more lessons.
4. Aquatic instructors must give safety guidelines to all participants before starting a class or a training session.
5. Aquatic instructors should be outside of the water (except for demonstrations).
6. Encourage each swimmer to bring their own equipment.
7. Disinfection of equipment is required after activities.
 - a. If possible, avoid using equipment during activities.
8. The following should not participate in organized activities:
 - a. People 65 years and older.
 - b. People who live in a nursing home or long-term care facility.
 - c. People of all ages with underlying medical conditions, particularly if not well controlled.
9. Participants should not share water bottles, towels, goggles or any other equipment with others.
10. Water bottles should be filled at home.
11. Patrons in need of assistance due to physical limitations should receive help from a family member.

Swimming Lessons

1. The owner and operator should prepare a plan for swimming lessons.
2. Maintaining physical distancing with swimming lesson participants can be challenging, especially with younger participants.
3. Offer swimming lessons while there is no ongoing community spread of COVID-19 in your region in accordance with provincial/territorial health authority recommendations.
4. Prioritize swimming lessons according to group levels where physical distancing measures can be easily implemented (younger participants usually need more physical manipulation and proximity).
5. Swimming lessons could be given in groups similar to infant lessons so that each participant is accompanied by a parent responsible for managing and handling their child.
6. See Recommendations for Staff Training for Instructional Programs.
7. The owner and operator should prepare a plan for training lifeguards ([Appendix J: Training for Lifeguard Model Organization Model, pg. 28](#)).
8. See current/amended program standards from the respective swimming organization.

Aquatic Fitness Classes

1. Maintaining physical distancing with aquatic fitness class participants can be challenging.
2. Only offer aquatic fitness classes in accordance with provincial/territorial health authority recommendations.
3. Prioritize aquatic fitness classes to group levels where physical distancing measures can be easily implemented.
4. See current/amended program standards from the respective aquatic fitness organization.

Aquatic Sports

1. Only offer organized aquatic sports in accordance with provincial/territorial health authority recommendations.
2. Offer organized aquatic events (such as competitions) only after provincial/territorial health authority approval has been granted.
3. Younger athletes that need physical manipulation and close proximity to others should not resume training before provincial/territorial health authority approval has been granted (corresponding with the start of swimming lessons and following the same recommendations).
4. Masters athletes or athletes at high-risk for severe illness from COVID-19 (see admission guidelines) should not resume training before provincial/territorial health authority approval has been granted.
5. Head trainers must present a plan to the operator for the organization of training in order to respect the basic principles of COVID-19 precautions. The plan should establish guidelines for the spatial, temporal and physical organization of a swimming pool, making it possible to comply with the rules of physical distancing while presenting an overall vision of the development and movement of individuals.
6. Follow respective sport federation or organization recommendations.
7. All aquatic sports:
 - a. Organize local training only (athletes should not come from another region/province to practice their sport).
 - b. Parents should not attend training sessions (if possible, the athlete should go to the aquatic facility on their own or the parent should stay in their vehicle).
 - c. Put measures in place that prevent the instructor or coach to be alone with an athlete.
 - d. Keep the same group of athletes for each training session.
 - e. Maintain physical distancing of at least 2 metres between each athlete.
 - f. Encourage solo skill training rather than group events.
 - g. Do not hold dry land training by the pool.
 - h. Athletes should not leave equipment or sport bags at the facility.

8. Competitive swimming:
 - a. Goggles are mandatory.
 - b. Lanes/lap swimming recommendations must be followed.
 - c. Keep the same group of swimmers in a lane for each training session.
 - d. Swimmers of the same family or household may swim in the same lane.
9. Diving:
 - a. Keep the same group of divers for each training session.
10. Artistic swimming:
 - a. Goggles are mandatory.
 - b. Practice solos (no group figures).
11. Water polo:
 - a. Goggles are mandatory.
12. Triathlon training:
 - a. See competitive swimming recommendations.
13. Lifesaving sport:
 - a. See Recommendations the Progressive Reopening of Aquatic Facilities – Appendix E: Lifesaving Sport Return to Practice Safety Plan.

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Appendix A

Progressive Reopening Phases Model

PHASES	PRECAUTIONS	ALLOWABLE ACTIVITIES AND FACILITIES
<p>Phase 0 Ongoing community spread of COVID-19 in your region.</p>	<p>Act with extreme caution and keep all aquatic facilities closed.</p>	<ul style="list-style-type: none"> • None
<p>Phase 1 Progressive reopening of aquatic facilities in compliance with provincial/territorial health authority.</p>	<p>The following activities and facilities can resume with:</p> <ul style="list-style-type: none"> • Controlled access and strict supervision. • Reduce bather loads and ensure physical distancing and disinfection measures. • High risk participants are prohibited. 	<ul style="list-style-type: none"> • Lifesaving or lifeguard training • Emergency use of the facility for seasonal health emergencies (heat wave/high temperature warning) • Aquatic sports training for athletes recognized as being of national interest in view of their participation in the Olympic Games or national and international events • Allow only essential equipment (e.g. PFD) <p><i>For waterfronts, outdoor pools and indoor pools only.</i></p>
<p>Phase 2 If Phase 1 reopening does not generate a reoccurrence of the virus within the community, consider allowing more activities to be held in aquatic facilities.</p>	<p>The following activities and facilities can resume with:</p> <ul style="list-style-type: none"> • Controlled access and strict supervision. • Reduce bather loads and high distancing and disinfection measures. • Higher instructor/coach ratio. • High risk participants are prohibited. 	<ul style="list-style-type: none"> • Individual swimming lessons or training sessions that do not need physical manipulation by the instructor or coach • Supervised lane/lap swimming with reduced bather loads • Aquatic sports excluding groups that need physical manipulation by the coach • Aquatic fitness classes with instructors being out of the water (except for demonstrations) • Day camps • Water playgrounds with controlled access and supervision • Water parks with reduced bather loads and operating installations allowing easy distancing and disinfection measures

PHASES	PRECAUTIONS	ALLOWABLE ACTIVITIES AND FACILITIES
<p>Phase 3</p> <p>If phase 2 reopening do not generate a reoccurrence of the virus within the community, consider allowing more activities to be held in aquatic facilities.</p>	<p>The following activities and facilities can resume with:</p> <ul style="list-style-type: none"> • Reduce bather loads and high distancing and disinfection measures. • Higher instructor/coach ratio. • High risk participants are prohibited. 	<ul style="list-style-type: none"> • Recreational swimming • Swimming lessons excluding groups that need physical manipulation by the instructor and with instructors being out of the water (except for demonstrations) • Water parks • Whirlpools, saunas and steam rooms • Allow other equipment (e.g. toys) with proper disinfection procedure
<p>Phase 4</p> <p>Pandemic is over, COVID-19 is under control due to an appropriate treatment or an effective vaccine.</p>		<ul style="list-style-type: none"> • All activities can resume

Note that the suggested phases of reopening aquatic facilities in this table are guidelines only, do not necessarily correlate with provincial/territorial health authority plan phases for reopening and are not meant in any way to supersede them.

Appendix B

Reopening Timeline Model (Sample dates only)¹

Step	Predecessor	Start	Duration	End
Government Announcement : Date when we know that operations can resume.		May 4, 2020		
Authorization to resume operations : Date when the break ends and aquatic activities can resume..				July 2, 2020
Guidelines for reopening by the Public Health Department.		May 4, 2020		
Carry out inventories and order equipment (sanitary, chemical, CPR and first aid products, etc.).	In order to reduce supply delays due to stock shortages, proceed now and shorten the schedule!	May 5, 2020	28 days	June 2, 2020
Integrate the Public Health Department's guidelines concerning COVID-19 (communication with clients, equipment procurement, updating the procedures and staff training.	Guidelines for reopening by the Public Health Department.	May 4, 2020	28 days	June 1, 2020
Fill, heat and empty the pool.	Government announcement.	May 5, 2020	14 days	May 19, 2020
Contact partners (clubs) and discuss their needs. Ideally maintain open communication from now on.	Government announcement.	May 5, 2020	5 days	May 10, 2020
Make programming adjustments and accept requests from partners.	Government announcement.	May 5, 2020	5 days	May 10, 2020
Hire staff and submit schedules.	Make programming adjustments and accept requests from partners.	May 5, 2020	14 days	May 19, 2020
Publicize updated programming and keep track of registrations.	Make programming adjustments and accept requests from partners.	May 11, 2020	25 days	June 5, 2020
Re-certify staff before the 2 years and 3 months expiry date of their certificates.	Fill, heat and empty the pool.	May 19, 2020	88 days	August 15, 2020
Period where certificates are valid for a maximum period of 2 years and 3 months.	Authorization to resume activities.	July 2, 2020	45 days	August 15, 2020
Open to the public: Open swims and access to clubs.	Integrate the Public Health Department's recommendations, receive material orders and hire staff.	July 2, 2020		
Open to the public: Swimming and fitness classes.	Publicize updated programming and keep track of registrations.	June 6, 2020		
Holding sports competitions (the directives of the Public Health Department will take precedence).	One (1) month following the start of training..	August 2, 2020		

¹ Available on the Lifesaving Society web site: <https://www.lifesaving.ca/safety-management-services.php>.

Appendix C

Daily Operator's Check List

QUESTION	YES	COMMENTS
Does the employer check the condition of employees arriving at the aquatic facility?	<input type="checkbox"/>	
Are employees advised to leave the aquatic facility if they have any COVID-19 symptoms?	<input type="checkbox"/>	
Has the employer planned the work to respect physical distancing?	<input type="checkbox"/>	
Is physical distancing respected during the entry-exit of the aquatic facility, during breaks, during meals?	<input type="checkbox"/>	
Are toilets accessible at the aquatic facility?	<input type="checkbox"/>	
Are the toilets cleaned every two (2) to four (4) hours?	<input type="checkbox"/>	
Is the staff room table and high-touch points cleaned before and after each use?	<input type="checkbox"/>	
Is the staff room cleaned every day?	<input type="checkbox"/>	
Is there presence of water and hand washing soap?	<input type="checkbox"/>	
Are shared equipment or workstations cleaned after each use?	<input type="checkbox"/>	

Appendix D

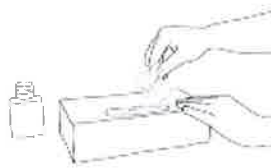
WHO Procedure to Remove Gloves

GLOVE USE INFORMATION LEAFLET

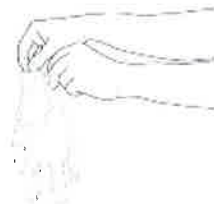
Technique for donning and removing non-sterile examination gloves

When the hand hygiene indication occurs before a contact requiring glove use, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water.

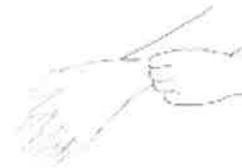
I. HOW TO DON GLOVES:



1. Take out a glove from its original box



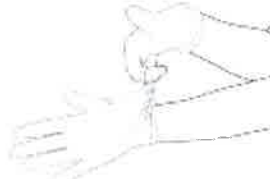
2. Touch only a restricted surface of the glove corresponding to the wrist (at the top edge of the cuff)



3. Don the first glove



4. Take the second glove with the bare hand and touch only a restricted surface of glove corresponding to the wrist



5. To avoid touching the skin of the forearm with the gloved hand, turn the external surface of the glove to be donned on the folded fingers of the gloved hand, thus permitting to glove the second hand

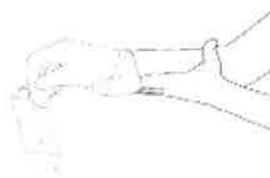


6. Once gloved, hands should not touch anything else that is not defined by indications and conditions for glove use

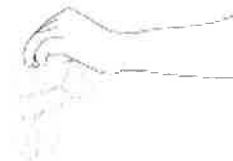
II. HOW TO REMOVE GLOVES:



1. Pinch one glove at the wrist level to remove it, without touching the skin of the forearm, and peel away from the hand, thus allowing the glove to turn inside out



2. Hold the removed glove in the gloved hand and slide the fingers of the ungloved hand inside between the glove and the wrist. Remove the second glove by rolling it down the hand and fold into the first glove



3. Discard the removed gloves

4. Then, perform hand hygiene by rubbing with an alcohol-based handrub or by washing with soap and water

Appendix E

WHO Procedure to Remove Personal Protective Equipment (PPE)

- 1** Remove waterproof apron and dispose of safely. If the apron is to be reused, place it in a container with disinfectant.



- 2** If wearing overshoes, remove them with your gloves still on (If wearing rubber boots, see step 4).



- 3** Remove gown and gloves and roll inside-out and dispose of safely.



- 4** If wearing rubber boots, remove them (ideally using the boot remover) without touching them with your hands. Place them in a container with disinfectant.



- 5** Perform hand hygiene.



- 6** If wearing a head cover, remove it now (from behind the head).



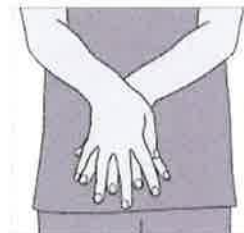
- 7** Remove face protection:
7a Remove face shield or goggles (from behind the head). Place eye protection in a separate container for reprocessing.



- 7b** Remove mask from behind the head. When removing mask, untie the bottom string first and the top string next.



- 8** Perform hand hygiene.



Source: Modified from Clinical Management of Patients with Viral Haemorrhagic Fever: A pocket Guide for the Front-line Health Worker World Health Organization, 2014



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page number consistency with 1st edition
of Guidelines (May 19, 2020)**

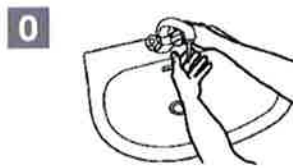
Appendix F

WHO How to Hand Wash Signage

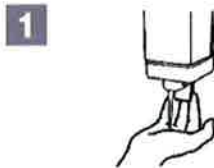
How to Handwash?

WASH HANDS WHEN VISIBLY SOILED! OTHERWISE, USE HANDRUB

 **Duration of the entire procedure: 40-60 seconds**



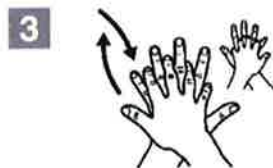
0 Wet hands with water;



1 Apply enough soap to cover all hand surfaces;



2 Rub hands palm to palm;



3 Right palm over left dorsum with interlaced fingers and vice versa;



4 Palm to palm with fingers interlaced;



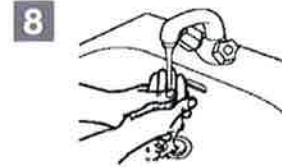
5 Backs of fingers to opposing palms with fingers interlocked;



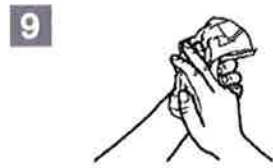
6 Rotational rubbing of left thumb clasped in right palm and vice versa;



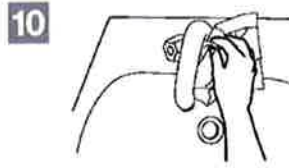
7 Rotational rubbing, backwards and forwards with clasped fingers of right hand in left palm and vice versa;



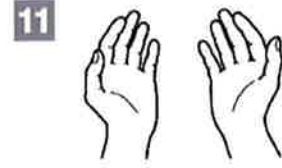
8 Rinse hands with water;



9 Dry hands thoroughly with a single use towel;



10 Use towel to turn off faucet;



11 Your hands are now safe.



World Health Organization

Patient Safety

A World Alliance for Safer Health Care

SAVE LIVES

Clean Your Hands

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Appendix G

Recreational Swimming/Day Camp and Groups Organization Model

Reception, Participant Health Check and Promotion of Behaviours that Prevent the Spread of COVID-19

- Educate swimmers on the rules of physical distancing, hygiene and respiratory etiquette.
- Do not allow entry to anyone with symptoms or who has been in contact with someone with symptoms
- Encourage swimmers to bring their own PFD and training equipment

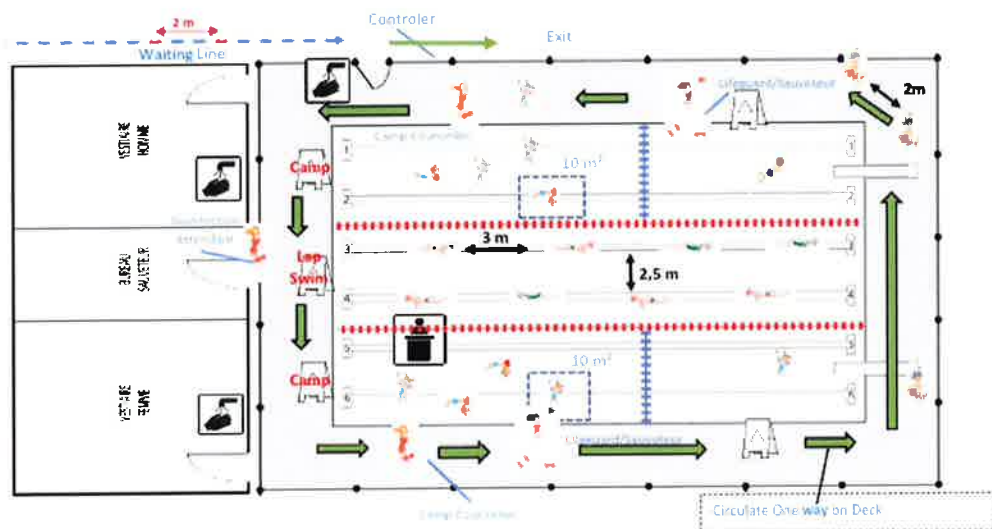
Physical Distancing, 2 metres:

- If possible, participants take a shower and change at home with access to the change room limited
- Swimming in one-way lanes, no overtaking, maintain a distance between swimmers and keep ends of lanes free
- Use the space on deck reserved for you or your household members or camp group

Hand Hygiene and Respiratory Etiquette, Cloth Face Coverings

- Ask swimmers to wash hand with soap for 20 seconds before swimming
- Encourage swimmers to wash hands often, to cover a sneeze or cough and throw away tissues as soon as used
- Encourage swimmers to cover their face: wear a cloth or mask when on deck except for swimming in the water
- Do not share training equipment, kickboard, pull buoy or personal flotation device (PFD); otherwise disinfect between each use

Model of organization of aquatics activities with physical distance



Previous chart of "Estimated Space Allowed per Swimmer" deleted; refer to BC Health Guideline for Swimming Pools, pg. 10 stating, "A 2 metre 'bubble' of space should be maintained around each patron using the pool or hot tub, unless they are from the same party."

Appendix H

Lanes/Lap Swimming Organization Model

Reception, Participant Health Check and Promotion of Behaviours that Prevent the Spread of COVID-19

- Educate swimmers on the rules of physical distancing, hygiene and respiratory etiquette.
- Do not allow entry to anyone with symptoms or who has been in contact with someone with symptoms
- Encourage swimmers to bring their own PFD and training equipment

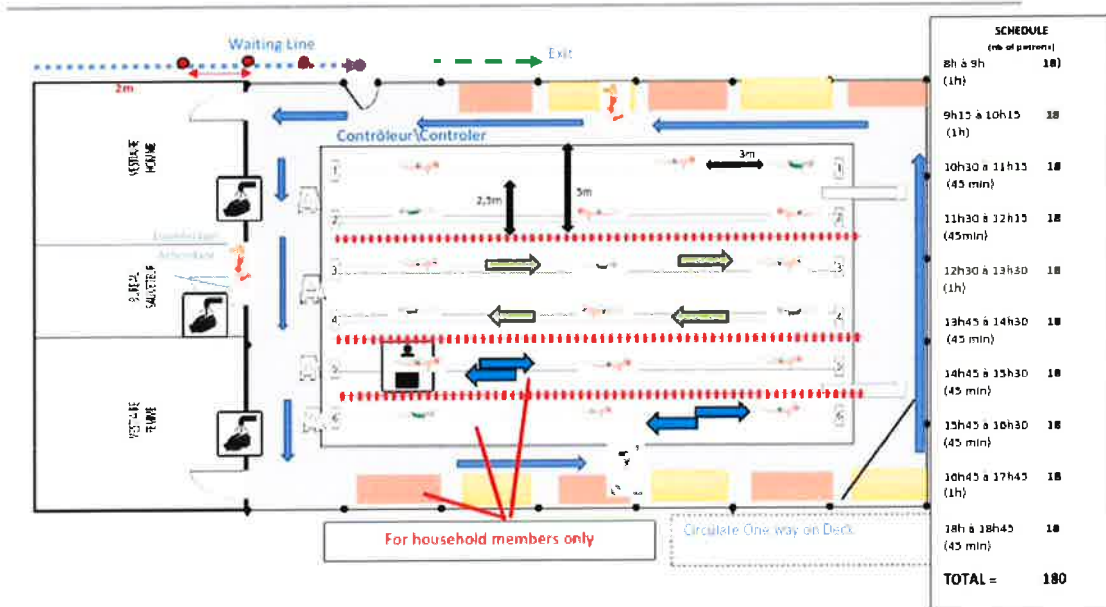
Physical Distancing, 2 metres:

- If possible, participants take a shower and change at home with access to the change room limited
- Swimming in one-way lanes, no overtaking, maintain a distance between swimmers and keep ends of lanes free
- Use the space on deck reserved for you or your household members or camp group

Hand Hygiene and Respiratory Etiquette/ Cloth Face Coverings

- Ask swimmers to wash hand with soap for 20 seconds before swimming
- Encourage swimmers to wash hands often, to cover a sneeze or cough and throw away tissues as soon as used
- Encourage swimmers to cover their face: wear a cloth or mask when on deck except for swimming in the water
- Do not share training equipment, kickboard, pull buoy or personal floating device (PFD); otherwise disinfect between each use

Model of organization of aquatics activities with physical distance



COVID-19: Resuscitation & First Aid Recommendations

Background:

When the process of drowning begins, the outcomes are often fatal. Unlike other injuries and many diseases, survival from drowning is determined almost exclusively at the scene of the incident and depends on two variable factors: how quickly the person is removed from the water, and how quickly effective resuscitation is performed.

In the COVID-19 era, lifeguards now face a decision about how to balance their own safety while providing life-saving care. Several factors must be considered:

- Individuals with moderate or severe infections are unlikely to be participating in water-related activities. Bather assessment by operators prior to entering the facility will reduce the exposure to those who are exhibiting symptoms of the disease.
- Most individuals who become infected will experience only mild or no symptoms.
- Proper personal equipment, hand hygiene and screening at sites can help decrease the risk to rescuers.
- Rescuers should always assess the risk of providing care. This includes an assessment of their own health status. Rescuers with other health problems are more likely to contract severe forms of the disease, and during times with high infection rates should consider doing other duties that do not involve direct public interaction.
- The frequency of response requiring direct contact by aquatic staff with bather is low, therefore the likelihood of transmission is minimal.
- Employers have the duty to provide appropriate protective equipment so that rescuers can respond safely.

Since risk aversion is impossible, any attempt at first aid or resuscitation, may result in self-contamination. As there is no one-size-fits-all solution to how we manage this new issue, this document will provide principles to ensure staff safety.

Implementation

Mitigating Risk of Infection When Administering CPR for a Drowning Victim

In consideration of rescuer safety, many lay-rescuer training organizations are recommending a shift in resuscitation procedures to using compression-only CPR. As drowning is a hypoxic event, delay in ventilation increases the likelihood that the victim's condition will deteriorate or they may not survive. Drowning is considered a "special circumstance" where ventilations should be prioritized to positively affect victim outcome.

Due to the risk of transmission, mouth-to-mouth ventilations and in-water ventilations (with or without a mask) should not be performed (viral filters must remain dry to be effective).

Rescuers should put on gloves for all first aid interventions or at the latest, immediately after removing a victim from the water. It would be reasonable for rescuers to wear facemasks with eye protection when performing first aid if available.

During a resuscitation event, rescuers should minimize the number of people in direct contact with the victim.

To minimize exposure to the rescuer, the following are ventilation techniques in order of preference:

1. Bag-valve-mask (BVM) with a viral filter; two rescuers with one rescuer maintaining a tight seal during ventilations and compressions.
2. If no BVM is available, or insufficient training, rescuers may consider mouth-to-mask ventilations with a viral filter; two rescuers with one rescuer maintaining a tight seal during ventilations and compressions.
3. If only one rescuer is responding, a pocket mask with a viral filter and head strap may be tightly placed on the victim's face to create a seal.
4. If family members or close contacts are nearby and trained, it is reasonable to see if they would be willing to provide the ventilations – as there is an increased likelihood that they are already infected themselves.

Rescuers should properly discard all protective equipment after the rescue and wash their hands before continuing with their duties.

Mitigating Risk of Infection When Administering CPR for a Non-drowning Victim

If there is no history of drowning, it is reasonable for the rescuer to do compression-only CPR until the arrival of appropriate equipment (if not immediately available). During compression-only CPR, rescuers may use a protective covering over the victim's mouth and nose such as a towel or light clothing. When the equipment arrives, use the same precautions as for a drowning victim.

Lifeguards not on duty with no access to personal protective equipment should place a protective covering over the victim's mouth/nose and perform compression-only CPR.

Mitigating Risk of Infection When Administering First Aid

When administering first aid, apply the following principles to help reduce the risk of disease transmission. These principles do not replace first aid assessment and treatment skills, but rather provide supplemental considerations for use throughout the rescue process.

- Rescuers should put on gloves for all first aid interventions or at the latest, immediately after removing a victim from the water.
- It would be reasonable for rescuers to wear facemasks with eye protection when performing first aid if available.
- Maintain physical distancing (2 m) whenever possible.
- Rescuers should minimize the number of people in direct contact with the victim.
- Victims should be encouraged to wear a mask if tolerated.

Rescuers should properly discard all protective equipment after the rescue and wash their hands before continuing with their duties.

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COVID-19 Facility Operations: Recommendations for Aquatic Staff Training

UPDATED – June 2020

Background

The outbreak of COVID-19 has generated questions and concerns about potential exposure upon reopening aquatic facilities. This Information Bulletin is intended to provide guidance to owners and operators of aquatic facilities regarding staff training for the progressive reopening of aquatic facilities during the COVID-19 pandemic.

This guidance is based on expert opinion and evidence-based research from many credible health organizations throughout Canada and globally. Recommendations should be adapted to meet local conditions of the disease burden as well as resource availability.

The Lifesaving Society will continue to reassess the public health risk based on the best available evidence as the situation evolves. These recommendations will be updated if additional information becomes available.

Additional training guidelines are in development for Lifesaving Society programs and award recertification.

The objectives of the recommendations for staff training as part of a progressive reopening of aquatic facilities are:

- To minimize the risk of COVID-19 transmission at public aquatic facilities between aquatic staff and the public.
- To ensure that lifeguards and all aquatic staff who provide safety supervision are able to provide effective safety supervision during a progressive approach to returning aquatic facilities to a complete operating schedule.

Implementation

After a prolonged absence from work, aquatic staff must be ready to provide effective safety supervision to the public participating in aquatic activities with a minimum of risk of transmission of COVID-19.

Employers are responsible for the health and safety of their staff therefore new protocols should be in place to minimize the risk of COVID-19 transmission. Aquatic staff should be trained and competent in the new protocols prior to reopening aquatic facilities. Owners and operators of aquatic facilities should:

- Put strategies in place to reduce the risk of COVID-19 transmission. All employees should be trained on new workplace safety assessments, controls and COVID-19 specific protocols for all staff including janitorial, clerical and safety supervision.
- Attempt to minimize in-person staff training time. Utilize alternative training and/or blended learning methods (e.g. online training, web conferencing software, self directed training) combined with in-person training as required.
- For in-person training, employers will need to review the space to provide for physical distancing of employees at all times, including breaks. This may result more training sessions with fewer employees in attendance.
- Activities will require modification to maintain physical distancing at all times. Manikins should be used for CPR and first aid demonstrations when the employee is not able to demonstrate the treatment on themselves.
- Develop training plans to reactivate returning staff that will help ensure aquatic safety supervision staff are able to successfully perform rescues when called on to do so after a prolonged absence from work.
- Develop a recertification schedule for aquatic staff whose certifications have expired or are close to expiring.
- During the initial onboarding of returning staff, the following should be included:
 - Review COVID-19 adapted Facility Safety Plans.
 - Review COVID-19 adapted Facility Operations protocols including disinfection protocols, use of the facility's amenities and amended program schedules.
 - Review COVID-19 personal health and physical distancing requirements for staff.
 - Review physical distancing measures for patrons within the facility.
 - Conduct a Rescue Ready Assessment of safety supervision staff (Appendix A).
 - Review COVID-19 adapted in-water rescue protocols (Appendix B).
 - Review safety education and rule enforcement practices (Appendix C).
 - Review COVID-19 adapted first aid and resuscitation protocols.
 - Review COVID-19 adapted PPE equipment for all aquatic and facility staff.
 - Update instructors on COVID-19 training program guidelines (Appendix D).
- Document all training.
 - Records must have the date, name and signature of all staff members who receive training.

Personal Protective Equipment (PPE) for Aquatic Staff

Rescues and lifeguard interventions may provide a source of COVID-19 transmission. Infection prevention and control (IPC) during rescues is essential to prevent transmission.

- Where possible, designate a staff member to take the lead during first aid and resuscitation allowing in-water rescuers time to dry off and don PPE before they continue victim care.
- Limit first aid room access to essential personnel.
- Facility staff should wear non-disposable facemasks/face covers of at least three layers of material, to prevent COVID-19 transmission.

Staff Training Guidelines for Safety Supervision, First Aid & Resuscitation

Specific protocols should be developed for all rescues to ensure lifeguard interventions are not a source COVID-19 transmission. In addition, specific protocols should be developed for aquatic staff when communicating with the public for safety education and when enforcing facility rules.

- All returning staff should undergo a Rescue Ready Assessment and COVID-19 specific training that should at a minimum include an:
 - Update in COVID-19 specific facility requirements for physical distancing and disinfection protocols.
 - Update in COVID-19 in-water rescues and lifeguard intervention protocols.
 - Update in COVID-19 first aid and resuscitation protocols.
- During training, staff should be supplied with their own PPE and personal first aid equipment (e.g. pocket mask, gloves, and hand sanitizer) as well as:
 - Follow hand hygiene recommendations.
 - Practice physical distancing and wear protective facemasks/face-covering.
 - Ensure facemasks/face-covering for lifeguards roaming at deck level, on the beach or dock.
- No person-to-person contact should occur during first aid or resuscitation skill assessments or practice situations.
 - In-water rescue breathing or victim assessments will not be used at this time.
- Disinfect all training equipment before, during and after training.
- Wherever possible, provide surveillance and scanning from elevated platform to promote physical distancing.
 - After each rotation, the lifeguard should disinfect the railings and common surfaces of the lifeguard chair.

References

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Approval

- Approved by Lifesaving Society Canada Board of Directors, 15 May 2020
- Update approved by Lifesaving Society Canada Board of Directors, 28 May 2020

Disclaimer

Lifesaving Society Canada's National Safety Standards are developed using Coroners' recommendations, the latest evidence-based research, and reflect the aquatics industry's best practices at the time the publication was approved.

In the rapidly changing COVID-19 era, Lifesaving Society Canada will update the COVID- 19 Information Bulletins as evidence-based research becomes available. The information contained within this document does not replace or supersede local, provincial/territorial or federal health authority guidelines.

Appendix A

Rescue Ready Assessment Recommendations

The Rescue Ready Assessment recommendations do not replace National Lifeguard or First Aid recertification courses. The recommendations are intended to provide guidance to owners and operators of aquatic facilities when reactivating returning staff.

Use an alternative training and/or blended learning approach to train returning staff. Prior to in-person training use online learning for COVID-19 specific protocols developed to manage your facility and its operations.¹ Follow your community guidelines that have been developed for restoring services.

Rationale

After an extended period of absence from work, aquatic staff must be ready to provide effective safety supervision to the public participating in aquatic activities.

Strategies

1. Owners and operators should assess skills and fitness items specific to the facility's needs.
2. The Rescue Ready Assessment recommendations provide an example of skills and fitness that may be required by the owner and operator for staff to successfully perform rescues in their facility when called on to do so.
3. Address the assessment criteria with staff prior to the assessment taking place as well as what remedies will be in place should assessment results be unsatisfactory.
4. Document all return to work assessments of staff. Records must have the date, name and signature of all staff members who receive training.
5. Ensure that candidates maintain physical distance requirements during all aspects of the assessment and that equipment is appropriately disinfected.

Lifeguard and Assistant Lifeguard* Pool Sample Assessment

The owner and operator need to adjust the assessment according to the aquatic facility specifications and activities. Fitness is an injury prevention measure for the employee and demonstrates their ability to perform rescue skills following aerobic requirement of a rescue.

1. Object recovery: Starting in the water, swim 15 m and surface dive to recover a 9 kg (20 lb.) object; surface and carry the object 5 m.
2. Demonstrate anaerobic fitness: Starting in the water, swim 50 m head-up.
3. Demonstrate effective management of a distressed or drowning victim in deep water in a pandemic context (COVID-19 protocols: use a training manikin, family member, etc.).
4. Demonstrate effective management of a submerged, non-breathing victim and perform 10 cycles of 30 compressions on a CPR manikin (COVID-19 protocols: use a training manikin, family member, etc.)

¹ Aquatic Facility Information Bulletin – COVID-19 Facility Operations: Recommendations for Progressive Reopening

Lifeguard and Assistant Lifeguard* Waterfront Sample Assessment

37

The owner and operator need to adjust the assessment according to the aquatic facility specifications and activities. Fitness is an injury prevention measure for the employee and demonstrates their ability to perform rescue skills following aerobic requirement of a rescue.

1. Demonstrate aerobic endurance: Run 100 m with a rescue aid to enter the water; swim 100 m to recover a conscious victim; tow the victim 100 m.
2. Demonstrate effective use of a rescue board or rescue craft: Approach 5 m on a beach; enter the water with a rescue craft; pick up a victim (a floating object) 100 m away and return to shore.
3. Demonstrate effective management of a distressed or drowning victim in deep water in a pandemic context (COVID-19 protocols: use a training manikin, family member, etc.).
4. Demonstrate effective management of a submerged, non-breathing victim and perform 10 cycles of 30 compressions on a CPR manikin (COVID-19 protocols: use a training manikin, family member, etc.).

Where **Assistant Lifeguards² are employed for safety supervision, the number of Assistant Lifeguards on active swimmer safety surveillance (on deck) shall not exceed the number of National Lifeguards on deck.*

² Lifesaving Society - Assistant Lifeguard for Swimming Pools Standards 2020

Appendix B

Guidelines for In-Water Rescue

These guidelines apply to any water-related incident (e.g. distressed or drowning non-swimmer, spinal-injured victim, submerged victims, seizures, etc.). Use an alternative training and/or blended learning approach to train your returning staff. Prior to in-person training, use online learning for COVID-19 specific protocols developed to manage your facility and its operations. Follow your community guidelines that have been developed for restoring services.

In-water Rescue Procedures

Rescuers should consider the use of non-contact rescue where appropriate.

1. Prior to entering the water rescuers should remove any face coverings being worn.
2. For in-water rescuers, whenever possible, approach the victim in a manner to avoid face-to-face proximity.³
3. For all rescues, minimize the number of rescuers who have direct contact with victims.
4. Where possible, designate a staff member to take the lead during first aid and resuscitation. This allows in-water rescuers time to dry off and don PPE before they continue victim care.
5. At each focal point, provide a dry container including hand sanitizer and PPE for two (2) rescuers, a victim and a bystander.
6. After each rescue, all rescuers, victims and bystanders should practice hand hygiene, shower with soap, change their clothes, bag clothes worn during the rescue (to be washed).
7. Follow the disinfection protocols⁴ for all rescue equipment used by staff when providing care.

Assessment & Treatment

The following guidelines are COVID-19 adaptations of assessment and treatment actions to be performed in conjunction with specific interventions required by a victim's condition.

1. Scene & Risk Assessment
 - Ensure scene is safe
 - Minimize the number of rescuer contacts with victim (where possible maintain physical distancing of 2m)
 - Don appropriate PPE (protect self/partner/other responders)
 - Manage/mitigate any hazards/risks
 - Victim health history - COVID-19
 - Mechanism of Injury
 - Request additional resources as required
 - Continuous and dynamic scene assessment

³ International Liaison Committee on Resuscitation (ILCOR) COVID-19 Practical Guidance for Implementation

⁴ US Center for Disease Control and Prevention (CDC) - Cleaning and Disinfecting Your Facility - Everyday Steps, Steps When Someone is Sick, and Considerations for Employers.

<https://www.cdc.gov/coronavirus/2019-ncov/community/disinfecting-building-facility.html>

2. Primary Assessment

- ABCs
- EMS
- Treat for shock
- Preparing for transport

3. Secondary Assessment – (promote self-treatment or treatment by a family member)

- Vital signs
- History - Functional Inquiry
- Head-to-Toe Exam
- Treatment
- Victims who can walk to the ambulance or access point should be encouraged to do so to reduce the risk of COVID-19 transmission.

Respiratory Hygiene Measures for Victims

1. Offer a facemask/face-cover to all victims.
2. Ensure that all victims cover their nose and mouth with a tissue or elbow when coughing or sneezing.

First Aid for Children and Minors

1. Wherever possible initiate first aid for children and minors by asking parents or caregivers to provide aid.⁵
2. Provide appropriate PPE (ie. facemask/face cover and gloves for those providing aid and the victims).

⁵ Appendix D. COVID-19 First Aid and Resuscitation Protocols

Application of Guidelines

Below are some examples of how these guidelines may be applied. Rescuers should consider the use of non-contact rescues where appropriate. The First Aid designate is highlighted in **BLUE**.

<p>Example: 1 lifeguard* & trained backup e.g. trained back-up or Assistant Lifeguard</p>	<ol style="list-style-type: none"> 1. Lifeguard signals and enters water with rescue aid 2. Other staff providing backup clear the water, get equipment, don PPE⁶. 3. If needed - assists in victim removal 4. All Rescuers involved with victim care should dry off and don appropriate PPE before continuing victim care. 5. Provide face mask to victim during care. 6. If available, direct other facility staff or a bystander <ul style="list-style-type: none"> • to assist in complex rescues • to call EMS 7. Follow disinfection protocols post-rescue
<p>Example: 2 lifeguards* e.g. 2 LGs or 1 LG + 1 Assistant Lifeguard</p>	<ol style="list-style-type: none"> 1. Rescuer 1: Signals and enters water with rescue aid 2. Rescuer 2: Initiates clearing the water, provides backup, assists with victim removal <ul style="list-style-type: none"> • where not needed in the water, get equipment and don PPE. 3. All Rescuers involved with victim care should dry off and don appropriate PPE before continuing victim care. 4. Provide face mask to victim during care. 5. If available, direct other facility staff or a bystander <ul style="list-style-type: none"> • to assist in complex rescues • to call EMS 6. Follow disinfection protocols post-rescue
<p>Example: 3 (or more) lifeguards* e.g. 3 LGs or 2 LGs + 1 Assistant Lifeguard</p>	<ol style="list-style-type: none"> 1. Rescuer 1: Signals and enters water with rescue aid 2. Rescuer 2: initiates clearing the water, provides backup and assist with victim removal 3. Rescuer 3/First Aid Designate: upon removal assume primary victim care 4. All Rescuers involved with victim care should dry off and don appropriate PPE before continuing victim care. 5. Provide face mask to victim during care. 6. If available, direct other facility staff or a bystander <ul style="list-style-type: none"> • to assist in complex rescues • to call EMS 7. Follow disinfection protocols post-rescue

Where **Assistant Lifeguards⁷ are employed for safety supervision, the number of Assistant Lifeguards on active swimmer safety surveillance (on deck) shall not exceed the number of National Lifeguards on deck.*

⁶ Appendix E. COVID-19 Lifeguard Personal Protective Equipment

⁷ Lifesaving Society - Assistant Lifeguard for Swimming Pools Standards 2020

Appendix C

Protocols for Safety Education and Rule Enforcement

1. Use an alternative training and/or blended learning approach to train returning staff. Prior to in-person training use online learning for COVID-19 specific protocols developed to manage your facility and its operations.⁸
2. Practice physical distancing which may include wearing protective facemask/face-covering while providing safety education and rule enforcement.
3. Where possible and needed, designate a staff member to inform and educate the public concerning COVID-19 specific protocols.
4. Staff performing safety supervision should not be engaged in other duties.
5. An important reminder for staff is that when providing information and enforcing rules, not all patrons will be initially accepting of the new protocols for the facility.
6. All staff should be reminded of the need for sensitivity regarding policies concerning customer service as well as personal safety in regard to harassment in the workplace.

Application of Guidelines

Below are examples of how these guidelines may be applied.

1. Prior to entering the facility, inform and educate the public, parents and caregivers of all new admission requirements including health questions and their responsibilities regarding physical distancing from non-family members for all activities and facility amenities.
2. Inform and educate patrons concerning one-way traffic measures around the facility, such as, entering and exiting showers, change rooms or toilet facilities.
3. Inform and educate patrons on measures put in place to avoid crowd gathering and to encourage physical distancing in waiting lines for recreational equipment.
4. Inform and educate program participants about not sharing personal equipment such as water bottles, towels, goggles, etc.
5. Wherever possible, lifeguards should maintain physical distancing while providing effective and consistent rule enforcement and accident prevention.
6. Wherever possible, lifeguards should maintain physical distancing when providing information with other team members.
7. Lifeguards should follow and maintain new protocols concerning regular disinfection of common contact surfaces throughout the operational day⁹.

⁸ Aquatic Facility Information Bulletin – COVID-19 Facility Operations: Recommendations for Progressive Reopening

⁹ COVID-19 Aquatic Facility Maintenance: Cleaning, Decontamination and Safe Water Management for Aquatic Facilities.

Appendix D. First Aid and Resuscitation Guidelines for COVID-19

Principles of Mitigating Risk of Infection When Administering First Aid and Resuscitation

The purpose of this section is to assist lifeguards in assessing risk at each step of the rescue process. These principles do not replace lifeguard skills acquired in Standard First Aid. They provide supplemental considerations for use throughout the process to assist in mitigating risk.

- SCENE ASSESSMENT
 - Maintain physical distancing (2m) whenever possible.
 - Collect information about the health status of the victim with regard to COVID-19.
 - It is important to pass this information on to EMS, allowing them to provide optimal treatment to the victim.
 - This information may be obtained from the victim, the victim's caregiver, bystanders, etc.
 - Determining the victim's health status and COVID-19 infection can be accomplished by asking common questions.
- PRIMARY ASSESSMENT
 - Maintain physical distancing (2m) whenever possible.
 - Determine if the victim's condition requires the lifeguard to make direct contact with the victim. (For clarity on 'no contact' as compared to 'direct contact' first aid treatment, see [Decision Tree for First Aid During a COVID-19 Era, pg. 45.](#))
 - Alternative options may include a victim's caregiver or family member administering first aid treatment with lifeguard direction (i.e. direct pressure to a wound, cleaning and bandaging, providing ventilation when resuscitation is required, etc.)
 - Don the PPE appropriate to the level of victim contact and first aid treatment required. Both rescuer & victim should don PPE. (For level of PPE required, See [Appendix E. Personal Protective Equipment, pg. 46.](#))
 - When victim history indicates positive or suspected COVID-19, inform EMS.
 - Regardless of direct or indirect contact, proper hand hygiene is important following all first aid treatment.
 - Proper hand hygiene includes washing with soap and water or hand sanitizer (70% alcohol or higher) for 20 seconds.
- SECONDARY ASSESSMENT
 - Maintain physical distancing (2m) whenever possible.
 - Only take vital signs that can be observed from a distance (i.e., skin colour, visual breathing check) or are required for victim treatment decisions (i.e., skin temp of a possible heat stroke victim).
- POST RESCUE PROCESS
 - Take care to remove and dispose of PPE in a safe manner.
 - Disinfect all surfaces that may have come in contact with the victim or rescuer during treatment (i.e. chair, clipboard, pen, etc.).
 - Where required, practice personal decontamination
 - For clarity regarding first aid disinfection protocols, see [COVID 19 Aquatic Facility Maintenance: Cleaning, decontamination, and safe water management of aquatic facilities, pg. 48.](#)

Levels of Risk and Personal Protective Equipment (PPE)

Due to the nature of COVID-19 as an aerosol transmitted pathogen, first aid protocols have been categorized into low-risk and high-risk categories. High-risk protocols include all treatments that generate aerosols, while protocols that do not generate aerosols fall under the low-risk category. Rescuers don PPE in accordance with the level of risk they encounter.

Identified high-risk (aerosol-generating) protocols are as follows:

- Chest compressions
- Ventilations
- High-flow oxygen administration (greater than 5 lpm)
- Suction
- Abdominal thrusts/back blows

All rescuers within 2 metres of the victim must don appropriate PPE for high-risk protocols. (For clarity on when to use PPE, see [Appendix E: Lifeguard Personal Protective Equipment, pg. 46.](#))

Oxygen

The use of high flow oxygen is considered high-risk as it generates aerosols and therefore should be reserved for:

- Victims in need of resuscitation
- Children and infant victims
- Drowning victims

Suction

The use of suction is considered high-risk as it generates aerosols. Clearing an airway using suction is not recommended at this time. Instead, roll the victim to allow drainage and utilize a finger sweep (with proper PPE) if required.

Itemized List of Personal Protective Equipment for Lifeguards

Most PPE components come in different sizes and it is important to stress that PPE does not follow a one-size-fits-all principle. A proper PPE fit is essential to obtain protection; a non-suitable size will not protect its wearer. Employers must ensure that PPE is available in proper sizes, is clean, workers are trained on its use, fit testing where required, and workers follow established protocols for its use.

Respiratory Protection - N95 or surgical mask

- **N95 Mask (non-valve):** reduce transmission of aerosol by 70%, protects from contracting aerosol route infection from others by 99%. N95 masks must be NIOSH approved and CE certified. Due to lack of availability of N95 masks, fit tested surgical masks can be worn to reduce risk. N95 masks must be dry to be effective.
- **Surgical Mask (3-layered):** reduces transmission of aerosol by 50% and protects from contracting aerosol route infection from others by 75%-80%. Surgical masks must be dry to be effective.

Mask & face coverings are prohibited in the water for lifeguards and patrons at all times.

Eye Protection – Where possible, face shields or personal protective goggles may be used. Both face shields and personal protective goggles prevent virus exposure of the eye mucosa. Protective goggles must fit the user's facial features and be compatible with the respiratory protection. Corrective lenses or safety glasses do not provide adequate protection. Protective eyewear may be reused once disinfected.

Hand Protection - Non-latex medical exam gloves should be used. Practice hand hygiene after gloves are removed.

Body Protection – Where possible, long-sleeved water-resistant gowns should be used to prevent body contamination. If water-resistant gowns are not available, remove and launder all clothing once treatment is finished. For both options, practice personal hygiene following use.

Bag-valve-mask with viral filter (e.g. HEPA): The viral filter or high-efficiency particulate air (HEPA) filter minimizes the risk of virus spread during ventilations. Viral filters must remain in their original packaging and be dry to be effective.

Pocket Mask with a viral filter (e.g. HEPA): The viral filter or high-efficiency particulate air (HEPA) filter minimizes the risk of virus spread during ventilations. Viral filters must remain in their original packaging and be dry to be effective.

Keeping Personal Protective Equipment Organized, Clean and Dry

As certain PPE (such as masks) must remain dry to be effective, it is strongly recommended that protocols that address PPE storage be added to facility safety plans.

Examples

Each lifeguard will have first contact PPE on their person including gloves and 2 surgical masks. The gloves and surgical masks may be kept in a resealable zip-top bag to avoid getting wet.

Each focal point will have a dry storage container that includes PPE for 2 rescuers and a bystander, resuscitation equipment (BVM with viral filter, etc.), hand sanitizer and disinfection wipes.

Personal Protective Equipment Disinfection

Proper disposal of single-use equipment and proper disinfection of reusable equipment is necessary for ensuring the safety of both staff and patrons. For proper disinfection of reusable equipment, see manufacturer's specifications. Where no specifications exist, the following ratios are recommended.

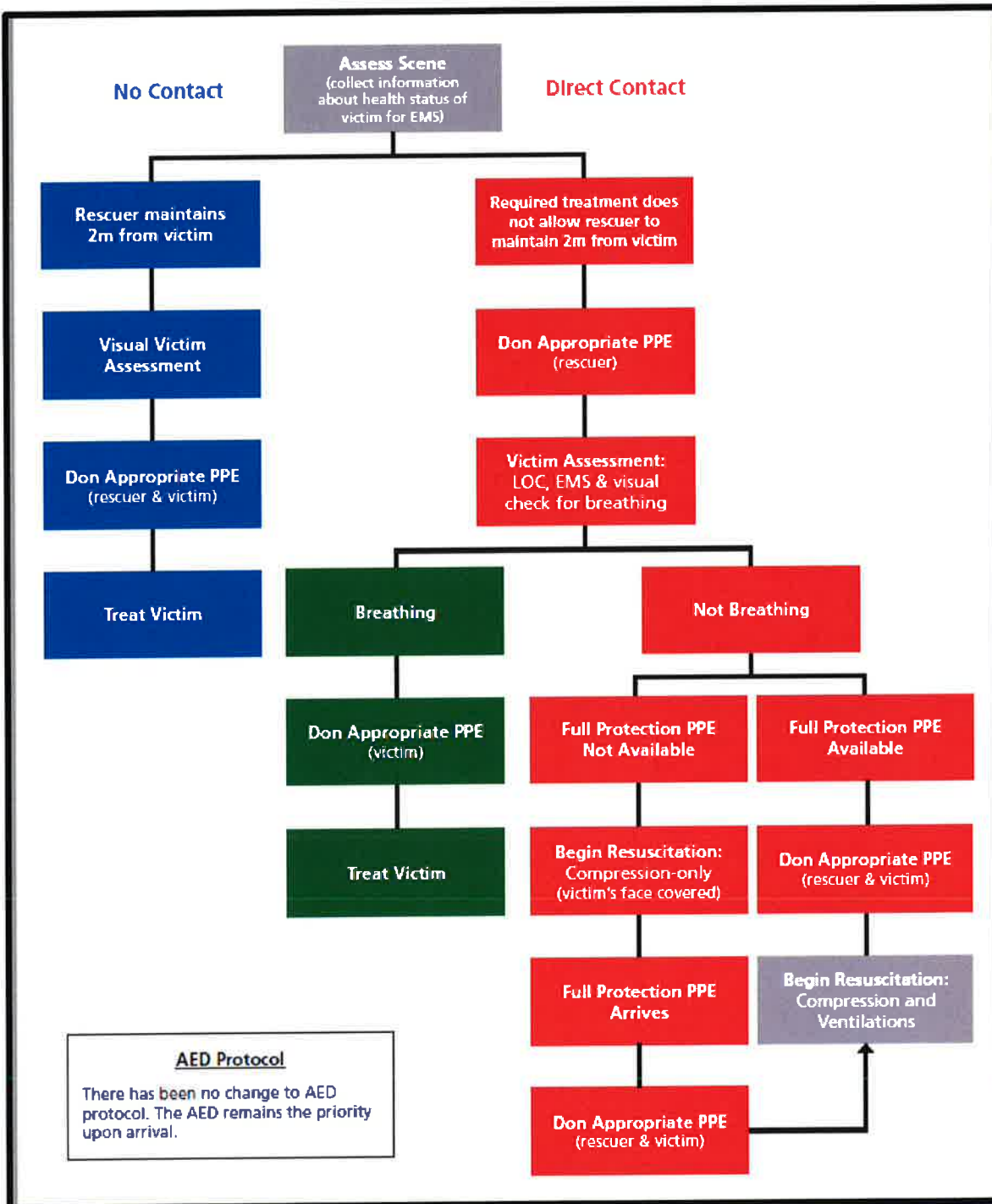
The Centres for Disease Control and Prevention (CDC) recommend a 1:10 dilution ratio for household bleach, or a 1:20 ratio for commercial sodium hypochlorite solution to disinfect PPE, then let air dry. Typically, 1 to 10 minutes contact time is recommended.

For full disinfection recommendations [COVID-19: Cleaning, Decontamination and Safe Water Management of Aquatic Facilities, pg. 48.](#)

Resuscitation When Ventilations are Recommended

(See [Resuscitation and First Aid Recommendations, pg. 29](#))

COVID-19 Decision Tree For First Aid & Resuscitation



APPENDIX E. LIFEGUARD PERSONAL PROTECTIVE EQUIPMENT

NO CONTACT	DIRECT CONTACT	
<p>2m physical distancing is maintained between the rescuer and victim</p>	<p>LOW-RISK Non-aerosol-generating treatment</p> <p>2m physical distancing will compromise victim outcome</p>	<p>HIGH-RISK Aerosol-generating treatment</p> <p>2m physical distancing will compromise victim outcome</p>
<p>RESCUER: face shield/goggles, gloves, surgical mask</p> <p>VICTIM: surgical mask</p>	<p>RESCUER: face shield/goggles, gloves, surgical mask</p> <p>VICTIM: surgical mask</p>	<p>RESCUER: face shield/goggles, gloves, N95/surgical mask, gown</p> <p>VICTIM: (in order of preference) BVM with viral filter & continuous seal OR Pocket mask with viral filter & continuous seal OR Non-rebreather face mask with supplemental oxygen and open airway OR Pocket mask with viral filter and tight head strap (single-rescuer only) OR Surgical mask (compression-only CPR)</p>

References

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13. European Resuscitation Council COVID-19 Guidelines APRIL 24, 2020
14. Emergency Cardiovascular Care Committee and Get with the Guidelines®-Resuscitation Adult and Pediatric Task Forces of the American Heart Association. *Interim Guidance for Life Support for COVID-19*: Web: April 11, 2020.
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Training Program Guidelines

These recommendations do not replace the evaluation criteria for your current instructional programs. The purpose of these recommendations and strategies is to adapt programming to physical distancing, personal contact restrictions, recommended hygiene protocols, and restricted ratio requirements, to reduce the risk of transmission of the COVID-19 virus.

These recommendations provide guidance to owners and operators of aquatic facilities when providing staff training to their teams. The primary concern should be to minimize the risk of transmission of COVID-19 and ensure the safety of employees and the public. After an extended period of absence from work, aquatic staff must be ready to provide effective safety supervision and instruction to participants in aquatic activities, and to adhere to changes to their instruction protocols and use of equipment.

Recommendations

1. Follow guidelines provided by the provincial/territorial public health authorities in your area to assist in developing your plan for restoring services. Guidelines concerning physical distancing, hand hygiene and respiratory etiquette, cleaning and disinfection procedures and mandatory Personal Protective Equipment (PPE) may influence the number of participants in each course.
2. Implement screening protocols that include questions concerning the health of participants, and that are COVID-19 specific. Turn away candidates and staff who are ill or have signs and symptoms of the coronavirus or who were exposed to someone with COVID-19 within the last 14 days.
3. Post signage about how to prevent the spread of COVID-19 including to notify the public that participants with symptoms will be excluded from participation in programs. This may help to encourage behaviours that prevent the spread of COVID-19 including physical distancing and personal hygiene.
4. Use an alternative training and/or blended learning approach to train returning and new instructional staff. Blended learning is a combination of online learning and in-person learning.
 - Prior to in-person training, use on-line learning for COVID-19 specific protocols developed to manage your facility and its operations.
 - Branches may require preapproval of plans for blended learning for lifesaving programs.
5. Phase in aquatic programs and services starting with staff training followed by:
 - high-performance swimmers and leadership programs
 - drop-in programs such as lane and family swims
 - aquatic fitness programs
 - and then progressively introducing learn to swim instructional programs
6. In-person staff training should be organized with appropriate physical distancing measures and may impact the number of participants in each training session.
 - Instruct staff to maintain physical distance during training, promote the washing of hands regularly before, during and after training, and after using equipment, and promote respiratory etiquette.

7. Create a safe instructional space on your deck, dock or on the beach. Methods to achieve these safe spaces may include:
 - Designating 2-metre diameter individual zones with barriers, pylons, stanchions or non-slip waterproof tape.
 - Setting up signage with directional arrows to control traffic flow. Use waterproof markers, peel and stick or stepping stones to maintain physical distancing, to direct participants and to avoid restricted areas.
 - Dividing the pool or waterfront designated swim area with lane lines or buoy lines.
 - Instructors rotating their participants through zones as required for skills, fitness sprint or endurance swimming and rescues.
 - Providing sufficient space for swimming, such as up one lane and down the next or individual lanes for lap swimming.
8. Consider adjusting the safety supervision guidelines for lifeguarding during swimming lessons.
 - If candidates are spread out more than usual to accommodate physical distancing, it may be difficult to provide adequate safety supervision if the instructor is also functioning as the lifeguard for their class.
9. To avoid the potential of virus transferring through use of learning aids, Instructors will need to assign learning aids to each candidate (e.g. CPR manikins, kickboards, lifejackets, rescue equipment or toys).
 - Learning aids could be numbered to avoid cross contamination.
 - Ensure the learning aids are cleaned and disinfected between users.
 - Candidates should be encouraged to bring their own learning aids such as kickboards, lifejackets, and pocket masks.
10. If household members such as a caregiver, guardians or sibling are aiding with skills that may require direct contact, such as rescues, or assisting with participant support for primary level classes, ensure they are screened for their swimming ability and properly trained in behaviours that prevent the spread of COVID-19.
11. Only use learning aids and specialty equipment where required by a skill.
 - Where possible Instructors should follow physical distancing guidelines and use of Personal Protective Equipment (PPE) while teaching such as face coverings, gloves and other protective clothing as required.
 - Participants must be instructed to safely put on and remove PPE.

Strategies

Owner/operators should follow these stages when planning for the reintroduction of lesson programming in aquatic facilities. Instructional safety, risk management principles, and learner characteristics have informed the development of 4 Stages of instructional programs. These recommendations promote a safe introduction of instructional programs that reflect additional resources and protocols that need to be in place.

Owner/operators should continue to evaluate the risk of COVID-19 transmission introduced at each stage, taking into consideration local conditions, the capacity of your facility, and the ability of staff to manage the programs safely.

This chart was developed to provide guidance concerning the timing of the addition of programs in your facility schedule and the training of instructional staff.

Stage 1 Staff Training	Staff (Lifeguards, Instructors, Examiners, Trainers, Coaches, Officials, Safety Management) These candidates are leaders and can follow physical distancing measures.
Stage 2 Public Access	First Aid, National Lifeguards and Instructors These candidates have a relatively high level of comprehension, learning capacity, understanding of the Lifesaving Society, are familiar with the acquisition of skills and can follow behaviours that prevent the spread of COVID-19 including physical distancing measures. High-performance Swimmers These participants have a high level of skill and ability to follow physical distancing measures.
Stage 3 Public Access	Canadian Swim Patrol and Bronze Medals Under supervision of a Lifesaving Instructor, these candidates are more independent, take direction readily, and can follow behaviors that prevent the spread of COVID-19 including physical distancing measures.
Stage 4 Public Access	Learn to Swim - Developing Swimmers (LS Level 3 or above) Under the supervision of a Swim instructor, these candidates are comfortable in deep water; require a high level of supervision, direct instruction, monitoring and guidance. They can be provided indirect contact with physically distant assistance. Learn to Swim – Preschool and School-aged LS Levels 1-2 Candidates are less competent in the water and need constant supervision, often requiring direct contact for safety and usually designated to shallow water.

Stage 1: Blended learning and fully online opportunities for content delivery

- Options available for participants to avoid transmission, small groups.
- Competent to highly skilled swimmers, ability of participants to self regulate distance measures while in the facility.

Staff training of Lifeguards and Instructors, advanced or vocational levels such as, Examiners, Trainers, Coaches, Officials, and Safety Management courses.

- A blended learning approach could be used for the higher-level lifesaving programs where theory, knowledge and concepts are learned. Some Branches require pre-approval of plans for blended learning, consult your Branch before going forward.

Stage 2: Specialty or vocational such as First Aid and National Lifeguard

- A classroom setting can be appropriate for some topics and skills while using physical distancing principles and smaller ratios. Blended learning approaches can be appropriate for theory, knowledge, and concepts. Check your provincial/territorial public health authorities and community guidelines for details.
- Candidates can demonstrate in-person assessment, rescue skills and treatment of victims using a CPR or rescue manikin or in partners with a household member. Demonstration of assessment may be interactive online with an Instructor. Instructors may need to provide candidates during real time feedback to show different angles of skills for online demonstrations.
- Use of oral quizzes or questioning can be an effective learning tool for knowledge items.
- Lifeguard skills and rescues can be performed on a CPR or rescue manikin or a household member. CPR is demonstrated on a CPR manikin with disposable lungs and AED Trainer using disposable gloves, mouth to mask (pocket mask) or Bag Valve Mask (BVM) with viral filter, etc.
- Candidates will need to learn how to safely don and remove PPE such disposable gloves, mask, face shield or goggles, gowns, aprons, or other protective clothing.
- Instructors will need to be innovative when teaching first aid due to the various props, learning aids and supplies such as treatment for bleeding, and injuries needing gauze, bandages, splints, ice packs, sugar (glucose tablets, candy, fructose juice drinks), etc.
- Another strategy for teaching rescues and situations is to allow simulation by candidates for recognition but switch with a rescue manikin for intervention if a member of the rescuer's household is not available. Once the rescue manikin is removed from the water, then don PPE.

Stage 3

- Opportunity to offer some blended learning
- Competent swimmers, small groups, ability to self regulate in the facility.
- Skills that require direct guidance from instructors, some transmission risk involved when learning new skills that involve contact.

Lifesaving Levels such as Canadian Swim Patrol & Bronze Medals

- Candidates can practice independently for short periods of time but require constant monitoring to ensure physical distancing and safe use of equipment.
- Classroom settings can be appropriate for some topics and skills while using physical distancing principles and smaller ratios.
- Blended learning approaches can also be appropriate for theory and knowledge, items.
- Rescue equipment and learning aids used in these levels require disinfection according to local protocols. This would include such items as weighted objects, buoyant aids, lines, rescue aids, CPR Manikins, AED Trainers, first aid supplies, and barrier devices.

- To avoid physical contact and the potential to spread COVID-19, use a rescue manikin for removals, submerged victim recovery, tows, carries and resuscitation.
- Household members can be utilized for partners during first aid scenarios and contact skills and rescues.

Stage 4

- These programs are based on in-water skill acquisition.
- Range of swimming skills from intermediate swimmers comfortable in deep water to non-swimmers.
- Young children must be assisted in the change rooms and supervised on deck and near the water, guided to perform personal hygiene and importantly not able to self regulate distance measures in the facility.

Learn-to-Swim, higher level such as Lifesaving Swimmer 3+

- Closely supervise candidates in Stage 4 to ensure they maintain physical distancing while practicing their skills. Demonstrations, explanations, and practice will be more challenging. Select formations that will allow physical distancing.
- Divide the pool into zones for stations. Lanes can be set up for sprints and endurance swimming up one lane and down the next. Candidates in these levels will need to be directed to safe zones for practicing their skills and strokes.

Learn to Swim, lower levels such as Parent and Tot, Preschool, Lifesaving Swimmer 1-2, and Water Smart education sessions or demonstrations)

- Candidates in Stage 4 require direct supervision and physical contact during instruction. Consider utilizing a household member such as a caregiver, guardian, or sibling to aid in-water support.
- Instructors should select teaching methods and formations to ensure candidate safety and physical distancing requirements.
- Use learning aids only if required. Provide learning aids for each participant. Clean and disinfect learning aids between each user.
- Consider Family Group lessons as an option to provide multilevel teaching within a family unit. Family members can provide direct contact assistance when required to assist participants in developing new skills.

COVID-19 - Aquatic Facility Maintenance Cleaning, Decontamination and Safe Water Management of Aquatic Facilities

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Background

Coronaviruses are a large family of viruses; some cause illness in people and others cause illness in animals. Human coronaviruses are common and typically associated with mild illnesses like the common cold. COVID-19 is a new disease that has not been previously identified in humans. Rarely, animal coronaviruses can infect people, and more rarely, these can then spread from person to person through close contact.

Surfaces frequently touched with hands are most likely to be contaminated. These include doorknobs, handrails, elevator buttons, light switches, cabinet handles, faucet handles, tables, countertops and electronics.

The virus responsible for COVID-19 survives for a certain time (a few hours to several days) on various surfaces but is easily eliminated by most regular cleaners and disinfectants.

It is important to ensure that the product has sufficient contact time with the surface to be disinfected, typically specified by the product manufacturer.

COVID-19 is a serious health threat and the situation is evolving daily. The risk will vary between and within communities, but given the increasing number of cases in Canada, the risk to Canadians is considered high. This does not mean that all Canadians will get the disease, it means that there is already a significant impact on our health care system.

The Lifesaving Society will continue to monitor the best available evidence as the situation evolves.

Implementation

The Government of Canada and the United States Center for Disease Control have created several online resources that will guide owner/operators in the cleaning and disinfection of aquatic facilities. Owner/operators should check these sites for the most current recommendations. The guidance provided in these resources on the cleaning and disinfection of public areas is aimed at limiting the survival of COVID-19. These recommendations will be updated if additional information becomes available.

These guidelines focus on community, non-healthcare facilities such as schools, institutions of higher education, recreation centres, offices, daycare centres, businesses and community centres that do not house people overnight.

Cleaning and Disinfecting Public Spaces

Personal Protection

The first step in addressing this virus is the personal protection of staff responsible for cleaning aquatic facilities. These individuals must be provided with adequate Personal Protective Equipment (PPE). In addition, they must practice personal hand hygiene.

The risk of exposure to cleaning staff is inherently low, however cleaning staff should wear disposable gloves and gowns for all tasks in the cleaning process, including handling trash.

Employers should develop policies for worker protection and provide training to all cleaning staff on site prior to assigning cleaning tasks. Training should include when to use PPE, what PPE is necessary, how to properly don (put on), use, and doff (take off) PPE and how to properly dispose of PPE.

In addition:

- Gloves and gowns should be compatible with the disinfectant products being used.
- Additional PPE such as masks, goggles or face shields may be required based on the cleaning/disinfectant products being used and whether there is a risk of splash.
- Gloves and gowns should be removed carefully to avoid contamination of the wearer and the surrounding area. Be sure to wash hands after removing gloves.
- If gowns are not available, coveralls, aprons or work uniforms can be worn during cleaning and disinfecting. Reusable (washable) clothing should be laundered after each use. Hands should be washed after handling dirty laundry. If soap and water are not available and hands are not visibly dirty, an alcohol-based hand sanitizer that contains at least 60% alcohol may be used.
- Follow normal preventative actions and avoiding touching eyes, nose or mouth with unwashed hands.
- Additional key times to clean hands include:
 - After blowing one's nose, coughing, or sneezing
 - After using the restroom
 - Before eating or preparing food
 - After contact with animals or pets
 - Before and after providing routine care for another person who needs assistance such as a child
- The use of a spray should be avoided if possible, in order to limit the formation of aerosol of disinfectant product which can be inhaled and thus irritate the respiratory tract. If such a spray bottle is used, adjust it to a large spray.

Where to Clean

Surfaces frequently touched by hands are most likely to be contaminated. These include doorknobs, handrails, elevator buttons, light switches, cabinet handles, faucet handles, tables, countertops and electronics. These areas are therefore high priority cleaning areas within the facility. It is not yet known how long the virus causing COVID-19 lives on surfaces, however, early evidence suggests it can live on objects and surfaces from a few hours to days.

A detailed cleaning schedule should be created which would include where, what and frequency of cleaning. Log sheets should be posted and completed each time cleaning occurs.

Cleaning Products

When cleaning public spaces, choose products that clean and disinfect at the same time (e.g. premixed store-bought disinfectant cleaning solutions and/or wipes when available). Cleaning products remove germs dirt, and impurities from surfaces by using soap (or detergent) and water. Cleaning does not necessarily kill germs, but by removing them, it lowers their numbers and the risk of spreading infection. Disinfecting products kill germs on surfaces using chemicals.

Use only approved hard-surface disinfectants that have a Drug Identification Number (DIN). Drug Identification Number (DIN) is a computer-generated eight-digit number assigned by Health Canada to a drug product prior to being marketed in Canada. It uniquely identifies all drug products sold in a dosage form in Canada and is located on the label of prescriptions and over-the-counter drug products that have been evaluated and authorized for sale in Canada. Employers must ensure workers are trained on the hazards of the cleaning chemicals used in the workplace.

A DIN uniquely identifies the following product characteristics: manufacturer, product name, active ingredient(s), strength(s) of active ingredient(s), pharmaceutical form, route of administration.

Create a Cleaning Procedure

Operators of aquatic facilities should develop or review protocols and procedures for cleaning their facility. This will help determine where improvements or additional cleaning may be needed. Manufacturer's instructions for safe use of cleaning and disinfection products (e.g. wear gloves, use in well-ventilated area, allow enough contact time for disinfectant to kill germs based on the product being used) should be reviewed and appropriate products should be selected for use by staff. Employers should work with their local health units to ensure appropriate local protocols and guidelines, such as updated/additional guidance for cleaning and disinfection, are followed.

When setting up procedures, staff should:

- use damp cleaning methods such as damp clean cloths, and/or a wet mop. Do not dust or sweep as it can distribute virus droplets into the air.
- Place contaminated disposable cleaning items (e.g. mop heads, cloths) in a lined garbage bin before disposing of them with regular waste. Reusable cleaning items can be washed using regular laundry soap and hot water (60-90°C). Clean and disinfect surfaces that people touch often.

In addition to routine cleaning, surfaces that are frequently touched with hands should be cleaned and disinfected more often, as well as when visibly dirty. Shared spaces such as kitchens and bathrooms should also be cleaned more often.

In public places, where people touch common surfaces, cleaning should be done at least daily and if possible, even more frequently e.g. every 2 or 4 hours. (Finnish Institute of Occupational Health, 2020)

In summary, procedures should:

- Encourage your staff or community members to protect their personal health
- Be reinforced through the posting of signs and symptoms of COVID-19: fever, cough, shortness of breath, etc.
- Ensure surfaces that are frequently touched – such as shared desks, countertops, kitchen areas, electronics and doorknobs are more frequently cleaned.

Cleaning and Disinfecting:

Rescue Equipment (rescue tube, rescue can, rescue pole, ring buoys)

- Clean and disinfect rescue equipment at the end of the day or during an exchange between lifeguards
- After cleaning, leave the rescue equipment immersed in the water during disinfection

Training Accessories and Recreational Toys and Games:

- Clean and disinfect training accessories after use by a bather or daily
- After cleaning, leave the rescue equipment immersed in the water during disinfection and store to dry overnight

Personal Flotation Devices (PFDs):

- Clean and disinfect PFDs after use by a bather or daily
- After cleaning, leave PFD immersed in the water during disinfection and store to dry overnight

Deck Equipment

- Clean and disinfect all surfaces of deck equipment that are frequently touched with hands at least daily

Toilets

Toilets require careful cleaning instructions. Typically, carefully planned aseptic work instructions do not need to be changed according to these instructions. However, it is essential to note that viruses are spread through feces and that cleaning a toilet bowl may create small droplets which could pose a risk to staff.

An good example of cleaning instructions is available from the Finnish Institute for Occupational Health – [Cleaning Guidelines for the Prevention of COVID-19 Infections](#)

Safe Water Management

The management of safe water is imperative during viral outbreaks like COVID-19. We know through the work of the United States Centers for Disease Control and Prevention that:

“There is no evidence that COVID-19 can be spread to humans through the water. Proper operation, maintenance, and disinfection (with chlorine or bromine) of pools should kill COVID-19.”

To ensure the disease is killed in swimming pool water, aquatic facility operators should ensure water testing takes place as required by regulation or more frequently if required by protocols established by the facility.

Owner/operators should ensure their swimming pool water testing meets or exceeds the requirement of the Regulation or Guidelines.

Chlorine/bromine

Free Available Chlorine (FAC) levels should be carefully maintained at levels recommended by regulation or provincial guidelines. Operators may choose to enhance disinfection levels by raising levels above minimum until the COVID-19 virus is no longer present in the community.

Other tests

The control of other variables in the swimming pool water will ensure disinfection is effective. Careful monitoring of pH, Total Alkalinity, Calcium Hardness and Cyanuric Acid levels will enhance water quality.

References

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