COVID-19 SAFETY PLAN

TFM
CONSULTANTS INTERNATIONAL

Contents

APPENDICES

1.0 INTRODUCTION

TFM is releasing this COVID-19 Safety Plan to help guide and keep our students, staff and visitors safe as we return to various forms of programming. These important guidelines apply to all forms of learning and work. This also covers operational and administrative spaces as well as common areas across our facility.

The Safety Plan covers:

- TFM and all community members' regulatory responsibilities and best practices;
- Best practices issued by the provincial government to mitigate and manage transmission of COVID-19 individually and operationally; and
- Return to Class Programs and Protocols.

We will update this plan as WorkSafeBC, Provincial Health Officer, and other regulatory guidelines evolve and emerge to ensure we remain current and are doing all we can to protect and inform our community.

The COVID-19 pandemic is dynamic, and this document is subject to change as new information becomes available.

The overall objectives of the Covid-19 Safety Plan are:

1. To provide a safe environment for building staff, students, and visitors.
2. Minimize the risk of spreading the virus.
3. Provide key communication to help staff, students, and visitors understand their responsibility in controlling the spread of SARS-CoV-2.

2.0 BACKGROUND

TFM site consist of various separate areas including an administration office, classrooms, washrooms, and a training-shop. The Safety Plan identifies areas and activities that will take place within the TFM sites that may result in the spread of SARS-CoV-2 upon reconvening in-classroom instructional activities, or required services, and provides practical solutions to managing the risks of exposure.

There is currently no vaccine to protect against SARS-CoV-2 and the potential for populations to develop herd immunity is unknown. Thus, risks of viral exposure and infection cannot be reduced to negligible levels via those routes. As such, the best means of preventing infection is to manage the most likely (i.e., "high risk") modes of viral transmission.

The primary route of SARS-CoV-2 transmission is through the inhalation of respiratory droplets, or close, direct contact with infected humans. COVID-19 is an enveloped virus, meaning that it does not survive well outside of a living cell. Currently, available information indicates that genetic material from SARS- CoV-2 can be isolated from surfaces from 48 hours to nine days after exposure to the virus. However, these tests do not confirm the presence of viable, infectious virus. Information around the duration of viability on surfaces is constantly evolving but in the absence of confirmed evidence many have assumed that high-touch surfaces can be a fomite for transmission. Some studies suggest that intense coughing or sneezing can produce aerosols which can then travel in indoor environments for tens of metres, or through heating, ventilation, and air conditioning (HVAC) systems (Morawska and Cao, 2020; Prather, Wang and Schooley, 2020.) However, the current position of the World Health Organization (WHO, 2020) is that, although there are indications of possible airborne transmission of SARS-CoV-2, it does not appear to be a significant means of viral spread.

In prioritizing the selection of risk management control measures, the Safety Plan considers the chances of severe illness upon infection with SARS-CoV-2, which are particularly high for at-risk groups such as the elderly and those with weakened immune systems.

3.0 REGULATORY RESPONSIBILITIES AND BEST PRACTICE GUIDELINES

3.1 Regulatory Requirements

This Plan will assist in complying with the following regulatory responsibilities:

- Provincial Occupational Health and Safety Acts and Regulations, including the following public health orders applicable to TFM operations:
  - Mass Gatherings (May 22, 2020)
  - Workplace Safety Plans (May 14, 2020)
  - Travellers and Employers (April 14, 2020)
- WorkSafeBC COVID-19 and returning to safe operations, Phases 2 & 3 https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe- operation

3.2 Roles and Responsibilities

3.2.1 TFM CEO

- Support the review and implementation of risk control measures implemented in their department areas;
- Support training for staff in duties and responsibilities under the Safety Plan;
- Communicate with staff on steps being taken and guidelines to adhere to; and
- Provide notification of any known COVID-19 infections currently impacting the area.
- Establish and maintain the Safety Plan;
- Provide advisory resources for preventing and reducing transmission of pandemics; and
- Develop a process to ensure safety equipment is readily available.

3.2.2 TFM Staff

- Communicate with staff, and/or students and visitors on steps being taken and guidelines to adhere to;
- Provide notification the CEO of any known COVID-19 infections currently impacting their area; and
- Conform to recommendations in this document and comply to building and program specific approved recommendations accordingly.
- Provide support and resources for cleaning, disinfecting, hand washing, and hand sanitizing protocols;
- Ensuring waste disposal and cleaning protocols are completed as per procedures outlined in this plan;

- Ensure maintenance and repairs are conducted on Heating Ventilation and Air Conditioning Units (HVAC) to ensure optimal performance; and
- Coordinate indoor air quality assessments as required.
- Do not access TFM facilities unless permitted, based on instructional, or work activity needs;
- Comply with COVID-19 specific policies and procedures put in place by TFM to minimize physical contact and reduce the transmission of SARS-CoV-2; and
- Comply with signage, and other access restrictions and utilize best hygiene to minimize the risk of viral infection and/or spread.

3.2.3 TFM Students

- Complete a COVID-19 Self-Assessment prior to accessing TFM facilities;
- Complete a Covid-19 Waiver Claim Form;
- Do not access TFM facilities unless permitted based on instructional needs;
- Comply with COVID-19 specific procedures put in place by TFM to minimize physical contact and reduce the transmission of SARS-CoV-2;
- Comply with signage, other access restrictions and utilize best hygiene practices to minimize the risk of viral infection and/or spread.

3.2.4 TFM Visitors

- Complete a COVID-19 Self-Assessment prior to accessing TFM facilities;
- Complete a Covid-19 Waiver Claim Form;
- Do not access TFM facilities unless permitted and authorized;
- Comply with COVID-19 specific procedures put in place by TFM to minimize physical contact and reduce the transmission of SARS-CoV-2; and
- Comply with signage, other access restrictions and utilize best hygiene practices to minimize the risk of viral infection and/or spread.

3.3 Codes of Good Practice

The Safety Plan take into consideration the advice of the following sources for codes of practice and professional guidelines including, *COVID-19: Going Forward*, prepared by the British Columbia Ministry of Health.

- BC's Restart Plan, Province of British Columbia, https://www2.gov.bc.ca/gov/content/safety/emergency-preparedness-response- recovery/covid-19-provincial-support/bc-restart-plan
- Community-based Measures to Mitigate the Spread of Coronavirus Disease (COVID-19) in Canada, Health Canada, https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/public- health-measures-mitigate-covid-19.html
- Coronavirus COVID-19: Cleaning and Disinfectants for Public Settings, British Columbia Ministry of Health, http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf
- Coronavirus Disease (COVID-19): Outbreak Update, Government of Canada, https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus- infection.html
- COVID-19 (Novel Coronavirus,) BC PHO, 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
- COVID-19 and Returning to Safe Operations, WorkSafeBC, https://www.worksafebc.com/en/about-us/covid-19-updates/covid-19-returning-safe- operation
- BC COVID-19: Go-Forward Management Strategy, British Columbia Ministry of Health. 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_goforward_management_strategy_web.pdf
- Guidance for Building Operations During the COVID-19 Pandemic, American Society of Heating Refrigerating and Air-Conditioning Engineers (ASHRAE,) https://www.ashrae.org/news/ashraejournal/guidance-for-building-operations-during-the- covid-19-pandemic
- How it Spreads, British Columbia Centre for Disease Control, http://www.bccdc.ca/health- info/diseases-conditions/covid-19/about-covid-19/how-it-spreads

- Preliminary Report for Restoration Contractors Assisting Clients with COVID-19 Concerns, Institute of Inspection Cleaning and Restoration Certification (IICRC,) https://cdn.ymaws.com/www.restorationindustry.org/resource/resmgr/RIA_Preliminary_R eport_for_R.pdf
- World Health Organization (WHO,) 2020. Transmission of SARS-CoV-2: Implications for Infection Prevention Precautions. Scientific Brief. 9 July 2020.

4.0 RISK ASSESSMENT

4.1 Risk Based Approach

The risk assessment process is used to determine the probability/likelihood of exposure to a particular hazard resulting in an adverse outcome (in this case transmission of the SARS-CoV-2 virus) resulting in infection and illness. The probability of exposure is dependent on there being a route of exposure, or transmission, and any exposure is assumed to result in illness. Thus, one cannot completely eliminate risks without removing either the hazard or exposure route. This can be done by extreme measures, which in the case of COVID-19, may not be practical or practicable, particularly when dealing with an operating educational institution or the public. In addition, the reality is that, even where practicable, it is unlikely that any mitigation measure will completely eliminate the risks associated with COVID-19. Even when there is a vaccine, or herd immunity has been established, there will always remain some probability, or "chance" of viral transmission, as populations resume normal activities such as going to work, school, shopping, etc. As such, the intent of the risk assessment is to identify the areas of highest transmission risk in a specific area or scenario, and the most practical solutions to reduce risks to within the tolerance limit of TFM. That is, the intent is to reduce the probability of viral infection for each individual within the building by applying mitigation measures that meet TFM's preferred balance between risk tolerance, cost, and practicality.

This risk assessment follows a Public Health Risk Assessment (PHRA) format. While a PHRA is most commonly used for evaluating public health risks associated with chemical releases or environmental contaminants and are sometimes quantitative in nature, where exposure and uptake of a chemical is modeled or measured, a PHRA can also be qualitative in nature. The qualitative approach is adaptable to the COVID-19 pandemic and provides a framework to document the process and inform management and communication efforts.

A qualitative PHRA is subjective and dependent on the risk tolerance of TFM. The recommended management measures are intended to be practical and provide value in terms of optimizing protection of all stakeholders without restricting activities altogether. Therefore, upon review of this risk assessment, it may be revealed that the risk tolerance of stakeholders is greater or lower than originally assumed, or that compromises must be made to alleviate restrictions and for activities to proceed smoothly. Thus, adjustments to the Safety Plan may be made as needed. Furthermore, the assumptions used in the risk assessment may change over time and will require updating. The following table provides examples of high, medium, and low risk individuals and activities, and the differences in mitigation measures that might be recommended:

Table I – Example Risk Summary

Risk Category	Individuals and Activities	Mitigation Measures
High Risk	Individual showing symptoms arrives at TFM	Prevent entry into building
Medium Risk	Site is located in an urban area; occasional visitors are expected	Implement health monitoring (i.e., temperature/ surveys) for visitors and restrict entry to essential visits only
Low Risk	No public access to building; building is occupied by regular staff only	Employees are entrusted to self-monitor for symptoms/exposure outside of the workplace

4.2 Modes of Transmission of COVID-19

SARS-CoV-2 is a highly contagious virus that is thought to spread primarily by respiratory droplets discharged from an infected person. Person-to-person spread may occur in the workplace between people in proximity to each other (2-2.5 metres), as transmission occurs when an infected person coughs, sneezes, or talks (Health Canada, 2020; Prather, Wang and Schooley, 2020).

The British Columbia Centre for Disease Control (BC CDC) defines high-risk close contact as living with or otherwise having close face-to-face contact (within 2 metres) with a probable or confirmed case for more than 15 minutes (may be cumulative, i.e. multiple interactions) up to 48 hours prior to symptom onset.

Available reports on SARS-CoV-2 suggest that individuals have the highest viral load just prior to, or within, the first few days of showing symptoms. The BC Provincial Health Officer has also stated that momentarily walking past an infected individual presents a low risk of COVID-19 transmission. Available literature on transmission of this and other infectious viruses also suggests that the infectious dose (amount of virus needed to establish an infection) is a factor for some infections, but there is insufficient evidence at this time to form conclusions as to a relevant infectious dose for contracting COVID-19. Thus, there is still uncertainty as to what is a safe exposure duration during which the ensuing virus particle dose will not cause infection.

Some studies suggest that intense coughing or sneezing can produce aerosols which can travel in indoor environments for tens of metres or through heating, ventilation, and air conditioning (HVAC) systems (Morawska and Cao, 2020; Prather, Wang and Schooley, 2020,) suggesting that the six foot physical distancing recommended by the American Centres for Disease Control and Prevention (CDC, 2020) may not be conservative enough in some indoor environments. However, the current position of the World Health Organization (WHO, 2020) is that, although there are indications of possible airborne transmission of SARS-CoV-2, it does not appear to be a significant means of viral spread, and more research is required to fully understand the likelihood of contracting COVID-19 through aerosol transmission over longer distances. Thus, viral transmission via droplet nuclei, spread through building ventilation systems, is considered to be a minor route of exposure. However, potential exposure via building operations has been addressed in the Risk Matrices and recommendations made to minimize risks.

SARS-CoV-2 is an enveloped virus, meaning that it doesn't survive well outside of a living cell. However, limited available information suggests the virus can survive on surfaces for periods from 48 hours up to nine days. Thus, high touch surfaces where droplets have fallen are believed to be a vector for spread of the virus, otherwise known as fomite transmission.

Since the onset of this pandemic, the CDC and the Government of Canada have identified the greatest exposure risks for SARS-CoV-2 to be close contact with a potentially infected person or touching potentially contaminated items (Health Canada, 2020). Although the current message and prevailing opinion among public health organizations, is that COVID-19 may be contracted by a person touching a surface that has the virus on it (e.g., doorknobs, chairs, washroom facilities), followed by touching their face, mouth, or nose, the number of reported cases where this has been the definitive means of infection are small. At this point in time, direct contact with droplets of infected individuals remains the primary concern according to the WHO (2020).

Evidence suggests that people who do not show symptoms of COVID-19 may still be able to spread the virus and subsequently infect others. This may also occur during the incubation period (five to six days on average and up to 14 days) prior to onset of symptoms. Spread by asymptomatic carriers is considered in this risk assessment and, for the purpose of this report, it was assumed that each area contains at least one infected but asymptomatic occupant.

The risk evaluation provided in this report considers the frequency and duration of each potential exposure event and the potential for viral transmission. However, the focus is on the risk of transmission or exposure and not the ensuing severity of disease. It is assumed that all outcomes from infection are severe. Thus, with severity set at a constant, the risks depicted in the Risk Matrix are driven by the likelihood of exposure.

4.3 Risk Summary

Among the highest risks identified were the public access to the building and the potential for asymptomatic carriers. In addition, potential for crowding in small spaces and shared spaces such as office area, classrooms, training-shop, and sharing of equipment, was deemed high risk. Risks within washrooms were ranked as low to medium based on the presence of soap and water and assumption that exposure would be short-term.

Low to Medium risk areas or activities include mechanical spaces and maintenance, air circulation systems (HVAC,) and extended vacancy issues such as water quality and mould.

A variety of options are provided for each category, however, the recommended choice is selected based on presumed effectiveness and ease of implementation.

Physical distancing is one of the simplest means of reducing all medium and high risks and is recommended as the primary management measure. Where distancing is not intuitive, controls such as those to establish queues for entry, capacity limits, and designated seating are used. Protective barriers are also used to mitigate the potential exposure to the virus.

The prioritization of risk management measures is based on the Hierarchy of Controls discussed in **Section 6**.

5.0 DEFINITIONS

Classroom Delivery: Means students are instructed in a classroom setting with protective barriers and using the TFM Safety Rules

Broad Spectrum Disinfectant: A substance intended to kill or inactivate the three major groups of microorganisms (viruses, bacteria and fungi) with broad spectrum efficacy. The product must have a Health Canada Drug Identification Number (DIN) on the label.

Cleaning: Refers to the removal of dirt and impurities, including germs, from surfaces. Cleaning alone does not kill germs. However, efforts to remove germs decreases their numbers and therefore the risk of spreading infection.

Confirmed Case of COVID-19: An occupant is considered a confirmed case of COVID-19 when they are diagnosed by a doctor. As testing is limited, diagnosis may be confirmed through COVID-19 testing or if a doctor deems the patient as a probable case of COVID-19.

Disinfecting: Works by using chemicals to kill germs on surfaces. This process does not necessarily clean dirty surfaces or remove germs. However, killing germs remaining on a surface after cleaning further reduces any risk of spreading infection.

Enveloped virus vs non-enveloped virus: Viruses are divided into two groups based on the presence of an outer membrane. Enveloped viruses have a membrane while non-enveloped viruses do not. COVID-19 is an enveloped virus. Enveloped viruses have a fatty membrane that contains the virus and can be easily broken with soap or hand sanitizing and the rubbing action of washing and sanitizing.

Fomite: Any inanimate object that, when contaminated with an infectious agent, can transfer disease to a new host.

Hand Sanitizer: A gel product used as an alternative to hand washing with soap and water that contains 60%-95% alcohol.

Non-porous: A material that does not absorb, nor is it easily penetrated by liquids, especially water.

Online Delivery: Course instruction delivered 100% using a virtual interface.

Porous: A material that contains pores, which absorbs liquids quickly (e.g., clothing and other textiles, padded or upholstered items, leather, taxidermy, paper goods, and many types of fine art).

Physical Distancing: Physical distancing measures are taken to restrict when and where people can gather to stop or slow the spread of infectious diseases. This includes keeping two metres away from other people. Physical distancing measures include limiting large groups of people coming together, closing buildings, and canceling events. At this time, BC CDC has ordered a limit of all public gatherings larger than 50 people.

Virtual Interface: A means of live broadcasting via the internet, including online classroom delivery and online meetings/conferences.

6.0 HIERARCHY OF CONTROLS FOR COVID-19

The British Columbia Ministry of Health considers the hierarchy of controls for COVID-19 in the document *COVID-19: Going Forward,* May 4, 2020. To align with this publication, WSBC has released a Safety Plan Template based on the Phase 2 and 3 BC Re-Start Plan which also considers the hierarchy of controls.
The hierarchy of controls is a framework for reducing or eliminating COVID-19 transmission hazards (Figure I). The hierarchy of controls is designed in order of priority, with the most effective and protective controls at the top of the pyramid and the least effective and protective controls at the bottom. Based on the framework, elimination is the first control needed. This includes limiting the number of people in your building by establishing on-line delivery protocols, establishing occupancy limits, and careful scheduling of programs and tasks. If impractical to complete these control items, the building should be reconfigured to accommodate physical distancing wherever possible. The Government of Canada defines physical distancing as maintaining approximately two (2) metres between individuals, as COVID-19 spreads mainly among people who are in close contact (within about six feet) for a prolonged period.

If contact cannot be eliminated, it must be made safer through engineering controls, administrative controls, or personal protective equipment (PPE), and controls must be considered in that order. **Figure I** displays a figure of the hierarchy of controls for COVID-19.

Engineering controls look to isolate occupants from the hazard. A common engineering control for COVID-19 is the installation of barriers. Administrative controls consider the way people perform their work. Examples include COVID-19 safety and cleaning procedures, rules, and training. After all other controls have been considered, PPE must be implemented where the previous controls cannot be maintained, and as a last resort, face covering will apply.
Instructors and staff will have access to a Student Orientation Checklist for new students. Refer to **Appendix II.**

Figure I – Hierarchy of Controls

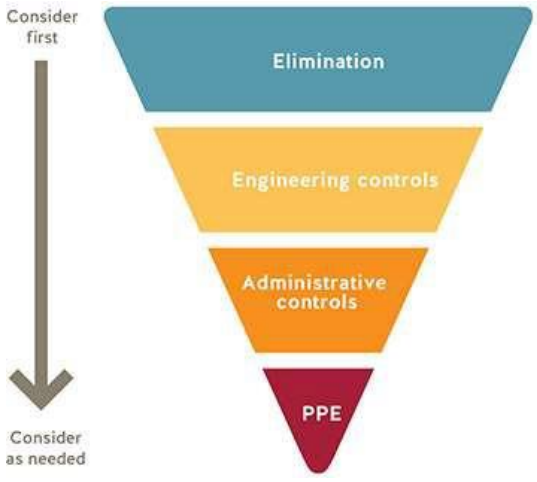


Figure 1 – Hierarchy of Controls for COVID-19, WorkSafeBC, May 2020.

6.1 Adopted Best Practices

6.1.1 Use of Technology

TFM has promoted the use of technology, such as online instructional delivery or other media platforms where possible. Virtual operations will be continued in place of in-person contact, such as online meetings, online tutoring, and online classes.

6.1.2 Prohibition on Large Gatherings

TFM has prohibited any large gatherings including but not limited to conferences, convocation ceremonies, tours, space rentals, and other events.

6.1.3 Workstations

Implementation of a clean desk policy includes the removal of all items from the surface of a desk at the end of each workday to aid in ease of disinfection of counters, tables, and desktops. All office areas and workstation areas will be provided with sufficient cleaning supplies to disinfect their workspaces.

6.1.4 Reduced Occupancy

TFM has implemented a maximum occupancy limit as follows:

Area	Occupancy Limit
TFM Learning Centre (unit # 206)	28
TFM Learning Shop (unit # 101)	20
TFM Learning Class (unit # 102)	20

6.1.5 Travelling and/or International Personnel

Any staff or students that are arriving internationally are required to self-isolate for a minimum of 14 days prior to attending any activity at TFM. All personnel travelling internationally must report to the CEO, on the date of last travel and resulting timeline of isolation.

6.2 Personal Hygiene Best Practices

If an occupant exhibits symptoms that may be related to COVID-19, they will be instructed to stay home until they no longer have symptoms. The occupant will consider visiting a healthcare provider for diagnosis or contacting 8-1-1 HealthLink BC to determine when they can safely return to the premises.

- Avoid handshakes and fist-bumps (including other contact like kisses/hugs) as a greeting;
- Avoid using other people's phones, desks, computers, keys, etc., where possible or clean common surface before using; and
- Practice physical distancing. Maintain two (2) metres between yourself and others. This includes between staff and between students.

Gloves can be used in select situations where outlined as a risk control measure, however, careful attention must be paid to donning and doffing. Gloves are not a substitute for handwashing. Wearers must be cognizant that the virus cannot enter the body through skin contact; it must contact a mucous membrane. In some instances, gloves may not provide additional protection, as touching your face with a glove is the same as touching your face with an ungloved hand.

Practice frequent hand hygiene (wash with soap and water for at least 20 seconds) and good respiratory etiquette:

- Hands should be washed often, including following cleaning, prior to eating, after using the restroom, after blowing one's nose or sneezing, after contact with frequently touched surfaces, etc. Utilize hand sanitizer if hand washing is not immediately available; and
- Cover sneezes and coughs with a tissue, then throw the tissue into a garbage bin immediately after use. If a tissue is not available, cough or sneeze into your elbow.

Avoid touching your eyes, nose, or mouth with unwashed hands.

All personal hygiene, tissues and other sanitary products must be disposed of in the garbage. These products must not be disposed of as part of composted waste.

6.3 Building Ventilation Systems

Current guidance from the American Society of Heating, Refrigerating and Air-Conditioning Engineers (ASHRAE,) is that transmission of SARS-CoV-2 is a low risk from building ventilation. Ventilation and filtration provided by the HVAC systems can reduce the airborne concentration SARS-CoV-2 and thus the risk of transmission through the air. ASHRAE's approved statements regarding COVID-19 are available at https://www.ashrae.org/technical-resources/resources. ASHRAE is the pre-eminent research organization for building ventilation in North America. The Building Codes in Canada reference the ASHRAE guides.

6.4 Housekeeping Practices

Direct contact with high touch surfaces are considered medium to high risk depending on the surface and location. A cleaning/sanitizing plan for the building must be completed. The use of best housekeeping practices will reduce the risk of spreading the virus and help keep building occupants safe and healthy. All housekeeping practices should conform with the BC CDC COVID-19 cleaning documentation (http://www.bccdc.ca/Health-Info-Site/Documents/CleaningDisinfecting_PublicSettings.pdf.) Staff must ensure they have debriefed this document, and associated procedures to ensure they understand the additional measures required from them. It is also pertinent that all users follow the manufacturers' direction for all cleaning products and disinfectants.

6.4.1 General Cleaning Information

General cleaning procedures are included in **Appendix I**.

All cleaning referenced in this document refer to the following process:

- Clean all visibly dirty surfaces first with a detergent or soap and warm water;
- Follow the manufacturers' direction for all cleaning products and disinfectants;
- Apply a broad-spectrum disinfectant or approved equivalent appropriate for the surfaces being cleaned to surfaces. Use disinfectants that have a Drug Identification Number (DIN). A list of disinfectants for use against COVID-19 are listed on the Health Canada Website:
    - Approved Products: https://www.canada.ca/en/health-canada/services/drugs- health-products/disinfectants/covid-19/list.html#wb-auto-5
    - Products with Interim Approval: https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/products-accepted- under-interim-measure.html
- Wear disposable gloves when performing cleaning;
- Immediately following the cleaning, the gloves should be disposed of in a lined waste bin, and hands should be washed with soap and warm water; and
- Where disposable gloves are not available, reuse a dedicated set of gloves.

6.4.2 High Touch Surfaces

High touch surfaces will be cleaned more frequently (at least twice throughout the day) and the cleaning should extend 3 – 12 inches beyond the object being frequently touched. High touch public or non-personal (i.e., not shared by multiple employees) surfaces include but are not limited to:

- Light switches
- Computer Keyboards and Mouse
- Faucets
- Door Handles
- Countertops/Desktops
- Equipment Controls (i.e., Remote Controls)
- Armrests

6.4.3 Disinfection of Equipment and Consumable Equipment

Hand tools, fixed tools/equipment, and associated accessories (bits, toolboxes, etc.) will be assigned to specific students and not allowed to be shared in most cases. Some fixed and shared equipment, and other shared equipment, will be properly disinfected before and after use — prior to being put back into rotation or allowed to be used by another person. All consumable equipment will be coordinated by instructors and distributed to students at the start of class to prevent repeat trips to stock areas. Consumable equipment that is not used during class time will be disinfected before being re-stocked. All staff, and students responsible for cleaning surfaces will be properly trained in the use of the disinfectant, including personal protective equipment requirements.

6.5 Outdoor Areas

Outdoor areas can be frequently overlooked; however, they can pose the same amount of risk as any indoor area. These can include the following:

- Exterior door handles;

Items that are frequently touched by the general public or by staff will be cleaned as per indoor high touch surfaces procedures.

6.6 Waste

The following steps will be followed for handling waste/garbage:
Students will be responsible for their own garbage.

- Use waste containers with no lids, or those with foot pedals, to prevent the need for hand contact;
- Line waste containers, including recycling and compost, with a plastic bag;
- When disposing of waste the individual must wear disposable gloves or dedicated waste removal gloves and have a dedicated layer of clothing (i.e., apron, lab coat, etc.) to protect between their regular clothing and the waste;
- Prior to removing waste from bins, the bag should be sealed;
- Regular cleaning of waste containers with warm water and soap; and
- Wash hands immediately following completion of waste handling.

6.7 General Classroom Policies

6.7.1 Signage and Notification

All staff and students are required to follow posted signage and safety rules. Students are sent a Covid-19 Student Handout prior to the first day of class. Refer to **Appendix IV**.

6.7.2 Student Breaks

All students will be encouraged to have their meals before class or to plan to eat when class is over. If possible, students should stay at their workstations during breaks. If students desire to leave the classroom for their break they will be advised to go outside via the nearest exit and ensure physical distancing is observed at all times.

6.7.3 Physical Hand Outs and Non-Essential Items

Wherever possible, physical hand outs will not be used. Instructors will utilize technology to display necessary information or e-mail it to students prior to class. All non-essential items will be eliminated from the classroom space or blocked from access.

6.7.4 Student Personal Items

Instructors are to establish a location for students to store their personal items (preferably at their workstations). Personal items will not be left overnight in classrooms or the training-shop.

6.7.5 Provisions for Close Interactions

There are times while instruction is being given where physical distancing guidelines must be broken. In accordance with the hierarchy of controls, this should be attempted to occur in an area where physical distancing is maintained, or utilize technology for communication in order to maintain physical distance, such as texting, instant messaging.
Classroom setting will be setup with plexiglass barriers for each workstation and TFM safety rules requires that each student must wear a mask at all times.

6.8 Entrance and Egress

Entry into the building will be limited to personnel that are required or authorized to be at the facility . Entrances to the building will be through as few controlled entries as possible. Queue lines may also be established for entrances into areas where personnel are entering.

6.9 Screening Building Entrants

Health screening signage will be posted on the outside of the front door at the building entry. The signage indicates building entrants must perform self-directed health screening and must not enter the building if they are feeling sick or have travelled outside of Canada within the past 14 days. The BC CDC recommends all people who are sick with COVID-19 or have symptoms of COVID-19 must stay home, except when receiving medical care, and must not visit public areas.
Each entrance will have a sign indicating to sanitize hands and to wear a mask and each person entering will also be temperature checked. Students will be assigned seating to prevent cross-contamination of workstations.

6.10 Face Coverings

Masks are required for all students. Staff are required to use a mask only if training in the shop or training one on one or meeting a visitor or physical distancing isn't practical.

If a face covering is required, practice the following mask etiquette:

- Before putting on a mask, clean hands with hand sanitizer or soap and water;
- Wear a mask that covers both the mouth and nose;
- Avoid touching the mask while using it. If you touch the mask, clean your hands with hand sanitizer or soap and water; and
- Remove the mask from behind. Do not touch the front of the mask. Discard it immediately in a closed bin and clean hands with hand sanitizer or soap and water.

Student users must supply their own face coverings unless required due to specific planned instances of close physical interaction due to instruction or work activities.

6.11 Signage

Signage will be placed throughout the building.
Refer to **Appendix IV** for signage types and locations.

6.12 Sanitizing Stations

High touch surfaces present one of the highest risks of viral transmission. Therefore, hand sanitizer stations will be used at entrances, washrooms, and workstations.

6.13 Doorways

Where possible, doorways will be positioned in an open position to minimize contact with door handles. Where doors must be kept closed, hand sanitizing stations will be provided outside the doors.

7.0 INCIDENT RESPONSE

Where an individual working or participating at TFM has been diagnosed with a confirmed case of COVID-19:

- Restrict access to areas of the building where that individual was working/participating.
- Implement a cleaning program based on *Cleanup Protocol* – **Appendix I**
- Gather as much of the following information as possible to support response efforts:
    - Detailed floor plan for the building location.
    - Details of the movements, activities and time spent by the confirmed COVID-19 individual prior to leaving the building.
    - Timing of when the confirmed COVID-19 individual was last present in the building.

8.0 COMMUNICATION

Creating a sense of safety and security is a key component in the successful return to operations at TFM. Communication applicable to the Safety Plan will ensure all audiences receive accurate and timely information in regard to the health and safety concerns of COVID-19.

TFM's key COVID-19 Communication Tools include but may not be limited to:

- Dedicated COVID-19 webpage conveys: Information for students and visitors and a link to the BC Centre for Disease.
- Email distribution: Students.
- Classroom and shop signage. Refer to **Appendix IV**.

9.0 AUDIT AND PLAN REVIEW

The Safety Plan will be reviewed regularly as new information about COVID-19 is available. Periodic inspections of the program areas will be conducted by CEO as needed. Feedback on COVID-19 risk control measures will be provided, and where necessary, corrective actions will be assigned. Refer to **Appendix III** for the COVID-19 Audit Checklist. This form will be used to for formal auditing.

APPENDIX I

General Cleaning Protocol

1.0 PURPOSE

There are a number of studies indicating that SARS-CoV-2 can be infectious anywhere from two (2) hours to (7) seven days outside the body. It is important to be more diligent in the overall cleaning of surfaces, as a preventative measure, even if they are not suspected of contamination.

This document will detail appropriate methods for cleaning of surfaces. It will also provide the latest knowledge on the proper disinfectants used to kill the virus.

2.0 SCOPE

This document is intended as a guideline for staff who may be engaged in the cleaning of surfaces in the building. Cleaning procedures in this document will address contamination on most surface types. This document can be used to clean and disinfect surfaces in various areas.

3.0 CLEANING/DISINFECTION PRODUCTS

As coronaviruses are enveloped, they are less resistant to heat and desiccation (removal of moisture) and easier to kill with virucides than non-enveloped viruses.

Based on Health Canada’s criteria, TFM has approved select products that are permitted to be used at the TFM facility.

4.0 GENERAL CLEANING PROTOCOL

Direct contact with high touch surfaces was ranked a medium to high risk, depending on the surface and location. The use of best housekeeping practices will reduce the risk of spreading the virus and help keep building occupants safe and healthy. All housekeeping practices will conform with the British Columbia Centres for Disease Control and Prevention (BC CDC) COVID-19 cleaning documentation.

5.0 GENERAL CLEANING PROCEDURE

All cleaning referenced in this document refers to the following process:

- Follow the manufacturers' direction for all cleaning products and disinfectants.
- Follow the product Safety Data Sheet for personal protective equipment and other precautions.
- Clean all visibly dirty surfaces first with soap and warm water.
- Apply disinfectants to the surfaces by following manufacturers instruction. NOTE: Do not spray disinfectants directly onto Electrical Components.
- Wipe down the surface with a microfibre cloth from high areas to low areas.
- Immediately following the cleaning, the gloves (if applicable) and microfibre cloth should be disposed of in a lined waste bin, and hands should be washed with soap and warm water.
- If applicable, remove safety glasses (if applicable).

5.1 High Touch Surfaces

High touch surfaces must be cleaned more frequently and the cleaning should extend 3 – 12 inches beyond the object being frequently touched. The British Columbia Public Service Agency (BC PSA) recommends cleaning high touch surfaces 2 - 4 times a day. The high touch surfaces cleaning frequencies are detailed below, if the area is not included in the list below, daily cleaning is recommended:

Table I – Minimum Cleaning Frequency of High Touch Points

2-4 Times per Day	**After Each User**
Completed by: Staff	**Completed by: User**
GENERAL SURFACES • Doors handles, door frames, both sides of door, glass in door • Walls, high touch areas • Light switches and area surrounding light switch • Furniture – hard and soft handrails, hardware, touch points beneath seats • Hard surface countertops, tables • Waste and recycling containers • Sneeze guard barriers	GENERAL SURFACES • Computer monitor touch points, • Computer mice • Computer keyboards • Multi-media controls • Filing cabinets • Microwave doors and hardware • Resource equipment – staplers, hole punch, etc. • Copiers

WASHROOM SURFACES • Washroom: toilet fixtures, faucets, grab bars, counters, stall doors and hardware, light switches and area surrounding light. • Toilets: seats, base, handle • Sink and Faucet hardware/handles • Garbage bins	

5.2 Waste

The following steps are recommended for handling waste/garbage:

- Where possible, use waste containers with no lids, or those with foot pedals to prevent the need for hand contact.
- Line waste containers, including recycling and compost, with one plastic bag.
- When disposing of waste, the individual must wear disposable gloves or dedicated waste removal gloves and have a dedicated layer of clothing (i.e. coverall, apron, lab coat, etc.) to protect between their regular clothing and the waste.
- Prior to removing waste from bins, the bag should be sealed.
- Regular cleaning of waste containers with warm water and soap is recommended.

APPENDIX II

Student Orientation Checklist

TFM CONSULTANTS INTERNATIONAL

Directions:
Students to complete this checklist onsite before beginning class and shop activities. After all topics have been reviewed and are clearly communicated, sign and date at the bottom of the form.
Instructions for the Instructor:
• Encourage students to ask questions • Provide students with as much detail as possible • Only one form needs to be completed per class
CLASS/SHOP INFORMATION
Class/Shop Session Name:
Location(s):
Instructor:
PROGRAM SPECIFIC PROCEDURES
☐ Student Handbook – Handed & Reviewed
Fire alarm and Emergency Evacuation: ☐ Locations of fire extinguishers and fire alarms ☐ Locations of appropriate emergency evacuation route. ☐ Location of assembly points outside the building.
Reviewed all Personal Protective Equipment used in area (please list): ☐ Not Applicable
☐ Reviewed applicable **TFM COVID-19 Safety Plan** ☐ Not Applicable
☐ Reviewed applicable COVID-19 safe work procedures, including room/area cleaning or task management ☐Not Applicable
Received instruction and demonstration on area specific work procedures (ensure the applied items are checked and reviewed):

☐ Know the **hazardous materials** used specific to your area and methods on exposure prevention ☐ Not Applicable	☐ Location, purpose, and significance of Safety Data Sheet (SDS). ☐ Not Applicable

☐ **Emergency spill response procedure and spill kits:** ☐ Know location of the spill kits. ☐ Received training on how to clean up a spill. Not Applicable
☐ Reviewed other applicable department specific safety procedures, e.g., equipment/machinery safe operating procedures, lockout procedures. List them here: a) b) c) d)
FORM COMPLETION

Instructor Signature:	Date: MMDDYYYY
Participated Students (print name below)	Date: MMDDYYYY

APPENDIX III

COVID-19 Audit Checklist

Date: _____ **Area:** _____

Audit By: _____

Staff/Instructors: _____ **Students:** _____

Type of Activities		Activity Description:
Classroom Instructions ☐	Partnered Activities ☐	•
Practical Instructions ☐		•
		•
		•

Documentation:				Equipment:			
☐	Department Specific Procedure Training	☐	Hand Sanitizer	☐	Disinfectant / Wipes	☐	
☐	Training / Orientation	☐	Hand Washing Station	☐	Face Masks	☐	
☐	Isolation Procedure	☐	Soap	☐	Gloves	☐	
☐	Signage	☐	Paper Towels	☐			

Item #	Category	Observation	Follow-up
1.	Is class attendance being kept?		
2.	Have personnel been advised to self-assess for symptoms?		
3.	Are occupancy limits posted where applicable?		
4.	Is signage in appropriate areas?		
5.	Is there a system for queuing on entry?		
6.	Are hand washing stations available? Type?		
7.	When is hand washing conducted?		
8.	Personnel observed conducting proper hand washing?		
9.	Entrance/Exits controlled? How?		
10.	Are personnel able to physical distance? If not, describe procedures.		
11.	Have meetings been kept to minimal numbers? Are they being held in an area that allows for physical distancing?		
12.	Have barriers been installed? Are they sufficient (i.e. size, continuous)?		
13.	Are high touch points being disinfected? How often and by whom?		
14.	Has unnecessary equipment (i.e. desks, tools, etc.) /materials (i.e. paper, etc.) been cleared?		
15.	Has equipment been assigned? If so, what are the protocols for cleaning and sanitization? By whom?		
16.	Any PPE or equipment being shared? If so, what are the protocols for sharing?		
17.	Are personal belongings present in the area?		

Item #	Category	Observation	Follow-up
18.	Are potable water sources present? Are they single serve?		
19.	Has shared food practices been banned?		
20.	Have break times been staggered?		
21.	Do received deliveries go through any form of disinfection (where applicable)?		
22.	Are queue lines being used? Is this area designated with signage? Is there adequate space for queue lines?		
23.	Has there been any COVID related cases reported in the last 7 days?		

Item (letter)	Additional Comments:
A	

Items Reviewed With: _____
(Print name)

* Reference Standard: Unless otherwise noted, references to criteria are based on WorkSafe BC Occupational Health and Safety Regulation and Guidelines.

Corrective Action			
Item #	**Comment**	**Date**	**Sign off**

APPENDIX IV

Exhibits

Covid-19 Student Handout

What is COVID-19?

COVID-19 is a novel, new coronavirus first diagnosed in humans in late 2019.
Coronaviruses can cause diseases ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS).

Protecting Yourself and Others

For information on how to protect yourself and others click the following link

- Government of Canada Coronavirus Disease
- Follow the classroom guidelines

To assist health screening, prior to attending class, a BC COVID-19 Self- Assessment Tool is available to anyone and can be used to help assess symptoms and determine if you need further assessment or testing for COVID-19.

If you have any concerns or questions regarding your health and safety at TFM, please speak with your instructor or email info@tfmci.com

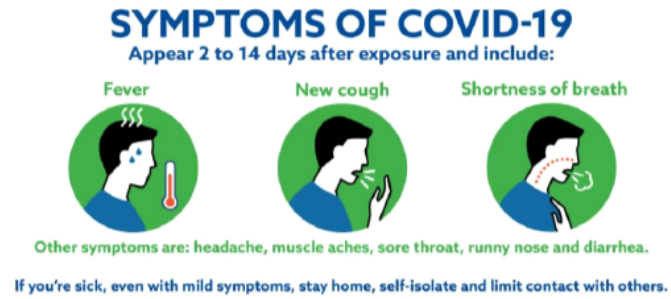
TFM Student Guidelines

Your safety is our first priority. Our objective is to provide a safe environment and to minimize the risk of spreading the virus by adhering to the Public Health, BCCDC, and WorkSafeBC protocols.

If you are a new or returning student, you must follow the safety rules below. Your actions are critical to protecting not only your health but also that of your classmates, instructors, and the community.

TFM Safety Rules

- **DO NOT COME TO CLASS** if you feel sick or exhibit any of the symptoms of COVID-19, a cold or the flu.
- **DO NOT COME TO CLASS** if you are self-isolating.
- Sanitize hands when coming into class and when opening any door.
- While in class you must always wear a mask.
- Physical distance must always be maintained - **2 meters**.
- Cough or sneeze into your elbow.
- Avoid large gatherings in common areas.
- Do not share tools unless they can be properly disinfected between each use.
- Pay attention to and follow directional and informational signage.
- Do not touch your face unless you have clean hands.
- Clean any tools or equipment you have used, as you are instructed.
- Wash your hands regularly throughout the day.



Student Training Options

To mitigate the exposure, we offer two options:

1. Virtual Academy
2. Classroom with safety protocols:
    a. Plexiglass physical barriers
    b. Limited amount of people
    c. Physical distancing
    d. Daily screening
    e. Masks worn at all times
    f. Thorough daily sanitization

TFM CONSULTANTS INTERNATIONAL

Entrance Door Notification

STOP

NOTICE

COVID-19

Important Information

Do not enter if you are sick or have respiratory symptoms.

To help support the health and safety of our community we would like to remind you of the following:

- Wash your hands frequently with soap and warm water.
- Cover your cough or sneeze using your elbow.
- For general information about COVID-19 call 1-888-COVID-19 or text 604-630-0300. Information is available in more than 110 languages.

If you are concerned that you may have symptoms of COVID-19, call your primary care provider or speak with a registered nurse at 8-1-1.

Visit fraserhealth.ca/COVID19

fraserhealth

Help prevent the spread of COVID-19

Please do not enter this workplace if you:

- Have any of the following symptoms:
  - Fever
  - Chills
  - New or worsening cough
  - Shortness of breath
  - New muscle aches or headache
  - Sore throat
- Have travelled outside of Canada within the last 14 days
- Are a close contact of a person who tested positive for COVID-19

All other visitors, please wash your hands or clean them with hand sanitizer before and after your visit. Please maintain physical distancing of 2 metres.

If you are displaying symptoms of COVID-19, refer to HealthLink BC at 811.

worksafebc.com

WorkSafeBC

Classroom Entrance Notification

BEYOND THIS POINT YOU MUST SANITIZE YOUR HANDS AND WEAR A MASK

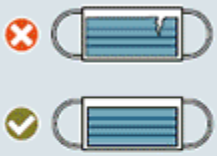
TFM
CONSULTANTS INTERNATIONAL

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."

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

worksafebc.com

WorkSafeBC

Sanitization Station Notification

Washroom Notification

REDUCE THE SPREAD OF COVID-19.
WASH YOUR HANDS.

1

Wet hands with warm water

2

Apply soap

3

For at least 20 seconds, make sure to wash:

4

Rinse well

5

Dry hands well with paper towel

6

Turn off tap using paper towel

palm and back of each hand

between fingers

under nails

thumbs

1-833-784-4397

canada.ca/coronavirus

Public Health Agency of Canada | Agence de la santé publique du Canada

Canada