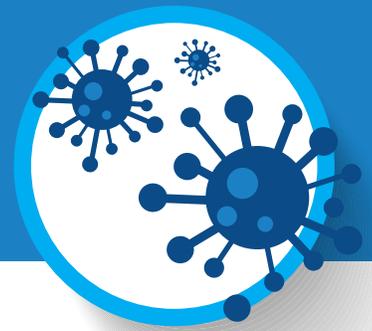# RISK ASSESSMENT
DURING COVID-19 PANDEMIC

Where work is required to continue during the COVID-19 pandemic, precautions must be taken to protect the health and safety of the workers performing those services/functions. The hazard associated with the COVID-19 virus is the introduction of the virus to the workplace where workers are performing work and the spread of infection between workers, contractors, members of the public or customers. COVID-19 is primarily spread via direct and indirect contact with infected respiratory droplets. That is, an infected person sheds the virus through respiratory droplets generated by coughing or sneezing. Other uninfected individuals are exposed either directly to the infected droplets and breathe them into their mouth or nose, or indirectly by touching surfaces that have been contaminated with the infected respiratory droplets. The risk of contracting COVID-19 increases as the prevalence of the virus in the general population increases.

Health and safety precautions for the protection of workers from biohazards such as COVID-19 virus are similar to other workplace hazards and follow the hierarchy of controls. The objectives of these control measures are to:

- prevent/reduce the likelihood of an infected individual coming to work and introducing the virus to the workplace, and

- prevent/reduce the likelihood of the spread of the virus among workers and the contamination of surfaces and inanimate objects.

To achieve these goals, the following control measures may apply:

1 ENGINEERING CONTROLS means isolating people from the hazard. These types of controls reduce exposure to hazards without relying on worker behavior, and for COVID-19 they are primarily geared towards physical distancing measures, including:

a) Ensuring workers maintain an appropriate physical distance from each other (i.e., 2 meters) while working.

b) If a safe distance can not be maintained, physical barriers can be used to prevent contamination of surfaces and airborne spread of respiratory droplets.

c) Using additional vehicles for transporting workers to ensure physical distancing is maintained (i.e., 1 person per vehicle).

d) Performing work remotely, for example, using drones to inspect lines or using video cameras to monitor certain equipment.

e) Quarantining workers to the worksite to reduce the transmission of the illness from the community to critical workers.

2 ADMINISTRATIVE CONTROLS means changing the way people work which requires action by the worker or employer. Typically, administrative controls are changes in work policy or procedures to reduce or minimize exposure to a hazard. Examples of administrative controls for COVID-19 include:

a) Ensuring workers and visitors complete the Daily Health Screening Questionnaire and temperature screening (where applicable).

b) For situations where workers must be in contact with members of the public (i.e., enter a person's home) utilize a screening tool, such as the Daily Health Screening Questionnaire, prior to entry.

ADMINISTRATIVE CONTROLS continued

c) Ensure all workers are informed of the hazards associated with COVID-19 and the safe work measures required for their work (i.e., physical/social distancing, hand washing, respiratory etiquette, etc.).

d) Decrease the number of crew members to the minimum required to do the work.

e) Ensure workers who are required to wear PPE are trained in appropriate procedures for donning and doffing PPE, disinfection procedures, etc., and are fit tested for respirators when required.

f) Ensure workers use their own dedicated tools and workspaces to prevent interaction among employees and decrease the chances of indirect contact.

g) Ensure tools that have to be shared are cleaned and disinfected as per the Cleaning and Disinfecting Guidelines.

h) Remove/reduce as much as possible the interaction between workers and members of the public.

i) When the physical distance between workers (2 meters) is not able to be maintained reduce the amount of time required for the task as much as possible.

j) Utilize hand sanitizer and appropriate cleaning supplies to reduce exposure from contaminated surfaces.

k) Ensure infection control practices are utilized where appropriate (i.e., emergency responders).

3 PERSONAL PROTECTIVE EQUIPMENT – protect the worker.

The purpose of the control measures outlined above, in particular the physical distancing measures and hand/respiratory hygiene, is to reduce the exposure of individuals to respiratory droplets from other people and interrupt the transmission and spread of the virus. While engineering and administrative controls are considered more effective in minimizing exposure to COVID-19, PPE may also be needed to prevent certain exposures. While correctly using PPE can help prevent some exposures, it should not take the place of other prevention strategies.

There may be times when physical distancing is not possible among workers performing work. In those situations, other control measures must be strictly enforced to reduce the likelihood of an infected individual entering the workplace and PPE must be used as outlined below.

PPE is always the last line of defense against workplace hazards. Because the transmission of COVID-19 is through close contact (within 2 meters) with an infected individual, and because of the potential for the virus to spread from asymptomatic individuals, the use of PPE including respirators and non-medical masks for protection against the virus is required when employees are working in close proximity to each other and members of the public

PERSONAL PROTECTIVE EQUIPMENT continued

Given the challenges associated with procuring certain PPE, efforts must be made to preserve our limited inventory as much as possible (in particular, disposable respirators and medical masks). To do this, please keep the following in mind when applying this risk assessment to ongoing work:

It is important to remember that the use of non-medical and medical masks is for the prevention/reduction of the spread of respiratory droplets. These masks do not provide the wearer with protection from other airborne hazards such as dust, fibers, etc. Facemasks and/or respirators should be chosen dependent upon the availability of these items in your region, and other potential hazards associated with the job being done.

- **When possible**, use coveralls that can be laundered at the end of the day, rather than disposable. Normal laundering practices in conjunction with hand hygiene techniques are effective.

- **Minimize the number of individuals** who need to use respiratory protection through the preferential use of engineering and administrative controls.

- **Use non-medical or medical masks wherever possibl**e, or alternatives to disposable respirators (i.e., other classes of filtering facepiece respirators, elastomeric half-mask and full facepiece air purifying respirators or powered air purifying respirators). Any employee being issued a tight fitting respirator, including N95 masks, must be fit tested prior to use.

- **Disposable respirators and medical masks** can be worn for an extended period of time and even reused in many cases. Try to reuse these items as much as possible but these respirators should be discarded if:

  - they become contaminated with blood, respiratory or nasal secretions, or other bodily fluids;

  - if the wearer has been in close contact with a known or suspected case of COVID-19 or another individual showing signs/symptoms of an infectious disease.

  - See additional document "Use and Reuse of Masks, Respirators and PPE During the COVID-19 Pandemic".

The table below outlines situations where workers are not able to maintain a 2 meter distance from other workers or members of the public. This risk assessment may be reevaluated at any time as community and internal risk factors change.

SCENARIOS WHERE PHYSICAL DISTANCING NOT ABLE TO BE MAINTAINED:

TEAMS/SCENARIOS	RISK FACTORS	RELATIVE RISK	RECOMMENDED PPE
Emergency response teams *(Note: please refer to appropriate guidelines for emergency response)* First aid response *(Note: kits sent to each region with PPE/supplies)*	• Dealing with members of the public and/or individuals whose health condition is unknown, uncertain or unable to be determined. • Direct contact with respiratory droplets from symptomatic individual is possible. • Indirect contact with respiratory droplets from a symptomatic person on surfaces or inanimate objects is possible.	HIGH	• Symptomatic Patient: medical mask • Responder: disposable respirator without exhalation valve** • Isolation gown or disposable clothing • Gloves • Face shield or goggles
Asymptomatic employees working in close proximity to members of the public (e.g. contractors or visitors to a site, employees entering homes of public)	• Dealing with members of the public and/or individuals whose risk factors may be uncertain. • Direct contact with respiratory droplets from symptomatic individual unlikely. • Indirect contact with respiratory droplets from a symptomatic person on surfaces and inanimate objects is unlikely.	MEDIUM	• Recommended mask* • Protective clothing (coveralls) that can be laundered, or disposable coveralls • Safety glasses, face shield, or goggles • Gloves
Asymptomatic employees working in close proximity to each other	• Employees not dealing with members of the public. • Direct and indirect contact with respiratory droplets from symptomatic individual is rare.	LOW	• Recommended mask* • Protective clothing (coveralls) that can be laundered, or disposable coveralls • Safety glasses, face shield, or goggles • Gloves

*The use of a face mask is to prevent the spread of respiratory droplets. For COVID-19 the recommended masks include:

• Non-medical face mask or medical (procedural or surgical) mask (preferred option, where available);

• NIOSH approved N95/N100, P95/P100 disposable respirator or equivalent; OR

•Half or full face tight fitting respirator with P100 filters

** NIOSH approved N95/N100, P95/P100 Respirators

Please note that the use of non-medical and medical masks is in line with the guidance provided by provincial and federal public health authorities to prevent/reduce the spread of respiratory droplets.