

Canadian Union of Public Employees

#### Introduction to **Health and Safety Principles** for COVID-19 and

#### The Role of Joint Health and Safety **Committees (JHSCs)**

March 2021 - Part II - Resource Materials

Tom McKenna, National Health and Safety Representative

The information is not legal advice. The materials only address Workers Compensation and Occupational Health and Safety. Nothing in this presentation supersedes the Workers Compensation Act, OHS Regulations, Guidelines and Policy. There may also be Collective Agreement rights and obligations. The current law and policy should be reviewed as they change frequently. Legislative, regulation and policy changes may occur. cope-491\*ct





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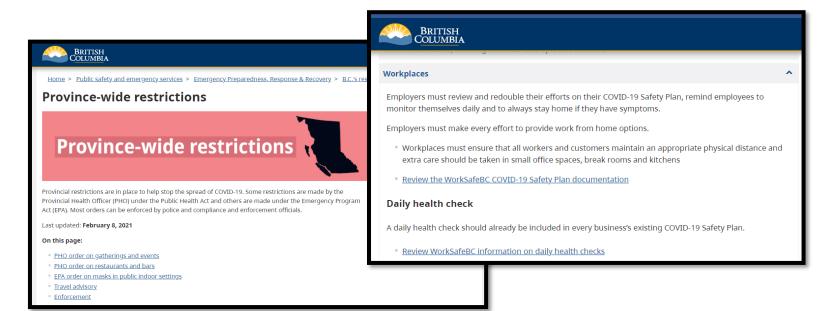
#### Table of Contents cont'd.

Important slides are indicated by



There are multiple system reviews occurring. Significant changes may occur in the next two years. Always refer to the online materials at WorkSafeBC.

Adhere to the BC Provincial Health Officer's Orders.





Canadian Centre for Occupational Health and Safety (49 tip sheets available)





## I. Overview of Presentation (Key words in red)

- There are three documents the Resources document (Part II, which is this document), the short Power Point Presentation (Part I) and the Summary Sheet (Part III).
- This is an introductory overview of key concepts related to the pandemic that Joint Health and Safety Committees need to be aware of.
- Information changes daily rely upon the most current information by the BC Provincial Health Officer, the BC CDC, the health authorities and WorkSafeBC.



# I. Overview cont'd. I.I. Core Contents of General Health and Safety Programs

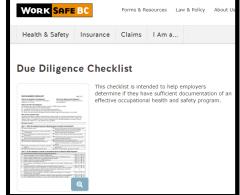
- Core general contents of a health and safety program include:
- A written Employer OHS policy.
- Health and safety promotion.
- Regular workplace inspections.
- Worker orientation and training.
- A fully functioning Joint Health and Safety Committee and meetings of management for health and safety program review.
- Accident and incident investigations.
- Keeping records and statistics.





# I. Overview cont'd. I.I. Core Contents of General Health and Safety Programs

- Instruction and supervision of workers by trained supervisors.
- Emergency procedures and First Aid.
- Any other workplace-specific procedures that may arise from such things as hazard and risk assessments.
- Incorporate the Internal Responsibility System everyone in the workplace both employees and employers is responsible for their own safety and for the safety of co-workers.
- Incorporate Due Diligence.
- Incorporate the Precautionary Principle.







# I. Overview cont'd. I.II. Core Contents of COVID-19 Specific Health and Safety Programs

- Core COVID-19 related contents of a health and safety program include:
- Safety Plans based on Due Diligence, the Precautionary Principle, the Hierarchy of Controls and the 4 Rights (including the Right to Refuse).
- Hazard and Risk Assessments, including site inspections.
- > Exposure Control Plans, including applying the Hierarchy of Controls.
- Worker Orientation.
- Worker Training.
- > Fully functioning and trained Joint Health and Safety Committee.
- Incident Investigations.





## I. Overview cont'd. I.III. Effective Health and Safety Programs

- Effective health and safety programs what does it mean:
- Identify and control hazards in the workplace.
- Prevent fatalities, injuries and disease.
- Promote a positive health and safety culture.





## I. Overview cont'd. I.III. Effective Health and Safety Programs

Due diligence:

Taking all reasonable steps to protect workers from harm based on the level of judgment and care that a person would reasonably be expected to do under the circumstances.

Due diligence requires that you:

- Identify all workplace hazards.
- Implement all necessary preventive measures.
- Communicate appropriately to all necessary personnel.
- Internal responsibility system:
   Everyone in the workplace both employees and employers is responsible for their own safety and for the safety of others.



## I. Overview cont'd. I.III. Effective Health and Safety Programs

Precautionary principle - when an activity raises threats of harm to human health, the environment, etc., precautionary measures should be taken even if some cause-and-effect relationships are not fully established scientifically.

WorkSafeBC See Section VIII. Resources and Links Section 6.34 of the *Regulation* requires that if a worker has or may have occupational exposure, then an exposure control plan must be developed and implemented, based on the precautionary principle.

The precautionary principle, as defined in section 6.33 of the Regulation, means adopting provisional precautions covering all routes of transmission, based on a higher level of protection when the identity, causation, or routes of transmission of the biological agent designated as a hazardous substance have not been established. The use of this principle was one of the key recommendations of the Justice Campbell SARS Commission Report released in January 2007. The Commission recommended that in any future infectious disease crisis including pandemic influenza, the precautionary principle should guide the development, implementation, and monitoring of the means of protecting workers. In practical terms, the application of the precautionary principle to the protection of workers in an influenza pandemic will mean that in some cases respirators meeting an N95 standard or equivalent will need to be worn.





#### General Health and Safety Information:

- There are overlapping legislation, regulations, policies and guidelines that affect occupational health and safety.
- The BC Provincial Health Orders, Workers Compensation Act, the OHS Regulations and the Prevention Policies are mandatory.
- The BC Provincial Health Orders are the primary source of direction.
- The OHS Regulation/legislation Guidelines only interpret the OHS Regulations.





WorkSafeBC See Section VIII. Resources and Links

#### COVID-19 safety plans



#### **Employer obligations**

#### As an employer, how do I fulfill my responsibility to ensure a healthy and safe workplace?

Employers have an obligation under the Workers Compensation Act section 21 (previously s.115) to ensure the health and safety of workers at their workplace and places where work is being done. With respect to COVID-19, this obligation includes protecting workers by following the orders of the provincial health officer and guidance provided by the BC Centre for Disease Control and developing control measures to prevent worker exposure. These measures include the following:

- Developing the necessary policies to manage their 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. Communicate these
  policies clearly to workers through training, signage, and reminders as required. You
  must develop and communicate policies prohibiting the following workers and others
  from entering the workplace:
  - Anyone who has had symptoms of COVID-19
  - o Anyone who has travelled outside of Canada within the last 14 days
  - Anyone who has been identified by Public Health as a close contact of someone with COVID-19
  - Anyone who has been told to isolate by Public Health
- Maintaining a distance of two metres between workers and others wherever possible, by
  revising work schedules, organizing work tasks, posting occupancy limits (e.g., on
  elevators and other small spaces), and limiting the number of workers at one time in
  break locations. If workers are not able to maintain distance, other measures will need to
  be implemented, including the use of barriers where appropriate, and masks where other
  measures do not adequately control the risk.
- Ensuring that the appropriate number of people are in each area of a worksite.
- Providing adequate handwashing facilities on site for all workers and ensuring their location is visible and easily accessed (note that providing and maintaining adequate washroom facilities is required by Occupational Health and Safety Regulation 4.85).
- Regularly cleaning all common areas and surfaces, including washrooms, shared offices, common tables, desks, light switches and door handles.



- Key sections of the revised Act related to COVID-19 include:
  - ▶21 General duties of Employers.
  - >22 General duties of Workers.
  - ≥23 General duties of Supervisors.
  - ≥31 to 46 Joint Health and Safety Committees.
  - ➤ 133 Employer must respond to Committee recommendations.
  - ▶ 135 Educational leave.
  - ▶ 151 Discrimination against workers prohibited.





Key sections of the OHS Regulations include:

#### Workplace Inspections

- > 3.5 General requirement.
  - 3.7 **Special inspections.**
  - 3.8 <u>Participation of the Committee or Representative</u>.

#### Correction of Unsafe Conditions

- > 3.9 Remedy without delay.
  - 3.10 Reporting unsafe conditions.
  - 3.11 Emergency circumstances.





#### Refusal of Unsafe Work

- > 3.12 Procedure for refusal.
  - 3.13 No discriminatory action.

#### Young or New Workers

- > 3.23 Young or new worker orientation and training.
- > 3.24 Additional orientation and training.

WorkSafeBC See Section VIII. Resources and Links







#### Joint Health and Safety Committees

- > 3.26 Evaluation of joint committees.
- > 3.27 <u>Minimum training requirements for new Joint</u> <u>Committee members or Worker Health and</u> <u>Safety Representatives</u>.

#### Participation in Investigations

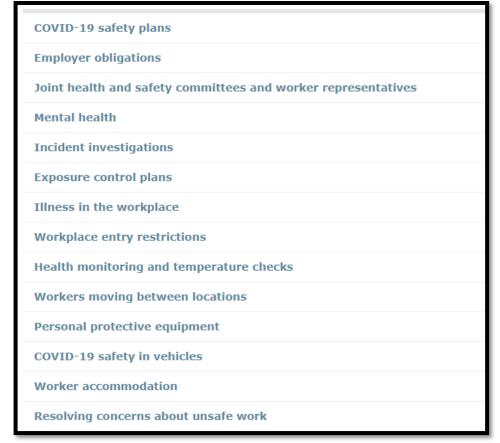
> 3.28 <u>Participation by Employer or Representative</u> of Employer and Worker Representative.





WorkSafeBC See Section VIII. Resources and Links







#### III. Health and Safety Programs

#### What does a Health and Safety Program need:

- I. General Requirements:
- Employer, supervisor, worker, owner, supplier and contractor (including sub-contractor) duties.
- Risk and hazard assessments.
- Health and safety rules and work procedures.
- Employee orientation.
- Training and education.
- Workplace inspections.





#### III. Health and Safety Programs cont'd.

- Right to refuse.
- Reporting and investigating accidents and incidents.
- Emergency procedures.
- Medical and first aid.
- Joint occupational health and safety committee.
- Health and safety promotion.
- Workplace specific items.

Red denotes areas of frequent confusion and disagreement.





#### III. Health and Safety Programs cont'd.

- Remember the Core COVID-19 related contents:
- Safety Plans based on Due Diligence, the Precautionary Principle, the Hierarchy of Controls and the 4 Rights.
- Hazard and Risk Assessments.
- Exposure Control Plans, including applying the Hierarchy of Controls.
- Worker Orientation.
- Worker Training.
- > Fully functioning and trained Joint Health and Safety Committee.
- Incident Investigations.





WorkSafeBC See Section VIII. Resources and Links

#### COVID-19 safety plans

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. Employers must involve frontline workers, joint health and safety committees, and supervisors in identifying protocols for their workplace. Refer to the COVID-19 Safety Plan OHS Guideline for information about developing a safety plan, including the level of detail required and using supporting documentation.

Below are answers to questions you may have about developing your plan.

#### Do I need to submit my COVID-19 safety plans to WorkSafeBC for approval?

Employers do not need to submit their COVID-19 safety plan to WorkSafeBC for approval, but in accordance with the order of the Provincial Health Officer of this plan must be posted at the worksite and on your website, if you have one. During a WorkSafeBC inspection, we will ask employers about the steps they have taken to protect their workers and to see their plan.

#### How will businesses know how to develop this COVID-19 safety plan?

See our Industry-specific information page for general guidance on developing your plans. It lays out a six-step process that employers should follow to prepare to return to operation safely, in a manner that reduces the potential for COVID-19 transmission. See our COVID-19 Safety Plan template for more information.

WorkSafeBC also worked with industry stakeholders to prepare industry-specific protocols and resources during Phase 1 and Phases 2 and 3 of B.C.'s Restart Plan ☑ , which employers can refer to for their plans.

As part of your planning process, you must involve workers as much as possible to ensure their concerns are heard and addressed. This includes frontline workers, supervisors, Joint Health and Safety Committees, and/or worker representatives.

#### What are the consequences of reopening without a COVID-19 safety plan in place?

WorkSafeBC will be engaging directly with employers and workers in returning industries through education, consultation and workplace inspections. Enforcement measures will be considered if employers are not taking measures to protect workers from COVID-19 exposure.



#### IV. The 4 Rights

- There are 4 rights, 3 of which have been referred to in the Act and Regulations. These are the:
  - ➤ Right to Know.
  - ➤ Right to Refuse.
  - ➤ Right to Participate.
  - ➤ Right to no retaliation/discrimination/reprisal/discipline. (Labour argues there is also the right to education A 5<sup>th</sup> right.)





#### IV. The 4 Rights cont'd.

- The 4 rights all relate directly and indirectly to Joint Health and Safety Committees.
- For example, the Right to Refuse may result in a joint investigation, discussion in the next Joint Health and Safety Committee meeting and follow-up recommendations. It may also indicate a need for education of both Joint Health and Safety Committee members and workers in general.
- Know how each Right relates to the Hierarchy of Controls.





CUPE National
Health and Safety
Branch
See Section VIII.
Resources and
Links

## Figure 1: Hazard Assessment Process

#### Note:

Risk is the combination of:

- 1. The likelihood that a worker will be exposed to a hazard that couldn't be removed, plus
- 2. The severity of harm if they are exposed to the hazard that couldn't be removed





WorkSafeBC See Section VIII. Resources and Links

#### Joint health and safety committees and worker representatives

#### What is the role of my joint health and safety committee or worker representative?

Occupational joint health and safety committees and worker representatives play an important role in helping employers establish and maintain healthy and safe workplaces. Workplaces that have more than 9 but fewer than 20 workers need to have a worker health and safety representative, while workplaces that have 20 or more workers need a joint committee.

The committee or representative gives workers and employers a way to work together to identify and find solutions to workplace health and safety issues, which includes health and safety concerns related to COVID-19. The joint committee or representative must:

- Identify situations that may be unhealthy or unsafe for workers, and advise on effective systems for responding to those situations.
- · Consider and promptly deal with complaints relating to the health and safety of workers.
- Consult with workers and the employer on issues related to occupational health and safety, and the occupational environment.
- Make recommendations to the employer and workers for improving the occupational environment.
- Advise the employer on programs and policies required under the regulations for the workplace, and monitor their effectiveness.
- Advise the employer on proposed changes to the workplace, including significant proposed changes to equipment and machinery, or the work processes that may affect the health or safety of workers.



- The fundamental role of the Joint Health and Safety
   Committee can be summarized as enforcing the Hierarchy of Controls.
- There are also core functions associated with the functioning/meetings of the Joint Health and Safety Committee.
- There are regular, ongoing core functions outside of the Joint Health and Safety Committee meetings such as inspections; accident and incident investigations; and new worker orientations (which includes workers returning to employment after an absence, changes in the workplace, multiple worksites, etc.).
- All functions are tied to the Hierarchy of Controls.





# There are many variations of the Hierarchy of Controls (next four slides)

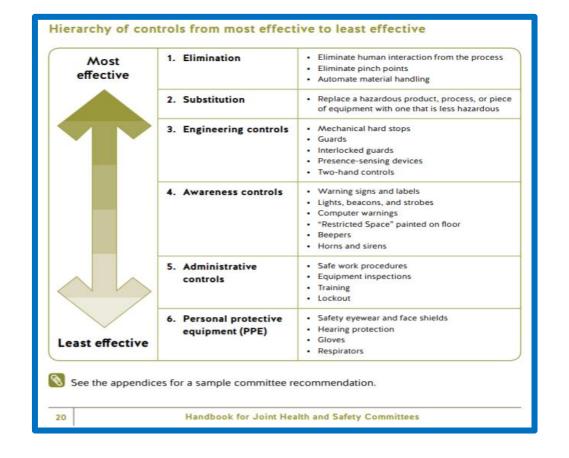


Most effective Physically remove **Elimination** the hazard Replace the **Substitution** The standard hazard model **Engineering** Isolate people from the hazard Change the way **Administrative** people work Protect the worker with **PPE** Personal Protective Equipment **Least effective** 





WorkSafeBC See Section VIII. Resources and Links







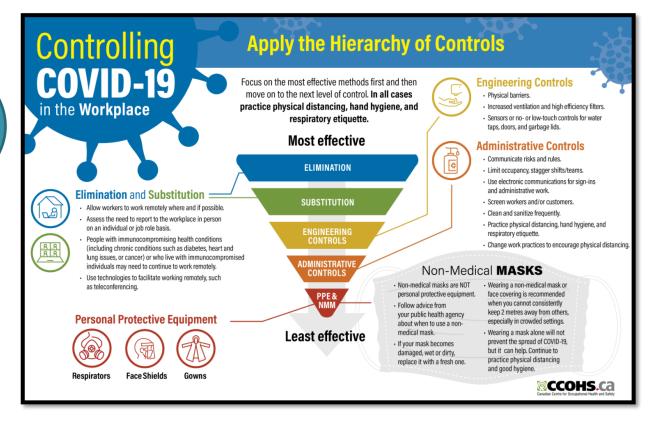
Canadian Centre for Occupational Health and Safety

#### Hierarchy of Controls for COVID-19 Prevention MODERN NIAGARA COVID-19 controls are now top of mind and are becoming integrated into existing safety work planning, such as; Scheduling, Job Hazard Analysis (JHA), Safe Work Procedures, Structured Toolbox Talks, and Plan Physically remove Elimination Of the Day Cards (task specific JHA) These above mentioned examples are created with the help of the Hierarchy of Controls. Safety Replace the hazard Substitution Committees and safety professionals are heavily relied upon to plan for actual and potential hazards and implement these controls with input from management and workers alike and then review these controls for their effectiveness. It is also the responsibility of all stakeholders to constantly learn from experiences Isolate people both positive and negative in order to continuously improve. from the hazard The application of the hierarchy of hazard controls is a recognized approach to containment of hazards Administrative Change the way and is fundamental in the world of occupational health and safety. An understanding of the strengths and **Controls** people work limitations of each of the controls enables those tasked with planning to focus on the most effective methods first until those options are exhausted and then move to the next level of control. You will Protect the worker with notice that some controls have elements of more than one category. Below is a breakdown of the hierarchy of controls as it pertains to aiding in controlling the spread of COVID19 in the workplace. The most effective means to prevent exposures to COVID-19 is through elimination - physically removing the hazard (COVID-19).; Which for Elimination the workplace is eliminating or reducing the amount of people in an area as well as not allowing people with symptoms or have come in contact with COVID19 into the workplace along with other criteria that will eliminate the chance of COVID19 entering the workplace. Physical barriers established to restrict and control worker access to areas and limit numbers to ensure physical distancing; access to adequate amounts clean water and soap, handwash stations and hand sanitizer dispensers; Using equipment to eliminate the need for workers to work in close contact. (two scissor lifts instead of one, lifting devices to allow one worker to remain on ground level while other work is active in a scissor lift). Increased air filtration devices with HEPA filters. Extra exits and entrances, planned walk paths, redesigned work areas to reduce grouping of workers. Actual physical barriers between workers and public or between workers themselves. Many of the controls for COVID19 related hazards are attached to the administration level of the hierarchy. The main forms are, policies, procedures, education, scheduling, and signage POLICIES: New rules for the workplace that are designed to eliminate or reduce threats of COVID19. Examples would be - all workers must Administrative maintain social distancing or anyone entering the premises must complete a screening questionnaire. PROCEDURES; the steps that will be created out of new polices. JHA, POD cards Controls Education; training all employees on the symptoms of COVID10 or training on handwashing. Toolbox talks SCHEDULING; stagger break times or shift start times to reduce congestion of workers. Coordinate with other trades to ensure rooms do not exceed capacity that cannot offer safe work distances of 2 metres or more. SIGNAGE; Placing appropriate messaging around a workplace directing or reminding all what are the rules of this area or the workplace. The hazard is now potentially at the person and specialized personal protective equipment is now necessary to protect the worker. PPE PPE including gloves, protective eyewear, coveralls, respiratory protection of all kinds may be required. Keep in mind this is the last form of defense and should only be used in concert with the above controls...





Canadian Centre for Occupational Health and Safety







The Joint Health and Safety Committee has many functions. These include:

- Identify situations that may be unhealthy or unsafe for workers, and advise on effective systems for responding to those situations.
- Promptly deal with concerns relating to the health and safety of workers.
- Consult with workers and the employer(s) on issues related to occupational health and safety, and the occupational environment.



- Make recommendations to the Employer and the workers for the improvement of safety of workers.
- Recommendations are the "grievances" for Joint Health and Safety Committees while Terms of Reference/Rules of Procedure are the Collective Agreement.
- Make recommendations to the Employer on educational programs promoting the health and safety of workers and the Joint Health and Safety Committees.





- Understand Hazard Identification, Assessment and Control Principles (e.g. Inspections, Job Safety Analysis, Work Procedures and Hazard Reporting Methods).
- Participate in investigation of safety complaints, including accident and incident investigations.
- Ensure that regular inspections are carried out as required.
- Ensure compliance with the Annual Joint Health and Safety Committee Evaluation Tool from the WCB.





# V. Functions of a JHSC (Inspections, Investigations, Recommendations, etc.) cont'd.

- Core functions that must occur on a regular, ongoing basis include:
  - Inspections of the workplace.
  - Accident and incident investigations.
  - Making and following up on recommendations.
  - ➤ Orientation of new workers (this includes new workplaces, processes, policies, workers returning from leaves, etc.).





# V. Functions of a JHSC (Inspections, Investigations, Recommendations, etc.) cont'd.

- Labour relations and human rights issues such as Duty to Accommodate are usually not part of the mandate of the Joint Health and Safety Committee.
- Anything to do with privacy such as disclosure of diagnoses, etc., should be referred to the CUPE National Representative immediately.





# **VI. JHSC Meetings**

- There must be monthly meetings (this includes calls, Zoom, Skype, etc.) of the Joint Health and Safety Committee.
- They should be on Employer-paid time.
- The chairing of the meeting must be alternated between the Employer and Worker Co-chairs.
- The agenda should be distributed at least one week and preferably one month in advance.
- The materials, statistics, etc. should be distributed at least one week and preferably one month in advance.



Canadian Centre for Occupational Health and Safety (page 1 of 7)



Coronavirus (COVID-19) Tips

#### Protect Yourself and Others from COVID-19

This tip sheet will help employers and administrators develop policies and procedures to protect workers and others from COVID-19. Guidance for workers is also included. This information should also be reviewed with an industry-specific tip sheet, where available.

In all situations, follow current guidance from local public health and government authorities about protective measures. Be aware that these measures may change as the pandemic continues.

#### As a worker

- · Stay informed, be prepared and follow public health advice.
  - Use trusted information sources, such as Public Health Agency of Canada: www.canada.ca/coronavirus and your local public health authority.
- Monitor yourself for symptoms of COVID-19. If you feel sick, suspect you may have been exposed, or receive a positive COVID-19 test result:
  - Stay at home and away from others.
  - Contact your health care provider or local public health authority and follow their advice.
- If you become sick while at work:
  - Immediately wear a medical mask (if unavailable, properly wear a well-constructed and well-fitting non-medical mask).
  - Isolate yourself from others in a designated space.
  - Tell your supervisor that you are going home.
  - Avoid using public transit or rideshare if possible.
  - Contact your health care provider or local public health authority and follow their advice.
- Use multiple <u>personal preventive practices</u> at once (i.e., use a layered approach) to protect yourself and others from COVID-19.
- Limit the time you spend outside of your home in the community and avoid crowds as much as possible. This is especially important if you are in one of these groups at risk for more severe disease or outcomes from COVID-19:
  - Older adults
  - People with chronic medical conditions
  - People who are immunocompromised
  - People who are living with obesity





# **VII.Addressing Problems**

- Reasons for dysfunctional Joint Health and Safety Committees include:
  - Employer selection of Worker Representatives.
  - Lack of initial training and annual education.
  - High turnover of the Joint Health and Safety Committees members.
  - Lack of mentoring of new Joint Health and Safety Committees members.
  - Retaliation against worker Joint Health and Safety Committees members.
  - Poor labour relations generally.





# VII. Addressing Problems cont'd.

- Joint Health and Safety Committee structural issues such as:
  - Poorly worded Terms of Reference.
  - Lack of role clarity including Joint Health and Safety Committees duties.
  - No clear direction by the Co-chairpersons.
  - No action plan that assigns people, resources and time lines to each action or recommendation.





## VII. Addressing Problems cont'd.

- No follow-up to action items and recommendations.
- No follow-up from inspections and investigations.
- Lack of role and function clarity between Local/Site
   Committees and Joint Health and Safety Committees.







# VII.Addressing Problems cont'd.

- Actions that can be taken include:
  - Section 38 of the Act refers to assistance in resolving disagreements within the Joint Health and Safety Committee:

If a Joint Health and Safety Committee is unable to reach agreement on a matter relating to the health or safety of workers in the workplace, a co-chair of the committee may report this to the WCB, which may investigate the matter and attempt to resolve the matter.



# VII.Addressing Problems cont'd.

- The WCB can investigate and attempt to resolve any health and safety matter upon which a Joint Health and Safety Committee is unable to reach agreement.
- ➤ Requesting a Prevention Officer to come and speak with the Joint Health and Safety Committee as per Section 38 of the Act (see the WCB P.A.C.E. program).
- ➤ Conducting a Joint Health and Safety Committee Annual Evaluation this is the easiest and most effective tool to ensure compliance.



# VIII. Resources and Links This is a partial list only. New / updated resources are created weekly.

#### **BC** Provincial Health Officer:

Province-wide restrictions <a href="https://www2.gov.bc.ca/gov/content/covid-19/info/restrictions">https://www2.gov.bc.ca/gov/content/covid-19/info/restrictions</a> BC CDC:

COVID-19
 <a href="http://www.bccdc.ca/health-info/diseases-conditions/covid-19">http://www.bccdc.ca/health-info/diseases-conditions/covid-19</a>

CUPE
On the front line



Home > Public safety and emergency services > Emergency Preparedness, Response & Recovery > B.C.'s resp

#### **Province-wide restrictions**

### **Province-wide restrictions**



Provincial restrictions are in place to help stop the spread of COVID-19. Some restrictions are made by the Provincial Health Officer (PHO) under the Public Health Act and others are made under the Emergency Program Act (EPA). Most orders can be enforced by police and compliance and enforcement officials.

Last updated: February 8, 2021

#### On this page:

- PHO order on gatherings and events
- PHO order on restaurants and bars
- EPA order on masks in public indoor settings
- Travel advisory
- Enforcement

#### PHO order on gatherings and events

This content is a summary of the <u>PHO order – Gatherings and Events (PDF)</u> document. It is not legal advice and does not provide an interpretation of the law. In the event of any conflict or difference between this webpage and the order, the order is correct and legal and must be followed.

By order of the PHO, all gatherings and events are suspended to significantly reduce COVID-19 transmission related to social interactions. The order came into effect November 19, 2020 at midnight and will be kept in place until further notice based on direction from the PHO.

#### Gatherings at residences or vacation accommodations

No social gatherings of **any size** at your residence with anyone other than your household or, if you live alone, your core bubble. For example:

- " Do not invite friends or extended family into your residence or vacation accommodation
- Do not gather in your backyard, patio, driveway or anywhere else on your property
- Do not host playdates for children



## VIII. Resources and Links cont'd.

#### CUPE Materials BC Region – General Health and Safety:

- •CUPE National has a website with many materials: https://cupe.ca/health-and-safety
- •Health and Safety Committee Resource Kit:
  <a href="https://cupe.ca/health-and-safety-committee-resource-kit">https://cupe.ca/health-and-safety-committee-resource-kit</a>
- CUPE BC OHS Committee materials:
   https://www.cupe.bc.ca/occupational\_health\_and\_safety\_committee
- CUPE BC OHS Committee:
   <a href="https://www.cupe.bc.ca/occupational health and safety committee">https://www.cupe.bc.ca/occupational health and safety committee</a>



## VIII. Resources and Links cont'd

#### CUPE Materials BC Region – COVID-19 Health and Safety:

CUPE BC OHS Committee – CUPE BC Region COVID-19
 Resources

https://d3n8a8pro7vhmx.cloudfront.net/cupebcvotes2014/pages/155 I/attachments/original/1603126940/resources\_list\_COVID-19\_2020\_09\_30.pdf?1603126940



7 pages

# CUPE BC REGION COVID-19 RESOURCES

This is a list of resources for SARS-CoV-2 and COVID-19 (the pandemic) from the CUPE BC Region, CUPE National Health and Safety Branch and CUPE Ontario. The CUPE Health and Safety Representatives from across Canada regularly coordinate and jointly work on pandemic-related resources. This document also contains information for filing a WorkSafeBC claim for SARS-CoV-2 and COVID-19 (BC).

Pandemic-related resources are constantly changing and being updated as per the CUPE National Health and Safety Branch website. CUPE creates four pandemic-related resources per month, on average. Most of these are located on the CUPE National Health and Safety Branch website. These are in addition to resources from the CUPE sector specific social media pages and websites, BC Centre for Disease Control, the Office of the Provincial Health Officer (BC), WorkSafeBC, CSA Group, various health authorities, the Federal Government, OHCOW, and other resources.

The resources from the Office of the Provincial Health Officer (BC), BC Centre for Disease Control, health authorities and WorkSafeBC are usually directory, while CUPE resources are for guidance purposes. WorkSafeBC also has de

forms and other materials for use.

For labour relations, Collective Agreement, human rights, and of health and safety matters please contact the CUPE National Re

The science and medical literature regarding the pandemic chaincome protection and other resources for workers. Ensure the information and resources are being used (and for the correct ju

Where links have changed or are broken, please refer to the Cl and Safety website.

> Tom McKenna, CUPE National Health and Safety F October 2020

> > 7 pages

34 pages

#### CUPE BC REGION

## COVID-19 RESOURCES FOR CUPE NATIONAL REPRESENTATIVES

This is a list of resources for SARS-CoV-2 and COVID-19 for CUPE National Representatives in the BC Region. This document also contains information for filing a WorkSafeBC claim for SARS-CoV-2 and COVID-19 (BC). This document is an internal document and not meant for distribution with the exception of Section II (which is on the CUPE BC OHS Committee website).

Screenshots of various resources are included to show the appearance of websites.

Pandemic related resources are constantly changing and being updated as per the CUPE National Health and Safety Branch website. These are in addition to resources from the CUPE sector specific social media pages and websites, BC Centre for Disease Control, the Office of the Provincial Health Officer (BC), WorkSafeBC, CSA Group, various health authorities, the Federal Government, OHCOW, and other resources. Ensure the most current information and resources are being used (and for

The resources from the Office of the Provincial Health Officer e Control, health authorities and WorkSafeBC are usually other resources are for guidance purposes. WorkSafeBC es, forms and other materials for use. The Office of the d the relevant health authorities should always be the

ase search for the document link using the title.

the other CUPE National Health and Safety nce with this document, and, in particular, I would like to d Paul Sylvestre.

UPE National Health and Safety Representative November 2020

SARS-CoV-2 / COVID-19

Mental Health Resources and Links for CUPE Members - BC Region

January 2021

Tom McKenna, CUPE National Health and Safety Representative BC Region

The pandemic has caused a significant increase in mental health issues across Canada and for Indigenous persons, the LGBTQ2+ community, persons with disabilities, women, younger people, the unemployed, and persons with preexisting mental health issues in particular. As per News 1130:<sup>1</sup>

"While 40 per cent of the 3,027 Canadian adults surveyed said their mental health has declined since March, 21 per cent of Canadians said they are hopeful.

However, the survey was executed in September, before major spikes in daily case counts, increased restrictions, and the recent spate of record-setting deaths in B.C.

Increased feelings of despair and hopelessness were more pronounced in people who identified as Indigenous (54 per cent), LGBTQ2+ (54 per cent), disability (50 per cent) or women (45 per cent).

Those who are unemployed (61 per cent), have a pre-existing mental health issue (61 per cent), and younger people aged 18-24 (60 per cent), also experienced heightened anxiety and stress above the national average."

(Emphasis added)

<sup>1</sup> Kelly, A. December 03, 2020. "Such despair they can't see past it': Pandemic-driven mental health crisis on the rise in Canada." City News. News 1330. Retrieved January 26, 2021 from <a href="https://www.citynews1320.com/2020/12/03/covid-19-pandemic-mental-bealth-crises-canada/">https://www.citynews1320.com/2020/12/03/covid-19-pandemic-mental-bealth-crises-canada/</a>

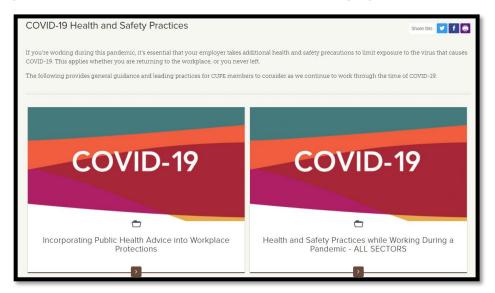
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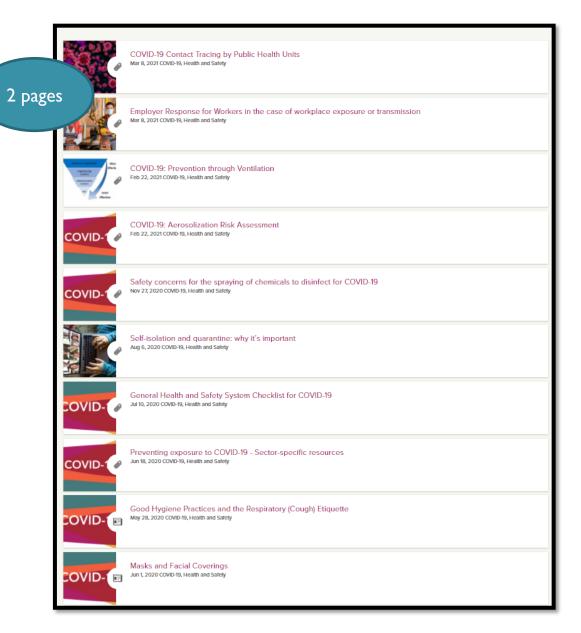
#### VIII. Resources and Links cont'd

CUPE Materials CUPE National Health and Safety – COVID-19 Health and Safety (Note: the following illustrations are multiple pages):

CUPE National – COVID-19 Health and Safety Practices
 <a href="https://cupe.ca/covid-19-health-and-safety-practices-0">https://cupe.ca/covid-19-health-and-safety-practices-0</a>









#### Preventing exposure to COVID-19 - Sector-specific resources









#### RELATED CONTENT

COVID-19 Contact Tracing by Public Health Units

Employer Response for Workers in the case of workplace exposure or transmission

Employment Insurance and federal recovery benefits: Q&A

View all

As the global pandemic of COVID-19 persists, CUPE wants to ensure that employers and members continue to implement leading practices to prevent workplace exposure to the virus which causes COVID-

The guidance in these documents is specific to the hazard related to COVID-19. It is intended to assist CUPE health and safety activists in their efforts to ensure that adequate protections are in place for members. In the case of those workplace that have suspended operations, the guidance is intended to assist in implementing effective controls prior to the resumption of normal operations.

It remains vital that employers continue to work with their (joint) health and safety committee about the best way to control sector-specific hazards during this pandemic.

#### ATTACHMENTS

- ALL SECTORS
- Airlines
- Aquatic facilities
- d Child Care
- d Community and Social Services
- Education sector
- Emergency Medical Services sector
- ☑ Energy sector
- Food Management and Services
- Health Care and Long-Term Care
- ☑ Library sector
- Municipal sector
- ☑ Post-Secondary Education sector
- ☑ School Buses ("Vehicles")





5 pages



#### General Health and Safety System Checklist for COVID-19 July 10, 2020

The best way to address health and safety concerns is to put the COVID-19 response plan in place before workers are re-introduced into the workplace. Where work has never stopped, existing hazard (or risk) assessments should be reviewed in light of COVID-19. This must be done with a (Joint) Health and Safety Committee or the Health and Safety Representative (HSC/HSR) consultation, as appropriate.

Below is a sample checklist to evaluate the current health and safety system in your workplace as it related to COVID-19. For more information on specific health and safety practices for COVID-19, HSC/HSR resources, and how a hazard/risk assessment can be performed, please visit the CUPE National Health and Safety Section of the website (see links below).

Worker Participation	Yes	No
Are the worker representatives on the HSC selected by the trade union?		
Has the HSC/HSR been consulted about the reopening of the workplace or how COVID-19		
may potentially affect workers' health and safety?		
Do(es) the HSC/HSR have a copy of the employer's risk assessment?		
Does the COVID-19 plan include floor plans/layout/tables indicating the locations of COVID-		
19 control measures in the workplace*?		
Are there clear lines of communication between the CUPE Local Executive and the HSC/HSR?		
Are HSC/HSR members receiving occupational illness notices and information related to		
COVID-19 exposures?		
Are HSC meetings being held often enough to be useful and relevant to the changing		
circumstances?		
Are HSC meetings being held in a manner suitable for COVID-19? (For example, are they		
being held in-person or through an online platform?)		
Was an inspection with worker representative(s) for re-opening performed before workers		
re-entered a space that was vacated?		
Will the committee or representative be performing increased inspections to ensure COVID-		
19 precautions are in place?		
Has a workplace COVID-19 policy and plan to implement the policy been prepared with the		
full participation of the joint health and safety committee (JHSC) or worker health and safety		
representative?		
Has the employer posted the full workplace COVID-19 policy and plan in the workplace and		
communicated both to all workers, supervisors, vendors, contractors and clients/customers		
as appropriate, in writing and/or electronic format?		

\*Note – when these are included, it provides specificity to any reader about what will be happening where. Floor plans provide an opportunity to evaluate the space under consideration.

Additional notes or comments or follow-up



### VIII. Resources and Links cont'd

#### WorkSafeBC – COVID-19 Health and Safety:

- WorkSafeBC COVID-19 webpage
   <a href="https://www.worksafebc.com/en/covid-19">https://www.worksafebc.com/en/covid-19</a>
- COVID-19 Information for Workers
   https://www.worksafebc.com/en/covid-19/covid-19-information-for-workers
- COVID-19 FAQs
   <a href="https://www.worksafebc.com/en/covid-19/health-and-safety/covid-19-faqs">https://www.worksafebc.com/en/covid-19/health-and-safety/covid-19-faqs</a>
- Exposure Control Plans, Risk Assessments, Precautionary Principle <u>https://www.worksafebc.com/en/law-policy/occupational-health-safety/searchable-ohs-regulation/ohs-guidelines/guidelines-part-06</u>



