Checklist for the control of COVID-19 in agricultural facilities

(Version – August 5, 2020)

Agricultural facilities that employ temporary foreign workers (TFW) have an important role to play in helping to prevent the introduction and spread of COVID-19. This document is intended to assist in understanding how to fulfill that role, with a view to helping to protect the health and safety of all employees using a risk-based approach. This resource can be used to create a COVID-19 assessment and control plan for applying specific preparation, prevention, and management measures.

Throughout the course of this pandemic, employers, staff and TFWs are expected to follow the latest public health requirements of the province/territory in which they operate consistent with guidance from the Government of Canada. The employer is required to ensure that all occupational health and safety measures are in compliance with provincial/territorial and public health laws related to COVID-19 and that staff and workers meet those requirements. This includes new provisions in several jurisdictions for job-protected sick leave as a result of the COVID-19 pandemic.

In addition to the information provided below, please ensure you check the <u>Employment and Social</u> <u>Development Canada website for the most current guidance for temporary foreign workers regarding COVID-19 and the Public Health Agency of Canada for the latest information about COVID-19*.</u>

COVID-19 assessment and control plan

It remains important that measures to prevent and slow the spread of COVID-19 continues after the quarantine period of temporary foreign workers ends. All aspects of the agricultural operation should be considered.

The purpose of this tool is to assess infection prevention and control (IPC) practices in communities where TFWs live and work in order to prevent the transmission of COVID-19. The infection prevention and control (IPC) elements are based on accepted standards and best practices. Examples of these are workplace practices, IPC practices, employee education/knowledge assessment, physical environment and engineering controls in living quarters.

*Note: web addresses for all hyperlinks are listed at the end of this document.





How the virus enters and spreads in a workplace

Agricultural work environments have been associated with increased transmission of the virus causing COVID-19. This may be due to such things as shared accommodations, gathering in areas where workers cannot avoid frequently touched surfaces, close contact with other employees or shared use of equipment. The most important control measure possible in congregate living and worksite locations is taking steps to prevent the introduction and spread of the virus. Factors that are believed to contribute substantially to the introduction and increased transmission of COVID-19 in workplaces include:

Close contact with an infected individual — A worker may come into close contact with a COVID-19 infected individual (symptomatic or asymptomatic) at a communal residence or at a worksite where physical distancing cannot be practised or other prevention measures employed. Additionally, a worker brought onsite from the community (e.g. through use of temporary staffing services) may introduce the virus to the temporary foreign workers on-site if measures to prevent this type of transmission are not in place.

Distance between employees – Employees often live and work closely with one another, such as when clocking in or out, during breaks, and as part of communal living.

Duration of contact – Employees may have long shifts where they have close contact with coworkers. Employees who live together, such as TFWs, may also have prolonged contact with their housemates and work crews. Continued contact with individuals infected with COVID-19 increases the risk of transmission.

How transmission occurs – Employees may be exposed to the virus through respiratory droplets in the air, for example, when someone in a greenhouse or bunkhouse who has the virus coughs or sneezes. It is also possible that exposure could occur when employees touch contaminated surfaces or objects, such as tools, field equipment, workstations, communal kitchens, washrooms or break room tables and then touch their mouth, eyes or nose before washing their hands. Shared spaces that increase close personal contact such as bunkhouses, break rooms and locker rooms may also increase risk. It is important to avoid touching your face with unwashed hands.

Other factors that may increase risk among employees include:

- Not physically distancing from others (at least two metres).
- Not following good hygiene practices such as washing hands frequently, respiratory etiquette and touching eyes, nose or mouth with unwashed hands.
- Working when ill and being in close contact with others while ill.
- Sharing transportation such as ride share, shuttle vehicles, car-pools, public transportation
 without appropriate personal protective equipment (PPE) and restrictions on seating in the
 vehicles.
- Frequent contact with community residents, family members, and fellow employees in areas where there is ongoing community transmission.

As the situation regarding COVID-19 continues to evolve, it is recommended that you consult the Public Health Agency of Canada for the latest information about COVID-19.

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This checklist can be used to reassess, update, and modify your assessment and control plan on a regular basis or as conditions change.

Date:	Completed by:

Section 1: Quarantine

Temporary foreign workers are screened under the *Quarantine Act* upon arrival in Canada, and are required to have an isolation plan in place for 14 days. Temporary foreign workers who do not abide by mandatory isolation requirements may face penalties under the *Quarantine Act*.

Employers are responsible for facilitating their employees' self-isolation. In parts of Canada, employers are also responsible for providing workers with appropriate housing. Employers who do not comply with their requirements are subject to penalties under the *Immigration and Refugee Protection Regulations*.

Employers must not prevent workers from meeting the requirements under the *Quarantine Act* in any way. This includes not making the worker interact with workers or others who are not in quarantine.

In most cases, the employer cannot authorize the worker to work during the quarantine period, even if requested by the worker. There are exceptions for those deemed as providing an essential service by the Chief Public Health Officer. In addition, the employer cannot ask the worker to perform other duties during that period, such as building repairs or administrative tasks.

For situations where workers become ill, please refer to the Managing COVID-19 infected workers section below.

Temporary foreign workers entering Canada follow obligations related to mandatory quarantine	Completed	Ongoing	Not Started	N/A
Workers are provided information on COVID-19 either on or before their first day of quarantine.				
Note: this information should be provided in a language/format the worker understands in writing and orally. Several resources are available online. In addition, the Public Health Agency of Canada has some materials available in several languages for use.				
Quarantined workers have access to food, medicine, and/or basic supplies while in the mandatory quarantine period.				
Worker health, specifically including potential signs and symptoms of COVID-19, is monitored during and after quarantine period. Note: If a worker becomes symptomatic at any time, the employer should contact local public health officials.				
Any violation(s) of the <i>Quarantine Act</i> on the part of a worker in quarantine or isolation are reported to local law enforcement. This includes workers that do not respect the mandatory quarantine period.				
Workers in quarantine are housed in accommodations separate from those not subject to quarantine. Ideally quarantined workers should be housed individually. Note: This may require alternate accommodations (e.g. hotel) if this requirement cannot be met.				

Workers who are subject to quarantine together must maintain a 2 metre distance from each other at all times. For example: Only one bunk in a bunk bed can be used. Beds/bunks must be at least 2 metres apart. Shared facilities (for example bathroom, kitchen, living space) are allowed, provided that there is sufficient space in the accommodations for workers to respect the quarantine requirements. Enhanced cleaning and disinfection protocols of common shared spaces should be followed. Workers are provided with cooked meals or the ingredients to prepared their own meals. Those in shared quarantine facilities* should wear a non-medical mask or face covering and conduct frequent hand hygiene in situations where physical distancing is difficult to maintain. If this requirement cannot be met, alternate accommodations (e.g. hotel) may be required.	
 Beds/bunks must be at least 2 metres apart. Shared facilities (for example bathroom, kitchen, living space) are allowed, provided that there is sufficient space in the accommodations for workers to respect the quarantine requirements. Enhanced cleaning and disinfection protocols of common shared spaces should be followed. Workers are provided with cooked meals or the ingredients to prepared their own meals. Those in shared quarantine facilities* should wear a non-medical mask or face covering and conduct frequent hand hygiene in situations where physical distancing is difficult to maintain. If this requirement cannot be met, alternate accommodations (e.g. hotel) may be required. 	
covering and conduct frequent hand hygiene in situations where physical distancing is difficult to maintain. If this requirement cannot be met, alternate accommodations (e.g. hotel) may be required.	
*In the best interest of all parties, it is recommended that date-stamped photos be taken of the facilities, including the bedroom, to demonstrate compliance.	
Note: If new workers are housed for quarantine in the same accommodations as others who are in quarantine, the clock resets to the day the most recent worker arrived. This is to account for the potential exposure of the new person from outside of the country to those already here.	
Quarantine accommodations prevent contact between the quarantined worker and older adults (65+) and those with medical conditions who are at risk of developing serious illness due to COVID-19.	
Comments / Notes	

^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

Section 2: Assessment

The Public Health Agency of Canada's <u>risk mitigation tool for workplaces/business operating</u> <u>during the COVID-19 pandemic</u> can provide information on assessing risk factors and determining appropriate mitigation measures to prevent/reduce these risks.

Consider the characteristics of your region, worksite, space, and job tasks that may impact assessment and control of COVID-19.	Completed	Ongoing	Not Started	N/A
Monitor federal, provincial, and local public health communications about COVID-1	9.			
Workers have access to, have reviewed, and understand current information, in the language of their choice, and verbally if necessary.				
Information such as signs and symptoms of COVID-19 are made available in both written and illustrative format and is posted in key areas (such as entrances and common areas).				
Information about hand hygiene is made available in both written and illustrative format and is posted in key areas (washrooms and eating areas).				
Workers and other staff know when and how to contact key people such as: Key facility individuals (e.g. supervisor / manager). Health care providers (if applicable). Local public health unit. COVID-19 assessment centre.				
Coronavirus disease (COVID-19): Prevention and risks is checked daily, or as needed depending on local conditions.				
A workplace coordinator responsible for COVID-19 assessment and control planning	is identific	ed.	ı	
All workers know how, and under which circumstances, to contact the coordinator.				
Coordinator(s) provide culturally appropriate materials that are appropriate for the participants' age, ability, and literacy level and language preferences.				
 Coordinator communicates measures to reduce COVID-19 in your community: importance of self isolating in designated lodging if ill, hand hygiene: (washing hands with soap & water for at least 20 seconds and when visibly dirty. If soap & water not available, alcohol based hand sanitizer containing at least 60% alcohol), respiratory etiquette, avoid touching face, physical distancing, wearing non-medical masks or face coverings, cleaning and disinfecting personal environment. 				
Staff and worker training: Staff and workers receive ongoing education and training on the importance of hand hygiene and respiratory etiquette.				

Comments / Notes	

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Section 3: Control Plan 3.1 Screening and monitoring workers Policies and procedures for screening workers for COVID-19 signs and symptoms Completed Ongoing N/A Started are developed. Workers know to stay home / in designated lodging if ill: They should stay home if ill, even if they only have mild symptoms. Know to inform their supervisor of any illness that could be COVID-19. Know to inform their supervisor if they have been at another facility with COVID-19 cases or if they have been exposed to COVID-19 (e.g., a contact of a Are aware of the sick leave policy, that they should get paid, and know they will not be punished for taking sick leave. Workers know to inform a manager if there has been contact with COVID-19: • Workers are told to inform their manager/supervisor, if they have worked at any another facility and if they have been advised that hey have had contact with COVID-19 cases, or if they have been exposed to COVID-19 (e.g., a contact of a case). Note: The local public health unit can assist with recommendations about possible exposures to COVID-19 and advice regarding quarantine (self-isolation). There are uniform policies and procedures for screening workers for COVID-19 signs and symptoms as well as potential exposure to others (i.e. contact of a case). Anyone with symptoms consistent with COVID-19 should not be allowed to enter the worksite. (see section below) Workers are screened for potential symptoms of COVID-19 and the results recorded before they enter the worksite and / or, if possible, before they board shared transportation. Workers know how they can conduct a self-assessment for COVID-19. Workers know how and where to get COVID-19 testing. Work site assessments are regularly conducted to identify COVID-19 risks and prevention/mitigation strategies. Verbal screenings for signs and symptoms of COVID-19 are conducted using workers' preferred languages. If symptoms present, workers should be isolated and local public health contacted. Consider signage with images if language is a Workers are encouraged to report symptoms immediately, when on-site and the supervisor knows what to do with the symptomatic worker. Workers who have symptoms know to self-isolate and contact a healthcare provider or local assessment centre. Workers who have symptoms of COVID-19 have access to food, medicine, and/or basic supplies, as well as direct medical care or telemedicine, when appropriate. Any recommended diagnostic testing is coordinated with local public health officials. Workers understand when it is safe to return to work and the operation's returnto-work policies and procedures. Symptomatic workers are removed from schedule and replacements assigned.

Personnel performing screening activities are protected.		
Temperature screeners (if used) are trained to use temperature monitors according to manufacturer instructions.		
Physical distancing, barrier or partition controls, and appropriate personal protective equipment (PPE) are used to protect screeners.		
Screeners who must be within 2 metres of workers, are provided with appropriate personal protective equipment including gloves, gown, eye protection, face shield, and face mask (at minimum), in conjunction with the Public Health Agency of Canada routine practices and additional precautions (PDF).		
Workers are trained how to properly put on, take off, and appropriately dispose of all PPE using designated no-touch waste receptacles.		
Comments / Notes		

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3.2 Managing COVID-19 infected workers

The employer is asked to monitor the health of workers. If a worker becomes symptomatic at any time, the employer is required to immediately provide accommodations that enable the worker to be isolated from others, including a private bedroom and private bathroom and also contact local public health officials.

Employers must ensure they have a clear plan to isolate, monitor and test symptomatic possible cases/COVID-19 infected workers/and workers who are contacts of possible cases.

All actions with COIVD-19 infected workers must be performed under the direction of local public health.

Please consult:

- Guidance on Case and contact management and how/when to engage public health authorities.
- Guidance on isolating a case in the home or co-living setting.

Monitoring and management of sick workers	Completed	Ongoing	Not Started	N/A
Local public health should immediately be notified of a symptomatic worker or a person suspected of having COVID-19.				
COVID-19 infected or symptomatic workers are immediately separated from others if they develop symptoms while at work.				
COVID-19 infected workers wear a face mask or covering if they have one, perform frequent hand hygiene, follow respiratory etiquette, ensure cleaning and disinfection of surfaces and/or tools, particularly those touched by the worker.				
Public health is notified immediately about suspected or known COVID-19 infected workers.				
Workers are provided with the means to contact public health themselves. There is a procedure for safely transporting COVID-19 infected workers to housing or a healthcare facility – ensuring they do not use public transit.				
COVID-19 infected workers who can't be isolated in their existing housing arrangement are provided with alternative housing arrangements under quarantine away from other workers (including suspect cases) according to local public health.				
Isolated workers are evaluated on twice daily basis for worsening of symptoms.				
Arrangements are in place to continue to care for COVID-19 infected workers in isolation (e.g. laundry is done, meals provided etc.)				
Provide written guidelines on how to manage laundry used by COVID-19 infected individuals. Consult: How to care for a person with COVID-19 at home — advice for caregivers (PDF), under: Keep your environment clean. COVID-19 infected workers know to avoid contact with animals, including livestock and pets.				
COVID-19 infected workers are provided with complete access to medical attention and are supported to access required medical care and know how to access this care.				
COVID-19 infected workers understand the operation's return to work policies and procedures.				
Protect personnel managing sick workers.	1	<u> </u>		
Personnel managing COVID-19 infected workers and those needing to be within metres of ill workers are provided with appropriate personal protective equipm (gloves, gown, face shield, and face mask).				

Workers are trained to properly put on, take off, and dispose of PPE in appropriate			
no-touch waste receptacles for discarding used PPE, and perform appropriate hand			
hygiene.			
An inventory of available PPE is kept to track the number of available masks, face			
shields, disposable gloves (all sizes) and disposable gowns (all sizes).			
Action plans are in place for workers with suspected or confirmed COVID-19.			
Any worker with possible exposure to COVID-19 through close contact is informed			
and provided instructions and location for isolation and self monitoring of			
symptoms according to local public health.			
The work area, equipment, common areas, and tools the COVID-19 infected worker			
used are cleaned and disinfected before use by any other person.			
If there is a COVID-19 infected worker in employer-furnished housing:			
Dedicated space for worker recovery is provided, away from all other workers,			
including those suspect cases, according to local public health.			
Living quarters, cooking and eating areas, bathrooms, and laundry facilities are			
cleaned and disinfected regularly with approved hard-surface disinfectants.			
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Workers are not allowed to use shared areas until after they are cleaned and			
disinfected. COVID-19 infected workers are excluded from using shared spaces as			
per quarantine/isolation protocols. Meals and essential care items should be			
delivered.			
A COVID-19 infected -worker going to a home in the community knows how to			
reduce the risk of spread in the home.			
Work with local, and/or provincial/territorial health officials to identify other			
exposed individuals and follow their advice on the need to quarantine (self-isolate)			
and for guidance on testing and workplace contact tracing.			
Comments / Notes			

^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

Consult the Public Health Agency of Canada's <u>resources for examples of mitigation strategies</u> (e.g., staggered breaks) based on risk factors mentioned below (e.g., physical proximity, handling of common equipment).

3.3 Engineering / Built environment controls

Physical distancing policies and practices are established.	Completed	Ongoing	Not Started	N/A
Visitor/vendor access to the bunkhouses and worksite is restricted through use of physical barrier, check point and/or security.				
If visitor access is required (e.g. regulatory inspectors) it is recommended visitors should be screened for signs and symptoms of COVID-19 infection or close contact with a COVID-19 case before entering and access within the workplace is limited to essential areas as required. This should be documented.				
Opportunities to limit close contact (less than 2 metres) between all individuals at the workplace are assessed and identified.				
Workflow is adjusted to allow for at least a 2 metre distance between workers.				
Workflow and movement are controlled (one directional where possible) and barriers or other engineering controls to reduce contact with common surfaces are in place.				
All workers should wear masks for situations where they may be within 2-metres of other people.				
Shields or barriers between workers are used when a 2 metre distance is not possible. Non-medical masks should also be used.				
Additional (touch-free, if possible) time clock stations are added or allow more time to clock in and out to reduce crowding.				
Arrival and departure time, and break, meal, kitchen, and bathroom times are staggered to avoid overcrowding.				
 Ventilation in the workplace is increased: Open windows if possible and, if weather permits. Move work outside when possible. 				
Visual cues to promote physical distancing are provided in break areas (for example, remove or rearrange chairs).				
All workers are trained to follow social distancing measures to prevent/reduce COVID-19 spread while on breaks.				
Workers wash their hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer containing at least 60% alcohol.				
There is access to conveniently located hand hygiene facilities prior to getting on shared transportation and prior to entering work site.				

Comments / Note	

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Checklist Section 3: Control Plan

Workers are provided with the tools needed to practice good hygiene. This includes access to facilities that enable them to wash their hands often with soap and warm water, providing soap, and providing an alcohol-based sanitizer if soap and water are not available and hands are not visibly soiled.

Surfaces in the accommodations are cleaned and disinfected regularly. Surfaces in bathrooms, kitchens and common areas are cleaned and disinfected daily, or more often as required, and that a record maintained. Workers can do this, as it constitutes essential care. The services of a professional cleaner can also be used, if desired. Regardless, cleaning materials should be provided (e.g. paper towels, household cleaning and disinfection products, dish soap and laundry soap).

3.4 Personal hygiene; cleaning, disinfection, and sanitation				
Promote hand hygiene.	Completed	Ongoing	Not Started	N/A
Workers practise good hygiene:				
 COVID-19 is a contagious disease. Proper hygiene practices will help lower the chance of getting it or spreading it to others. Workers should continue to do the following: Perform hand hygiene frequently. Cough and sneeze into a tissue or the bend of your arm. Avoid touching your face with unwashed hands. Dispose of used tissues in a lined waste container and then wash your hands. 				
Workers know to:				
 Wash their hands often with soap and water for at least 20 seconds, or Use hand sanitizer with at least 60% alcohol (when handwashing facilities are not available). 				·
There is access to permanent and/or temporary hand washing facilities equipped with soap, clean water, and clean, single-use towels.				
When soap and water are not immediately available, there is access to temporary stations, placed in multiple locations, equipped with hand sanitizer containing at least 60% alcohol. Or, workers are provided with individual containers of hand sanitizer to use in field settings.				
Visual cues are provided to prompt individuals to perform hand hygiene (particularly for use of individual containers of hand sanitizer, in the absence of alcohol based hand rub dispensers).				
Note: If hands of workers are soiled, hand hygiene may not be effective. May need to provide wipes to remove visible dirt, then they can perform hand sanitizing.				
Cleaning and disinfection				
There are sanitation protocols for daily cleaning and disinfection of work sites and record of cleaning practices, where feasible.				
The number of common surfaces that need to be touched are reduced where possible (e.g., prop doors open, no-touch waste containers).				
There is an adequate inventory of equipment/tools etc. to minimize sharing, if possible.				_
There are cleaning and disinfecting procedures for high-touch areas such as tools, equipment, and vehicles.				
Cleaning schedules are prepared and when cleaning is performed it is documented.				

Workers understand and follow cleaning product manufacturers' contact time			
recommendations. Consult: <u>Cleaning and disinfecting public spaces during</u> COVID-19			
Appropriate disinfectants or alternative cleaning methods (e.g., soap and water)			
are used for surfaces with which food comes into contact.			
There is targeted and frequent cleaning and disinfecting of high-touch areas (e.g.			
bathroom fixtures, vending machines, railings, door handles).			
Break areas are cleaned and disinfected daily and between groups (e.g. tables,			
high touch surfaces etc.)	+		
Locker rooms are cleaned and disinfected after each shift (e.g. tables, high touch surfaces etc.)			
Disposable disinfectant wipes are available to frequently clean commonly			
touched surfaces.			
Prevent or limit sharing of tools, when possible.			
Shared tools are cleaned and disinfected between worker use. If cleaning tools			
after each use is not possible, conduct daily, targeted, and more frequent			
cleaning of tools.			
cleaning of tools. Comments / Notes			
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^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

Information about preventing the spread of COVID-19 should be posted in the accommodations, in easy to understand language, including information that outlines best practices for workers in maintaining bathroom and other washing facilities. It is suggested that such information be posted in bathrooms, kitchens and common areas, and that it be posted in the language of the worker. Several resources are available on Coronavirus disease (COVID-19): Awareness resources. In addition, the Public Health Agency of Canada has some materials available in several languages for use.

This <u>risk mitigation tool for workplaces/businesses operating during the COVID-19 pandemic</u> provides examples of mitigation strategies (e.g., staggered breaks) based on risk factors (e.g., physical proximity, handling of common equipment).

Note: the goal is to promote understanding by all workers so it is suggested information be provided in a language and format the worker understands. Consideration should be given to providing this information in writing and/or orally (for example by phone), as appropriate.

Several resources are available online. In addition, the <u>Public Health Agency of Canada</u> has some materials available in several languages for use.

3.5 Administrative controls	Completed	Ongoing	Not Started	N/A
Restrict non-essential travel and site access.				
Visitor / vendor access to the worksite and bunkhouse is restricted to workers of those accommodations only.				
Bunkhouse access is restricted to residents of those facilities only. Additionally, co-mingling between residents of different bunkhouses is not permitted.				
Unregulated temporary staffing services / contractors are not used to fill workforce gaps within the temporary foreign workforce employees.				
Working as a bunkhouse cohort is encouraged.				
Daily screening of workers for signs and symptoms of COVID-19 or potential contact with a COVID-19 case are conducted before entering the workspace.				
COVID-19 training, that is easy to understand, is provided in preferred languages levels. Workers should receive training about:	, and at app	propriate	literacy	1
Signs and symptoms of COVID-19, how it spreads, risks for workplace exposures, and how workers can protect themselves.				
What to do if they are infected with COVID-19.				
How to alert their supervisors if they have signs or symptoms of COVID-19 or recent close contact with someone with confirmed or suspected COVID-19.				
Proper handwashing and use of hand sanitizer.				
Farm-specific physical distancing practices.				
Cough and sneeze etiquette.				
How to put on and take off non-medical masks and gloves.				
Employer policies regarding COVID-19 (e.g., disinfection protocols, housing and worker isolation, sick leave polities).				
Signage is posted to remind employees/clients to practice these measures, ensuring that it is appropriate for the employees'/clients' age, ability, reading level and language preferences.				
Many downloadable resources on personal preventive practices are available on Coronavirus disease (COVID-19): Awareness resources.				
Employers provide weekly updates to staff to reinforce infection control practice measures and provide updates when new information is available.				

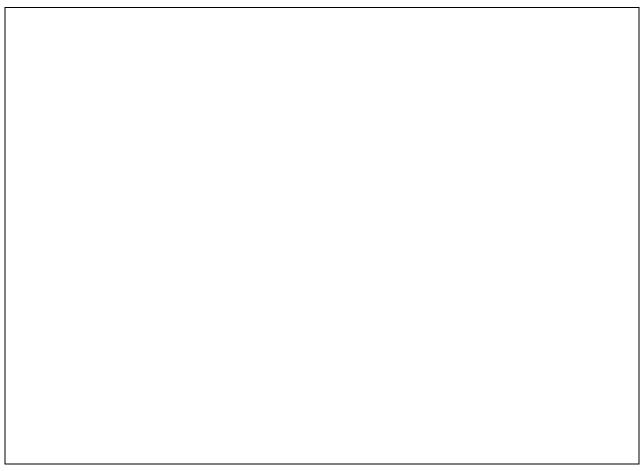
Supervisors and trained individuals observe and provide just-in-time feedback to workers on infection prevention and control practices such as respiratory			
etiquette and hand hygiene.			
Leave and sick leave policies			
Ill workers know they should stay home when sick and are not punished for taking sick leave.			
Workers are aware of and understand sick leave policies.			
Workers understand that they will not be penalized for taking sick leave if they have COVID-19.			
Flexible leave policies allow advances on future sick leave or workers to donate sick leave to each other.			
Promote physical distancing.			
Crew sizes are reduced to maintain physical distancing.			
Work shifts, mealtimes, and break times are staggered.			
If vehicles are used: they need to be appropriately sized, with an empty seat in between workers. Workers need to wear non-medical masks and alcohol-based hand sanitizer must be made available.			
Farmworkers work in alternate rows in fields to keep at least a 2 metre distance from other workers.			
Materials are moved at a central transfer point instead of transferring directly from one worker to the next.			
Healthy workers are grouped together into cohorts that include the same workers each day.			
Note: If this "social circles" concept can be enforced (with the assumption that workers are only part of one circle), then some of the physical distancing measures may not be necessary.			
Workers who are in the same shared housing unit understand and follow the Special considerations for shared housing (see below).			
Training is conducted outside and in smaller groups, with participants spaced 2 metres apart.			
Comments / Notes			
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^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

The Public Health Agency of Canada recommends and encourages wearing non-medical masks or cloth face coverings* to protect others as an additional protective measure in addition to physical distancing. This is particularly important when a consistent, two metre distance is not easily maintained or is unpredictable, as in crowded spaces.

* Non-medical masks and cloth face coverings should not be placed on anyone who has trouble breathing or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.

3.6 Personal protective barriers If non-medical masks or cloth face coverings are worn in the workplace because Not Completed Ongoing N/A social distancing of 2 metres is not possible: Started Follow current recommendations for non-medical face masks or face coverings. They should: allow for easy breathing, fit securely to the head with ties or ear loops, maintain their shape after washing and drying, be changed as soon as possible if damp or dirty, be comfortable and not require frequent adjustment, be made of at least 2 layers of tightly woven material fabric (such as cotton or linen), and be large enough to completely and comfortably cover the nose and mouth without gaping. Refer to the Public Health Agency of Canada's guidance on non-medical masks. Personal protective equipment A hazard assessment has been done to determine if personal protective equipment is necessary to protect workers if social distancing of 2 metres is not possible. Workers performing cleaning and disinfecting are provided with appropriate PPE based on information from Safety Data Sheets. Workers are provided with detailed instructions for putting on and taking off PPE, including observational training by trained staff. When occupational health and safety requires the use of prescribed personal protective equipment, consider additional hazards that may be created by poorly fitting PPE in the work environment and how to prevent such hazards. Workers are allowed to continue wearing gloves they would normally wear while doing fieldwork. Training should include the following: When to use PPE and what PPE is necessary. How to properly put on and take off PPE. How to properly dispose of disposable PPE. How to properly clean and disinfect reusable PPE. Reminder to change PPE if it is torn, dirty, or otherwise damaged. Reminder to wash hands with soap and water for 20 seconds frequently and when visibly dirty or use alcohol-based hand sanitizer containing at least 60% alcohol after removing PPE. **Comments / Notes**



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Section 4: Special considerations for shared housing

Resource(s):

• How to isolate in the home or co-living setting.

Note: all guidance / direction provided by local / provincial public health for shared housing must be followed

Consider coordinating bulk grocery pickup or delivery to minimize the frequency /			Started	
necessity for workers to leave the housing site.				
Workers have information and understand how to prevent transmission in housing areas.				
Where possible, employees are organized into work teams so the same group live, work, and travel as one unit.				
There are dedicated and segregated sleeping quarters, kitchens, and restrooms for quarantining workers with confirmed or suspected COVID-19 in accordance with direction from local public health.				
Note: Those exposed are in quarantine (self-isolation, see above). Considerations should be taken to separate confirmed cases from suspect cases, as those exposed may not necessarily become infected.				
Dishes, drinking glasses, cups, and eating utensils are not shared.				
Non-disposable food service items are handled with gloves and washed with hot water and dish soap, or in a dishwasher.				
Soap for handwashing, and household cleaners are available to help workers implement personal preventive measures.				
Meetings and conversations are conducted outdoors, whenever possible, to minimize congregation in close quarters.				
Encourage residents to wear a non-medical mask or cloth face covering in shared spaces, where a 2 metre distance cannot be maintained.				
Note: non-medical masks and cloth face coverings should not be placed on anyone who has trouble breathing or is unconscious, incapacitated or otherwise unable to remove the mask without assistance.				
Enhanced sanitation and cleaning plans are developed and implemented.				
Frequency of cleaning and disinfecting is specified and records are kept.				
A designated person(s) responsible for carrying out the sanitation and cleaning plan is identified.				
Living quarters, cooking and eating areas, bathrooms, and laundry facilities are cle	aned and d	isinfecte	d.	
There is good airflow in shared rooms through use of an air conditioner or open windows.				
Air conditioning units are cleaned and filters changed according to manufacturer recommendations.				
Air filtration systems are provided in units without air conditioning units.				
Common areas are regularly cleaned following cleaning and disinfection standards.				
Residents regularly clean and disinfect living quarters and records are kept.				
Supplies for cleaning shared kitchen utensils and appliances are provided.				
Laundry facilities have established guidelines to ensure physical distancing.				

Options for residents to store reusable non-medical masks to prevent cross-contamination are provided.			
Physical distancing in shared housing is maintained.			
Social distancing is encouraged during all housing activities, including cooking, sleeping, and recreation.			
Limit the occupancy of bunkhouses during outbreaks as directed by local public health.			
Physical barriers are added (if possible) between bathroom sinks and in other areas where maintaining a 2 metre distance is not possible.			
Excess furniture is removed or spaced at greater distance in common areas.			
Bed configurations are modified to maximize social distancing in sleeping quarters, where feasible.			
Beds are arranged so that residents sleep head-to-toe with at least 2 metres between beds.			
Physical barriers are added between beds when they cannot be 2 metres apart.			
Minimize or avoid the use of bunkbeds.			
Daily health checks are conducted at shared housing.			
Residents are screened daily for symptoms and temperatures are checked.			
Multiple screening locations or staggered screening times are established to			
prevent congregations of large groups.			
The confidentiality of those with suspected or confirmed COVID-19 should be		1	
protected, if possible, despite cohorting and/or contact tracing.			
A plan is established for responding to residents with suspected or confirmed COVI	D-19.		
Accommodations are provided to separate COVID-19 infected, symptomatic		Τ	
workers, and / or contacts of cases from each other and from ill workers.			
Personnel managing COVID-19 infected residents are protected from exposure by			
using PPE when they are within 2 metres of individuals who are infected with			
COVID-19.		1	
Separate buildings or rooms are used to separate ill residents from well residents.			
Consider providing separate food and bathroom access where possible.			
Non-essential persons are restricted from entering the isolation area.			
Medical access and/or telemedicine are provided for emergent illnesses.			
Safe transportation is provided, if needed, for the suspected or confirmed COVID-			
19 case, with appropriate PPE for other staff.			
Comments / Notes			

^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

Section 5: Special considerations for shared transportation: Sharing transportation such as ride-share vans, shuttle vehicles, car-pools, and public transportation may increase risk among employees.				
Special considerations for shared transportation	Completed	Ongoing	Not Started	N/A
As close to 2 metres distance between riders is provided, if possible.				
Individuals are seated with at least one empty seat between them.				
All vehicle occupants wear non-medical masks or cloth face coverings.				
Workers are grouped (or cohorted) in the same crews and/or those sharing living quarters together when transporting.				
The number of vehicles available for transportation and/or the frequency of trips is increased.				
Hand washing/sanitizing stations are provided for use before riders enter a vehicle and when arriving at their destination or, workers are provided with individual containers of hand sanitizer.				
Riders are trained to follow coughing and sneezing etiquette and to avoid touching their face.				
Vehicle interiors / high touch points are cleaned and disinfected before and after each trip, and daily at a minimum.				
Comments / Notes				

^{*}Note: web addresses for all hyperlinks are listed at the end of this document.

Resources

Canadian Centre for Occupational Health and Safety (CCOHS) Agriculture Coronavirus (COVID-19) Tip Sheet (PDF)

https://www.ccohs.ca/images/products/pandemiccovid19/pdf/agriculture.pdf

Canada Labour Code

https://laws-lois.justice.gc.ca/eng/acts/L-2/page-1.html

Centers for Disease Control and Prevention: Agriculture Workers and Employers - Interim Guidance from CDC and the U.S. Department of Labor

https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-agricultural-workers.html

Employment and Social Development Canada (ESDC)

Guidance for employers of temporary foreign workers regarding COVID-19

Government of Ontario

Agriculture health and safety during COVID-19

Hard-surface disinfectants and hand sanitizers (COVID-19)

https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19.html

Health Canada: COVID-19 Self-Assessment Tool

https://ca.thrive.health/covid19/en

National Institute for Occupational Safety and Health (NIOSH): Hierarchy of Controls https://www.cdc.gov/niosh/topics/hierarchy/default.html

Public Health Agency of Canada:

Cleaning and disinfecting public spaces during COVID-19

https://www.canada.ca/en/public-health/services/publications/diseases-conditions/cleaning-disinfecting-public-spaces.html

Community-based measures to mitigate the spread of coronavirus disease (COVID-19) in Canada https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/public-health-measures-mitigate-covid-19.html

Coronavirus disease (COVID-19): Awareness resources

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/awareness-resources.html

Coronavirus disease (COVID-19): Measures to reduce COVID-19 in your community https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/measures-reduce-community.html#fi

Coronavirus disease (COVID-19): Prevention and Risks

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html

How businesses and employees can stay safe while operating during COVID-19 https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/measures-reduce-community/guidance-workplaces-covid-19.html

How To Care For A Person With Covid-19 At Home— Advice For Caregivers https://www.canada.ca/en/public-health/services/publications/diseases-conditions/how-to-care-for-person-with-covid-19-at-home-advice-for-caregivers.html

Instructions for isolating a case in the home or co-living setting https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html#app1

Non-medical masks and face coverings: About

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/about-non-medical-masks-face-coverings.html

Public health management of cases and contacts associated with COVID-19 https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html

Risk mitigation tool for workplaces/business operating during COVID-19 pandemichttps://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/guidance-documents/risk-informed-decision-making-workplaces-businesses-covid-19-pandemic.html

Routine Practices and Additional Precautions for Preventing the Transmission of Infection in Healthcare Settings

 $\frac{https://www.canada.ca/en/public-health/services/publications/diseases-conditions/routine-practices-precautions-healthcare-associated-infections.html}{}$

Wear a mask or face covering

https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks/measures-reduce-community.html#w

Public Health Ontario Checklist, COVID-19 Preparedness and Prevention in Congregate Living Settings (PDF)

https://www.publichealthontario.ca/-/media/documents/nCoV/cong/2020/05/covid-19-preparedness-prevention-congregate-living-settings.pdf?la=en

World Health Organization guidance on how to manage laundry when individuals have COVID-19 https://www.who.int/emergencies/diseases/novel-coronavirus-2019/question-and-answers-hub/q-a-detail/q-a-on-infection-prevention-and-control-for-health-care-workers-caring-for-patients-with-suspected-or-confirmed-2019-ncov