



COVID-19 and Silviculture and Consultant Forestry

Working Draft - MOTELS/REMOTE ACCOMMODATIONS VERSION

This REMAINS a DRAFT document that will be updated as conditions change, and as employers and the industry map out their plans. There are several issues and considerations that are currently being negotiated, including steps taken to ensure proper support for all workers. This is indicated at several places in this document. Updated April 2nd, 2020

Employers in silviculture and consultant forestry are working with associated Ministries and Public Health to ensure any plans we develop remain consistent with their current expectations. This evolving draft plan is moving forward on the assumption that our activities will be subject to any additional conditions or restraints to ensure we do not increase risk to the health of workers or any other group.

The key to the success of our industry at this time is ensuring that we maintain and strengthen our greatest virtue as an industry – isolation. The fact that silviculture crews often operate as isolated units is a central feature that can be used to adapt to the current conditions. Our primary goal is to establish and maintain this isolation and prevent the transmission of illness. We must focus our efforts to establish isolation at the outset of the season to prevent transmission of illness within our crew or to other groups - and maintain isolation throughout the season to prevent ingress of illness to our crews from other groups or communities. Crews that complete prescribed terms of isolation without exposure to COVID-19 or evidence of illness will be valuable assets in preserving silviculture and forestry programs, and resources should focus on supporting crews to achieve and maintain this status.

A viable management plan must be established and shared by all contractors as soon as possible to ensure health imperatives are protected, and the season can proceed. While healthy young workers may be among those least likely to experience serious impacts from COVID-19, there are still distinct health risks associated with the illness and our industry has an obligation to reduce all risks to workers and to other groups around us, and we have a duty to minimize our burden on the health care system so that the most-needy can receive proper help.

GOALS OF THIS PLAN:

- **Be responsible partners in preventing the spread of illness in society and protect human safety.**
- **Support all members of our industry and protect the health of our workers.**
- **Minimize the introduction of illness to our camps and increase their capacity to operate in isolation with minimal interaction with outside parties.**
- **Prevent transmission of illness between our workers and other groups and communities.**
- **Reduce our burden on local health care systems and other local community resources.**
- **Sustain the resilience of our industry this year, and for the future.**

This bulletin addresses considerations related to prevention and mitigation of COVID-19 according to various levels of management, with a focus on motels, lodges, and other accommodations where workers are housed during the planting season.

This set of strategies includes many requests of workers, and their cooperation will be mandatory to ensuring that the work season can proceed. These requests are not made lightly, and employers must ask workers to share and be honest with their information. Any individual or company that chooses to ignore recommendations risks compromising their own season, and the health and success of all persons and groups around them.

Source documents contributing to these guidelines include

- Northern Health's COVID-19: Interim Guidelines for Industrial Camps
- Health and Medical Services Plan Best Management Guide For Industrial Camps (Northern Health): https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/industrial-camps-BMG.pdf
- COVID-19: Interim Communicable Disease Control Guidelines for Industrial Camps (BC Centre for Disease Control): <http://www.bccdc.ca/Health-Info-Site/Documents/COVID-19-guidelines-industrial-camps.pdf>
- COVID-19 Information: GUIDANCE FOR MANAGERS AND OPERATORS OF INDUSTRIAL WORK CAMPS (Government of Alberta): <https://www.alberta.ca/assets/documents/covid-19-work-camps-fact-sheet.pdf>
- Vancouver Coastal Health: If you are sick. <http://www.vch.ca/covid-19/about-covid-19/if-you-are-sick>
- Vancouver Coastal Health: COVID-19: <http://www.vch.ca/covid-19>

While most regulations and guidelines that apply to remote work camps do not necessarily apply to rental accommodations and motels, these guidelines follow a precautionary principle of applying best practices whenever possible.

Part 1 - Screening of Staff

Any worker that has been travelling outside Canada, has visited an area affected by an outbreak, or has had close contact with a person presumed or confirmed to have COVID-19 must complete self-isolation for a minimum 3 weeks prior to showing up for work, and a least two weeks from the first sign of any symptoms of illness. Any person that has been to specific areas, particularly where there is a know case of COVID-19, must call a health care provider; call 8-1-1, call public health.

Any worker that has a confirmed case of COVID-19, must secure permission from a Public Health Official or doctor prior to coming to work.

Camps that maintain proper screening measures have the opportunity to operate in a sheltered environment and may provide safe refuge from the spread of illness elsewhere in public. However, healthy conditions in camp will only occur if two conditions are met: 1) Employers exercise proper pre-screening and education measures. 2) Workers cooperate with the steps designed to protect them through the season.

Efforts to screen staff MUST begin immediately in order to ensure that staff are given adequate notice to adjust their schedules for the coming season. All staff must understand that their individual choices can impact a wider group, and they are personally responsible for doing their part in not spreading illness to the workplace.

The following table describes the five steps of screening in establishing safe operations.

STEP ONE: Pre-deployment

Contractors should contact all workers immediately.

Employers shall establish communications with all staff and provide them with instructions to **self-isolate** for a period of at least 14 days prior to leaving for their workplace base of operations.

Employer shall provide workers with fact-sheets to avoid contact with Covid-19, and to maintain personal health and hygiene.

Workers that report signs of illness will be required to complete a period of additional isolation of 10 days from the onset of symptoms and gain medical approval prior to proceeding to the work location. **This process shall follow instructions from Chief Medical Health Officer and may be revised to reflect current guidelines.** <http://www.vch.ca/covid-19/about-covid-19/if-you-are-sick>

Workers will be instructed in proper methods of monitoring their health during this pre-deployment self-isolation and will be **required** to provide a log to this effect.

Workers that do not provide satisfactory health logs will not be permitted to travel to the worksite.

STEP TWO: Transportation

Contractors are recommended to immediately assemble a list of staff (and hires) including their location and contact information so that effective transportation may be arranged.

Contractors will assist staff in securing safe transportation to their jobs. This may include ride-sharing with others that have completed self-isolation. Other options, including domestic flight will be considered and evaluated for risk. Mass transit such as trains and busses shall be avoided.

All staff and employees shall receive instruction in how to maintain safe isolation, social distancing, and hygiene throughout their trip.

Workers traveling more than one day, will be required to provide a satisfactory itinerary to indicate their route and schedule.

STEP THREE: Pre-deployment Assessment

Prior to checking into rental accommodations, workers will be screened, based on completed logbooks, travel itinerary, report or observation of any symptoms, and temperature screening where resources and staff capacity permit. Additional testing may be required pending availability of Covid-19 medical testing kits.

Workers in central positions such as first aid personnel and supervisory personnel should be prioritized for testing.

Any worker testing positive for COVID-19, or displaying persistent symptoms of COVID-19 that comprise a presumptive case based on assessment by a physician or use of the BC self-assessment tool, will immediately be assigned to mandatory isolation on arrival (STEP FOUR), along with any other workers that had shared close contact or transportation with that person in the past 14 days. Public Health shall be notified as required and workers shall complete BC Health self-assessment tool <https://bc.thrive.health/>

All workers that clear screening will then receive their work assignments and follow a strict travel itinerary that shall include zero contact with outside parties.

STEP FOUR: Isolation at site (IAS)

Workers with a positive test for COVID-19, persistent symptoms of COVID-19 that comprise a presumptive case based on assessment by a physician or use of the BC self-assessment tool, or workers with contact with any other persons or workers verified as having or suspected of having COVID-19, shall be immediately assigned to mandatory isolation at a facility provided by the company. This may include a room with separate entrance or private quarters with appropriate facilities dedicated to support workers in isolation protocol. Self-assessment tool: <https://bc.thrive.health/>

Workers in IAS shall receive daily wages and meal support and shall have no contact whatsoever with any outside parties apart from re-assessments and monitoring by staff and delivery of meals and supplies.

Workers in IAS shall not be permitted to visit any nearby communities or leave the company-assigned quarters until their isolation period is over.

Any worker displaying or reporting anything beyond mild symptoms shall be immediately referred to medical aid, with all decisions based on direct input from a physician, from contacting 811, or completion of the BC self-assessment tool. <https://bc.thrive.health/>

Daily re-assessments shall be completed for all workers in isolation – with a minimum of self-report of ongoing symptoms. Nature and scope of re-assessments shall manage risks to other staff, and include steps based on availability of resources and trained staff.

Workers will be oriented with the conditions and goals of the IAS process, and any worker failing to comply with conditions of IAS may be required to return to their place of residence.

IAS shall continue for a minimum of 14 days, or at least 10 days past the onset of all symptoms, whichever is longer, before workers return to work (<http://www.vch.ca/covid-19/about-covid-19/if-you-are-sick>)

STEP FIVE: Ongoing

All workers will be continually monitored and shall self-monitor for potential symptoms for the duration of their stay in the workplace and rental accommodations.

Additional training and education will be provided to first aid staff to conduct more frequent and thorough re-assessments with all workers.

Seasonal Preparations

- Companies should train additional staff for replacements in key positions who can step into place in the case of a supervisor, crew boss, or other key staff becoming unavailable due to illness or other reasons such as family needs.
- Training for all employees shall include appropriate social distancing measures. Web-based modules will be made available to all staff wherever possible. Mass in-person training of staff shall be avoided whenever possible.
- All staff, workers, and visitors shall be educated on hygiene protocols, respiratory etiquette, and the Communicable Disease Control Plan (CDCP) for the operations, and a record shall be maintained of all persons that complete this training.
- Key staff, including first aid attendants and supervisors, shall be educated about COVID-19, including appropriate support and medical referrals for mild to severe cases.
- Additional camp staff should be hired to assist with Covid-19 prevention and mitigation plans, and with hygiene and sanitization procedures.

Medical Services

- All operations shall identify local regional Medical Health Officers and ensure that field staff have contact information for these parties and local medical services.
- Total Physio Medical services should be implemented to all eligible contractors where services can be readily established. This system provides an internet-based link between doctors on retainer and staff remote in the field. This system allows workers to receive medial assessment and prescription for treatment and a limited range of prescriptions without travelling to hospitals or requiring in-person treatment. This system is already utilized for physiotherapy services and has been successfully applied in the tree planting industry for the past two years.
- Health and safety coordinators should be established in each operational location to oversee implementation of the mitigation plan, and other regular health and safety requirements.
- All operations shall maintain a stock of infection control supplies on-site so that first aid staff can deal with suspected and/or confirmed cases. This should include:
 - Hand washing supplies and hand cleaning gels
 - Appropriate cleaning supplies (see below for more information)
 - Surgical masks where supplies are available (with tissues used to cover coughs/sneezes if surgical masks cannot be purchased due to shortages)
 - Disposable gloves

All operational supervisors and managers shall update their procedures by reviewing the government's COVID-19 website on a daily basis. <http://www.bccdc.ca/health-info/diseases-conditions/covid-19>

A copy of the company’s communicable disease control plan (CDCP) shall be posted in a central area for workers to review. While CDCP’s are primarily intended for camp operations, they also have value for crews in rental accommodations, and should be completed as a best practice.

Each operation should prepare a summary of project information that can be referenced in the event of an outbreak at the camp. The camp should document the initiatives and procedures that the company will implement to prevent and manage COVID-19. The plan can be tailored to unique circumstances and be scaled to the size of the camp. Some of the following information may already be available in the current Communicable Disease Control Plan (CDCP) for the camp. If your camp does not have a CDCP, then use this guide to develop protocols for preparing and responding to COVID-19 cases. Northern Health’s Communicable Disease Control Plan Best Management Guide for Industrial Camps can also be consulted for advice on developing a Communicable Disease Control Plan.

https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/communicable-disease-control-BMG.pdf

At a minimum, the plan shall include the following:

- Project location
- Contact information (names, telephone numbers and email addresses)
 - o Camp personnel (managers, food, cleaning, etc)
 - o Medical service provider(s) if applicable
- Number of residents
- Number of staff (both working at the camp and housed at the camp)
- Demographics and health care status of workers (if known)
- Where workers are coming from (percentage: local, regional, provincial or international; if international, which countries are they from)
- Turnover patterns and work shifts (How did they arrive (fly, drive)? How long are they expected to stay at the camp? Which travel hubs are they flying/driving out of?)
- Overview of accommodation set-up (description of facilities including the number of rooms, room occupancy limits for individual and common spaces, number of showers and washrooms, dining and community areas, and recreational facilities etc.)

Hygiene

- Staff shall wash hands prior to entering trucks at the beginning and end of each day. Workers in the field should carry additional water and hand soap for this purpose, or crew trucks shall be equipped with materials for this purpose
- Hand-washing systems should be provided with each work truck so workers can wash their hands at the worksite, and prior to returning at the end of their workday.
- Hand sanitizer will be provided in trucks, pending availability.
- All crew vehicles shall be cleaned after every shift, including thorough cleaning AND sanitization of all headrests, seats, dashes, controls, internal and external handles, and other frequently touched surfaces. Sanitizing must use an agent effective against coronavirus. The types of disinfectants that can be used include:
 - o 500 parts per million chlorine solution: 1:100 [e.g. mix 10 ml household bleach (5.25%) with 990 ml water]

- Accelerated hydrogen Peroxide (0.5%)
- Quaternary Ammonium Compounds (QUATs)

When selecting a disinfectant, ensure that the product has a DIN number. Always check the manufacturer's information to ensure that the product is effective against coronaviruses. Follow product instructions for dilution and contact time. Unless otherwise stated on the product, use a detergent to clean surface of all visible debris prior to application of disinfectant.

- Cleaning and sanitization supplies should be checked and replenished prior to each morning, afternoon, and evening shift – including cleaning AND sanitizing agents and appropriate supplies of paper towels and other cleaning tools.
- All staff, workers, and visitors shall be educated on hygiene protocols, respiratory etiquette, and the Communicable Disease Control Plan (CDCP) for the operation, and a record shall be maintained of all persons that complete this training.

Accommodations requirements

- Workers should be assigned one person, or one paired couple (e.g. common law, married, or involved couple) per room whenever possible. The primary objective should be to provide as much separation in accommodations as possible.
- All room cleaning shall be completed by the worker(s) occupying that room. Employees of the rental accommodations should only clean rooms if there is a system to ensure that there is no risk of potential transmission of illness. Workers should clean rooms before their final departure.
- The contractor should supply workers with adequate cleaning supplies to maintain sanitized conditions in their rooms.
- Each room should have a private bathroom as far as possible based on available facilities.
- Each room should have separate kitchen facilities as far as possible. If kitchen facilities must be shared, control measures shall be implemented to restrict use of the facilities to one group at a time, and to complete cleaning and sanitization of the kitchen after each use.
 - Workers must wash hands before entering the kitchen facilities
 - All dishes must be cleaned and sanitized and put away after use.
 - Different set of dedicated utensils and plates must be kept for each individual or couple.
 - All surfaces in any shared dining areas shall be sanitized after each meal shift.

Part 4 – Social Distancing and Isolation

Crews

- All workers occupying motels or remote accommodations must must conduct themselves consistent with all guidance provided by the Provincial Health Authority.
- All group activities shall be arranged in a manner that provides at least 2 meters of space between individuals whenever possible, and with groups confined to their normal working crews without mixing of personnel between crews.

- All meetings shall be conducted in small groups led by crew leaders.
- Contractors should arrange for food delivery and group shopping orders for crews rather than rely upon local markets and individual shopping whenever such services can be reasonably arranged.
- Auxiliary service providers, including boat and helicopter service, should be appropriately screened before permitting interaction with any company staff, and complete an orientation with the COVID-19 prevention and mitigation plan.
- Visitors to the operations should be strictly limited to persons necessary for the operation. All visitors must be screened for prior isolation and travel history and be thoroughly oriented with the hygiene and illness-prevention program. Visitors should only visit to perform essential duties and be required to avoid all unnecessary contact with staff.
- Workers should not be permitted to have any visitors to their rooms.
- Camps shall maintain strict isolation from the outside community and maintain this isolation throughout the duration of their operations as far as possible. This includes avoiding all sit-in restaurants, retail outlets, and public facilities.
- Workers should be required to remain at their base of operation on days off. Arrangements should be made for laundry delivery service or other systems to enable cleaning of clothes, shopping orders, and food services for the day off whenever possible.
- Local stores should be notified prior to any member of a company visiting to conduct group shopping.
- Any activities that must be performed in the community (including shopping, refuelling, or administration) should be conducted by a designated single person. There must be clear written procedures for each activity to ensure that person exercises the highest degree of care and hygiene in all activities. This should include use of all appropriate PPE, including face masks (as available), and hand-washing protocols, and not shopping during busy hours.
- The total number of people in each vehicle should be minimized whenever possible.
- Workers should not consume food inside vehicles.
- Workers should not share food, drinks, or cigarettes.
- Workers should not share helmets, head protection, or other Personal Protective Equipment.
- Local stores should be notified prior to any member of a company visiting to purchase bulk supplies.
- Workers should be asked to remain at the worksite/workplace and avoid any trips back to their home residence during the season. Depending on circumstances, return trips home may result in subsequent paid or unpaid self-isolation periods in order to ensure a safe return to work.
- Prior to utilizing a helicopter, a pre-flight briefing must be held with the pilot to review the CDCP and the steps for aircraft. This should cover:
 - Social distancing
 - Boarding and disembarking
 - Use of equipment, headsets, and other frequently touched surfaces
 - Use of hearing protection other than headsets
 - Cleaning and sanitizing of all headsets and frequently touched surfaces

- Vehicles should be consistently used by the same members of the crew each day. Consistent groups of 2 to 6 shall be identified and maintained consistently as working units throughout the season.
- The total number of people in each vehicle should be minimized whenever possible.
- Workers should keep their personal gear in separate gear caches during the day. Workers shall maintain appropriate distances from each other during daytime operations.
- Crew members who live in the local community must travel in separate trucks and avoid any interactions with remote-accommodation crew at all times. Contact between community-based workers and remote-accommodation workers must be minimized or eliminated as far as possible.
- **All workers and company representatives shall seek to eliminate any unnecessary contact with isolated communities, including all First Nations communities. It is acknowledged, that many First Nations communities have limited medical resources, have vulnerable populations of Elders, and may have a higher level of vulnerability to COVID-19. Respect for small communities is mandatory.**

All medical and treatment or management decisions related to treatment and of workers with symptoms shall be based on guidance from medical professionals. This includes seeking immediate medical advice for any presumptive case, and medical attention as directed by a doctor.

Plan to Manage Individuals with Suspected COVID-19 Infection

Individuals who are experiencing symptoms can be directed to call HealthLinkBC (8-1-1), use the self-assessment tool (<https://bc.thrive.health/>), or to contact a healthcare practitioner for more information. If there is a medical clinic on-site, the individual can be directed to the on-site clinic staff. The recommendations for individuals who are experiencing symptoms are evolving on a day-to-day basis; please see the BCCDC website for the most up-to-date guidance.

If there is concern that a resident or staff member has symptoms suggestive of COVID-19 while in camp, it is recommended that:

- If available, provide the individual with a surgical/procedural mask or tissues to cover their mouth and nose.
- Promptly move the individual to an area separate from others. This area should be behind a closed door if possible.
- Direct the person to the online self-assessment tool or to a health care provider (including the on-site medical clinic if available) who will provide advice on next steps. The individual can also be directed to a local Online Clinic Line (if available) or HealthLinkBC (8-1-1).
- Support the individual to self-isolate at the base of operations, unless they are within close driving distance of their home and are able to safely travel home without using shared transportation (see more information below on self-isolation).
- Any rooms they have been in while symptomatic should be cleaned and disinfected.

If urgent medical care is needed, call 9-1-1 or the local emergency number.

Notify the local Medical Health Officer if there is an outbreak or if there is a suspicion of an outbreak

An outbreak is when two or more cases of fever and/or respiratory symptoms (cough, sore throat, runny nose, shortness of breath etc.) are detected in residents and/or staff within a 12-day period, with at least one case identified as a resident, or if any staff or resident is diagnosed with COVID-19.

Urgent medical care is needed if there is a change in the patient's health that needs medical help right away. This could be needed due to COVID-19 or for some other reason: If it becomes harder to breathe, you can't drink anything or you feel very unwell; seek urgent medical care at an urgent care clinic or emergency department. Mention to the healthcare providers that you are self-isolating because of COVID-19. If you or someone in your care has chest pains, difficulty breathing, or severe bleeding, it could be a life-threatening emergency. Call 9-1-1 or the local emergency number immediately.

For most cases, symptomatic individuals can be cared for in the community without referral to a hospital. *Sending individuals to emergency rooms, when they are not sick enough to require a higher level of medical care, risks spreading infection further.* Healthcare providers can provide advice on a suitable location for self-isolation, considering the severity of illness and other factors. In the cases where referral to a higher-level medical facility is required, please share information on suspected or confirmed COVID-19 with the receiving facility, as well as BC Emergency Health Services (BCEHS), prior to the case's arrival to ensure appropriate infection control measures are in place.

Workers may self isolate in at the facilities unless have their own transportation to safely travel home. Once self-isolation begins, it should only stop when:

- The patient has had no fever for 5 days and it has been at least 10 days since the onset of symptoms (based on standard identified by BC Chief Medical Health Officer)
- Or, a Public Health Official or doctor clears the person for return

In the case of any presumptive or verified case of Covid-19, the rest of the crew will maintain isolation from all outside parties and follow intensive monitoring, including additional testing for infection.

All sick days and isolation days should be paid.

Ensure Confidentiality

It will be important that any targeted communicable disease interventions are non-stigmatizing and respect confidentiality. This includes maintaining privacy for those seeking healthcare or who may be part of self-isolation, contact tracing or outbreak investigation.

Review On-site Management of Company Policy Requirements

A significant burden to the local health care system can arise simply from company policies that require sick notes and back to work notes. Employers are asked to excuse staff for sick leave without requiring a doctor's note, if their employees are ill or required to self-isolate. This helps not only to reduce pressures on the health care system, but also minimizes the risk of spreading infection within the community.

In the case of a Government order or general shutdown of work, the employer shall have a plan in place to ensure the safe return of all workers to their homes.

Contractors shall require workers to provide a written plan for their exit plans prior to the entering the workplace. This shall include the method of transportation, travel itinerary, and destination point.

No workers with potential symptoms of COVID-19, or within a 14-day isolation period will be permitted to use public transportation of any kind as a means to return home at the conclusion of employment.

Any worker in isolation protocol who either ends their employment or reaches the end of their contract period, will be required to complete that isolation period either in the remote accommodations.

Any worker seeking to move from one company or one operation to another, may not do so if there is any ongoing isolation period applying to themselves or another worker at their point of origin.