

Occupational Health and Safety

Coronavirus Disease 2019 (COVID-19)

On December 31, 2019, Chinese health authorities identified a new (or novel) coronavirus (referred to as 2019-nCoV) through a series of reported cases of pneumonia in Wuhan, China. On February 11, 2020 the World Health Organization announced an official name for the disease. The new name of this disease is **coronavirus disease 2019, abbreviated as COVID-19**. In COVID-19, 'CO' stands for 'corona,' 'VI' for 'virus,' and 'D' for disease.

Globally, more than 80,000 people in nearly 50 countries have been infected. Nearly 2,800 have died, the majority in China's Hubei province.

Coronaviruses

Coronaviruses are a large family of viruses. They can cause diseases ranging from the common cold to more severe diseases such as Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS-CoV)

How COVID-19 Spreads

Current understanding about how the virus that causes coronavirus disease 2019 (COVID-19) spreads is largely based on what is known about similar coronaviruses. The virus is thought to spread mainly from person-to-person; more specifically:

- Between people who are in close contact with one another (within about 6 feet)

- Via respiratory droplets produced when an infected person coughs or sneezes; these droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

The virus may also spread from contact with infected surfaces or objects. It may be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

People are thought to be most contagious when they are most symptomatic (the sickest). Some spread might be possible before people show symptoms however this is not thought to be the main way the virus spreads. Your risk of severe disease may be higher if you have a weakened immune system, as may be found in older people or those individuals with chronic disease like diabetes, cancer, heart, renal or chronic lung disease.

Symptoms and treatment

Symptoms range from mild flu-like and other common respiratory infections – to severe, and can include fever, cough and difficulty breathing. If the disease is developed complications can include serious conditions, like pneumonia or kidney failure, and in some cases, death.

There are no specific treatments for coronaviruses, and there is no vaccine that protects against coronaviruses. Most people with common human coronavirus illnesses will recover on their own.

If you begin to feel flu-like symptoms **CONTACT YOUR DOCTOR IMMEDIATELY**, you should drink plenty of fluids and get rest and sleep as much as possible. It is best to stay indoors and avoid contact with other people. If you need immediate medical attention you should call 911 and mention your travel history and symptoms.

Reducing Risks

There is currently no vaccine to prevent coronavirus disease 2019 (COVID-19). The best way to prevent illness is to avoid being exposed to this virus.

However there are everyday preventive actions to help prevent the spread of respiratory diseases, including:

- Avoid close contact with people who are sick.
- Avoid touching your eyes, nose, and mouth.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then discard the tissue in the garbage.
- Clean and disinfect frequently touched objects and surfaces

Facemasks should be worn by people who show symptoms of COVID-19 to help prevent the spread of the disease to others and by people who are taking care of someone in close settings at home.

Facemask usage (with appropriate training as part of a respiratory protection program) is crucial for health care workers or in a health care facility.

Travel

Be aware of travel advisories issued by various governments and agencies. Currently the Government of Canada is continuing to recommend that Canadians avoid non-essential travel to China and avoid all travel to Hubei province. If you are travelling to an area known to have cases of coronavirus, be sure to avoid:
Spending time in large crowds or crowded areas.

- Avoid contact with sick people, especially if they have fever, cough, or difficulty breathing
- High-risk areas such as farms. Avoid contact with animals (alive or dead), live animal markets, animal products such as raw or undercooked meat and areas where animals may be slaughtered
- Surfaces with animal droppings or secretions on them

Travellers who have returned from areas under a travel health advisory for COVID-19 should monitor themselves for symptoms of the coronavirus for 14 days after leaving the affected area. **If you have travelled to a known coronavirus area and develop symptoms of COVID-19, call your appropriate public health authority immediately.**

We all have a responsibility to reduce risks of exposure to and transmission of the virus. As workers, we must take precautions to reduce exposure. Employers should create prevention plans in consultation with relevant health and safety committees and worker representatives.

Pandemics and workplace laws

Due diligence is commonly addressed in health and safety legislation under the "general duty clause," which places a duty on employers to take all reasonable precautions to prevent injuries or accidents in the workplace. The general duty clause also applies to all situations that are not addressed elsewhere in the occupational health and safety legislation.

Occupational safety

Workers in some sectors (for example, health care and transportation) have a greater likelihood of exposure to viruses and other disease-causing agents. Employers have a general duty to take every precaution reasonable in the circumstances to protect workers from hazards in their workplaces. Employers in these sectors should already have effective plans in place for regular day-to-day interactions.

When new viruses are identified, employers, in consultation with their health and safety committees or worker representatives, should follow an appropriate hazard-assessment methodology that looks at the virus and considers if existing controls are appropriate. The goal of a prevention plan must be to eliminate exposure to the infectious virus as much as possible.

The selection of controls should be guided by a hierarchy of controls and include both engineering and administrative controls.

Engineering controls

- Use isolation wards and self-contained areas and negative pressure rooms to reduce exposure when cases are suspected
- Ensure proper ventilation with high efficiency particulate air (HEPA) filtration units
- Make plans to alter the physical space of workplaces to prevent the spread of viruses and influenza-like illness
- Establish separate entrances and exits as well as triage areas in health care workplaces for those with suspected COVID 19, influenza, or related symptoms

Administrative controls

- Develop an exposure control plan before an outbreak occurs
- Stock and manage the distribution of personal protective equipment (PPE)
- Adjust staffing levels to accommodate high rates of sick leave
- Educate workers, patients and visitors on viruses and influenza, including the steps to mitigate exposure
- Group infected patients in health care settings and limit worker exposure to infected patients
- Combine tasks to limit the number of workers entering areas with infected patients
- Implement effective environmental, housekeeping and laundry protocols (where applicable) to reduce the spread of viruses and influenza
- Provide access to effective hygiene and hand-washing facilities

Personal protective equipment

- Provide N95 respirators or more protective NIOSH-certified respirators for all workers
- Wear gloves, face shields, and gowns

Communicate policies and procedures to ensure N95 respirators are fit-tested annually or if facial features change.

The use of surgical-type masks (**Paper Masks**), does not provide adequate protection from viral exposure. **Minimal protection is usually granted by a N95 respirator.** All workers who are fit-tested with N95 respirators need to receive training on all aspects of PPE (putting on, wearing, removal, disposal, etc.)

What we learned from SARS – use the “Precautionary Principle”

In the aftermath of the SARS outbreak, Ontario established a commission to look at the introduction and spread of SARS. In its final report, Commissioner Justice Archie Campbell wrote that “we cannot wait for scientific certainty before we take reasonable steps to reduce risk”.

Campbell's report identified the **precautionary principle** as an approach for protecting workers in circumstances of scientific uncertainty. This reflects the need to take prudent action in the face of potentially serious viruses without having to wait for complete scientific proof that a course of action is necessary.

Ensure the Precautionary Principle guides all decisions related to dealing with COVID-19

Sources: WHO, Ontario Government, CUPE, PSAC, ONA

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