

COVID-19 PANDEMIC RESPONSE PLAN

Version Number	Date	Document Owner	Department	Approved By	Latest Revision Made
7	06-May-20		Health & Safety	Pandemic Committee	Removal of: RM team Communication (Virtual) Addition of: General Pandemic language Spare Vehicle Inspection Checklist (AP- 11) Contact Care Chart (AP-12
					All changes highlighted in YELLOW

Table of Contents

1. Introduction	3
a) Objective	3
b) Plan Integration	3
c) Activation	3
2. Organization & Responsibilities	4
Overall Structure	4
Corporate Response Team (CRT)	4
Pandemic Committee (PC)	
3. Monitoring External Communications	
4. Communications	
a) Senior Management Communications	
b) Pandemic Alerts	
c) COVID-19 Information	
5. Prevention	
a) Access to Information	
b) Respiratory Protection and Hygiene	
c) Hand Washing	
d) Isolation during Illness	، ع
 Containment Activities 	
a) Social Distancing	
b) Cleaning	
c) Offsite Work Capabilities	
d) Management of Cases at Work	
e) Travel 7. Treatment	
a) Anti-viral Treatment	
b) Access to Health Care Error! Bookmark not define	
8. Preparedness	
a) Employee Awareness Training	
b) Personal Planning Information for Employees	
9. Return to Work	
10. First Aid Procedure	
11. Projects and Spare Vehicle Cleaning Requirements (APPENDIX 7 & 10)	
APPENDIX 2 – COVID-19 WARNING NOTICE APPENDIX 3 – COVID-19 INFORMATION SHEET	
APPENDIX 3 – COVID-19 INFORMATION SHEET APPENDIX 4a – Corporate Response Team (CRT)	
APPENDIX 4a – Corporate Response Team (CRT) APPENDIX 4b –Pandemic Committee (PC)	
APPENDIX 5 – COVID-19 TRACKING	
APPENDIX 6 - SUSPECTED COVID-19 HEALTH CASE AT WORK	
APPENDIX 7 – CONTAINMENT AT WORKSITE – CLEANING	
APPENDIX 8 – PERSONAL COVID-19 PLANNING	
APPENDIX 9a – COVID-19 ON-Employee Screening Questionnaire	
APPENDIX 9b –COVID-19 AB-Employee Screening Questionnaire	
APPENDIX 9c – COVID-19 BC-Employee Screening Questionnaire	
APPENDIX 10–COVID-19 Site Sanitation Checklist	
APPENDIX 11–COVID-19 Spare Vehicle Inspection Checklist	
APPENDIX 12–COVID-19 Contact Care Table	22

1. Introduction

a) Objective

The objective of the Maple Reinders Pandemic Response Plan (PRP) is to manage the impact of a pandemic crisis on employees and business activities using two main strategies:

- Protect our staff, guests and the public
- Containment of the disease by reducing spread within the business

b) Plan Integration

The PRP responsibilities, preparedness activities and response activities are integrated with the following plans and processes:

- HSE Manual
- Project Emergency Response Plans
- Crisis Management Plan

Whenever possible, the PRP references support services and processes that already exist and identify activities and processes that need to be integrated across the company.

c) Activation

The activation of the Pandemic Contingency Plan consists of:

- The activation of the Pandemic Committee
- Corporate Response Team
- Consultation with businesses and functions on critical processes, impacts and priorities.

Maple Reinders is committed to preparing and responding to the current Pandemic crisis and adequately protecting our employees, the public, and to continue to execute on essential services.

2. Organization & Responsibilities

The PRP is maintained and updated by Maple Reinders's management team with input and support from all departments as required. The following outlines key responsibilities by department or area as detailed in the PRP:

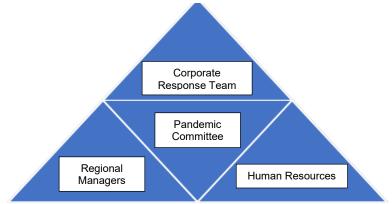
- Corporate Response Team is the lead for coordinating activities related to Public Health Emergencies.
- Pandemic Committee is responsible for monitoring for health emergencies and making recommendations to the Corporate Response Team.
- Regional management teams are responsible for communicating the plan to their teams.
- Corporate Response Team maintains the response structures.

Overall Structure

Corporate Response Team (CRT)

The Corporate Response Team (CRT) is ultimately responsible for the steps taken during the current Pandemic. These decisions include but are not limited to:

- Employee protection steps
- Continuing construction activities as directed by governing officials



- Office and project closures as per plan
- Office and project re-openings
- Social media releases
- Media releases
- Contract disputes

Pandemic Committee (PC)

The Pandemic Committee (PC) provides support and recommendations to the Corporate Response Team during a pandemic. During the current Pandemic crisis, the PC will:

- Meet daily or as agreed to strategize on vital health and safety steps
- Make recommendations to the Corporate Response Team

- Research reliable documents to ensure employees are accurately informed
- Make available an email address for employees to send their questions/concerns
- Produce and maintain a specific website

3. Monitoring External Communications

The PC will actively monitor the following information sources to identify any emerging public health issues including current Pandemic details:

- World Health Organization (<u>www.who.int</u>)
- Centre for Disease Control (<u>http://www.cdc.gov/</u>)
- Public Health Agency of Canada (<u>www.phac-aspc.gc.ca</u>)
- Local and provincial public health agencies

The PC will maintain contact with appropriate representatives from the various business units during the pandemic.

4. Communications

a) Senior Management Communications

Senior management will on a regular basis, communicate what steps are being taken to ensure the health and safety all office and project teams is maintained. Updates will include important information from the Federal and Provincial government and Maple Reinders' initiatives.

b) Pandemic Alerts

The PC will work with the CRT to ensure that appropriate pandemic alert information is provided in a timely manner during a public health emergency. This will include sharing external and internal alert conditions associated with the current Pandemic.

The CEO and COO will approve the pandemic alert condition. Maple Reinders will follow alert condition levels similar to the World Health Organization as outlined below:

Phase	Description	Response
0	No COVID-19 concerns	 Implement normal good health practices (washing hands frequently, common areas cleaned routinely, hand sanitizer available in public areas, etc.)
1	News of a specific potential Pandemic threat is circulated by Health authorities (the World Health Organization (WHO), Public Health Agency of Canada or the Centers for Disease Control (CDC)) with reports of human cases outside of countries of operation.	 Monitor disease progress Review the current Pandemic Response Plan Provide generic disease information to employees as deemed appropriate
2	News of a specific potential Pandemic threat is circulated by health authorities with reports of human cases within countries of operation.	 Continue to monitor disease progress Review the current Pandemic Response Plan Begin non-invasive mitigation measures (wash hands more frequently, distribute hand sanitizer, clean common rooms more frequently, etc.)
3	Health Authorities report that a Pandemic is present within the country of operation, but few reported cases are present in the Region/area of operation.	 Continue to monitor disease progress Consider enacting the company's Pandemic Response Plan and appropriate regional response Consider invasive mitigation measures
4	Health Authorities report that a Pandemic or epidemic disease is present within the region/area of operation.	 Enact Pandemic Response Plan and appropriate regional response Begin invasive mitigation measures (limit face-to-face meetings; limit travel, etc.)
5	Cases have been confirmed within Canada.	 Implement aggressive mitigation measures (exercise work from home plans, reduce human interfaces, etc.)
6	Widespread health impacts to Canadian Provinces e refer to Appendix 3 for more informati	Continue to manage event using the Pandemic Response Plan and appropriate

Please refer to Appendix 3 for more information on the current Pandemic.

c) Current Pandemic (COVID-19) Information

Historically, influenzas such as COVID-19 have had significant worldwide impacts. Five influenzas have occurred in the past century:

- 1918 Spanish influenza
- 1957 Asian influenza
- 1968 Hong Kong influenza
- 2003 SARS
- 2009 H1N1 influenza

COVID-19 outbreaks occurred following predicable seasonal patterns and some immunity is built up from previous flu-type exposures. All age groups are at risk of serious complications from COVID-19.

However serious morbidity and mortality occurs almost exclusively in those with chronic underlying illness and the elderly.

5. Prevention during the current Pandemic (COVID-19)

The keys to preventing the current Pandemic outbreak are:

- a) Access to information
- b) Respiratory hygiene
- c) Hand washing
- d) Isolation during illness

a) Access to Information

Maple Reinders and Public Health will ensure that employees have adequate information on the pandemic emergency issues to allow employees to make informed decisions regarding illness prevention. During the COVID-19 pandemic, notices will be posted in entrance areas of manned worksites. Information on the pandemic and the impact will be shared regularly with employees to address concerns and to reduce stress and anxiety.

Any employee concerns on pandemic issues should be directed to their supervisor, the Pandemic Committee and/or Regional Manager. Employees can also receive support through the existing Employee Assistance Program.

b) Respiratory Protection and Hygiene

Personal hygiene can effectively minimize the transmission of COVID-19. Ways to reduce the respiratory spread are:

- Face covers are to be worn when frequenting high touch/populated areas and when social/physical distancing is unavoidable
- Individuals must wear a certified respirator as prescribed by company policy, legislative requirements and equipment instruction manuals
- Covering the nose and mouth when sneezing or coughing
- Disposing of used tissues immediately
- Washing hands frequently
- Keeping hands away from eyes, nose and mouth

c) Hand Washing

Thorough hand washing (with warm water and soap, alcohol-based hand rub, or antiseptic hand wash) is one of the most effective measure to reducing the spread of the current Pandemic. Proper steps for hand washing include:

- 1. Wet your hands and apply enough liquid soap to create a good lather. The temperature of the water should be between 35°C and 45°C.
- 2. Rub your hands palm to palm in circular motions. Rotate clockwise and anticlockwise.
- 3. Rub the Back of Hands
- 4. Interlink Your Fingers
- 5. Cup Your Fingers
- Clean the Thumbs
- 7. Rub Palms with Your Fingers

All Maple Reinders' projects and office will have running water to ensure proper hand washing can be done.

Waterless alcohol-based hand sanitizers (with a minimum 60% alcohol solution) can be used as an alternative to hand washing and are useful when sinks or warm running water is limited.

d) Isolation during Illness

Employees should stay home if they are unwell or caring for individuals who are ill. Isolation periods would be based on government guidance or recommendations from Maple Reinders Management.

6. Containment Activities

a) Social/Physical Distancing

Social/Physical distancing refers to strategies to reduce the frequency of contact between people. Strategies for the worksites include:

- Follow governing directives
- Keep gathering to the recommended number
- Reduce face-to-face meetings, increasing the use of telephone and video conferences, and increase reliance on the electronic exchange of information
- Minimize meeting times and meeting in large rooms, reducing contact
- Whenever possible, physical contact with co-workers should be minimized i.e. avoid hand shaking, avoid lunch/break rooms
- The use of shared workstations should be minimized or increased cleaning between use should occur
- If possible, avoid public transportation
- Flexible work hours, staggered shift changes, staggered lunch hours
- Avoid unnecessary travel

b) Cleaning

During the current pandemic, office and project cleanings will be reviewed and should include:

- Develop cleaning checklists to ensure areas are not missed and regular cleanings are measured
- Cleaning checks are to be scheduled
- Designated personnel or cleaning companies are to be assigned for the cleanings
- Steps to limit equipment sharing must be developed and implemented
- Cleaning schedules must be implemented if equipment sharing is unavoidable

Employees are expected to ensure their personal workspace is properly sanitized during normal operations as well as Pandemic times. Appendix 7 includes a summary of effective cleaning solutions.

c) Offsite Work Capabilities

Telecommuting, working at home, and the use of offsite locations are valuable tools that Maple Reinders can use to contain the spread of illness at work sites during a public health emergency. In addition, many employees have the ability to work remotely or at home to support critical and essential functions. Working remotely may be an option and should be reviewed with their manager.

d) Management of Cases at Work

If an employee feels ill, or if someone observes that a person is exhibiting symptoms associated with the COVID-19 virus, the employee's supervisor should be contacted. The supervisor should then discuss this situation with the site management team and the Pandemic Committee. The Contact Care Table (Appendix 12) can be used to aid in the reactionary steps.

If there is a confirmed case, the following steps are to be taken:

- Avoid direct contact with the person by managing the process over the phone if possible
- Direct the employee to leave the work site, avoiding the use of public transportation if possible, and contact a health professional as appropriate
- Confirm symptoms to determine if it is a suspected case
- Contact HR, the regional H&S coordinator and conduct an investigation. All required PPE shall be worn during any investigation. The investigation shall include:
 - Secure the scene
 - Identify potentially effected individuals
 - Survey the scene
 - Gather evidence and prepare a matrix
 - Interview potentially effected individuals
 - Analyze the facts
 - Prepare a report
- Consider identifying other individuals who have had recent contact with the suspect case and consider requiring these employees or contractors to return home
- Ensure the employee's workstation and company vehicle is cleaned and disinfected
- Continue to monitor the health of co-workers in the work area
- Check with the suspect case employee during a work absence and confirm appropriate criteria for return to work

e) Travel

All travel needs will follow Governing Directives.

7. Treatment & Medical Assistance

a) Treatment

All treatment of cases will be done through the direction of employees' family Dr.

b) Medical Assistance

Employees currently have access to health care programs through government, benefit programs, social programs and employee assistance programs. Maple Reinders management will continue to regularly review these programs to ensure they are appropriate for employees' needs.

During the pandemic emergency, the existing benefit, health services, and employee assistance programs, would be reviewed by

Maple Reinders management to determine if supplement assistance would be required. This could include:

- Special policies for extended leave
- Additional employee compensation and/or sick leave
- Additional support for mental health care

8. Preparedness

a) Employee Awareness Training

As part of the PRP, awareness sessions will be provided through Orientations, ToolBox Talks and general broadcasting. Steps, such as staggering meeting times and changing meeting locations will occur ensure these sessions are conducted as per the guidelines.

b) Personal Planning Information for Employees

The CRT, PC and RMs will work with employees to assist with additional planning.

9. Return to Work

- *a)* If under self-Isolation due to travel or exposure and you <u>have not</u> shown any symptoms, you are able to return to work after 14 days.
- b) If under self-Isolation due to travel or exposure and you <u>have</u> shown symptoms but were not medically recommended to stay home, you are able to return to work at the end of the 14 day **and** you can pass your provincial online self-assessment.
- *c)* If under self-Isolation due to medical recommendation but your physician has not taken a test sample, you are able to return to work if:
 - You have completed your 14 days isolation; and
 - At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
 - At least 7 days have passed since symptoms first appeared.
- *d*) If under self-Isolation due to medical recommendation and your physician has confirmed a negative test result, you are able to return to work if:

- At least 3 days (72 hours) have passed *since recovery* defined as resolution of fever without the use of fever-reducing medications **and** improvement in respiratory symptoms (e.g., cough, shortness of breath); **and**,
- At least 7 days have passed since symptoms first appeared.
- e) If under self-Isolation due to medical recommendation and your physician has confirmed a positive test result, you are able to return to work if:
 - At least 3 days (72 hours) resolution of fever without the use of feverreducing medications **and**
 - Improvement in respiratory symptoms (e.g., cough, shortness of breath) and
 - You received two negative tests in a row, 24 hours apart.

Self-Assessment Tool links can be found on the Maple Reinders' COVID19 website.

10. First Aid Procedure

<u>RESPONSIBILITY</u>

First Aid Attendants

TOOLS AND EQUIPMENT REQUIRED

- Hand sanitizer
- Waste bags
- Goggles
- Approved respirator or equivalent
- Disposable non-latex gloves
- CPR barrier/s

PROCEDURE

1. Assess patient walk in or onsite response

- 1.1. When a patient arrives at first aid station or you arrive on the scene, maintain physical/social distance and communicate to the patient that you are qualified to assess/assist them, you have been fully screened and acquire consent to assist.
- 1.2. Ensure EMS has been called if needed.
- 1.3. Remind others who may gather at the scene to maintain physical/social distancing or fully disperse.
- 1.4. Perform hand hygiene (wash hands with soap & water or rinse thoroughly with hand sanitizer) and use the following additional PPE prior to treatment (non-latex gloves, approved face mask or respirator and face shield (if available)).
- 1.5. If you need assistance, ensure the above steps are taken before your assistant/s proceeds.
- 1.6. Only handle the equipment required during the treatment to reduce contamination.
- 1.7. Provide first aid within the level of your training. Once EMS arrives follow directions given.

2. Hygiene and disposal

This process is to be followed by every First Aid Attendant each time they render first aid treatment during a walk in or onsite response.

- 2.1. The entire first aid room and all equipment touched are sanitized. All potentially contaminated equipment, first aid room and PPE must be cleaned and disinfected before it is used, or access is allowed.
- 2.2. Remove all PPE (non-latex gloves, mask) carefully to ensure no cross contamination and dispose of it along with any potentially contaminated wipes, rags, first aid disposable materials.

Wash hands thoroughly before doing any paperwork.

11. Projects & Spare Truck Cleaning Requirements

(APPEN 7 & 10)

Our construction sites operating during the Covid-19 pandemic need to ensure they are protecting their workforce and minimizing the risk of spread of infection. This guidance is intended to introduce consistent measures on all active projects.

The following shall be in place on each site:

- A Site Sanitation Checklist and schedule for cleanings
- Sufficient toilet facilities with soap/sanitizer dispensers
- Hand washing facilities with soap/sanitizer and paper towels
- Sufficient cleaning products for daily usage

Cleaning procedures will be in implemented on each project, with minimum of daily cleaning / wipe downs particularly in communal areas and at touch points including:

- Toilet and washing facilities ensuring dispensers stocked
- Door handles and push plates
- Handrails on staircases and corridors
- Elevator and hoist controls where shared use
- Machinery and equipment controls where shared use
- Shared keyboards, computer or phones
- Shared site radios o Photocopiers and other shared office equipment with touch points (eg coffee makers, microwaves etc)
- Common Areas desks/meeting tables/sign in points

Trash collection and storage points will be increased and emptied regularly and at the end of each day or as needed.

Efforts will be taken to reduce the need for the use of spare company trucks throughout the Pandemic. However, if the need is unavoidable, proper cleaning procedures will be completed to ensure the vehicle cab is properly sanitized for the next user. The Spare Vehicle Inspection Checklist will be completed (Appendix 11). Cleaning supplies such as wipes and hand sanitizer will be kept in the vehicle for immediate use.

APPENDIX 1 – REFERENCE MATERIAL SUMMARY

The following key reference materials were reviewed in the development of the PRP:

External Resources:

- World Health Organization
- Public Health Agency of Canada & Public Safety and Emergency Preparedness Canada Working Group on COVID-19 Influenza Planning Discussions Notes
- Public Safety and Emergency Preparedness Canada
- Health Canada
- New Zealand Ministry of Economic Development
- Canadian Electrical Associations Preparedness and Response, COVID-19
 Influenza
- The Economic Impact of an COVID-19 Influenza Department of Finance Economic analysis and forecasting division January 24, 2006 Presentation
- Canadian Manufacturers & Exported COVID-19 Influenza: Continuity Planning Guide for Canadian Businesses



APPENDIX 2 – COVID-19 WARNING NOTICE

APPENDIX 3 – COVID-19 INFORMATION SHEET

DIFFERENCE BETWEEN COVID-19 AND A COMMON COLD								
SYMPTOM	COVID-19	Common Cold						
Fever	Usual, sudden onset 38C – 40C and lasts 3 – 4 days	Rare						
Headache	Usual but can be severe	Rare						
Aches and pains	Usual but can be severe	Rare						
Fatigue and weakness	Usual and can last 2 – 3 weeks or more after acute illness	Sometimes, but mild						
Debilitating fatigue	Usual, early onset can be severe	Rare						
Nausea, vomiting, diarrhea	In children <5 years old	Rare						
Watering of the eyes	Rare	Usual						
Runny, stuffy nose	Rare	Usual						
Sneezing	Rare in early stages	Usual						
Sore throat	Usual	Usual						
Chest discomfort/Cough	Usual and can be severe	Sometimes, but mild to moderate						
Complications	Respiratory failure; can worsen a current chronic condition; can be life threatening	Congestion or ear-ache						
Fatalities	Well recognized	Not reported						
Prevention	frequent hand-washing, cover your cough, maintain 2 metres from other individuals, sanitize office and work areas daily	Frequent hand-washing, cover your cough						

APPENDIX 4a – Corporate Response Team (CRT)

Member	Job title	Location
Harold Reinders	CEO	Mississauga
Jeremy Olthuis	C00	Edmonton
Paul Gibson	VP HR	Mississauga
Chris Moran	General Council	Mississauga

APPENDIX 4b – Pandemic Committee (PC)

Member	Job title	Cell Phone	Email	Location
Craig Sparks	H&S Manager	416-459-7344		Mississauga
Steve Van Hoffen	Director of Finance	905-745-5240		Mississauga
Kevin Dreyer	I.T. Director	416-4597930		Mississauga
Robin Sodia	HR Manager	416-948-1505		Mississauga
Jonas Van Gin Hoven	RM	780-289-7461		Edmonton
Glen Spalding	RM	250-470-8400		Kelowna

APPENDIX 5 – COVID-19 TRACKING

General Instructions:

Each Regional H&S Coordinator will complete a weekly tracking sheet and report the HR Manager.

APPENDIX 6 - SUSPECTED COVID-19 HEALTH CASE AT WORK

General Instructions:

In order to ensure that an employee's private and medical information is properly managed and protected, all Regional Managers are asked consult with HR and to adhere to the following protocols:

- 1. All medical information is personal information that must be held confidential. As such, electronic information containing such medical information must be kept in a protected location where access is limited and secure from viewing by other employees. Hard copies of medical information must be kept in a secure cabinet that cannot be accessed by others.
- 2. If it is necessary to raise an issue relating to an employee's medical information for business purposes (i.e. return to work decisions, coverage, etc.) any documents and e-mails must be marked "Confidential" and should be sent ONLY to those necessary to make a decision. Limit the amount of personal information (i.e. information that can identify a person such as their name, medical information, address, date of birth, etc.) to only that which is necessary in such communications.
- 3. If it is necessary to advise groups of co-workers who have been in contact with an employee who is away for medical reasons for the purpose of maintaining public health, convey the information without disclosing personal information of the employee who is away. Use generic terms whenever possible, like "an individual in your work area" or "an individual on your floor".
- 4. Aggregating any medical information for trending and reporting purposes is fine, as long as individual employees cannot be identified from the aggregated material.
- 5. All documentation should be placed and kept in a protected/secure location (electronically or hardcopy) in accordance with document retention requirements. The Regional Manager shall ensure that records of any confidential information beyond the time period that the information is required for business purposes, is disposed of in a secure manner.

Disinfectants	Recommended Use	Precautions		
Sodium Hypochlorite				
1000 parts per million of available chlorine, usually achieved by a 1 in 5 dilution of hospital grade bleach.	Disinfection of material contaminated with blood and body fluids.	Should be used in well- ventilated areas. Protective clothing required while handling and using undiluted bleach. Do not mix with strong acids to avoid release of chlorine gas. Corrosive to metals.		
Granular Chlorine I.e. Det-Sol 5000 or Diversol, to be diluted as per manufacturer's instructions.	May be used in place of liquid bleach, if it is unavailable.	Same as above.		
Alcohol I.e. Isopropyl 70%, ethyl alcohol 60%.	Smooth metal surfaces, tabletops, and other surfaces on which bleach cannot be used.	Flammable and toxic. To be used in well-ventilated areas. Avoid inhalation. Keep away from heat sources, electrical equipment, flames, and hot surfaces. Allow it to dry completely, particularly when using diathermy, as this can cause burns.		

APPENDIX 8 – PERSONAL COVID-19 PLANNING

Personal Health

- Eat, rest well and exercise in moderation
- Wash your hands frequently with warm water and soap
- Cover your nose and mouth when coughing or sneezing
- Minimize visitors at home
- Check up on friends and family who live alone
- Teach your children to wash hands frequently with soap and water
- Stay informed watch for updates from public health providers
- Get the COVID-19 vaccine when available

Stay away from crowds

- Stock up (**not panic buy**) on basic items (food, water, medical supplies)
- Shop at smaller stores with smaller line-ups
- Shop at off peak hours
- Consider pre-ordering groceries and then just pick up or have delivered
- Pay bills electronically
- Postpone family gatherings, outings, trips

Stay healthy at work and at home

- Maintain contact with colleagues who may be working remotely
- Use Teams or Zoom to talk face to face (virtually)
- Continue to look after your physical and mental condition
- Maintain a healthy diet

APPENDIX 9a – COVID-19 ON-Employee Screening Questionnaire

Maple * Reinders	SABEST MAN COM Platinum	AGED PANIES					
Maple Reinders' COVID-19 Screening Questions Ontario Region							
MRCL would like to ensure that the Health and Safety of all our workers and visitors during the COVID 19 pands	emic rema	ins our					
primary priority. Please complete the following questionnaire.							
For the purpose of the questionnaire, DIRECT CONTACT means:							
A) Greater than 15 minutes face-to-face contact in any setting with a presumptive or confirmed case in the period exter	nding from	24 hours					
before onset of symptoms in the confirmed case.							
B) Sharing of a closed space with a presumptive or confirmed case for a prolonged period (eg. more than two hours) in	the period	extending					
from 24 hours before onset of symptoms in the confirmed case.							
1. Have you flown or traveled outside of Canada in the past 14 Days?	Y	N					
2. Has someone you are in direct contact with tested positive for COVID-19?	Ŷ	N					
3. Are you experiencing:							
Any of the following symptoms: severe difficulty breathing, severe chest pain, lost consciousness	Y	N					
Any of the following symptoms: fever, new cough, shortness of breath (even when inactive)	Y	N					
Two or more of the following symptoms: muscle ache, fatigue, headache, sore throat, runny nose	Y	N					
4. Do ANY OF the following apply to you:							
I have a condition that affects my immune system (for example, HIV/AIDS)	Y	N					
I have a chronic health condition (for example, diabetes, heart condition)	Y	N					
I am getting treatment that affects my immune system (for example, chemotherapy)	Y	N					
5. Are you in direct contact with someone who has been directed to self-isolate for 14 Days?	Y	N					
6. Are you in direct contact with a person who is sick with new respiratory symptoms or who recently traveled outside of Canada?	Y	N					
If you answer YES to <u>ANY</u> of the above questions, do NOT proceed on to site. Immediately contact your direct supervise instructions.	or for furth	er					
The Maple Reinders' Pandemic Committee urges all age groups to take the appropriate steps to stop the spread of this day Governing authorities have provided factual evidence that COVID-19 affects all age groups and health levels.	ngerous dise	ease.					
If you feel you may be at a higher risk from contracting COVID-19, MRCL encourages you to practice prudent social distancing and consider whether your presence on site today is necessary. Please indicate that you understand this request.	Y	N					
SITE: COMPANY:							

NAME:

DATE:

APPENDIX 9b – COVID-19 AB-Employee Screening Questionnaire

Maple * Reinders Maple Reinders' COVID-19 Screening Questions Alberta Region	SCON	T NAGED VIPANIES um member
MRCL would like to ensure that the Health and Safety of all our workers and visitors during the COVID 19 pande primary priority. Please complete the following questionnaire. For the purpose of the questionnaire, <u>DIRECT CONTACT</u> means:	mic remain	is our
 A) Greater than 15 minutes face-to-face contact in any setting with a presumptive or confirmed case in the period exterbefore onset of symptoms in the confirmed case. B) Sharing of a closed space with a presumptive or confirmed case for a prolonged period (eg. more than two hours) in the form 24 hours before onset of symptoms in the confirmed case. 	-	
1. ARE YOU EXPERIENCING ANY OF THE FOLLOWING SYMPTOMS:		
Severe difficulty breathing (e.g. struggling for each breath, speaking in single words), severe chest pain, having a hard time waking up, feeling confused, lost consciousness	Y	N
Shortness of breath at rest Inability to lie down because of difficulty breathing Chronic health conditions that you are having difficulty managing because of your current respiratory illness	Y	N
Fever, cough, sore throat, runny nose	Y	N
2. Have you travelled to any countries outside Canada (including the United States) within the last 14 days?	Y	N
3. Did you provide care or have direct contact with a person with COVID-19 (probable or confirmed) while they were ill (cough, fever, or sore throat)?	Y	N
4. Did you have direct contact with a person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, or sore throat)?	Y	N
5. Are you in direct contact with someone who has been directed to self-isolate for 14 Days?	Y	N
If you answered YES to <u>ANY</u> of the above questions, do NOT proceed on to site. Immediately contact your direct super instructions.	visor for fur	ther
The Maple Reinders' Pandemic Committee urges all age groups to take the appropriate steps to stop the spread of this da Governing authorities have provided factual evidence that COVID-19 affects all age groups and health levels.	ngerou s dis	ease.
If you feel you may be at a higher risk from contracting COVID-19, MRCL encourages you to practice prudent social distancing and consider whether your presence on site today is necessary. Please indicate that you understand this request.	Y	N
SITE:COMPANY NAME:		

DATE:

APPENDIX 9c –COVID-19 BC-Employee Screening Questionnaire

Maple * Reinders	SAUDAND COM Platinum	IAGED PANIES
Maple Reinders' COVID-19 Screening Questions British Columbia R	egion	
MRCL would like to ensure that the Health and Safety of all our workers and visitors during the COVID 19 p primary priority. Please complete the following questionnaire. For the purpose of the questionnaire, <u>DIRECT CONTACT</u> means: A) Greater than 15 minutes face-to-face contact in any setting with a presumptive or confirmed case in the period e before onset of symptoms in the confirmed case. B) Sharing of a closed space with a presumptive or confirmed case for a prolonged period (eg. more than two hours) from 24 hours before onset of symptoms in the confirmed sace.	xtending from	24 hours
1. ARE YOU EXPERIENCING ANY OF THE FOLLOWING SYMPTOMS:		
Severe difficulty breathing, severe chest pain, having a hard time waking up, feeling confused, losing consciousness	Y	N
Mild to moderate shortness of breath, inability to lie down because of difficulty breathing, chronic health conditions t you are having difficulty managing because of difficulty breathing	^{that} Y	N
Fever, cough, sneezing, sore throat	Y	N
2. Have you traveled to any countries outside Canada (including the United States) within the last 14 days?	Ŷ	N
3. Did you provide care or have direct contact with a person with COVID-19 (probable or confirmed) while they were i (cough, fever, sneezing, or sore throat)?	III Y	N
4. Did you have direct contact with a person who traveled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing, or sore throat)?	Y	N
5. Are you in direct contact with someone who has been directed to self-isolate for 14 Days?	Y	N
If you answer YES to <u>ANY</u> of the above questions, do NOT proceed on to site. Immediately contact your direct super instructions.	rvisor for furthe	er
The Maple Reinders' Pandemic Committee urges all age groups to take the appropriate steps to stop the spread of thi Governing authorities have provided factual evidence that COVID-19 affects all age groups and health levels.	s dangerous dis	ease.
If you feel you may be at a higher risk from contracting COVID-19, MRCL encourages you to practice prudent social distancing and consider whether your presence on site today is necessary. Please indicate that you understand this request.	Y	N
SITE: COMPANY:		
NAME: DATE:		

APPENDIX 10–COVID-19 Site Sanitation Checklist

Maple Reinders COVID - 19 Daily Site Sanitation Checklist							
To ensure all Maple Reinders' projects and offices are kept sanitized wash stations are to be cleaned a minimum of three times per day.	l and safe to a	operate, the follow	ing steps sho	all be taken. So	anitary faciliti	ies and	
Project Name		Project Number					
Project Representative		Time					
SITE ADMINISTRATION COVID - 19 Screening Process Screening Questionnaire Daily Sign-In	Complete	Not Completed				N/A	
COMMUNICATIONS Item Title / Details	Complete	Not Completed				N/A	
COVID - 19 discussed in orientations							
Covid-19 ToolBox Talks delivered in an open air setting							
Handwashing, coughing/sneezing, and symptoms posters							
CONSTRUCTION SITE TRAILER CLEANING CHECKLIST							
Cleaning and disinfection - Common areas	Complete	Not Completed	AM	Midday	PM	N/A	
Common areas (Trailers - desks, tables, lunch room, door handles)							
Computer equipment, keyboards etc if shared Handrails on stairs and corridors							
Door handles							
Sign In points							
Site radios/phones that are shared							
Printers/Copiers/ Fax machines/Plannir Printers)							
Sanitary Measures	Complete	Not Completed				N/A	
Hand washing method display (WHO)							
Water stations available							
Soap dispensers or Hand Sanitizer Available Paper Towels Available							
Disinfectant wiping products Available							
Chemical toilets / sanitary blocks		Not Completed	AM	Midday	PM	N/A	
Toilets Cleaned and supplies available - including sink, handles) Trash Cans regularly emptied (when necessary)							
Washing stations - Cleaned and supplies available							
CLEANING OF CONSTRUCTION SITE TOOLS, MACHINERY	Consulat	Not Comulate d	0.0.0	N 4: deless	DM		
Item Sanitization of shared tools	Complete	Not Completed	AM	Midday	PM	N/A	
Elevator/Hoist controls							
Sanitization of heavy equip interiors (1 per day if single use)							
ON SITE ITEMS							
Workers	Complete	Not Completed				N/A	
Good hygiene practices discussed during ToolBox Talks							
All meetings conducted virtually or in open air settings							
Staggered breaks and lunch breaks where required							
COMMENTS / OBSERVATIONS and RECCOMENDATIONS							I
Please document your observation	ons and accompo	any them with photos i	fappropriate				
VERIFIED BY	Deter						
Superintendent or designate	Date	1					
	_					-	
Signature							
	_						

APPENDIX 11–COVID-19 Spare Vehicle Inspection Checklist

Maple * Reinders Vehicle Information											
Vehicle:	Date Out: DATE In:							:			
License	icense Plate: Prov: Km Out								Kn	n In	
Driver:											
					Check	list					
Prior to S											
		d condition?)						Yes			No
		el (adequate for			s?)			Yes			No
		low, missing lug		/				Good			Needs Repair
		akage under veh						None			Needs Repair
		dings & scratche						Yes			Damage Noted
		you sanitized h	•					Yes			No
		<u>g wheel, radio, arm</u>									
		ooling is not all	owed	d in t	this vel	nicle.					
After Sta											
		ht (did it come o						No			Yes
		nfirmation (did it			rning?)			No			Yes
		ney all work? Hi	bean	ns?)				Yes			No
		they all work?)						Yes			No
		they work?)						Yes			No
Upon Re											-
		ess (appropriate	condi	tion	?)			Yes			No
	nk at leas							Yes			No
	ncies repo							Yes			No
		nance performed	d?					Yes			No
	s attache							Yes			No
		/s returned?						Yes			No
	COVID19-Have you sanitized high-touch areas of the							Yes			No
		g wheel, radio, arm								_	-
	COVID19-Have you left enough cleaning produces in							Yes			No
this vel	hicle for	the next persor	ו?				_				
Notes <u>SIGNAT</u>	URE:										

APPENDIX 12–COVID-19 Contact Care Table

Risk Level	Description of Risk Level d	Isolation Level/ Contact actions	Public health authority (PHA) actions
High	 Close contact(s) of a case: provided direct care for the case (including health care workers, family members or other caregivers), or who had other similar close physical contact (e.g. intimate partner) without consistent and appropriate use of recommended personal protective equipment e, OR who lived with or otherwise had close, prolonged f contact (within 2 metres) with a case up to 48 hours prior to symptom onset or while the case was symptomatic and not isolating, OR had direct contact with infectious body fluids of a case (e.g., was coughed or sneezed on) without the appropriate use of recommended personal protective equipment. e 	 a. Quarantine (self-isolate) g at home for 14 days from last unprotected exposure b. Follow good respiratory etiquette and hand hygiene practices. c. Self-monitor for the appearance of symptoms, particularly fever and respiratory symptoms such as coughing or shortness of breath. d. Take and record temperature daily and avoid the use of fever reducing medications (e.g., acetaminophen, ibuprofen) as much as possible. These medications could mask an early symptom of COVID-19; if these medications must be taken, advise the PHA. e. Isolate within the home setting as quickly as possible should symptoms develop, and contact the local public health authority for further direction, which will include: where to go for care, appropriate mode of transportation to use, and IPC precautions to be followed. 	 Conduct an individual risk assessment Active daily monitoring of contacts for symptoms
Medium	 Non-close contact: provided direct care for the case, (including health care workers, family members or other caregivers) or who had other similar close physical contact with consistent and appropriate use of personal protective equipment OR who lived or otherwise had prolonged contact but was not within 2 metres of a case up to 48 hours prior to symptom onset or while the case was symptomatic and not isolating. 	Self-monitor for symptoms for 14 days following their last contact. Follow actions recommended for the entire population Avoid close contact with individuals at higher risk for severe illness https://www.canada.ca/en/public- health/services/diseases/2019-novel- coronavirus-infection/health- professionals/interim-guidance- cases-contacts.html#co	 Conduct a risk assessment for non- close contacts, if feasible No active monitoring
Low/No known risk	Only transient interactions (e.g., walking by the case or being briefly in the same room) or unknown but possible transient interaction due to the occurrence of local community transmission.	 Follow actions recommended for the entire population https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/health-professionals/interim-guidance-cases-contacts.html#co 	 Provide community level information Provide individual advice, if required