

COVID-19 PANDEMIC RESPONSE PLAN

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9	29-July-20		Health & Safety	Pandemic Committee	 Revised: Provincial Screening Questionnaires Added the Safe Social Circle Guidelines- Appedix 14
					All changes highlighted in YELLOW

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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:

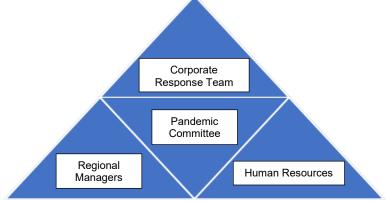
- Corporate Response Team is the lead for coordinating activities related to Public Health Emergencies.
- Pandemic Committee is responsible for monitoring for health emergencies and making recommendations to the Corporate Response Team.
- Regional management teams are responsible for communicating the 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	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.
- Rub the Back of Hands
 Interlink Your Fingers
- 5. Cup Your Fingers
- 6. 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**,
- The full 14 day isolation period has passed and you have no signs or symptoms
- **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

RESPONSIBILITY

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 COMPlatinum	AGED PANIES
Maple Reinders' COVID-19 Screening Ques Ontario Region	stions	5
MRCL would like to ensure that the Health and Safety of all our workers and vi the COVID 19 pandemic remains our primary priority. Please complete the fo questionnaire. For the purpose of the questionnaire, <u>CLOSE CONTACT</u> means: Working with, socializing with or caring for an individual with a confirmed case of C	llowing	
prolonged period of time (greater than 15 minutes) within 6 a foot distance without f approved personal protective equipment (fitted N-95 mask and face shield) OR is liv someone who has COVID-19 OR has come in direct contact with bodily fluids of an person (e.g. was coughed on, sneezed on or shared food and/or drink).	the use o ving with	of 1
1. Have you flown or traveled outside of Canada in the past 14 Days?	Y	N
2. Has someone you are in CLOSE contact with tested positive for COVID-19?	Y	Ν
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, lost sense of taste or smell	Y	N
4. Do ANY of the following apply to you:	<u> </u>	
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 CLOSE contact with someone who has been directed to self-isolate for 14 Days?	Y	N
6. Are you in CLOSE 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. Imme your direct supervisor for further instructions.	diately c	ontact
SITE: COMPANY:		

NAME:

.

DATE:

SIGNATURE:

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

Maple ***** Reinders



Maple Reinders' COVID-19 Screening Questions Alberta Region

MRCL would like to ensure that the Health and Safety of all our workers and visitors during the COVID 19 pandemic remains our primary priority. Please complete the following questionnaire.

For the purpose of the questionnaire, CLOSE <u>CONTACT</u> means:

Working with, socializing with or caring for an individual with a confirmed case of COVID-19 for a prolonged period of time (greater than 15 minutes) within 6 a foot distance without the use of approved personal protective equipment (fitted N-95 mask and face shield) OR is living with someone who has COVID-19 OR has come in CLOSE contact with bodily fluids of an infected person (e.g. was coughed on, sneezed on or shared food and/or drink).

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, lost sense of smell and taste	Y	Ν
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 CLOSE contact with a person with COVID-19 (probable or confirmed) while they were ill (cough, fever, sneezing, or sore throat)?	Y	N
4. Did you have CLOSE contact with a person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing, or sore throat)?	Y	N
5. Are you in CLOSE contact with someone who has been directed to self-isolate for 14 Days?	Y	N

If you answered YES to ANY of the above questions, do NOT proceed on to site. Immediately contact your direct supervisor for further instructions.

The Maple Reinders' Pandemic Committee urges all age groups to take the appropriate steps to stop the spread of this dangerous disease. Governing authorities have provided factual evidence that COVID-19 affects all age groups and health levels.

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	Y	Ν
understand this request.		

SITE:

COMPANY:

NAME:

DATE: _____

SIGNATURE:

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





Maple Reinders' COVID-19 Screening Questions British Columbia Region

MRCL would like to ensure that the Health and Safety of all our workers and visitors during the COVID 19 pandemic remains our primary priority. Please complete the following questionnaire.

For the purpose of the questionnaire, CLOSE CONTACT means:

Working with, socializing with or caring for an individual with a confirmed case of COVID-19 for a prolonged period of time (greater than 15 minutes) within 6 a foot distance without the use of approved personal protective equipment (fitted N-95 mask and face shield) OR is living with someone who has COVID-19 OR has come in direct contact with bodily fluids of an infected person (e.g. was coughed on, sneezed on or shared food and/or drink).

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 that you are having difficulty managing because of difficulty breathing	Y	N
Fever, cough, sneezing, sore throat	Y	N
2. Are you experiencing cold, flu or COVID-19-like symptoms, even mild ones? Symptoms include: fever, chills, cough, shortness of breath, sore throat and painful swallowing, stuffy or runny nose, loss of sense of smell or taste, headache, muscle aches, fatigue or loss of appetite	Y	N
3. Have you travelled to any countries outside Canada (including the United States) within the last 14 days?	Y	N
4. Did you provide care or have CLOSE contact with a person with COVID-19 (probable or confirmed) while they were ill (cough, fever, sneezing, or sore throat)?	Y	N
5. Did you have CLOSE contact with a person who travelled outside of Canada in the last 14 days who has become ill (cough, fever, sneezing, or sore throat)?	Y	N
6. Did you provide care or have CLOSE contact with a person with confirmed COVID-19? Note: This means you would have been contacted by your health authority's public health team.	Y	N

If you answered YES to <u>ANY</u> of the above questions, do NOT proceed on to site. Immediately contact your direct supervisor for further instructions.

The Maple Reinders' Pandemic Committee urges all age groups to take the appropriate steps to stop the spread of this dangerous disease. Governing authorities have provided factual evidence that COVID-19 affects all age groups and health levels.

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	Y	N
understand this request.		
	· · · · · ·	

SITE:

COMPANY:

NAME:

DATE:

SIGNATURE:

APPENDIX 10–COVID-19 Site Sanitation Checklist

Maple * Maple Reinders	COVID	- 19 Daily	Site Sar	nitation	Checklis	t	
To ensure all Maple Reinders' projects and offices are kept sanitized of wash stations are to be cleaned a minimum of three times per day.	and safe to a	operate, the follow	ing steps sha	ll be taken. So	anitary faciliti	es and	
Project Name		Project Number					
Project Representative		Time					
SITE ADMINISTRATION							
COVID - 19 Screening Process		Not Completed				N/A	
Screening Questionnaire Daily Sign-In							
COMMUNICATIONS	Complete	Not Completed				N/A	
Item Title / Details 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	Middav	PM	N/A	
Common areas (Trailers - desks, tables, lunch room, door handles)				Wildday			
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							
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	Consulate	Not Consulate t	0.0.0	NALL	DNA		
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							
Please document your observation	s and accompo	any them with photos i	f appropriate				
VERIFIED BY							
Superintendent or designate	Date	I					
	_					-	
Signature							

APPENDIX 11–COVID-19 Spare Vehicle Inspection Checklist

Maple * Reinders			Ve	əhic	le Info	ormatic	on				
Vehicle:				Date	e Out:				DAT	E In:	
License Pl	ate:		Prov	<i>י</i> :		Km Out				Km In	
Driver:											
					Check	dist					
Prior to St											
		d condition?)						_ Ye			No
		el (adequate for			s?)			_ Ye			No
Tires & w	/heels (l	ow, missing lug	nuts?	')				Go	od		Needs Repair
· · · ·		akage under veh						_	ne		Needs Repair
		dings & scratche	,					_ Ye	s		Damage Noted
		you sanitized h					[_ Ye	S		Νο
		g wheel, radio, arm									
		ooling is not all	owed	t in t	this ve	hicle.					
After Star											
		ht (did it come o						No			Yes
Tire pres	sure co	nfirmation (did it	give	a wa	arning?)		_ No)		Yes
U		ney all work? Hi	bean	าร?)				_ Ye	-		No
		they all work?)						_ Ye	S		No
		they work?)						_ Ye	S		No
Upon Retu							F =	_			
		ess (appropriate	condi	tion	?)			<u> </u>			No
Fuel tank								_ Ye			No
Deficienc								_ Ye			No
		nance performed	d?					_ Ye			No
Receipts								_ Ye			No
		vs returned?						_ Ye	S		No
COVID19)-Have	you sanitized h	igh-t	oucł	h areas	s of the		_ Ye	S		No
vehicle?	(steering	<u>g wheel, radio, arm</u>	rests	, doo	or handle	<u>es etc)</u>					
		you left enough		ning	g prod	uces in		_ Ye	S		No
this vehi	cle for	the next persor	ו?								
Notes											
<u>SIGNATU</u>	<u>RE:</u>										

APPENDIX 12–COVID-19 Contact Care Table

Table 1. Categories of contacts by exposure risk level

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 e OR who lived or otherwise had prolonged f 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.	 <u>Follow actions recommended for the entire population</u> 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 	

APPENDIX 13–COVID-19 Confirmed Case Response Flowchart *The full flowchart can be found on the website*

Confirmed C	OVID-19 Case - Response Flowchart – Offi	ce Locations		
	A Maple Reinders' office is notified of a			
	confirmed case of an employee or an			
	office guest			
	Stop work at the office location			
	Make contact your Division Manager			
Governing officials do not	and a memberls of the			
need to be notified at this	Pandemic Committee			
time				
	Inform office employees of the			
	confirmed case and close the office			
	Use the provided definitions and			
	investigation form to determine who			
	has had Close Contact or Secondary			
	Contact with the confirmed case at the			
	office or spare vehicle			
CLOSE CONTAC	Conduct an investigation using the SEC	CONDARY CONTACT		
	Contact Tracing Form			
Determine who had close contact with		Determine who had secondary contact with the confirmed case, they		
the confirmed case and send them	Determine what areas will need to be			
nome immediately to <u>self-isolate</u> for 14	deep cleaned. Areas may include but	will be required to continue with self-		
day	are not limited to: reception, meeting	monitoring		
	rooms, washrooms, personal offices,			

	A Maple Reinders' project or a Maple			
	Reinders' JV project is notified of a			
	confirmed COVID-19 case on site			
	Stop work on site or designated areas			
	Make contact your Division Manager			
Governing officials do not	and a member/s of the			
need to be notified at this	Pandemic Committee			
time				
	Inform workers and subs of the			
	confirmed case			
	Using the provided definitions,			
	determine who has had Close Contact			
	or Secondary Contact with the			
	confirmed case at the project, in a			
	vehicle or in a hotel room			
	Conduct an investigation using the			
CLOSE CONTACT	Contact Tracing Form	SECONDARY CONTACT		
Determine who had close contact with the confirmed case and remove them	Determine what areas will need to be deep cleaned. Areas may include but	Determine who had secondary contac with the confirmed case, they will be		



How to create a safe Social Circle/Bubble/

Cohort Group

Ontario, BC and Alberta

Social Circle guidelines for Ontario residents

Step 1: Start with your current circle: anyone you live with or who regularly comes into your household

Be sure to include anyone that would come into regular close contact with you and the people you live with.

This may be:

- family members, including children
- your roommates
- another parent to your child(ren) that lives outside the home
- a babysitter or caregiver

Considerations

If you add people outside of your household to your social circle, be sure to include anyone in their households as well. You may not see them often, but they would still be considered part of your current circle.

Remember that everyone in a household must be part of the same social circle.

Step 2: If under 10 people, you can add members to your social circle, including another household, family members or friends

As you add additional members, ask yourself:

Do they live with or come into regular close contact with anyone else? You may never see them, but they would still be considered part of your social circle.

 What makes most sense for you or your household? That could include another household with similarly-aged children or family members that you want to spend more time with.

Considerations

If you live alone, you may want to start with family members or other close friends. People may, or may not, choose to participate in a social circle depending on their unique circumstance, and risk of developing complications from COVID-19, for example people:

- over 70
- with compromised immune systems
- with underlying medical conditions

Remember that your social circle can include fewer than 10 people. It's always best to start slow and safely add more members later.

Step 3: Get agreement from everyone that they will join the social circle

That means they agree to join only one circle, and physically distance with anyone outside the circle.

Essential workers can be part of a social circle, so long as the other members are aware of the risks and agree to them.

Step 4: Keep your social circle safe

To keep the people in your social circle safe:

- continue to follow public health advice, including frequent hand washing and sneezing and coughing into a sleeve
- continue to physically distance with anyone outside your circle by keeping two metres or six feet apart from them

If someone in your circle feels sick, they should immediately inform other members of the circle, self-isolate at home and not come into close contact with anyone, including other members of the circle they should also get tested.

Everyone else in the circle should closely monitor themselves for symptoms of COVID-19. If you believe you have been exposed to COVID-19 you should also be tested.

Step 5: Be true to your social circle

No one should be part of more than one circle.

Regardless of the safe social circles people form, Maple Reinders' Health and Safety protocols supersede these guidelines. Individuals are still required to maintain social/physical distance and if this is unavoidable, a face cover is must be worn. Safe social circles do not apply.

Social Circle guidelines for British Columbia residents

If you are at greater risk (over the age of 60 or with underlying medical conditions), be informed of your risk, think through your risk tolerance and take extra precautions.

Inside Your Bubble

Your bubble includes members of your immediate household and can be carefully expanded to include others.

- Try to limit the number of people in your bubble
- Every time you add someone to your bubble, you are also connecting with everybody in their bubble
- Inside your bubble you can hug and kiss and do not need to wear a mask or stay 2 m apart
- Remember, vigilant hand-washing and space cleaning is still important
- If you are sick, self-isolate from people in your bubble as much as possible

Outside Your Bubble

In personal settings when you're seeing friends and family who aren't in your bubble:

- Only get together in small groups of 2 to 6 people
- Keep 2 m of physical distance from those who are outside your bubble and limit your time together
- Stay home and away from others if you have cold or flu-like symptoms
- Take extra precautions for those at higher risk for serious illness from COVID-19, including older people and those with chronic health conditions

Regardless of the safe social circles people form, Maple Reinders' Health and Safety protocols supersede these guidelines. Individuals are still required to maintain social/physical distance and if this is unavoidable, a face cover is must be worn. Safe social circles do not apply.

Social Circle or a Cohort Group guideline for Alberta residents

A COVID-19 cohort, also referred to as a bubble, circle, or safe squad, is a small group whose members – always the same people - do not always keep 2 metres apart.

The cohort concept encourages individuals who cannot maintain 2 metre physical distance when in group settings to interact with the same people within their own cohort group rather than switching daily contacts or randomly interacting with others outside that circle. Note: When interacting with individuals not in your cohort, individuals should maintain a distance of two metres or wear a mask when closer than two metres with others. COVID-19 Information and Risk Mitigation

- 1. The purpose of forming a cohort
 - Limiting close physical contact only to those in a cohort decreases opportunities for being exposed to the virus while giving the opportunity for social interaction between individuals within the cohort.
 - Keeping the same people in the same small cohort group, rather than mixing and mingling, helps reduce the chance you or someone else will get COVID-19.
 - If someone does get sick, it is also easier to trace a person's close contacts when cohort members are known.
- 2. Core Cohort and recommended limit
 - Core Cohort: Your core cohort includes the people with whom you regularly spend the longest amounts of time and have the closest physical contact - those you can hug and touch - and those who are part of your daily or regular routines.
 - In the early months of COVID-19, Albertans were encouraged to limit close contact to their immediate families, household members or their closest tightknit social circle. o Core cohorts can now be expanded to include up to 15 additional people from outside of your household.
 - Albertans should only belong to one core cohort and still need to keep it small and safe as possible.
 - You spend the longest amount of time and have the closest physical contact with these people. If one of you gets COVID-19, there is a greater chance of the virus spreading quickly to the other members.
- 3. Other cohort types and recommended limits
 - Under Stage 2 of relaunch, other types of cohort groups are available to Albertans:
 - Childcare programs may operate in cohorts of up to 30 people, including staff and children
 - Sports teams can play in region-only cohorts of up to 50 players and coaching staff (mini leagues)
 - Performers can have a cohort of up to 50 people (cast members or performers)
 - Note: Sports and performing cohort numbers do not include parents or spectators
 - Albertans might find themselves in more than one cohort at the same time. Limit the total number of other cohort groups to which you and your core cohort belong.
 - Interacting with the same people and the same cohorts will be safer than constantly changing the people you interact with.
 - It is recommended if possible that households with sports, performing, and/or childcare cohorts consider having a smaller core cohort, given the total number of close contacts between all groups.

4. Safety recommendations for expanding your core cohort

- Follow these simple steps to expand your core cohort safely.
 - Step 1: Start with your current core group
 - This includes everyone you live with, including children, and anyone who regularly comes into your household.
 - It also includes anyone who comes into regular close contact with the people you live with (e.g., your children's other parent who lives outside the household, a babysitter or caregiver).
 - Step 2: Think carefully before expanding your core cohort
 - Take a look at your everyday life and see who makes the most sense to include for you and your household. You may want to include another family with similarly-aged children or friends/family members that you want to spend more time with.
 - Staying with those in your neighbourhood or those who live closest to you may slow the virus' geographic spread.
 - Don't feel pressured to expand a cohort until you feel confident it's safe. Start slow and safely add more members later.
 - Step 3: Get agreement and commitment from everyone to keep the core cohort safe. Members should:
 - Belong to only one core cohort
 - Limit interactions with people outside the core cohort
 - When interacting with people outside the core cohort, do it safely, in ways that keep risks low. Maintain a distance of 2 metres. Where this can be difficult masks should be worn.
 - Step 4: Limit the total number of other cohort groups to which you and your core cohort belong.
 - This might mean changing your daily routines or reducing the number of teams or groups you join.
 - When interacting with people in other types of cohorts, do it safely, in ways that keep risks low.
 - Minimize the amount of time you spend with them and limit the close physical contact you have with them.
- 5. Safety recommendations for participating in other types of cohort groups
 - When participating in other types of cohort group, you should:
 - interact outdoors if possible it's safer than indoors
 - avoid closed spaces with poor ventilation, crowded places and close contact settings
 - keep the cohort in your local community or neighborhood to reduce geographic spread
 - be healthy and not show any COVID-19 symptoms
 - $_{\odot}$ have not travelled outside Canada in the last 14 days
 - have not been in close contact with a case of COVID-19 in the last 14 days
 - keep track of where you go, when you are there and who you meet. This will be helpful if someone is exposed to COVID-19.

Regardless of the safe cohort groups people form, when working in a Maple Reinders' office or on a project, our Health and Safety protocols supersede these guidelines. Individuals are still required to maintain social/physical distance and if this is unavoidable, a face cover is must be worn. Safe cohort grouping does not apply