

Coronavirus COVID-19



BC Centre for Disease Control | **BC** Ministry of Health

COVID-19: Interim Communicable Disease Control Guidelines for Industrial Camps

Provincial COVID-19 Task Force March 30, 2020







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Introduction

Purpose

This guide is intended to highlight key communicable disease preparedness and response measures that can be taken by industrial camps in relation to COVID-19. It is independent of and does not negate WorkSafe BC or *Industrial Camps Regulation* requirements.

This guidance is also based upon current knowledge and it should be understood that guidance is subject to change as new data become available and new developments arise with this new virus; furthermore, unique situations may require some discretion in adjusting these guidelines which are meant to be supportive, not prescriptive.

COVID-19 Information

For the most up-to-date provincial information and resources, please visit the BC Centre for Disease Control (BCCDC)'s <u>webpage on the novel coronavirus</u>¹, which is updated on a daily basis. For more information, please refer to:

- HealthLinkBC.ca Health Feature Coronavirus: https://www.healthlinkbc.ca/health-feature/coronavirus
- Government of Canada 2019 novel coronavirus: Outbreak update: https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html
- To receive non-medical information about COVID-19, British Columbians can reach service representatives seven days a week, from 7:30 a.m. to 8 p.m., by calling 1-888-COVID19.
- Online self-assessment tool at https://covid19.thrive.health/

While we recognize that industrial camps provide an environment that can foster the transmission of infections from person to person, we also recognize that common, effective infection prevention and control measures are effective in reducing the transmission of COVID-19, similar to how you would deal with a more familiar condition such as influenza.

How Is COVID-19 Spread?

The novel coronavirus, COVID-19, is transmitted via larger liquid droplets when a person coughs or sneezes. The virus can enter through these droplets into the eyes, nose or throat of individuals who are nearby. The virus is not known to be airborne (e.g. transmission through particles that are suspended in the air) and it is not something that comes in through the skin. It can be spread by touch if a person has used their hands to cover their mouth or nose when they cough. That's why we recommend you cough or sneeze into your arm, wash your hands regularly, and avoid touching your face.

What Are the Symptoms?

While many of the characteristics of COVID-19 are still unknown, mild to severe illness has been reported for confirmed cases. The symptoms of COVID-19 are similar to other respiratory illnesses, including the flu and common cold. They include cough, fever, and difficulty breathing.ⁱ

¹ http://www.bccdc.ca/health-info/diseases-conditions/coronavirus-(novel)

COVID-19 Prevention and Control in Camps

Provide information for Staff and Camp Residents

Provide staff and residents information about where to access the most up-to-date and accurate information about COVID-19 (provided at the beginning of this guide). Ensure staff and residents are aware of the infection prevention and control measures that are being implemented by the company to minimize transmission in the camp.

Raise awareness among staff about what they should do if they become sick. As per usual practice, it is always advised that employees should not be working if they are ill. We recommend that employers provide remuneration of employees who are on isolation precautions for the duration of their communicable period to ensure those who are sick report their symptoms and adhere to isolation protocols, both of which are critical to controlling transmission of the disease. Employers are asked to excuse staff for sick leave without requiring a doctor's note, if their employees are ill or required to self-isolate. See page 12, 'Personnel precautions', of the NH CD Guide for Camps for more information.

Plan to Manage Individuals with Suspected COVID-19 Infection

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

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

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

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

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

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









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Contact information for local MHO:

Fraser Health

For public: 604-587-3936

Health professionals: 1-866-990-9941

Interior Health

For public: local health centre

Health professionals: 1-866-778-7736

Island Health

South Island: 1-866-665-6626 North Island: 1-866-770-7798

Northern Health: 250-565-2990

Vancouver Coastal Health: 604-675-3900

Test for COVID-19 if needed

Refer to the <u>BCCDC's webpage for health professionals</u> for up-to-date guidance on COVID-19 testing protocols, including testing in the event of a respiratory illness cluster.

Note that given the risks associated with industrial camps, it may be appropriate, based on the advice of your local Medical Health Officer, to do some testing of suspected cases in camps regardless of current provincial guidance for COVID-19 testing in community settings. If there are suspected cases in a camp, please notify your local Medical Health Officer and they can provide guidance on required testing and follow-up.

If there is no medical clinic on-site, an individual experiencing symptoms or with questions about their health can be directed to the online self-assessment tool available at https://covid19.thrive.health, 811, or a healthcare practitioner who will be able to provide advice on next steps, including where to go for testing (if needed).

Local Medical Health Officers typically receive test results within 72-96 hours after collection; however, in some instances this may take longer. Note that the BCCDC will notify the local Health Authority of any confirmed case for follow up. Medical Health Officers will work with the camp to implement management actions as applicable to the specific situation.

Refer to Urgent Medical Care Only if Indicated

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

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

Support Camp Residents Who Are Self-isolating

Some individuals are being asked to self-isolate by health professionals and officials. They should avoid face-to-face contact with others for the duration of their self-isolation. For workers who live permanently or temporarily on-site, preparations should be made so that individuals who need to self-isolate can have

separate sleeping quarters and ideally a separate bathroom. Camps may want to identify a specific section of the camp that is to be used for self-isolation. Plans should be in place for supporting residents under self-isolation, including delivery of food and other necessities, cleaning of self-isolation areas, and handling of laundry.

Workers may travel home for self-isolation in cases where they are within close driving distance of their home and are able to safely travel without using shared transportation (i.e. without risk of spreading the infection in the community). In all other cases where self-isolation has been recommended, workers should be provided with a single occupancy room for self-isolation and supported to stay at the camp unless a higher level of care is needed. Note that when individuals who are infected are self-isolated in their room, and appropriate infection control measures are in place at the camp (for food delivery, cleaning and laundry), the risk of further transmission within the camp is expected to be low. Please

What is self-isolation?

Self-isolation is a term for when a person who is at risk of spreading disease avoids contact with others. This is done to prevent spread of disease to other people. Self-isolation is one important way of preventing novel coronavirus (COVID-19) from spreading in BC. People may be asked to self-isolate when they have travelled recently to an area with many cases of COVID-19, when they have been in contact with a person who has COVID-19, or when they experience respiratory symptoms.

do not turn individuals who are suspected or confirmed cases away from the camp without a plan in place of where they can be safely isolated.

Enact Physical Distancing

Physical distancing has been recommended to reduce the spread of COVID-19. It is recommended that gatherings of any size be structured so that those present can maintain a distance of 2 metres from each other. Achieving this will require a variety of actions to decrease crowding and social interaction, such as staggering meal times, opening additional dining areas, and cancelling group activities. Continuing with these events during an outbreak can increase the risk of infection spreading within the camp.

Have Sufficient Infection Control Supplies

It is recommended that camps have a stock of infection control supplies on-site to deal with suspected and/or confirmed cases. This should include:

- Hand washing supplies and hand cleaning gels
- Appropriate cleaning supplies (see below for more information)
- Surgical masks if possible (with tissues used to cover coughs/sneezes if surgical masks cannot be purchased due to shortages)
- Disposable gloves
- For on-site medical facilities that provide a higher level of care (e.g. nurse practitioners or physicians)
 - Personal protective equipment for contact and droplet precautions (including eye protection, surgical/procedural masks, and disposable gowns and gloves)
 - A stock of swabs to conduct COVID-19 testing. Clinicians can use the same collection devices that are routinely used for NP swabs for influenza (or other respiratory virus testing or skin/mucosal swabs for HSV/VZV viral testing), with a label/requisition for COVID-19 testing. The <u>BCCDC's webpage for health professionals</u> provides up-to-date guidance on COVID-19 testing protocols.
- It is advised to have some supply of N95 respirators on-site (if possible) for medical responders in the rare event that they are needed for an aerosol-generating procedure (e.g. to administer CPR). Airborne precautions, including N95 respirators with eye protection, are recommended only for aerosol-generating procedures (e.g. open suctioning of respiratory tract, intubation, bronchoscopy, cardiopulmonary resuscitation).

These should be procured from private suppliers and we recommend that orders are made as soon as possible in light of the supply shortages. It is not recommended to stock-pile excess quantities of these supplies which may put further strain on healthcare systems and supply chains.

Clean and Disinfect Regularly

High-touch areas in the camp, such as toilets, bedside tables and door handles, should be disinfected at least once daily and preferably twice daily with an agent effective against coronavirus.

Coronaviruses are enveloped viruses, meaning they are one of the easiest types of viruses to kill with the appropriate disinfectant product. The types of disinfectants that can be used include:

- 500 parts per million chlorine solution: 1:100 [e.g. mix 10 ml household bleach (5.25%) with 990 ml water]
- Accelerated hydrogen Peroxide (0.5%)
- Quaternary Ammonium Compounds (QUATs)ⁱⁱ

The Environmental Protection Agency (EPA) released a list of registered disinfectant products that have qualified for use against SARS-CoV-2, the novel coronavirus that causes COVID-19. The list is available here: https://www.epa.gov/newsreleases/epa-releases-list-disinfectants-use-against-covid-19

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

Surfaces that become soiled with respiratory secretions or body fluids should be cleaned with an effective disinfectant. Use disposable gloves and protective clothing (e.g. plastic aprons, if available) when cleaning or handling surfaces, clothing, or linen soiled with bodily fluids.

Support hand hygiene and respiratory etiquette

Supporting works to engage in hand hygiene helps prevent or reduce the spread of COVID-19 and other illness. Work camp operators should ensure easy access to hand hygiene facilities throughout camps, either through hand hygiene stations or the provisions of hand sanitizer.

Hands should be cleaned frequently with an alcohol-based hand sanitizer (minimum 60% alcohol) or soap and water. Note that if a person's hands have dirt or food or anything else on them, they should use soap and water because hand sanitizer may not work. If hands are visible soiled and running water is not available, it is acceptable to use wipes hand wipes to removing dirt and then use hand sanitizer.

Hand hygiene is most important at the following times:

- Before eating or preparing food
- After coughing, sneezing, or blowing one's nose
- Before and after contact with an ill person
- After touching dirty surfaces such as taps and doorknobs and after going to the bathroom

Respiratory etiquette is also essential in preventing the spread of illness. The key elements of respiratory etiquette are:

- 1. Covering cough/sneeze with a sleeve or tissue
- 2. Disposing of used tissues in garbage
- 3. Cleaning hands after coughing or sneezingiii

Operators of work camps can support respiratory hygiene by educating workers on its importance and by providing tissues.

Prepare a summary of project information that can be referenced in the event of an outbreak at the camp.

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

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

At a minimum, the plan should include the following:

- Project location
- Contact information (names, telephone numbers and email addresses)
 - Camp personnel (managers, food, cleaning, etc.)
 - Medical service provider(s)
- Number of residents
- Number of staff (both working at the camp and housed at the camp)
- Demographics and health care status of workers (if known)
- Where workers are coming from (percentage: local, regional, provincial or international; if international, which countries are they from)
- Turnover patterns and work shifts (Do they fly in/fly out? How long are their shifts/rotations? Which travel hubs are they flying/driving out of)
- Overview of camp set-up (description of camp facilities including the number of rooms, room occupancy, number of showers and washrooms, dining and community areas, and recreational facilities such as gyms, pool tables, television rooms, etc.)

Ensure safe food handling

Germs from ill people (or from contaminated surfaces) can be transferred to food. During an outbreak, facilities should reinforce routine food safety and sanitation practices. Where possible, implement measures to minimize handling of shared food and items that may touch another person's food, such as:

- Discontinue self-serve buffet lines—have designated staff dispense food.
- Minimize handling of multiple sets of cutlery.
- Remove shared food containers from dining areas (e.g. shared pitchers of water, shared coffee cream dispensers, salt & pepper shakers, etc.).
- Dispense snacks directly to staff/clients and use pre-packaged snacks only.
- Ensure that food handling staff:
 - Practice good hand hygiene
 - Do not work in food handling areas if they are ill
- Ensure that all surfaces of the tables and chairs (including the underneath edge of the chair seat)
 are cleaned and disinfected after each meal.

Persons in self-isolation can place dishes outside of their room for pick-up. Disposable gloves can be used by individuals who are picking-up and handling these dishes. Ordinary cleaning and sanitation procedures for dishes are sufficient for killing the virus. Please note that the use of disposable plates and cutlery by ill staff/clients is not required during outbreaks.

Ensure Laundry is handled safely

Use precautions when doing laundry. Contaminated laundry should be placed into a laundry bag or basket with a plastic liner and should not be shaken. Gloves and a surgical/procedural mask should be worn when in direct contact with contaminated laundry. Clothing and linens belonging to the ill person can be washed together with other laundry, using regular laundry soap and hot water (60-90°C). Laundry should be thoroughly dried. Hand hygiene should be performed after handling contaminated laundry and after removing gloves. If the laundry container comes in contact with contaminated laundry, it can be disinfected using a diluted bleach solution.

Ensure Confidentiality

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

Review On-site Management of Company Policy Requirements

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

Outbreak Protocol

See Appendix D in the "Infection Prevention and Control for Novel Coronavirus: Guidance for Long-Term Care and Assisted Living Facilities) available http://www.bccdc.ca/Health-Info-Site/Documents/COVID19 LongTermCareAssistedLiving.pdf

Line list templates are available in Appendix E & F of the same document.

Precautions for On-site Medical Clinics

You can minimize transmission risks from COVID-19 in the medical office through common, effective infection prevention and control measures, similar to how you might deal with a more familiar condition like influenza.

Medical clinics can access information about COVID-19, including information on recommended clinic infection control precautions, testing guidelines, and advice on clinical care of people with suspected or confirmed COVID-19 at http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care.

Considerations and Recommendations for Medical Clinics

Reception Area

- Display posters at patient/client entrances with instructions for anyone with respiratory symptoms to identify themselves immediately to staff
 - o COVID-19 Poster for Medical Clinics
- Upon arrival at the clinic, workers who exhibit respiratory symptoms should be given a surgical/procedural mask or tissues to cover their mouth and nose, and be directed to a hand-washing or hand-sanitizer station.
 - o COVID-19 Hand Hygiene Poster
- If possible, place patients exhibiting respiratory symptoms in a private room and close door. Put up contact and droplet precautions signs as necessary.
- Have alcohol-based hand rubs (60-90% alcohol) and/or hand-washing stations available as appropriate at the clinic entrance, the reception counter, around the waiting area, as well as near exam room doors.
- Increase frequency of cleaning of high-touch areas (at least twice daily).

Waiting Room

- Remove newspapers and magazines.
- Remove or cover cloth seating.
- Space waiting room chairs apart. Place some in a hallway if needed to separate patients.
- If patients being seen for COVID-19 are not wearing a mask and cannot be spaced apart in the waiting room, place them in an exam room as soon as possible.
- Air circulation should be increased if feasible.
- Increase frequency of cleaning of high-touch areas (at least twice daily).

Exam Rooms

- Designate the closest possible exam room(s) for patients being seen for COVID-19 in order to allow rapid isolation.
- Empty these exam rooms of all but the bare minimum equipment (e.g. exam table, BP cuff).
- Wipe down all surfaces and equipment between patients who present with respiratory symptoms with an appropriate disinfectant.
- Complete general cleaning of all exam rooms at least twice daily.
- Air circulation should be increased if feasible.

Health care workers should wear a gown, gloves, procedural/surgical mask and eye protection when providing care to patients suspected or confirmed to have COVID-19. Additional precautions including N95 respirators with eye protection should be used during aerosol-generating procedures. For more information, visit the BCCDC webpage on personal protective equipment.

Up-to-date guidance on diagnostic testing for COVID-19 can be found here: http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/lab-testing

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Note that given the risks associated with industrial camps, it may be appropriate to do some testing of suspected cases in camps regardless of the current provincial guidance for testing in community settings.

More information on environmental cleaning and disinfectants for physician's offices can be found here: http://www.bccdc.ca/Health-Professionals-Site/Documents/COVID-
19 MOH BCCDC EnvironmentalCleaning.pdf

Additional Resources

Northern Health Communicable Disease Control Plan Best Management Guide for Industrial Camps: https://www.northernhealth.ca/sites/northern_health/files/services/office-health-resource-development/documents/communicable-disease-control-BMG.pdf

- 1. BCCDC website
 - a. For Health Professionals: http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care
 - b. For the Public: http://www.bccdc.ca/health-info/diseases-conditions/covid-19
 - c. Signage and Posters: http://www.bccdc.ca/health-professionals/clinical-resources/covid-19-care/signage-posters
- 2. Public Health Agency of Canada: Coronavirus disease (COVID-19) webpage: https://www.canada.ca/en/public-health/services/diseases/coronavirus-disease-covid-19.html
- 3. Alberta Health Services Guidelines for Outbreak Prevention, Management and Control in Work Camps: https://www.albertahealthservices.ca/assets/info/hp/phys/if-hp-phys-moh-work-camps-outbreak-guidelines.pdf
- 4. BC Housing COVID-19 Fact Sheet for Housing & Service Providers: https://www.bchousing.org/COVID-19

i http://www.bccdc.ca/health-info/diseases-conditions/covid-19

[&]quot; http://www.bccdc.ca/resource-

gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/Other/PICNet_GI_Guidelines_2010_.pdf

iii https://www.albertahealthservices.ca/assets/info/hp/phys/if-hp-phys-moh-work-camps-outbreak-guidelines.pdf

iv https://www.albertahealthservices.ca/assets/info/hp/phys/if-hp-phys-moh-work-camps-outbreak-guidelines.pdf

 $^{^{\}mathrm{v}}$ Memo: Important update on COVID-19, College of Physicians and Surgeons of British Columbia