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s.13

Shortt, Amanda PREM:EX

From: Hockin, Amber PREM:EX
Sent: May 7, 2020 4:41 PM
To: Kennedy, Christine PREM:EX; Wright, Don J. PREM:EX
Subject: FW: media scan - sick leave
Attachments: GoForward_TechBriefing_FINAL.pdf

In follow up to the sick leave question: Here is the media scan. Thanks

Without referencing paid or unpaid, the PHO's technical briefing (slide 12) included under "Core Workplace Guidelines":
You **must** have clear policies to enable and ensure that **individuals who have the symptoms of a cold, flu, or Covid-19 including any coughing or sneezing should not come into the workplace.** As part of opening your specific settings, you should implement sick day policies for the coming twelve months that actively work with individual staff being off sick more often or working safely at home during these illnesses. As employers you **must** take leadership in this regard with routine screening/questions of staff for symptoms checking.

Several news articles mentioned or quoted this – but none of them appear to say that it means employer paid sick leave and some actually followed by noting that there was no mention of legislation to mandate sick pay. CTV carried PJH referencing working with the Feds on funding it.

Rob Shaw:
Copyright

Palmer quotes the tech briefing but notes no requirement:

Copyright

From Zussman:
Copyright

<https://globalnews.ca/news/6911210/coronavirus-premier-plan-reopen/>

From CBC:
Copyright

Copyright

' [https://www.cbc.ca/news/canada/british-](https://www.cbc.ca/news/canada/british-columbia/covid-19-update-may-6-1.5556699)

[columbia/covid-19-update-may-6-1.5556699](https://www.cbc.ca/news/canada/british-columbia/covid-19-update-may-6-1.5556699)

CTV mentioned the potential of a paid sick leave program, Copyright

Copyright

' [https://bc.ctvnews.ca/mobile/from-haircuts-to-](https://bc.ctvnews.ca/mobile/from-haircuts-to-dinner-parties-b-c-unveils-plan-for-easing-covid-19-restrictions-1.4927166)

[dinner-parties-b-c-unveils-plan-for-easing-covid-19-restrictions-1.4927166](https://bc.ctvnews.ca/mobile/from-haircuts-to-dinner-parties-b-c-unveils-plan-for-easing-covid-19-restrictions-1.4927166)

James Smith

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COVID-19 IN BC

B.C.'s COVID-19 Go-Forward Strategy

May 6, 2020



Stay Informed Via These Resources:

gov.bc.ca/Covid-19 | bccdc.ca | 1-888-COVID19

Symptom Self-Assessment:

covid19.thrive.health



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Context

The COVID-19 pandemic will be over when the proportion of the population that is immune is large enough that transmission between people is no longer sustained. This can happen in two ways:

1. after enough people have been infected and have recovered; and/or
2. when enough people have been immunized with a vaccine.

The goal of our restrictions is to slow the spread of COVID-19 – protecting our most vulnerable and ensuring our health-care system can respond to increased demand while we develop a vaccine.

Context – What Are We Doing

Measures we have taken in B.C. include:

- Providing physical distancing and hygiene guidelines for industry.
- Banning mass gatherings of more than 50 people.
- Closing bars, restaurants, and personal service establishments.
- Reducing in-classroom learning and childcare.
- Requiring travelers to implement a 14-day self-isolation plan.
- Restricting visitors in health care and assisted living settings.
- Postponing elective surgeries and decanting hospitals.

Context – What Do We Do Next

Full engagement of individual citizens, key institutions, and employers to hard wire best-practices into day-to-day interactions with the overall objective to find the right balance against five goals:

- Suppress transmission rate to lowest rate possible for at-risk populations until a vaccine becomes available.
- Avert the health system being overwhelmed such as to be unable to offer quality care to both non-COVID-19 and COVID-19 patients.

Context – What Do We Do Next

Balanced against.....

- Meeting the very real ongoing physical and mental health needs of the non-COVID-19 patients and populations.
- Getting people back to work and rebuilding the economy.
- Optimizing the social fabric of our families and communities.

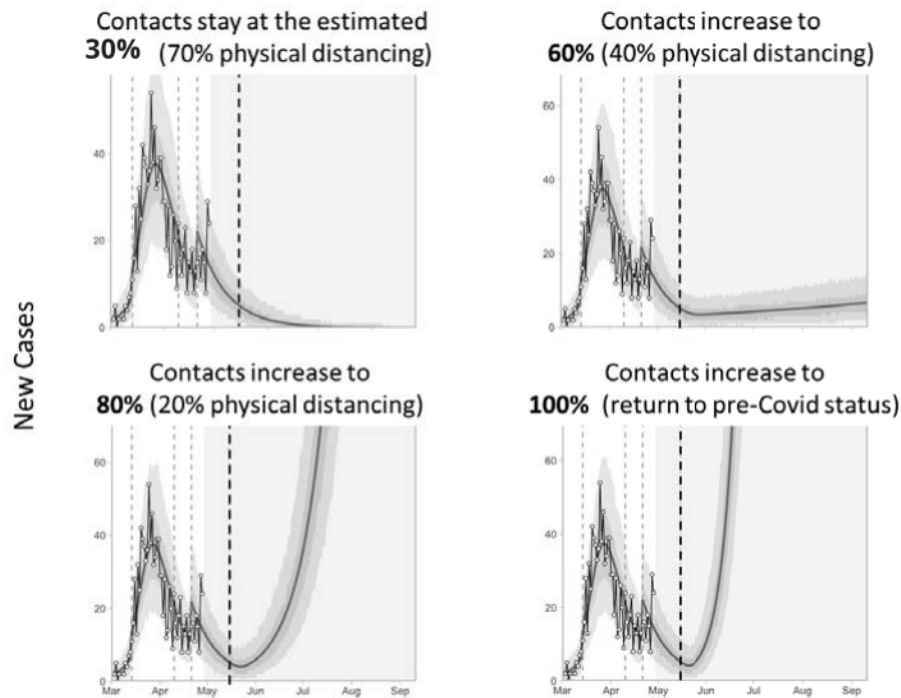
Dynamic Modelling

- While a return to near normal levels is expected to radically increase transmission, the move to 60% of normal is expected to result in a relatively flat transmission rate.
- Practically, British Columbians could almost double the amount of social contacts they have currently and still maintain a flat transmission rate.
- This presents opportunities we need to improve economic, social and personal well being for citizens – to find the right balance.
- This should provide a sustainable “new-normal” for the coming 12 to 18 months, while a vaccine is developed and deployed. We can continue to refine and tweak the balance of actions based on closely monitoring transmission rates.

Dynamic Modelling results

Using the Oxford Stringency Index (OSI) measure we can simulate various transmission impacts of increasing social contacts.

- *This is a mathematical model (run April 30, 2020) that demonstrates a key concept: there appears to be a threshold where some increased contact can occur without a rapid increase in cases.*
- *Cases will rebound if physical distancing is relaxed above a threshold because we have not reached herd immunity in B.C.*
- *Converting mathematical percentages of contact into social policy or practical societal terms must be thoroughly considered.*
- *These models are best suited to explore short-term trends. Projections past four weeks become less reliable.*



Three Areas of Focus to Reduce Transmission

- Core Guidelines for Personal Self Care.
- Core Guidelines for Managing Social Interaction with Extended Family and Friends.
- Core Guidelines to Implement Safe Practices In Organizations and Public Institutions.

Core Guidelines for Personal Self Care

- No hand shaking.
- Practicing good hygiene: frequently washing you hands and covering your cough.
- Maintaining reasonable physical distance when out in the community and using a non-medical mask or face covering in situations where reasonable physical distancing cannot be maintained.
- If you have the symptoms of a cold, flu, or COVID-19 stay at home and keep a safe distance from others until those symptoms have completely disappeared.
- If you are at greater risk (older than 60, compromised immune system, underlying chronic medical conditions) get informed about risk, assess your own risk tolerance, think through and apply extra precautions and heightened vigilance.

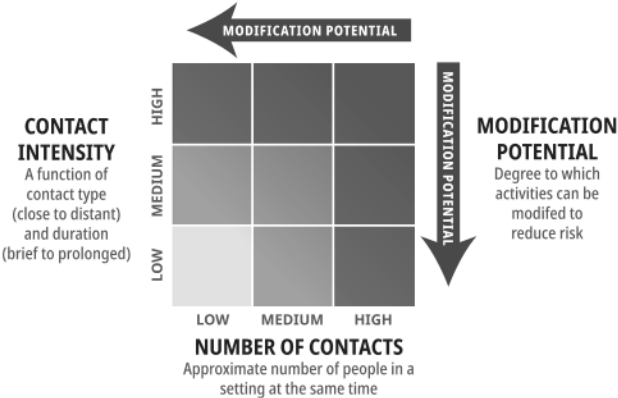
Core Guidelines for Social Interaction

- A clear policy for not socializing when you have the symptoms of a cold, flu, or COVID-19, including coughing or sneezing.
- Maintain regular social contact with extended family or small groups of friends – but only in small groups (between 2-6 guests) while maintaining a safe physical distance.

These considerations are especially important when visiting people who are more vulnerable to the health impacts of COVID-19.

Core Guidelines for Organizations and Public Institutions

The risk of transmission in organizational settings and public institutions is subject to two variables that we need to modify to reduce transmission risk: contact intensity (how close you are to someone and for how long); number of contacts (how many people are in the same setting at the same time).



Modifying from high to low can be based on a range of actions:

- Physical distancing measures – to reduce density of people
- Engineering controls – physical barriers, increased ventilation
- Administrative controls – rules and guidelines
- Non-medical masks

Core Workplace Guidelines

- Actively promote and monitor personal self care actions in your organization.
- Actively promote and implement the core measures for managing social interaction in your organizational setting in congregate social areas (kitchens, staff room, canteens, shared public spaces).
- You **must** have clear policies to enable and ensure that **individuals who have the symptoms of a cold, flu, or Covid-19 including any coughing or sneezing should not come into the workplace**. As part of opening your specific settings, you should implement sick day policies for the coming twelve months that actively work with individual staff being off sick more often or working safely at home during these illnesses. As employers you **must** take leadership in this regard with routine screening/questions of staff for symptoms checking.
- Require and sustain higher levels of **frequent cleaning of “high touch” areas** in workplaces and retail outlets throughout the day and availability of hand sanitizer stands at entrances or around workplaces and shops.
- Where appropriate and practical increase **use of temporary physical barriers** (such as plexiglass at service counters or checkouts).
- Focus on how you will **support and accommodate higher-risk populations** including those 65+ and those with underlying medical conditions. Workplaces, retail and personal service businesses are encouraged to exercise greater accommodation for these age groups in terms of work space, more flexible hours of work or shopping (earlier, later, mid-day) or working at home options.

Additional Guidelines for Offices

- Where possible continue to encourage working from home part of the time to reduce “contact intensity” and “number of contacts” in the work place.
- Where this is not possible or in addition to working from home policies, enable employees to have less contacts by:
 - Using staggered shifts or work hours for individuals or groups.
 - Teams working together virtually or small team task groups.
 - Forgoing in person group meetings as much as possible.

Additional Guidelines Retail Stores

- Best practice for the retail sector will be open to discussion as the sector develops its proposed plans. The PHO is continuing to review the guidelines.
- There are several actions the sector should think through in developing their proposed plans:
 - Ability to increase throughput of customers and reduce line-ups by opening and maintaining a higher number of check-outs once physical plexiglass barriers are installed between checkouts.
 - Increased or continued encouragement of on-line shopping, deliveries, and/or pick-ups to reduce volume of visits.
 - Increasing hours of shopping to decrease density of customers throughout the day.
 - Encourage or require utilization of basic non-medical masks while shopping in the store to reduce the spread through individuals coughing, sneezing, or close interpersonal contact and therefore increase density.
 - Use of physical barriers such as plexiglass.
 - Messaging re not shopping while sick (cold, flu, Covid-19 symptoms) and routine screening/questions of customers for symptoms checking.

Additional Guidelines Personal Services

- Hair salons, barbers, and personal service establishments will:
 - Use messaging about not accessing services while sick (cold, flu, Covid-19 symptoms) and routine screening/questions of customers for symptoms checking before providing a service.
 - Manage in terms of physical distancing and reducing or eliminate waiting areas.
 - Require appointments or bookings to manage customer flow.
 - Use of non medical masks and maintaining distance between customers while being served.
 - Use of physical barriers such as plexi-glass where practical.

Additional Guidelines for Child Care

- Routine daily symptom screening for all staff and children.
- Routine and frequent environmental cleaning.
- Clear policy for children or staff who have the symptoms of a cold, flu, or COVID-19, with any coughing or sneezing not coming into a child-care facility.

Additional Guidelines Schools (K-12)

- Routine daily screening protocol for all staff and students.
- Routine and frequent environmental cleaning.
- Smaller class sizes, increased space between desks, alternating attendance arrangements, frequent hand washing, wearing non-medical masks for group activities and sports, and limiting group sizes.
- Clear policy for children, youth and staff who have symptoms of a cold, flu, or COVID-19, with any coughing or sneezing not coming into school or taking part in extra curricular activities and sports.
- Planning over the summer for increased use of remote online learning, especially for high school children.
- Early arrival and self-isolation for 14 days of international students.

Additional Guidelines Post Secondary

- Routine daily screening protocol for all staff and students.
- Routine and frequent environmental cleaning.
- Clear policy for students and staff who have symptoms of a cold, flu, or COVID-19, with any coughing or sneezing not to attend classes, extra curricula activities, sports or work.
- Increased use of on-line learning balanced against the need of social interaction for learning and development.
- Early arrival and self-isolation for 14 days of international students.

Additional Guidelines

Sports/Recreation and Camps

- Routine daily symptom screening for all participants.
- Low contact sports especially those outdoors are considered safer. Identify high contact sports that should not take place during the pandemic.
- Clear policy for participants and staff who have the symptoms of a cold, flu, or COVID-19 symptoms, with any coughing or sneezing not participating.
- Staff and participants at higher risk of experiencing severe illness should not take part in recreational, sporting, or camp activities.

Managing public health and health-care service capacity

To respond to the COVID-19 pandemic, we need to protect the health-care system and health-care workers from being overwhelmed to continue providing appropriate care to non-COVID-19 and COVID-19 patients.

We need to consider our capacity to offer appropriate:

- Public Health Services.
- Hospital Critical and Ventilatory Care.

Public Health Measures – Testing

- Testing will remain an important part of the management strategy going forward.
- Public Health has recently revised guidance for COVID-19 testing by Nucleic Acid Tests (NATs) as follows:
 - Test all individuals with new respiratory or symptoms compatible with COVID-19 however mild.
 - Individuals in the following groups should be prioritized for testing:
 - Residents and staff of long-term care facilities.
 - Individuals requiring admission to hospital or likely to be admitted.
 - Healthcare workers.
 - Individuals with a higher probability of being infected with COVID-19 such as travellers just returned to Canada.
 - Residents of remote, isolated communities, including remote and isolated Indigenous communities.
 - People living in congregate settings such as work camps, correctional facilities, shelters, group homes, assisted living and seniors' residences.
 - People who are homeless or have unstable housing.
 - Essential service providers such as first responders.
 - Healthcare providers can order a COVID-19 test for any patient based on clinical judgement.
 - COVID-19 testing not recommended for individuals without symptoms.
 - The Medical Health Officer may recommend testing for others, such as those who are part of an investigation of a cluster or outbreak.

Public Health Measures – Capacity to Respond

- Sustained communication strategy to inform public of best practice and evidence.
- Preparation and resourcing to quickly respond to fresh outbreaks as required including using emergency powers.
- Explore development of an APP and supporting materials as an alert system.
- Provide additional risk-based guidelines targeted at at-risk populations to help individuals and families to think through how to healthily self-manage over the coming 12 to 18 months.
- Net new investment in PHSA and BCCDC for lab capacity, data analytics, modelling and reporting.

Health Services Measures

- PHSA/BCCDC to fully complete modelling to establish hospitalization rates for the BC system to be able to manage inclusive of normal demand.
- Continue to operationalize Urgent and Primary Care Centres as a key service element to respond to COVID-19 testing and respiratory care to reduce pressure on ERs and respiratory care in the community.

Health Services Measures (cont'd)

- Continue to improve the safety of people in Long Term Care and Assisted Living settings. This includes maintaining single-site working arrangement throughout this pandemic and planning for future outbreaks.
- Safely reboot key areas of the health care system that includes resuming non-urgent health-care services like:
 - primary care;
 - dental care;
 - physiotherapy and chiropractic care;
 - scheduled surgeries;
 - outpatient clinics; and
 - diagnostic and imaging services.

Supporting Working with Indigenous, Rural and Remote Communities

- We know that people living in rural, remote and Indigenous communities have unique challenges in accessing the health care that they need. The new collaborative framework will help ensure that people living in these communities have access to the care and unique supports they need.
- The framework outlines immediate actions to improve health care services including:
 - improved medical transportation options to larger centres, including flight and ambulance;
 - housing options for people looking to self-isolate near their families while remaining in their home communities;
 - new and faster COVID-19 testing technology;
 - culturally safe contact tracing that respects privacy in small communities;
 - access to Virtual Doctor of the Day, a program that connects First Nations members and their families in remote communities to a doctor or nurse practitioner using videoconferencing;
 - options for accommodation near larger centres with more medical services; and
 - increased mental-health supports in communities.

IMPLEMENTATION

- Unlike many other places that imposed strict “lock down” policies, B.C.’s approach was to require *safe operation* of a broad range of services designated as essential services to protect our health care system and maintain access to key services and supplies.
- Also many non-essential businesses remained open, provided that they could operate safely.
- As a result, B.C.’s economy has continued to operate in ways that other provinces haven’t. But it’s undeniable that local businesses have suffered.

A Safe Restart for Additional Businesses

- To help these businesses and other organizations get back on their feet, we need workplace practices that ensure British Columbians feel safe, whether they are returning to work, or going out as a customer.
- Employers will need to engage with their employees to find the right solutions and consider the concerns and needs of their customers.
- For the different organizational sectors to move forward they will be asked to develop operational protocols aligned with the Public Health and Safety Guidelines.
- WorkSafeBC will work with industry associations to ensure the direction and guidance they provide to their members meets the requirements set out by the Provincial Health Officer.
- WorkSafeBC will work with employers and workers through educational materials, consultation, and workplace inspections to help them restart safely.
- A cross-ministry deputy minister's committee will monitor the process and ensure overall alignment with Public Health and Safety Guidelines and WorkSafeBC.

Focus for Mid-May Onwards

Under enhanced protocols

- Restoration of health services
 - Re-scheduling Elective Surgery
 - Medically-related services
 - Dentistry, Physiotherapy, Registered Massage Therapy, Chiropractors
 - Physical therapy, speech therapy and similar
- Retail sector
- Hair salons/ barbers/other personal service establishments
- In-person counselling
- Restaurants, cafes, pubs – with sufficient distancing measures
- Museums, art galleries, libraries
- Office based worksites
- Recreation/sports
- Parks, beaches and outdoor spaces
- Transit Services
- Child care

Focus June-September – If Transmission Rate Remains Low or In Decline

Under enhanced protocols

- Hotels and Resorts (June)
- Parks – broader reopening, including some overnight camping (June)
- Film industry – beginning with domestic productions (June/July)
- Select entertainment – Movies and symphony, but not large concerts (July)
- Post-secondary education – with mix of online and in-class (September)
- K-12 education – with only a partial return this school year (September)

More Challenging or To Be Determined

- The timing of a safe restart of night clubs, casinos and bars is a more complicated consideration. As with other sectors, industry associations will be expected to develop safe operations plans, for review, that are in keeping with Public Health and Safety Guidelines, as well as WorkSafeBC.
- Conditional on at least one of: wide vaccination; “community” immunity; broad successful treatments:
 - Restrictions of large gathering (not >50 for social gathering **NOT** applied work or retail box stores, larger grocery stores, or malls) will remain in place for now
 - Activities requiring large gatherings will be prohibited
 - Conventions
 - Live audience professional sports
 - Concerts
 - International tourism

How We'll Keep Taking Care Of Each Other

Supporting families and businesses

- When the pandemic hit, the governments of British Columbia and Canada came together to identify critical supports for people, businesses and community organizations. The urgency of COVID-19 made it critical to plan, announce and deliver on vital supports for people and businesses across our province in record time.
- These supports have helped people stay in their homes, support their families and make ends meet and will continue to be in place as we start recovery.

Supports for Individuals and Families

- BC Emergency Benefit for Workers - a one-time, tax-free payment of \$1,000 to people whose income has been affected by COVID-19
- A COVID-19 crisis supplement for people with low-incomes, people with disabilities
- BC Hydro Relief
- ICBC payment relief
- Financial support through the BC Climate Action Tax Credit
- Emergency relief for families with children with special needs
- Continued support to youth in care
- New temporary rental supplement for renters and landlords
- Freezing all new annual rent increases
- Stopping all new and existing evictions to protect renters
- Freezing BC student loan repayments until September 2020
- Over 2,700 safe spaces for vulnerable people to self-isolate
- More spaces for people leaving violence
- Supporting seniors through funding to the United Way & bc211
- Supporting family caregivers through funding to Family Caregivers BC
- New job protected leave through changes to the *Employment Standards Act*
- Child care matching for essential service workers
- Launching Keep Learning BC so kids can continue their education online
- Emergency financial assistance for post-secondary students

Support for Businesses, Organization, and Industry

- Tax relief for commercial property owners and tenants.
- Rent reduction by 75% for small businesses with federal-provincial Canada Emergency Commercial Rent Assistance Program (CECRA).
- COVID-19 Supply Hub to help source medical and non-medical products and services.
- BC Hydro Relief.
- ICBC payment relief.
- BC Business COVID-19 Support Service – one-on-one support.

Conclusion

- Our “new normal” plan must remain nimble enough to allow us to fine-tune our interventions quickly enough to stay ahead of the outbreak trajectory.
- That can include an acceptable steady state of approximately 60% of the “old normal” social interaction – the goal is to maintain a steady go-forward state and if needed a series of moderate “lift and suppress” cycles, where restrictions are relaxed and then reapplied in ways that can keep the pandemic under control at an acceptable economic and social cost.
- We must all be 100% to modified restrictions in a “new normal,” in the same way we are committed to the current restrictions that are keeping our communities safe.

QUESTIONS?

COVID-19 IN BC

B.C.'s COVID-19 Go-Forward Strategy

May 6, 2020



Stay Informed Via These Resources:

gov.bc.ca/Covid-19 | bccdc.ca | 1-888-COVID19

Symptom Self-Assessment:

covid19.thrive.health



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Shortt, Amanda PREM:EX

From: Hughes, Trevor LBR:EX
Sent: May 13, 2020 8:30 AM
To: Wanamaker, Lori FIN:EX; Wright, Don J. PREM:EX
Cc: Mihlar, Fazil JEDC:EX; Kennedy, Christine PREM:EX
Subject: Paid Sick Leave BN
Attachments: 59518 - Paid Sick Leave BN.pdf

Importance: High

Good morning. Attached as promised is a DRAFT BN on paid sick leave. Dated Monday but is current to today and was sent to MHB last night for his review and direction – and we are discussing it in a briefing tomorrow afternoon. Happy to have a discussion with you before then but wanted you to know our thinking on the options in a “how can we stretch our minds” to be creative to find possible options. Copying in Fazil given this is a piece that has been raised in our Thursday ERTF sessions. Look forward to any comment/advice.

Thank you.

T.

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s.13