BRITISH COLUMBIA
BC Public Service
Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated June 3, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources at http://covid-19.bccdc.ca/.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19: https://covid19.thrive.health.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Vaccination planning by Public Health will continue to be impacted by the predictability and volume of approved vaccines being delivered, and by the number of additional vaccine types authorized for use by Health Canada.

COVID-19 vaccines are being developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the public health plan to end the pandemic. The BCCDC provides the most up to date information regarding vaccines.

2. How will COVID-19 vaccination change workplace safety plans?

When followed, Workplace Safety Plans and Public Health protective measures are successful in providing protection from COVID-19 transmission in our workplaces. The practices each reduce the risk of transmission and, as layers, together minimize the risk of COVID-19. These practices include staying home when sick, screening for symptoms, wearing masks, sanitizing and most importantly, keeping two metres distance from one another. COVID-19 vaccination, which is shown to be highly effective, provides a further layer of protection for individuals from COVID-19 infection and severe illness.

These layers of protection will remain an important workplace practice and permit safe delivery of services to clients with unknown immunity or vaccination status. Until community (or “herd”) immunity is achieved and community transmission decreases. Workplace Safety plans and Public Health practices will continue to be in place for a period of time after the BC immunization plan is completed. The BC Public Service follows the direction of Public Health on keeping these protections in place.

3. When will essential workers get a vaccine? [UPDATED]

The Public Health COVID-19 BC Immunization BC Plan included priority front line workers who work in specific industries. Initial vaccination for these workers was completed in Phase 3 (May 2021).

The Public Health age-based vaccination program has progressed quickly and is currently accessible to all individuals 12 years and older.

BC Public service employees who received a first vaccination in a workplace based clinic will receive their second shot through the provincially coordinated vaccination clinics.

See the Immunize BC Plan, which is updated frequently with the most current information including arranging second doses.

4. When will I get vaccinated? [UPDATED]

B.C.'s COVID-19 Immunization Plan has four phases. The focus in the early phases was to protect those most vulnerable to severe illness.

Public Health officials are encouraging all eligible British Columbians to get fully vaccinated as the key strategy to ending the pandemic restrictions in B.C.

B.C. is currently in Phase 4 of the immunization plan. All British Columbians 12 and older are eligible to register for vaccination. Registration links and scheduling information are available on the vaccination website. Individuals who received their first vaccination before April 6 are required to register online to be notified for their second dose.

All British Columbians who would like a vaccine, and who are eligible to receive one, are able to receive their first dose before July 1, 2021. Due to improved vaccine supplies in B.C., Public Health is also advancing the second dose vaccination due dates. Updated vaccine due dates can be viewed on the Health Gateway application.

5. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

6. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss your need for leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

7. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

No. COVID-19 vaccinations are not mandatory for employees. By summer 2021, vaccinations will have been made available for all B.C. residents who want one.

COVID-19 infections range widely in severity of symptoms. And given the high level of effectiveness of the vaccine, Public Health is encouraging all British Columbians to learn about the benefits and safety of the vaccine and consider vaccination to protect themselves and others.

Vaccination is an additional layer of protection for employees in the workplace. While virus transmission continues in the community following Public Health guidance on physical distancing, personal and workplace hygiene practices provide protection from the transmission of COVID-19 for employees and the public.

In an office setting or a worksite where the employer has implemented COVID-19 safety controls, the risk of exposure is much lower. This is different than an uncontrolled setting, such as a store or public transit, where physical distancing cannot be maintained on a sustained basis and the health status of other individuals is not certain. If everyone in the workplace closely follows the safety requirements in place, it remains safe to be in the workplace and the risk of exposure to COVID-19 remains low.

Anyone who is sick must stay home, and everyone in the workplace must follow required physical distancing and hygiene measures. Workplace safety procedures are updated based on changing Public Health and WorkSafe BC (WSBC) guidance.

8. Do I have to tell my supervisor or my ministry that I have been vaccinated?

No. Your vaccination is part of your own confidential medical history. You do not need to share your vaccination status, and your supervisor will not ask you.

9. Considering privacy restrictions, will information such as the number of staff immunized in my workplace be shared?

No. Vaccinations are a part of a person's confidential medical history. Your ministry will not ask if you have been vaccinated or gather statistics about the number of staff vaccinated.

10. Once I get vaccinated will I still have to follow COVID protocols in the workplace?

Yes. Our workplaces have been safe since the beginning of the COVID pandemic due to the protocols and protections in place. These include:

- If you are sick, do not come to work
- If you begin to feel unwell at work, go home immediately
- Active daily health checks
- Two-metre physical distancing
- Barriers between staff and or clients
- Reduced workplace capacity
- Cleaning
- Hand hygiene
- Mask use in common areas and where two-metre physical distancing cannot be maintained

These layers of protection will remain an important workplace practice and permit safe delivery of services to clients with unknown immunity or vaccination status. Until community (or "herd") immunity is achieved, and community transmission decreases, Workplace Safety Plans and Public Health practices will continue to be in place for a period of time after the B.C. immunization plan is completed. The BC Public Service follows the direction of Public Health on keeping these protections in place.

11. Once I get vaccinated will I still have to follow Public Health guidance and orders? [UPDATED]

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. In the workplace, employees must follow the COVID-19 Workplace Assessment and any applicable WorkSafeBC regulations or policies.

All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Public Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

On May 25, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding remote work arrangements. While the Provincial Health Officer lifted the recommendation to work from home, public service employees can continue to do so through Step 1 and Step 2 of the Restart Plan.

Employees choosing to return to the workplace can do so after discussing it with their supervisor and in compliance with existing workplace safety protocols. The update further outlines that in Step 3, employees can voluntarily return to the office on at least a part-time basis through the summer.

The B.C. Restart Plan outlines four steps. In advance of Step 3, which is projected to occur on July 1, WorkSafe BC will update sectoral guidance for workplaces. This guidance, along with Public Health guidance, informs workplace guidelines in the BC Public Service.

Those who have worked in your regular workplaces throughout the pandemic due to operational requirements can continue to do so safely because of the safety plans in place. For those who will continue to be in the workplace, all the safety plans and measures we have put in place remain in effect and must be followed.

The Provincial Health Officer's order also requires daily health checks for all employees attending a workplace anywhere in the province A guide for supervisors on how to conduct screening and the health check questions are available on MyHR.

As outlined in the Restart Plan, the Provincial Health Officer encourages continued caution with social interactions as COVID-19 continues to circulate in B.C.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. The same COVID-19 protocols will protect you in the workplace e.g. physical distancing, barriers, washing your hands, and staff staying home when you aren't feeling and the use of PPE where required.

Because variants may be better at spreading and infecting people, it is critical that we all follow our workplace COVID-19 protocols and public health guidance at all times.

Public Health is accelerating first and second doses of COVID-19 vaccinations and is recommending vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its

variants. Vaccination is another layer of personal protection in addition to workplace controls to decrease the risk of infection.

Workplace Health and Safety is following the variants closely and will update the COVID-19 Workplace Assessment Tool and any safe work procedures as required.

14. Are masks now required in BC Public Service workplaces for clients or the public? [UPDATED]

On November 24, under the Emergency Program Act an order was issued regarding face coverings in indoor public spaces. The November 24 order covers high-traffic public settings where people who do not know each other interact.

Under the November 24 order, all British Columbians 12 years of age or older are required to wear a face covering that covers the nose and mouth unless they are unable to wear one due to health concerns. The order applies to many public indoor spaces, including:

- Retail stores, including liquor and cannabis retail operations
- Courthouses
- Common areas in office buildings such as hallways, elevators, public bathrooms and lobbies

During Steps 1 & 2 of the BC Restart Plan, masks must be worn in these publicly accessible indoor areas by clients and staff (when able). If they have not already done so, workplaces must develop client mask or face covering procedures to be included in their COVID-19 Workplace Assessment Tool (COVID-19 safety plan) and associated training. An update to the COVID-19 Workplace Assessment Tool is on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

The mask/face covering requirement will be prominently communicated in client-facing signage and at entries to public service workplaces, and workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Ministries provide essential services to the public they cannot receive anywhere else. Efforts have been made to shift to virtual service, or other types of services that limits contact where possible. Clients will not be denied service if they are not wearing a mask as long as other protections against the transmission of COVID-19 are in place.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. In client service settings they offer superior protection to masks and don't rely on both staff and client to properly wear a mask. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communications.

Staff should speak with their supervisor about their ministry's procedures to support client mask wearing and the ministry procedures to manage unmasked clients seeking services.

15. Do BC Public Service employees have to wear a mask in the workplace? [UPDATED]

During Step 1 & 2 of the BC Restart Plan, employees must continue to wear masks when two-metre physical distancing can't be maintained. Masks must also be worn in lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens auditoriums, gyms and when moving around the workplace. Masks are not required in meeting rooms once seated, as long as two-metre physical distancing can be maintained.

All workplaces should review the mask and face covering procedures in their COVID-19 Workplace Assessment Tool. If a workplace has not updated their Assessment Tool for mask use, a mask use update is on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

Non-medical masks or face coverings are not a replacement for physical distancing or physical barriers in reducing the risk of transmission of COVID-19 in the workplace. Physical distancing is the most important control for the transmission of COVID-19 and should be maintained whenever possible, even if you are wearing a mask.

As has been recommended throughout the pandemic, if workplace activities require individuals to work within two metres of another person on a sustained basis, and barriers are not possible, ministries are encouraged to contact MyHR for support with specific workplace procedures and mask requirements. A guide for workplace mask use is available on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

16. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) as a result of the Provincial Health Officer's Orders or the BC Restart Plan? [UPDATED]

As noted in the COVID-19 Workplace Guidelines for BC Public Service Managers & Supervisors, all workplaces should regularly review the effectiveness of their COVID 19 Workplace Assessment Tool (COVID-19 Safety Plan). The PHO and WorkSafeBC have ordered all workplaces to continually review and update their plans as required to ensure they are protecting employees from the transmission of COVID-19. As of June 2021, all public service workplace assessments must include a review of:

- Mask requirements for public and staff
- Lunch, kitchen or break room protocols
- Supply, photocopier rooms or other areas where staff may be using shared equipment
- Protocols to prevent staff from congregating in other common areas of your workplace
- Washrooms
- Employee change rooms, and gyms (if applicable)

Updates to the Assessment Tool are found on the Tools & Resources for Managing COVID-19 in the BC Public Service page. Complete any required updates and add them to your current workplace assessment. Ensure you record the date of your review and actions and train all staff in any changes or updates.

17. How can physical distancing be practiced in the workplace?

Physical distancing is an important way we can all help limit the spread of COVID-19 in the community. The recommendation for physical distancing is that people stay at least two metres apart and avoid prolonged close personal contact. COVID-19 is transmitted by an infected person coughing or sneezing droplets and someone breathes them in. Typically, droplets travel less than two metres. The droplet can also land on hard surfaces that we touch and then we touch our faces.

Ways to practice physical distancing in the workplace include:

- Following the new workplace capacities and posted protocols.
- Avoid shaking hands, wash your hands thoroughly, and stay home if you are sick.
- If you're having a conversation with someone in their office or cubicle, stay at the door to increase the distance.
- Use virtual meeting tools rather than face-to-face conversations.
- If meeting with a group, use the largest room available and physically distance two metres from each other. Observe the posted maximum COVID-19 occupancy for the room.
- Sit at least two metres apart in mobile workspaces.
- Use automatic door openers to avoid touching door handles.
- Wipe down shared surfaces in mobile workspaces, meeting rooms and common areas.
- When working with clients, where possible keep the two-metre distance by standing back slightly at a service counter if necessary.
- Don't share food, plates or cutlery in staff rooms.
- Ensure staff room dishes are well cleaned.
- Don't leave items on staff room counters and tables overnight so janitorial staff can properly wipe down the entire surface.

18. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer has reported evidence of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province. Work associated activities such as carpooling, driving together to get a takeout lunch or sitting together without distancing while having a work break can all pose a risk of COVID-19 exposure.

These exposures in common and social areas of workplaces increase risk of transmission. We all need to be cautious when socializing at work and be attentive to physical distancing from colleagues, wear masks in common areas and practice good hygiene.

Based on evidence and concerns from the PHO, an updated assessment tool for common areas and lunchrooms was posted April 16. In some cases, workplaces may have to update their COVID-19 Safety Plans to reflect the updated assessment tool for common areas and lunchrooms.

As we tackle COVID-19 transmission together, these incidents remind us of the need to be cautious when socializing and be extra attentive to physical distancing when near our colleagues who are not in our personal bubbles. Other risks to avoid include sharing food or beverages or common utensils.

19. How can we work with clients or the public to maintain physical distancing?

- Put up signs at entrances to remind clients that they should not attend the office or re- book their appointment if they are sick, have a cough, have difficulty breathing or have not completed a 14-day self-isolation after international travel.
- Have signs asking people to reduce the number of people in elevators to maintain physical distancing.
- Use signs to encourage social/physical distancing in lobbies and waiting rooms.
- When working with clients, where possible keep the two-metre distance by standing back slightly at a service counter if necessary.
- When booking in-person meetings, add a reminder for clients about physical distancing and to reschedule if they feel unwell.
- Try to do virtual or phone meetings wherever possible.
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants.
- Rearrange or remove some of the waiting room furniture to allow for physical distancing.
- Use tape to mark out two metres spacing on the floor for line ups and counter service.
- If clients appear unwell, ask them if they would reschedule.
- Ask clients to cover up if they are coughing or sneezing using their elbow or a tissue.
- Create the recommended two metres distance between yourself and clients at counters and in interview or meetings rooms.

20. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the assistance of the PSA if needed, must determine whether there is a duty to accommodate and must assess the employee's situation in light of the information, including medical information, they are able to provide as to why they cannot work at the workplace. The supervisor should have a discussion with the employee about their circumstances, including their limitations and restrictions, and should discuss safety procedures at the worksite. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation on MyHR.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

21. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises that people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease,

diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g. HIV, chronic liver or organ transplant) or treatment, such as chemotherapy or immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

22. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes and letters, or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

23. An employee requests to remain at home as someone in their household has a chronic health condition and they are worried about transmitting COVID-19 to them. Is there a medical basis for this concern?

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, the supervisor should have a discussion with the employee about their circumstance and review the safety procedures and standard hygiene precautions in the workplace and how they are designed to protect staff from COVID-19. In addition, in controlled settings where employees with symptoms are not to come to work and clients are dealt with at a physical distance or with a barrier in place, this further reduces the risk of COVID-19. Employees should be informed of new or updated workplace safety procedures before the return to the worksite.

All employees should practice regular hand hygiene to minimize the risks of transmission which includes when leaving work and when arriving home.

When these measures are followed, there are several opportunities to stop the spread of infection and this should alleviate the concerns regarding the medical riskof transmission from the workplace.

Where this does not resolve the employee's concerns, the supervisor should continue to address this by following the steps in question #7 and the supervisor should contact MyHR for assistance.

24. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
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> The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) posted a statement in August 2020 on their site that airborne SARS-CoV-2 transmission is "sufficiently likely that airborne exposure to the virus should be controlled." The Public Health Agency of Canada and the US Center for Disease Control also updated their information on coronavirus transmission acknowledging the potential of airborne transmission in specific circumstances.

Following ASHRAE's guidance to "control" airborne exposure to SARS-CoV-2, the primary control is to "avoid the hazard". This means ensuring that any person experiencing any symptoms of any illness (i.e. not only COVID-19 symptoms) should stay at home.

ASHRAE has also recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property

Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g. filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

25. Is the coronavirus transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

26. Can employees working from home take IT equipment and office furniture home if needed to allow them to work effectively?

Employees may temporarily take monitors, keyboards and other easily transported IT peripheral devices they need to work effectively at home. Similarly, with their supervisor's agreement, employees may take their work chairs home. Employees are expected to transport this equipment themselves and must exercise care to prevent both injury to themselves and damage to any government assets. In cases where employees are not able to transport the equipment themselves,

they are requested to discuss the move arrangements with their supervisors. Branches are responsible for tracking any equipment employees take home and ensuring their return when employees return to their usual work arrangements.

Except for chairs, employees cannot take desks or other furniture home. If an employee requires a height-adjustable desk or other furniture as part of an accommodation agreement, the employee should be required to continue to work in the office as usual. Our workplaces remain safe for those employees continuing to work onsite. With more employees working from home, those who are in their regular workplaces are able to practice effective physical distancing measures and we have enhanced cleaning of workplaces to support employee safety.

Consistent with existing telework policies, the employer does not reimburse costs for utilities or office supplies employees use when choosing to work from home.

27. I have worked from home for significant periods of time in 2020 due to COVID-19. Will my supervisor/manager sign Canada Revenue Agency (CRA) form T2200 so that I may claim home-office related expenses on my 2020 tax return?

The federal government recently announced that for the 2020 tax year it is simplifying the process and requirements related to claiming home-office related expenses on an employee's tax return. Specifically, the Canada Revenue Agency (CRA) has established an information page advising that you are eligible to claim a deduction for home office expenses for the period you worked from home, if the CRA's eligibility criteria are met.

Eligible employees may apply for deductions using the new temporary flat rate method or the detailed method. Using the temporary flat rate method (CRA form T777S) means there is no requirement for you to have your supervisor sign CRA forms or to keep any supporting documentation. Eligible employees using the detailed method are required to have their supervisor sign CRA form T2200S and must keep any documents supporting their deductions.

CRA form T2200 obligates a supervisor to confirm that teleworking is a condition of employment. In the BC Public Service, teleworking has been optional during the pandemic and therefore CRA form T2200 does not apply for most employees and in most cases should not be signed by supervisors. However, supervisors are authorized to sign CRA form T2200S, which allows the employee to use the detailed method to calculate their home office expenses (see what expenses are eligible by reviewing CRA form T777S) but does not rely on telework being a condition of employment.

For more details, see the information page created by the CRA. If you have additional questions about eligibility or any other aspect of this process, please contact the CRA directly or consult with a tax professional. The employer does not provide tax advice.

28. What are the considerations needed when planning for a work event or large meeting while there is the potential for exposure to COVID-19? [UPDATED]

Wherever possible, virtual meeting options should be used. In-person meetings should only proceed if absolutely necessary to enable to essential work. Meetings should only be held in workplaces and meeting rooms that have been assessed and have COVID-19 protocols in place. For more information on meeting rooms see the COVID-19 Meeting Room Procedures.

Work events that traditionally would have staff gathering, for example team days or learning events, should either be held virtually or require specific COVID-19 safety protocols. If your workplace requires assistance with this type of activity contact MyHR.

Workplace Health and Safety encourages workplaces to use virtual options for meetings and events until Step 3 of the BC Restart Plan.

29. How do we implement COVID-19 workplace safety controls in Leading Workplace Strategy (LWS) designed settings?

Adapting to the new maximum staffing levels simply requires flexibility and spacing. While some adjustments to shared work surfaces are needed, the more fluid design of these spaces also allows more options to preserve the required physical distancing. Many of the practices outlined in the new workplace safety guidelines are applicable in an LWS work environment.

Safety in the workplace during this time of Covid-19, whether in a LWS environment or one that is traditionally planned, is highly dependent on prevention precautions such as ensuring physical distancing, hand-washing, sanitization of surfaces, staying away from work if feeling unwell, avoiding touching the face, etc. These are not space dependent but are reliant on employees' individual behaviours.

Part 3: Employee Exposure and Self-Isolation

30. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

Any employee who is sick with COVID-19 symptoms must stay home and away from others.

Public Health is notified of all positive tests immediately and contact tracing will begin by speaking to the COVID-19 positive employee. This review will identify the nature of contacts in the community, social or work locations in the 48 hours prior to becoming symptomatic. If Public Health staff identify any close contacts during this review, those individuals will be contacted directly by Public Health and given self-isolation advice. Public Health will only contact the workplace if there is a concern about transmission of the virus in the workplace or difficulty contacting individuals. In all cases, not hearing from Public Health official means the risk of transmission is low and no further notifications or actions are required. Cleaning requirement can be determined by using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

In terms of co-workers, determine the level of interaction with the employee. Workplace COVID protocols including daily active screening, distancing and hygiene significantly reduce the risk of associated transmission in the workplace. Low-risk exposure to a confirmed COVID-19 case includes walking by the person or briefly being in the same room with two metres distance. If low risk, the co-workers can continue usual activities, including daily self-checks for symptoms and practice good hand hygiene and social distancing in public, at home and at work.

Be prepared to provide information to Public Health officials about the workplace if they contact you.

If a COVID-19 positive individual was in the workplace while symptomatic or Public Health has contacted the workplace, supervisors are encouraged to communicate when this has occurred while protecting the identity of the individual, and to convey any identified cleaning protocol that was undertaken. Your ministry strategic human resource unit has resources to assist with messaging, or you can contact MyHR.

If there are further safety questions about managing the worksite and operations, please contact MyHR.

31. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Individuals who are sick should not be coming to work and potentially spreading disease to others.

Since April 23, testing guidelines have been updated to include testing any individuals with new respiratory or systemic (more generalized) symptoms compatible with COVID-19, however mild.

This universal approach to testing symptomatic individuals is an important part of monitoring the impact of changing public health recommendations.

You can ask the employee if they have used the BC COVID-19 Self Assessment Tool at https://bc.thrive.health/covid19/en, and if not, this should be encouraged. This tool has been updated to include mild symptoms and provides advice to find the test collection centre in their area. The employee can also still contact 8-1-1 to find the nearest centre or for directions in another language.

Negative test results can be obtained by phone, text, or online at http://www.bccdc.ca/health-info/diseases-conditions/covid-19/testing/test-results.

32. What does "close contact" mean? [UPDATED]

Individuals will be identified as a close contact by Public Health staff following evaluation of new cases and tracing contacts. Employees who have been advised they are close contacts should stay away from the workplace, follow Public Health staff's direction and discuss work arrangements with their supervisor.

For Public Health monitoring, a close contact is defined as a person who:

- Provided care for the case, including healthcare workers, family members or other caregivers, or who had other similar close physical contact without consistent and appropriate use of personal protective equipment, OR
- Who lived with or otherwise had close prolonged* contact (within 2 metres) with a probable or confirmed case while the case was ill, OR
- Had direct contact with the infectious body fluids of a probable or confirmed case (e.g. was coughed on or sneezed on) while not wearing recommended personal protective equipment.

Close contacts of COVID-19 cases confirmed by public health must self-isolate for 14 days from last contact with the COVID-19 positive person. Work settings where clients are residents may have other return to work policies.

*As part of the individual risk assessment, public health will consider the duration of the contact's exposure (e.g. a longer exposure time likely increases the risk), the case's symptoms (coughing or severe illness likely increases exposure risk) and whether the exposure occurred in a health care setting.

33. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated

obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

34. I supervise an employee who is sick with a fever and new respiratory symptoms (e.g. cough, runny nose). There is no travel history and no history of exposure to someone who was ill and travelled. What should I do? [UPDATED]

The employee should self-isolate and not be in the workplace in order to minimize the risk of infection to others. The employee should be advised to use the BC COVID-19 Self- Assessment Tool which will provide recommendations with COVID -19 testing. The employee should be placed on sick leave unless they are able to work from home.

Ending self-isolation and returning to work:

- For employees who test positive for COVID-19, public health will be involved with contact tracing, management, and advise the employee when to end self isolation.
- For employees who test negative for COVID-19 and have symptoms of illness, they are to continue to isolate until their symptoms resolve.

For employees who don't have test results or Public Health did not provide direction on ending self-isolation, they can return to their routine activities, including work, once all of the following criteria is met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without the use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing after recovery may persist for several weeks. This does not mean the individual is infectious and they are not required to self-isolate. Health care providers and other employees in residential settings should check with their supervisor about different return to work procedures.

35. I supervise an employee who tells me they have been medically advised to stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to remain at home on self- isolation or isolation because they are sick (or in hospital for treatment), they are eligible for sick leave.

36. A family member (partner, relative, child) of a worker becomes sick with an illness but has not been COVID tested yet and has not been identified by public health as a close contact. The worker lives in the same household as the family member but has no symptoms. Can the worker continue to attend work, or are they required to self isolate until the family member is tested and results are negative?

If the worker is asymptomatic, they can continue to attend work and are not required to self-isolate. The asymptomatic worker would continue with preventative health practices such as hand washing, distancing, and self-monitoring for symptoms. If the worker subsequently develops symptoms, they should not attend work, get assessed and, if necessary, tested.

If the symptomatic family member's test comes back COVID positive, Public Health will be involved and provide advice to the worker regarding self-isolation and not to attend work.

37. A family member (partner, child, relative) of a worker has been recommended to stay home for 14 days since they have been identified by Public Health as a close contact of a COVID positive case. The worker lives in the same household as the family member. Can the worker continue to attend work, or do they need to self isolate as well?

If the family member is asymptomatic and the worker is also asymptomatic, the worker can continue to attend work and does not need to self isolate. However, if the family member becomes ill, the family member will need to be medically assessed and tested since they are a close contact. While the symptomatic family member is being tested and waiting for their results, it is reasonable for the worker to also self isolate pending the outcome of the test results.

If the symptomatic family member, who is a close contact, has a positive COVID test result, Public Health will be involved in contact tracing and the asymptomatic worker will be given advice on self isolation and not to attend work. Even if the worker is asymptomatic, if they have been medically recommended to self-isolate, they must not return to the worksite for the 14-day self-isolation period. If the employee is able to work remotely, this should be explored with their supervisor.

If the symptomatic family member, who is a close contact, turns out to have a negative COVID test result, the asymptomatic worker can continue to attend work and self monitor for symptoms, but does not need to self isolate.

38. In the situation outlined in the previous question, what does this mean for co-workers? Do we need to close that workplace? [UPDATED]

The employee is self-isolating as a precaution, not showing symptoms, and therefore the co-workers only need to continue with current COVID-19 public health recommendations for all British Columbians, such as hand hygiene, social distancing, and staying home if sick.

Routine cleaning of surfaces is advised. Workplaces do not need to close early just so routine cleaning can be done. Most people become ill from being in close contact with someone who showed symptoms such as coughing and sneezing, therefore transmitting the virus through

droplets. In the case above, the employee is not coughing or sneezing and the risk to co-workers is low.

In terms of surfaces that may have virus on it, routine cleaning with disinfectant kills the virus. In addition, if one happened to touch a contaminated surface, washing your hands kills the virus. Not touching your face with your hands can also stop your likelihood of picking up the virus.

39. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

The best thing we can all do is follow the steps recommended by the Provincial Health Officer to protect ourselves and others: wash your hands regularly and thoroughly, avoid touching your face, clean surfaces, and practice physical distancing measures.

See questions in Part 1 above for more information on how this can be done in your workplace and talk to your supervisor about your concern. If you follow these recommendations and the exposure control procedures for your workplace, the risk of contracting COVID-19 even through passing documents and other items back and forth between workers or clients is low.

If you commute to work on public transit, physical distancing and hand washing are effective preventative measures.

40. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

41. I have an employee who will be coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required.

Employees who have mild respiratory symptoms that can be managed at home can return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication

- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious and must self isolate.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

42. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

43. When an employee tells their supervisor that they have been exposed to COVID-19 and they have no symptoms, does that employee need to self-isolate?

It is important to understand how the employee knows the source is a confirmed COVID-19 case. Cases can only be defined by a positive COVID-19 swab test or determined by a health care professional based on the pattern of symptoms, exposure history, and severity of illness.

Low risk exposures to a confirmed COVID-19 case include walking by the person, or briefly being in the same room. No precautions are recommended. Exposures that are not close contacts (see above) are recommended to self-monitor daily. Instructions on self-monitoring are available from the BC Centre for Disease Control. The person would only self-isolate and contact Public Health if they become symptomatic. Close contacts to an established COVID-19 case will be asked by Public Health to self-isolate and self-monitor daily.

If this arises while the employee is in the workplace, seat them alone in a board room or away from others while you contact MyHR for advice.

44. I have an employee who attended a public event where another attendee was subsequently confirmed as having COVID-19 infection with testing. Should my employee be required to self-isolate and do other staff in the same work location need to take any precautions?

No. If the employee does not have symptoms, they do not need to self-isolate. The employee can self monitor for symptoms for 14 days. Staff in the same work location as the employee do not need any additional precautions. As usual, hand washing, not touching faces, cleaning of commonly

touched surfaces, cough/sneeze etiquette, and staying home if one is sick should be promoted at every opportunity.

The exception is when the public event is part of an investigation of a cluster or outbreak lead by public health and if there is a medical recommendation for all attendees to self- isolate. Public health officials will be involved with COVID-19 positive case management and contact tracing.

Part 4: Employee Exposure Related to Travel

45. With current public health orders and direction, can employees undertake work-related travel?

Effective November 19, 2020 until further notice, the Provincial Health Officer directed that non-essential travel within B.C. should be limited. Virtual meeting options should be used in place of travel wherever possible, and only essential work-related travel is permitted. Essential work-related travel includes training, site visits and meetings that cannot be done virtually. All travel must have COVID safety protocols in place.

Employees who choose to take personal international travel unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

46. My domestic partner, spouse or family returned from travel outside of Canada on or after March 12, 2020 and they do not have any symptoms. Do I need to self-isolate for 14 days if I have not travelled myself?

No, the self-isolation order after travel is designed to stop the potential spread of COVID-19 should a returning traveler have had an exposure from abroad. Employees that have not travelled can continue to participate in the workplace and as usual should self-monitor for the development of COVID-19 symptoms.

If the partner, spouse or family member then develops illness within the 14 days of self-isolation, the employee should leave the workplace and contact their supervisor. If operationally feasible, modified work can be offered otherwise the employee will be placed on sick leave for a 14-day self-isolation period. Public health officials will have further advice for family members and the employee.

47. An employee refuses to comply with the PHO/Federal Minister of Health order to self- isolate for 14 days following travel. They insist they can return to the workplace. How do I advise them?

In March 2020 an Emergency Order under the Quarantine Act was implemented that requires any person entering Canada by air, sea, or land to quarantine (self-isolate) themselves for 14 days whether or not they have symptoms of COVID-19.

Further restrictions for travellers arriving in Canada have been put in place in February 2021. Employees should be directed to check the Government of Canada website and the BC Provincial Health Officers site for the latest quarantine and travel requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until quarantine and all requirements have been met. Employees who

choose to take personal international travel unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor if they are going to be absent more than 14 calendar days and in advance of any return to work.

Contact MyHR if you have questions about the application of the order to employees who are essential workers.

48. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and cannot work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated June 25, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources at http://covid-19.bccdc.ca/.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19: https://covid19.thrive.health.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Vaccination planning by Public Health will continue to be impacted by the predictability and volume of approved vaccines being delivered, and by the number of additional vaccine types authorized for use by Health Canada.

COVID-19 vaccines are being developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the public health plan to end the pandemic. The BCCDC provides the most up to date information regarding vaccines.

2. How will COVID-19 vaccination change workplace safety plans?

When followed, Workplace Safety Plans and Public Health protective measures are successful in providing protection from COVID-19 transmission in our workplaces. The practices each reduce the risk of transmission and, as layers, together minimize the risk of COVID-19. These practices include staying home when sick, screening for symptoms, wearing masks, sanitizing and most importantly, keeping two metres distance from one another. COVID-19 vaccination, which is shown to be highly effective, provides a further layer of protection for individuals from COVID-19 infection and severe illness.

These layers of protection will remain an important workplace practice and permit safe delivery of services to clients with unknown immunity or vaccination status. Until community (or “herd”) immunity is achieved and community transmission decreases. Workplace Safety plans and Public Health practices will continue to be in place for a period of time after the BC immunization plan is completed. The BC Public Service follows the direction of Public Health on keeping these protections in place.

3. When will essential workers get a vaccine?

The Public Health COVID-19 BC Immunization BC Plan included priority front line workers who work in specific industries. Initial vaccination for these workers was completed in Phase 3 (May 2021).

The Public Health age-based vaccination program has progressed quickly and is currently accessible to all individuals 12 years and older.

BC Public service employees who received a first vaccination in a workplace based clinic will receive their second shot through the provincially coordinated vaccination clinics.

See the Immunize BC Plan, which is updated frequently with the most current information including arranging second doses.

4. When will I get vaccinated?

B.C.'s COVID-19 Immunization Plan has four phases. The focus in the early phases was to protect those most vulnerable to severe illness.

Public Health officials are encouraging all eligible British Columbians to get fully vaccinated as the key strategy to ending the pandemic restrictions in B.C.

B.C. is currently in Phase 4 of the immunization plan. All British Columbians 12 and older are eligible to register for vaccination. Registration links and scheduling information are available on the vaccination website. Individuals who received their first vaccination before April 6 are required to register online to be notified for their second dose.

All British Columbians who would like a vaccine, and who are eligible to receive one, are able to receive their first dose before July 1, 2021. Due to improved vaccine supplies in B.C., Public Health is also advancing the second dose vaccination due dates. Updated vaccine due dates can be viewed on the Health Gateway application.

5. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

6. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss your need for leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

7. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

No. COVID-19 vaccinations are not mandatory for employees. By summer 2021, vaccinations will have been made available for all B.C. residents who want one.

COVID-19 infections range widely in severity of symptoms. And given the high level of effectiveness of the vaccine, Public Health is encouraging all British Columbians to learn about the benefits and safety of the vaccine and consider vaccination to protect themselves and others.

Vaccination is an additional layer of protection for employees in the workplace. While virus transmission continues in the community following Public Health guidance on physical distancing, personal and workplace hygiene practices provide protection from the transmission of COVID-19 for employees and the public.

In an office setting or a worksite where the employer has implemented COVID-19 safety controls, the risk of exposure is much lower. This is different than an uncontrolled setting, such as a store or public transit, where physical distancing cannot be maintained on a sustained basis and the health status of other individuals is not certain. If everyone in the workplace closely follows the safety requirements in place, it remains safe to be in the workplace and the risk of exposure to COVID-19 remains low.

Anyone who is sick must stay home, and everyone in the workplace must follow required physical distancing and hygiene measures. Workplace safety procedures are updated based on changing Public Health and WorkSafe BC (WSBC) guidance.

8. Do I have to tell my supervisor or my ministry that I have been vaccinated?

No. Your vaccination is part of your own confidential medical history. You do not need to share your vaccination status, and your supervisor will not ask you.

9. Considering privacy restrictions, will information such as the number of staff immunized in my workplace be shared?

No. Vaccinations are a part of a person's confidential medical history. Your ministry will not ask if you have been vaccinated or gather statistics about the number of staff vaccinated.

10. Once I get vaccinated will I still have to follow COVID protocols in the workplace?

Yes. Our workplaces have been safe since the beginning of the COVID pandemic due to the protocols and protections in place. These include:

- If you are sick, do not come to work
- If you begin to feel unwell at work, go home immediately
- Active daily health checks
- Two-metre physical distancing
- Barriers between staff and or clients
- Reduced workplace capacity
- Cleaning
- Hand hygiene
- Mask use in common areas and where two-metre physical distancing cannot be maintained

These layers of protection will remain an important workplace practice and permit safe delivery of services to clients with unknown immunity or vaccination status. Until community (or "herd") immunity is achieved, and community transmission decreases, Workplace Safety Plans and Public Health practices will continue to be in place for a period of time after the B.C. immunization plan is completed. The BC Public Service follows the direction of Public Health on keeping these protections in place.

11. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. In the workplace, employees must follow the COVID-19 Workplace Assessment and any applicable WorkSafeBC regulations or policies.

All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Public Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

12. What workplace changes are required for Step 2 and Step 3 of the BC Restart Plan? [NEW]

There are no required changes to COVID Workplace Safety Plans in Step 2 of BC's Restart Plan. Employees coming to the office must continue to complete a Daily Health Check, physical distance in workspaces and wear a mask in common areas and lunchrooms.

Step 3 will begin on July 1, 2021 at the earliest. There will be a significant amount of regulatory and legislative change before the province fully moves to Step 3. Ministries will have a transition period while the workplace adapts to new guidelines and materials.

Step 3 guidance allows much more social connection and a return to a more normal level of societal functioning. Public Health will continue to closely follow new case rates, numbers of COVID variant strains and hospital occupancy to monitor the impact of the increased interactions.

As new guidance materials are released, the Public Service Agency will provide updated guidance and support ministries to maintain operations and keep employees safe.

13. What is the current direction on returning to the workplace and remote work?

On May 25, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding remote work arrangements. While the Provincial Health Officer lifted the recommendation to work from home, public service employees can continue to do so through Step 1 and Step 2 of the Restart Plan.

Employees choosing to return to the workplace can do so after discussing it with their supervisor and in compliance with existing workplace safety protocols. The update further outlines that in Step 3, employees can voluntarily return to the office on at least a part-time basis through the summer.

The B.C. Restart Plan outlines four steps. In advance of Step 3, which is projected to occur on July 1, WorkSafe BC will update sectoral guidance for workplaces. This guidance, along with Public Health guidance, informs workplace guidelines in the BC Public Service.

Those who have worked in your regular workplaces throughout the pandemic due to operational requirements can continue to do so safely because of the safety plans in place. For those who will continue to be in the workplace, all the safety plans and measures we have put in place remain in effect and must be followed.

The Provincial Health Officer's order also requires daily health checks for all employees attending a workplace anywhere in the province A guide for supervisors on how to conduct screening and the health check questions are available on MyHR.

As outlined in the Restart Plan, the Provincial Health Officer encourages continued caution with social interactions as COVID-19 continues to circulate in B.C.

14. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. The same COVID-19 protocols will protect you in the workplace e.g. physical distancing, barriers, washing your hands, and staff staying home when you aren't feeling and the use of PPE where required.

Because variants may be better at spreading and infecting people, it is critical that we all follow our workplace COVID-19 protocols and public health guidance at all times.

Public Health is accelerating first and second doses of COVID-19 vaccinations and is recommending vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Vaccination is another layer of personal protection in addition to workplace controls to decrease the risk of infection.

Workplace Health and Safety is following the variants closely and will update the COVID-19 Workplace Assessment Tool and any safe work procedures as required.

15. Are masks now required in BC Public Service workplaces for clients or the public?

On November 24, under the Emergency Program Act an order was issued regarding face coverings in indoor public spaces. The November 24 order covers high-traffic public settings where people who do not know each other interact.

Under the November 24 order, all British Columbians 12 years of age or older are required to wear a face covering that covers the nose and mouth unless they are unable to wear one due to health concerns. The order applies to many public indoor spaces, including:

- Retail stores, including liquor and cannabis retail operations
- Courthouses
- Common areas in office buildings such as hallways, elevators, public bathrooms and lobbies

During Steps 1 & 2 of the BC Restart Plan, masks must be worn in these publicly accessible indoor areas by clients and staff (when able). If they have not already done so, workplaces must develop client mask or face covering procedures to be included in their COVID-19 Workplace Assessment Tool (COVID-19 safety plan) and associated training. An update to the COVID-19 Workplace Assessment Tool is on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

The mask/face covering requirement will be prominently communicated in client-facing signage and at entries to public service workplaces, and workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Ministries provide essential services to the public they cannot receive anywhere else. Efforts have been made to shift to virtual service, or other types of services that limits contact where possible. Clients will not be denied service if they are not wearing a mask as long as other protections against the transmission of COVID-19 are in place.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. In client service settings they offer superior protection to masks and don't rely on both staff and client to properly wear a mask. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communications.

Staff should speak with their supervisor about their ministry's procedures to support client mask wearing and the ministry procedures to manage unmasked clients seeking services.

16. Do BC Public Service employees have to wear a mask in the workplace?

During Step 1 & 2 of the BC Restart Plan, employees must continue to wear masks when two-metre physical distancing can't be maintained. Masks must also be worn in lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens auditoriums, gyms and when moving around the workplace. Masks are not required in meeting rooms once seated, as long as two-metre physical distancing can be maintained.

All workplaces should review the mask and face covering procedures in their COVID-19 Workplace Assessment Tool. If a workplace has not updated their Assessment Tool for mask use, a mask use update is on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

Non-medical masks or face coverings are not a replacement for physical distancing or physical barriers in reducing the risk of transmission of COVID-19 in the workplace. Physical distancing is the most important control for the transmission of COVID-19 and should be maintained whenever possible, even if you are wearing a mask.

As has been recommended throughout the pandemic, if workplace activities require individuals to work within two metres of another person on a sustained basis, and barriers are not possible, ministries are encouraged to contact MyHR for support with specific workplace procedures and mask requirements. A guide for workplace mask use is available on the Tools & Resources for Managing COVID-19 in the BC Public Service page.

17. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) as a result of the Provincial Health Officer's Orders or the BC Restart Plan?

As noted in the COVID-19 Workplace Guidelines for BC Public Service Managers & Supervisors, all workplaces should regularly review the effectiveness of their COVID 19 Workplace Assessment Tool (COVID-19 Safety Plan). The PHO and WorkSafeBC have ordered all workplaces to continually review and update their plans as required to ensure they are protecting employees from the transmission of COVID-19. As of June 2021, all public service workplace assessments must include a review of:

- Mask requirements for public and staff
- Lunch, kitchen or break room protocols
- Supply, photocopier rooms or other areas where staff may be using shared equipment
- Protocols to prevent staff from congregating in other common areas of your workplace
- Washrooms
- Employee change rooms, and gyms (if applicable)

Updates to the Assessment Tool are found on the Tools & Resources for Managing COVID-19 in the BC Public Service page. Complete any required updates and add them to your current workplace assessment. Ensure you record the date of your review and actions and train all staff in any changes or updates.

18. How can physical distancing be practiced in the workplace?

Physical distancing is an important way we can all help limit the spread of COVID-19 in the community. The recommendation for physical distancing is that people stay at least two metres apart and avoid prolonged close personal contact. COVID-19 is transmitted by an infected person coughing or sneezing droplets and someone breathes them in. Typically, droplets travel less than two metres. The droplet can also land on hard surfaces that we touch and then we touch our faces.

Ways to practice physical distancing in the workplace include:

- Following the new workplace capacities and posted protocols.
- Avoid shaking hands, wash your hands thoroughly, and stay home if you are sick.
- If you're having a conversation with someone in their office or cubicle, stay at the door to increase the distance.
- Use virtual meeting tools rather than face-to-face conversations.
- If meeting with a group, use the largest room available and physically distance two metres from each other. Observe the posted maximum COVID-19 occupancy for the room.
- Sit at least two metres apart in mobile workspaces.
- Use automatic door openers to avoid touching door handles.
- Wipe down shared surfaces in mobile workspaces, meeting rooms and common areas.
- When working with clients, where possible keep the two-metre distance by standing back slightly at a service counter if necessary.
- Don't share food, plates or cutlery in staff rooms.
- Ensure staff room dishes are well cleaned.
- Don't leave items on staff room counters and tables overnight so janitorial staff can properly wipe down the entire surface.

19. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer has reported evidence of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province. Work associated activities such as carpooling, driving together to get a takeout lunch or sitting together without distancing while having a work break can all pose a risk of COVID-19 exposure.

These exposures in common and social areas of workplaces increase risk of transmission. We all need to be cautious when socializing at work and be attentive to physical distancing from colleagues, wear masks in common areas and practice good hygiene.

Based on evidence and concerns from the PHO, an updated assessment tool for common areas and lunchrooms was posted April 16. In some cases, workplaces may have to update their COVID-19 Safety Plans to reflect the updated assessment tool for common areas and lunchrooms.

As we tackle COVID-19 transmission together, these incidents remind us of the need to be cautious when socializing and be extra attentive to physical distancing when near our colleagues who are not in our personal bubbles. Other risks to avoid include sharing food or beverages or common utensils.

20. How can we work with clients or the public to maintain physical distancing?

- Put up signs at entrances to remind clients that they should not attend the office or re- book their appointment if they are sick, have a cough, have difficulty breathing or have not completed a 14-day self-isolation after international travel.
- Have signs asking people to reduce the number of people in elevators to maintain physical distancing.
- Use signs to encourage social/physical distancing in lobbies and waiting rooms.
- When working with clients, where possible keep the two-metre distance by standing back slightly at a service counter if necessary.
- When booking in-person meetings, add a reminder for clients about physical distancing and to reschedule if they feel unwell.
- Try to do virtual or phone meetings wherever possible.
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants.
- Rearrange or remove some of the waiting room furniture to allow for physical distancing.
- Use tape to mark out two metres spacing on the floor for line ups and counter service.
- If clients appear unwell, ask them if they would reschedule.
- Ask clients to cover up if they are coughing or sneezing using their elbow or a tissue.
- Create the recommended two metres distance between yourself and clients at counters and in interview or meetings rooms.

21. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the assistance of the PSA if needed, must determine whether there is a duty to accommodate and must assess the employee's situation in light of the information, including medical information, they are able to provide as to why they cannot work at the workplace. The supervisor should have a discussion with the employee about their circumstances, including their limitations and restrictions, and should discuss safety procedures at the worksite. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation on MyHR.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

22. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises that people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g. HIV, chronic liver or organ transplant) or treatment, such as chemotherapy or immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request

for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes and letters, or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

24. An employee requests to remain at home as someone in their household has a chronic health condition and they are worried about transmitting COVID-19 to them. Is there a medical basis for this concern?

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, the supervisor should have a discussion with the employee about their circumstance and review the safety procedures and standard hygiene precautions in the workplace and how they are designed to protect staff from COVID-19. In addition, in controlled settings where employees with symptoms are not to come to work and clients are dealt with at a physical distance or with a barrier in place, this further reduces the risk of COVID-19. Employees should be informed of new or updated workplace safety procedures before the return to the worksite.

All employees should practice regular hand hygiene to minimize the risks of transmission which includes when leaving work and when arriving home.

When these measures are followed, there are several opportunities to stop the spread of infection and this should alleviate the concerns regarding the medical risk of transmission from the workplace.

Where this does not resolve the employee's concerns, the supervisor should continue to address this by following the steps in question #7 and the supervisor should contact MyHR for assistance.

25. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.

Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) posted a statement in August 2020 on their site that airborne SARS-CoV-2 transmission is "sufficiently likely that airborne exposure to the virus should be controlled." The Public Health Agency of Canada and the US Center for Disease Control also updated their information on coronavirus transmission acknowledging the potential of airborne transmission in specific circumstances.

Following ASHRAE's guidance to "control" airborne exposure to SARS-CoV-2, the primary control is to "avoid the hazard". This means ensuring that any person experiencing any symptoms of any illness (i.e. not only COVID-19 symptoms) should stay at home.

ASHRAE has also recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g. filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

26. Is the coronavirus transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

27. Can employees working from home take IT equipment and office furniture home if needed to allow them to work effectively?

Employees may temporarily take monitors, keyboards and other easily transported IT peripheral devices they need to work effectively at home. Similarly, with their supervisor's agreement, employees may take their work chairs home. Employees are expected to transport this equipment themselves and must exercise care to prevent both injury to themselves and damage to any government assets. In cases where employees are not able to transport the equipment themselves, they are requested to discuss the move arrangements with their supervisors. Branches are responsible for tracking any equipment employees take home and ensuring their return when employees return to their usual work arrangements.

Except for chairs, employees cannot take desks or other furniture home. If an employee requires a height-adjustable desk or other furniture as part of an accommodation agreement, the employee should be required to continue to work in the office as usual. Our workplaces remain safe for those employees continuing to work onsite. With more employees working from home, those who are in their regular workplaces are able to practice effective physical distancing measures and we have enhanced cleaning of workplaces to support employee safety.

Consistent with existing telework policies, the employer does not reimburse costs for utilities or office supplies employees use when choosing to work from home.

28. I have worked from home for significant periods of time in 2020 due to COVID-19. Will my supervisor/manager sign Canada Revenue Agency (CRA) form T2200 so that I may claim home-office related expenses on my 2020 tax return?

The federal government recently announced that for the 2020 tax year it is simplifying the process and requirements related to claiming home-office related expenses on an employee's tax return. Specifically, the Canada Revenue Agency (CRA) has established an information page advising that you are eligible to claim a deduction for home office expenses for the period you worked from home, if the CRA's eligibility criteria are met.

Eligible employees may apply for deductions using the new temporary flat rate method or the detailed method. Using the temporary flat rate method (CRA form T777S) means there is no requirement for you to have your supervisor sign CRA forms or to keep any supporting documentation. Eligible employees using the detailed method are required to have their supervisor sign CRA form T2200S and must keep any documents supporting their deductions.

CRA form T2200 obligates a supervisor to confirm that teleworking is a condition of employment. In the BC Public Service, teleworking has been optional during the pandemic and therefore CRA form T2200 does not apply for most employees and in most cases should not be signed by supervisors. However, supervisors are authorized to sign CRA form T2200S, which allows the employee to use the detailed method to calculate their home office expenses (see what expenses are eligible by reviewing CRA form T777S) but does not rely on telework being a condition of employment.

For more details, see the information page created by the CRA. If you have additional questions about eligibility or any other aspect of this process, please contact the CRA directly or consult with a tax professional. The employer does not provide tax advice.

29. What are the considerations needed when planning for a work event or large meeting while there is the potential for exposure to COVID-19?

Wherever possible, virtual meeting options should be used. In-person meetings should only proceed if absolutely necessary to enable to essential work. Meetings should only be held in workplaces and meeting rooms that have been assessed and have COVID-19 protocols in place. For more information on meeting rooms see the COVID-19 Meeting Room Procedures.

Work events that traditionally would have staff gathering, for example team days or learning events, should either be held virtually or require specific COVID-19 safety protocols. If your workplace requires assistance with this type of activity contact MyHR.

Workplace Health and Safety encourages workplaces to use virtual options for meetings and events until Step 3 of the BC Restart Plan.

30. How do we implement COVID-19 workplace safety controls in Leading Workplace Strategy (LWS) designed settings?

Adapting to the new maximum staffing levels simply requires flexibility and spacing. While some adjustments to shared work surfaces are needed, the more fluid design of these spaces also allows more options to preserve the required physical distancing. Many of the practices outlined in the new workplace safety guidelines are applicable in an LWS work environment.

Safety in the workplace during this time of Covid-19, whether in a LWS environment or one that is traditionally planned, is highly dependent on prevention precautions such as ensuring physical distancing, hand-washing, sanitization of surfaces, staying away from work if feeling unwell,

avoiding touching the face, etc. These are not space dependent but are reliant on employees' individual behaviours.

Part 3: Employee Exposure and Self-Isolation

31. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

Any employee who is sick with COVID-19 symptoms must stay home and away from others.

Public Health is notified of all positive tests immediately and contact tracing will begin by speaking to the COVID-19 positive employee. This review will identify the nature of contacts in the community, social or work locations in the 48 hours prior to becoming symptomatic. If Public Health staff identify any close contacts during this review, those individuals will be contacted directly by Public Health and given self-isolation advice. Public Health will only contact the workplace if there is a concern about transmission of the virus in the workplace or difficulty contacting individuals. In all cases, not hearing from Public Health official means the risk of transmission is low and no further notifications or actions are required. Cleaning requirement can be determined by using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

In terms of co-workers, determine the level of interaction with the employee. Workplace COVID protocols including daily active screening, distancing and hygiene significantly reduce the risk of associated transmission in the workplace. Low-risk exposure to a confirmed COVID-19 case includes walking by the person or briefly being in the same room with two metres distance. If low risk, the co-workers can continue usual activities, including daily self-checks for symptoms and practice good hand hygiene and social distancing in public, at home and at work.

Be prepared to provide information to Public Health officials about the workplace if they contact you.

If a COVID-19 positive individual was in the workplace while symptomatic or Public Health has contacted the workplace, supervisors are encouraged to communicate when this has occurred while protecting the identity of the individual, and to convey any identified cleaning protocol that was undertaken. Your ministry strategic human resource unit has resources to assist with messaging, or you can contact MyHR.

If there are further safety questions about managing the worksite and operations, please contact MyHR.

32. I supervise an employee who has developed mild symptoms, but they are not sure if itis COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Individuals who are sick should not be coming to work and potentially spreading disease to others.

Since April 23, testing guidelines have been updated to include testing any individuals with new respiratory or systemic (more generalized) symptoms compatible with COVID-19, however mild.

This universal approach to testing symptomatic individuals is an important part of monitoring the impact of changing public health recommendations.

You can ask the employee if they have used the BC COVID-19 Self Assessment Tool at https://bc.thrive.health/covid19/en, and if not, this should be encouraged. This tool has been updated to include mild symptoms and provides advice to find the test collection centre in their area. The employee can also still contact 8-1-1 to find the nearest centre or for directions in another language.

Negative test results can be obtained by phone, text, or online at http://www.bccdc.ca/health-info/diseases-conditions/covid-19/testing/test-results.

33. What does "close contact" mean?

Individuals will be identified as a close contact by Public Health staff following evaluation of new cases and tracing contacts. Employees who have been advised they are close contacts should stay away from the workplace, follow Public Health staff's direction and discuss work arrangements with their supervisor.

For Public Health monitoring, a close contact is defined as a person who:

- Provided care for the case, including healthcare workers, family members or other caregivers, or who had other similar close physical contact without consistent and appropriate use of personal protective equipment, OR
- Who lived with or otherwise had close prolonged* contact (within 2 metres) with a probable or confirmed case while the case was ill, OR
- Had direct contact with the infectious body fluids of a probable or confirmed case(e.g. was coughed on or sneezed on) while not wearing recommended personal protective equipment.

Close contacts of COVID-19 cases confirmed by public health must self-isolate for 14 days from last contact with the COVID-19 positive person. Work settings where clients are residents may have other return to work policies.

*As part of the individual risk assessment, public health will consider the duration of the contact's exposure (e.g. a longer exposure time likely increases the risk), the case's symptoms (coughing or severe illness likely increases exposure risk) and whether the exposure occurred in a health care setting.

34. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated

obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

35. I supervise an employee who is sick with a fever and new respiratory symptoms (e.g. cough, runny nose). There is no travel history and no history of exposure to someone who was ill and travelled. What should I do?

The employee should self-isolate and not be in the workplace in order to minimize the risk of infection to others. The employee should be advised to use the BC COVID-19 Self- Assessment Tool which will provide recommendations with COVID -19 testing. The employee should be placed on sick leave unless they are able to work from home.

Ending self-isolation and returning to work:

- For employees who test positive for COVID-19, public health will be involved with contact tracing, management, and advise the employee when to end self isolation.
- For employees who test negative for COVID-19 and have symptoms of illness, they are to continue to isolate until their symptoms resolve.

For employees who don't have test results or Public Health did not provide direction on ending self-isolation, they can return to their routine activities, including work, once all of the following criteria is met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without the use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing after recovery may persist for several weeks. This does not mean the individual is infectious and they are not required to self-isolate. Health care providers and other employees in residential settings should check with their supervisor about different return to work procedures.

36. I supervise an employee who tells me they have been medically advised to stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to remain at home on self- isolation or isolation because they are sick (or in hospital for treatment), they are eligible for sick leave.

37. A family member (partner, relative, child) of a worker becomes sick with an illness but has not been COVID tested yet and has not been identified by public health as a close contact. The worker lives in the same household as the family member but has no symptoms. Can the worker continue to attend work, or are they required to self isolate until the family member is tested and results are negative?

If the worker is asymptomatic, they can continue to attend work and are not required to self-isolate. The asymptomatic worker would continue with preventative health practices such as hand washing, distancing, and self-monitoring for symptoms. If the worker subsequently develops symptoms, they should not attend work, get assessed and, if necessary, tested.

If the symptomatic family member's test comes back COVID positive, Public Health will be involved and provide advice to the worker regarding self-isolation and not to attend work.

38. A family member (partner, child, relative) of a worker has been recommended to stay home for 14 days since they have been identified by Public Health as a close contact of a COVID positive case. The worker lives in the same household as the family member. Can the worker continue to attend work, or do they need to self isolate as well?

If the family member is asymptomatic and the worker is also asymptomatic, the worker can continue to attend work and does not need to self isolate. However, if the family member becomes ill, the family member will need to be medically assessed and tested since they are a close contact. While the symptomatic family member is being tested and waiting for their results, it is reasonable for the worker to also self isolate pending the outcome of the test results.

If the symptomatic family member, who is a close contact, has a positive COVID test result, Public Health will be involved in contact tracing and the asymptomatic worker will be given advice on self isolation and not to attend work. Even if the worker is asymptomatic, if they have been medically recommended to self-isolate, they must not return to the worksite for the 14-day self-isolation period. If the employee is able to work remotely, this should be explored with their supervisor.

If the symptomatic family member, who is a close contact, turns out to have a negative COVID test result, the asymptomatic worker can continue to attend work and self monitor for symptoms, but does not need to self isolate.

39. In the situation outlined in the previous question, what does this mean for co-workers? Do we need to close that workplace?

The employee is self-isolating as a precaution, not showing symptoms, and therefore the co-workers only need to continue with current COVID-19 public health recommendations for all British Columbians, such as hand hygiene, social distancing, and staying home if sick.

Routine cleaning of surfaces is advised. Workplaces do not need to close early just so routine cleaning can be done. Most people become ill from being in close contact with someone who showed symptoms such as coughing and sneezing, therefore transmitting the virus through

droplets. In the case above, the employee is not coughing or sneezing and the risk to co-workers is low.

In terms of surfaces that may have virus on it, routine cleaning with disinfectant kills the virus. In addition, if one happened to touch a contaminated surface, washing your hands kills the virus. Not touching your face with your hands can also stop your likelihood of picking up the virus.

40. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

The best thing we can all do is follow the steps recommended by the Provincial Health Officer to protect ourselves and others: wash your hands regularly and thoroughly, avoid touching your face, clean surfaces, and practice physical distancing measures.

See questions in Part 1 above for more information on how this can be done in your workplace and talk to your supervisor about your concern. If you follow these recommendations and the exposure control procedures for your workplace, the risk of contracting COVID-19 even through passing documents and other items back and forth between workers or clients is low.

If you commute to work on public transit, physical distancing and hand washing are effective preventative measures.

41. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

42. I have an employee who will be coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required.

Employees who have mild respiratory symptoms that can be managed at home can return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication

- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious and must self isolate.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

43. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

44. When an employee tells their supervisor that they have been exposed to COVID-19 and they have no symptoms, does that employee need to self-isolate?

It is important to understand how the employee knows the source is a confirmed COVID-19 case. Cases can only be defined by a positive COVID-19 swab test or determined by a health care professional based on the pattern of symptoms, exposure history, and severity of illness.

Low risk exposures to a confirmed COVID-19 case include walking by the person, or briefly being in the same room. No precautions are recommended. Exposures that are not close contacts (see above) are recommended to self-monitor daily. Instructions on self-monitoring are available from the BC Centre for Disease Control. The person would only self-isolate and contact Public Health if they become symptomatic. Close contacts to an established COVID-19 case will be asked by Public Health to self-isolate and self-monitor daily.

If this arises while the employee is in the workplace, seat them alone in a board room or away from others while you contact MyHR for advice.

45. I have an employee who attended a public event where another attendee was subsequently confirmed as having COVID-19 infection with testing. Should my employee be required to self-isolate and do other staff in the same work location need to take any precautions?

No. If the employee does not have symptoms, they do not need to self-isolate. The employee can self monitor for symptoms for 14 days. Staff in the same work location as the employee do not

need any additional precautions. As usual, hand washing, not touching faces, cleaning of commonly touched surfaces, cough/sneeze etiquette, and staying home if one is sick should be promoted at every opportunity.

The exception is when the public event is part of an investigation of a cluster or outbreak lead by public health and if there is a medical recommendation for all attendees to self- isolate. Public health officials will be involved with COVID-19 positive case management and contact tracing.

Part 4: Employee Exposure Related to Travel

46. With current public health orders and direction, can employees undertake work-related travel?

Effective November 19, 2020 until further notice, the Provincial Health Officer directed that non-essential travel within B.C. should be limited. Virtual meeting options should be used in place of travel wherever possible, and only essential work-related travel is permitted. Essential work-related travel includes training, site visits and meetings that cannot be done virtually. All travel must have COVID safety protocols in place.

Employees who choose to take personal international travel unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

47. My domestic partner, spouse or family returned from travel outside of Canada on or after March 12, 2020 and they do not have any symptoms. Do I need to self-isolate for 14 days if I have not travelled myself?

No, the self-isolation order after travel is designed to stop the potential spread of COVID-19 should a returning traveler have had an exposure from abroad. Employees that have not travelled can continue to participate in the workplace and as usual should self-monitor for the development of COVID-19 symptoms.

If the partner, spouse or family member then develops illness within the 14 days of self-isolation, the employee should leave the workplace and contact their supervisor. If operationally feasible, modified work can be offered otherwise the employee will be placed on sick leave for a 14-day self-isolation period. Public health officials will have further advice for family members and the employee.

48. An employee refuses to comply with the PHO/Federal Minister of Health order to self- isolate for 14 days following travel. They insist they can return to the workplace. How do I advise them?

In March 2020 an Emergency Order under the Quarantine Act was implemented that requires any person entering Canada by air, sea, or land to quarantine (self-isolate) themselves for 14 days whether or not they have symptoms of COVID-19.

Further restrictions for travellers arriving in Canada have been put in place in February 2021. Employees should be directed to check the Government of Canada website and the BC Provincial Health Officers site for the latest quarantine and travel requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until quarantine and all requirements have been met. Employees who

choose to take personal international travel unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor if they are going to be absent more than 14 calendar days and in advance of any return to work.

Contact MyHR if you have questions about the application of the order to employees who are essential workers.

49. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and cannot work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take applicable leave.

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BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated July 2, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both COVID-19 vaccinations as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

COVID-19 vaccines are being developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the public health plan to end the pandemic. The BCCDC provides the most up-to-date information regarding vaccines.

2. How will COVID-19 vaccination change workplace safety plans? [UPDATED]

Receiving both doses of the COVID-19 vaccination is shown to be highly effective and significantly reduces the community risk of COVID-19 in British Columbia. In Step 3 of BC's Restart plan, COVID-19 safety plans are no longer required in workplaces. Some public health practices that have protected workplaces through the pandemic continue to offer additional layers of protection. These include staying home when sick, screening for symptoms, good handwashing practices and being careful about social contact.

As many restrictions are lifted in Step 3, public service workplaces are evaluating and beginning transition away from some of the physical setup changes put in place during the pandemic. Dr. Henry has written to employers with advice through this transition.

High levels of public health monitoring help identify any need to change communicable disease prevention plans. The BC Public Service follows the direction of Public Health and complies with WorksafeBC on how to manage communicable disease risk.

3. How will essential workers get a second vaccine? [UPDATED]

Public Service employees who received an early vaccination continue to participate in the provincial vaccination clinic program for their second dose. If you haven't already, register online to make sure you get notified for your second vaccination.

The Immunize BC Plan is updated frequently with the most current information about vaccination, including arranging second doses.

4. When will I get vaccinated? [UPDATED]

B.C.'s COVID-19 Immunization Plan has four phases. The focus in the early phases was to protect those most vulnerable to severe illness.

Public Health officials are now encouraging all British Columbians 12 and over to get fully vaccinated as the key strategy to ending the pandemic restrictions in B.C. The second dose is recommended to boost personal immunity, including protection from circulating variant strains of COVID-19.

B.C. is currently in Phase 4 of the immunization plan. All British Columbians 12 and older are eligible to register for vaccination. Registration links and scheduling information are available on the vaccination website. Those who received their first vaccination before April 6 are required to register online to be notified for their second dose.

All eligible British Columbians who want to receive the vaccine were able to receive their first dose before July 1, 2021. Due to improved vaccine supplies in B.C., Public Health is also advancing the second dose vaccination due dates. Updated vaccine due dates are available on the Health Gateway application.

5. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

6. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

7. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

No, COVID-19 vaccinations are not mandatory for employees.

COVID-19 infections range widely in severity of symptoms. Given the vaccine's high level of effectiveness and the low level of side effects, Public Health is encouraging all British Columbians age 12+ to learn about the benefits and safety of the vaccine. Receiving the vaccine protects you and those around you. Full vaccination is also a key recommendation from Public Health to prevent the spread of COVID-19 variant strains in the province.

Both doses of the COVID-19 vaccine are available for all B.C. residents age 12+ who want to get vaccinated. Public Health is also recommending mask wearing for individuals age 12+ who are not vaccinated or are less than 14 days after their second dose of the two dose vaccines.

8. Do I have to tell my supervisor or my ministry that I have been vaccinated?

No. Your vaccination is part of your own confidential medical history. You do not need to share your vaccination status, and your supervisor will not ask you.

9. Considering privacy restrictions, will information such as the number of employees immunized in my workplace be shared? [UPDATED]

No. Vaccinations are a part of a person's confidential medical history. Your ministry will not ask if you have been vaccinated or gather statistics about the number of staff vaccinated.

Public Health testing, contact tracing and achieving a high level of vaccination in the province have proven to reduce the level of exposure risk.

10. Once I get vaccinated will I still have to follow Public Health guidance and orders? [UPDATED]

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Low levels of COVID- may continue in the community for some time. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

11. Do I need to do a workplace Daily Health Check? [NEW]

In Step 3, anyone who is symptomatic should stay home and follow testing guidance. COVID-19 will continue to circulate at low levels with greater risk in those with lower immunity.

As vaccine based immunity develops in those receiving vaccination, Workplace Health and Safety recommends continuing workplace Daily Health Checks as a layer of protection for those in the workplace. This recommendation will be re-evaluated as the province prepares to enter Step 4.

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

On May 25, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding remote work arrangements. The province moving to Step 3 of BC's Restart plan and the removal of office occupancy limits does not change this guidance. Employees choosing to return to the workplace throughout the summer can do so after discussing it with their supervisor and must follow existing workplace communicable disease plans.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

Public Service workplaces are maintaining physical barriers during the transition to Step 3, as recommended by Dr. Henry. Maintaining the barriers will be evaluated regularly as the province moves through Step 3. There will be future updates as the province moves closer to Step 4.

Other safety protocols such as handwashing, checking for symptoms before attending work and staying home when symptomatic continue.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. The same COVID-19 protocols will protect you in the workplace, such as physical distancing, barriers, washing your hands and staying home when not feeling well.

Public Health is accelerating first and second doses of COVID-19 vaccinations and is recommending vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination (current vaccines require two doses) provides the highest level of personal protection and helps protect all of us in British Columbia from variant strains of COVID-19.

Workplaces are continuing infection control and hygiene practices to decrease the risk of infection.

Public Health continues to monitor and provide weekly updates, reporting on evolving COVID-19 trends in health regions. During Step 3 and Step 4 of BC's Restart plan, local Medical Health Officers across BC will provide guidance and recommendations as needed to continue preventing the spread of COVID-19.

14. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

On November 24, under the Emergency Program Act an order was issued regarding face coverings in indoor public spaces. The November 24 order covers high-traffic public settings where people who do not know each other interact. This order has been rescinded as the province moves into Step 3.

On June 29, 2021, the Provincial Health Officer recommended anyone who received their second vaccine dose less than 14 days ago should continue to wear a mask in public settings. In BC Public Service workplaces, mask wearing is a personal choice. Employees can manage their risk and the risk to those around them by wearing masks.

The mask and face covering recommendations are will be posted in client-facing areas and at entries to public service workplaces. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Ministries provide essential services to the public they cannot receive anywhere else. Efforts have been made to shift to virtual service or other types of services to limit contacts where possible. Clients will not be denied service on the basis of mask wearing. With high levels of vaccine participation in B.C. and other controls available such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. In client service settings, they offer superior protection to masks and don't rely on both the employee and client to properly wear a mask. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

15. Can BC Public Service employees wear a mask in the workplace? [UPDATED]

On June 29, 2021, Public Health guidance changed the recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, for most office workplace settings where masks are not part of an exposure control plan, wearing a mask is the employee's personal choice. Each individual has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

16. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

As the province enter Step 3 of BC's Restart plan, British Columbia workplace guidance is shifting to communicable disease plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses such as seasonal influenza.

The provincial public health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. If community risk rises, Public Health may have guidelines or restrictions for workplaces.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific worksite restrictions.

17. What is the concern regarding workplace kitchen and social activities? [UPDATED]

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary as workplaces transition to Step 3.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry a level of exposure risk. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

18. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

"COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.

Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.

Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g. filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

19. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

20. Will workplaces maintain physical distancing when working with clients in Step 3? [NEW]

As BC Public Service workplaces transition to Step 3, a number of COVID-19 controls are being phased out based on the assessed communicable disease risk and workplace readiness. During the transition to Step 3, maintaining the following guidance offers increased protection in the workplace:

- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, keep a two-metre distance where possible by standing back slightly at a service counter if necessary
- When booking in-person meetings, include a reminder for clients about physical distancing and ask them re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Evaluate the readiness of bringing back waiting room furniture previously moved to allow physical distancing
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

21. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

22. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g. HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

Part 3: Employee Exposure and Self-Isolation

PREAMBLE [NEW]

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public health determines a person who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

24. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to

provide information to Public Health about the workplace if they contact you. Also identify any cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

25. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

26. What does "close contact" mean? [UPDATED]

Public Health determines whether an individual meets the requirements of a high-risk exposure or close contact.

For Public Health monitoring, a high-risk exposure or close contact is defined as:

- Anyone who has been within 2 metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Public Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

27. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

28. I supervise an employee who tells me they have been medically advised to stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to remain at home to isolate because they are sick (or in hospital for treatment), they are eligible for sick leave.

29. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do? [UPDATED]

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and very low levels of community transmission of the COVID-19.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

30. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

31. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

32. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

33. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada? [UPDATED]

Yes. as of July 1 under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

34. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

35. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer? [UPDATED]

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the

initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated August 11, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

1. Where do I find out about the COVID-19 immunization programs? [UPDATED]

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key public health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. High levels of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines are being developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the public health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. How will COVID-19 vaccination change workplace safety plans? [UPDATED]

Receiving both doses of the COVID-19 vaccination is shown to be highly effective at reducing severe infection and hospitalization and significantly reduces the community risk of COVID-19 in British Columbia.

In Step 3 of BC's Restart plan, COVID-19 safety plans are no longer required in workplaces. Some public health practices that have protected workplaces through the pandemic continue to offer additional layers of protection. These include staying home when sick, screening for symptoms, good handwashing practices and being careful about social contact.

As many restrictions are lifted in Step 3, public service workplaces are evaluating and beginning transition away from some of the physical setup changes put in place during the pandemic. Dr. Henry has written to employers with advice through this transition.

High levels of public health monitoring help identify any need to change communicable disease prevention plans. The BC Public Service follows the direction of Public Health and complies with WorksafeBC on how to manage communicable disease risk.

3. How will essential workers get a second vaccine?

Public Service employees who received an early vaccination continue to participate in the provincial vaccination clinic program for their second dose. If you haven't already, register online to make sure you get notified for your second vaccination.

The Immunize BC Plan is updated frequently with the most current information about vaccination, including arranging second doses.

4. When will I get vaccinated? [UPDATED]

B.C.'s COVID-19 Immunization Plan has four phases. The focus in the early phases was to protect those most vulnerable to severe illness.

Public Health officials are now encouraging all British Columbians 12 and over to get fully vaccinated as the key strategy to ending the pandemic restrictions in B.C. The second dose is recommended to boost personal immunity, including protection from circulating variant strains of COVID-19.

B.C. is currently in Phase 4 of the immunization plan. All British Columbians 12 and older are eligible to register for vaccination. Registration links and scheduling information are available on the vaccination website. Those who received their first vaccination before April 6 are required to register online to be notified for their second dose.

All eligible British Columbians were able to receive their first dose before July 1, 2021. Beginning August 9, 2021, participants can receive their second COVID-19 vaccination 28 days after the first dose. Public Health shortened the vaccination schedule to achieve higher community immunity faster. Full vaccine immunity generally occurs 14 days after the second dose. Updated personal vaccine due dates are available on the Health Gateway application.

5. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

6. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

7. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

No, COVID-19 vaccinations are not currently mandatory for employees.

COVID-19 infections range widely in severity of symptoms. Given the vaccine's high level of effectiveness and the low level of side effects, Public Health is encouraging all British Columbians ages 12 and up to learn about the benefits and safety of the vaccine. Receiving the vaccine protects you and those around you. Full vaccination is also a key recommendation from Public Health to prevent the spread of COVID-19 variant strains in the province.

Both doses of the COVID-19 vaccine are available for all B.C. residents ages 12 and up who want to get vaccinated. Public Health is also recommending mask wearing for individuals ages 12 and up who are not vaccinated or are less than 14 days after their second dose of the two dose vaccines.

8. Do I have to tell my supervisor or my ministry that I have been vaccinated? [UPDATED]

There is no current requirement to disclose your vaccination status to your supervisor. Vaccination status is personal medical information, and it is the individual's choice to share it. Given the linkage between vaccination and loosening social restriction, this can often become a topic of discussion amongst peers and colleagues. However, managers are encouraged instead to focus team conversations to the shared procedures and protective practices in the communicable disease plans.

As workforce leaders plan the staffing in office locations, vaccination status should not be requested from employees as this is private medical information. Because of the individualized immune response to vaccination, it should not be a factor in workplace planning based on the current state of COVID-19.

However, vaccination status is important in managing exposure situations and close contacts. The July 2021 BCCDC Interim Guidelines for management of cases and contacts determines isolation requirements based on vaccination status. Fully vaccinated close contacts may be only required to self monitor. When managing any workplace exposure incidents, employees disclosing their vaccination status to those managing the incident may be able to avoid self-isolation. Sharing this information may also be relevant in the individualized assessment of an employee's request for medical accommodation.

9. Once I get vaccinated will I still have to follow Public Health guidance and orders? [UPDATED]

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021 Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces? [NEW]

Provincial control of the COVID-19 pandemic and progress with the Restart BC Plan depends on ongoing regional population health monitoring and guidelines. Medical Health Officers have been delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health areas and regions. As has occurred in August in the Central Okanagan, regional guidance due to an outbreak may bring tighter workplace communicable disease controls. Attention to local health authorities' communications will impact workplace safety controls.

10. Do I need to do a workplace Daily Health Check?

In Step 3, anyone who is symptomatic should stay home and follow testing guidance. COVID-19 will continue to circulate at low levels with greater risk in those with lower immunity.

As vaccine based immunity develops in those receiving vaccination, Workplace Health and Safety recommends continuing workplace Daily Health Checks as a layer of protection for those in the workplace. This recommendation will be re-evaluated as the province prepares to enter Step 4.

11. Is it safe to return to the workplace? [NEW]

Safe work practices and making safety management a priority keep COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorksafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors with updated guidance.

Consistent with current guidelines, BC Public Service workplaces have communicable disease plans in place, or exposure control plans where required an. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

Layers of protection include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently this is reinforced with Daily Health Checks before starting work.
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues.
- Employees are supported with leave benefits to attend and participate in vaccination clinics.
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces.
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices.

- In many workplaces, physical barriers between employees and clients have remained in place.
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office.
- Employees can choose to wear a mask in any workplace.
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service communicable disease plans.

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

On May 25, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding remote work arrangements. The province currently being in Step 3 of BC's Restart plan and the removal of office occupancy limits does not change this guidance. Employees choosing to return to the workplace throughout the summer can do so after discussing it with their supervisor and must follow existing workplace communicable disease plans.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Maintaining the barriers will be evaluated regularly as the province moves through Step 3. There will be future updates as the province moves closer to Step 4.

Other safety protocols such as handwashing, checking for symptoms before attending work and staying home when symptomatic continue.

On July 20, 2021, employees were notified that those wishing to continue remote working on a full or part-time basis after the anticipated transition to Step 4 of BC's Restart plan on September 7 must have a telework agreement approved by their supervisor. More information on the approach to flexible work arrangements is available on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. The same COVID-19 protocols will protect you in the workplace, such as physical distancing, barriers, washing your hands and staying home when not feeling well.

Public Health is accelerating first and second doses of COVID-19 vaccinations and is recommending vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination (current vaccines require two doses) provides the highest level of personal protection and helps protect all of us in British Columbia from variant strains of COVID-19. Workplaces are continuing infection control and hygiene practices to decrease the risk of infection.

Public Health continues to monitor and provide weekly updates, reporting on evolving COVID-19 trends in health regions. During Step 3 and Step 4 of BC's Restart plan workplaces pay close attention to regional advice from local Medical Health Officers across B.C as they will provide guidance and recommendations as needed to continue preventing the spread of COVID-19.

14. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

On November 24, under the Emergency Program Act an order was issued regarding face coverings in indoor public spaces. The November 24 order covers high-traffic public settings where people who do not know each other interact. This order was rescinded when the province moved into Step 3 of BC's Restart Plan.

On June 29, 2021, the Provincial Health Officer recommended anyone who received their second vaccine dose less than 14 days ago should continue to wear a mask in public settings. When COVID-19 outbreaks occur, Medical Health Officers may provide regional requirements for wearing masks.

In BC Public Service workplaces, while not a public health requirement, mask wearing is a personal choice. Employees can manage their risk and the risk to those around them by wearing masks. BC Public Service workplaces are equipped with client-facing signs to display directions aligned with local public health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Ministries provide essential services to the public they cannot receive anywhere else. Efforts have been made to shift to virtual service or other types of services to limit contacts where possible. Clients will not be denied service on the basis of mask wearing. With high levels of vaccine participation in B.C. and other controls available such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. In client service settings, they offer superior protection to masks and don't rely on both the employee and client to properly wear a mask. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

15. Can BC Public Service employees wear a mask in the workplace? [UPDATED]

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, for most office workplace settings where there is no public health mask requirement and masks are not part of an exposure control plan, wearing a mask is the employee's personal choice. Each individual has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

16. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

When the province entered Step 3 of BC's Restart plan, British Columbia workplace guidance shifted to communicable disease plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses such as seasonal influenza.

The provincial public health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. If community risk rises, Public Health may have guidelines or restrictions for workplaces.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific worksite restrictions.

17. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry a level of exposure risk. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

18. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

"COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.

Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.

Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

19. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

20. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan?

During Step 3 of BC's Restart Plan, a number of COVID-19 controls are being phased out in BC Public Service workplaces based on the assessed communicable disease risk and workplace readiness. During Step 3, maintaining the following guidance offers increased protection in the workplace:

- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, keep a two-metre distance where possible by standing back slightly at a service counter if necessary
- When booking in-person meetings, include a reminder for clients about physical distancing and ask them re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Evaluate the readiness of bringing back waiting room furniture previously moved to allow physical distancing
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

21. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

22. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

24. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

25. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do? [UPDATED]

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

26. What does "close contact" mean? [UPDATED]

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within 2 metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

27. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

28. I supervise an employee who tells me they have been medically advised to stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to remain at home to isolate because they are sick (or in hospital for treatment), they are eligible for sick leave.

29. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do? [UPDATED]

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

30. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

31. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

32. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

33. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

34. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

35. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated August 24, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key public health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. High levels of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines are being developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the public health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. How will COVID-19 vaccination change workplace safety plans? [UPDATED]

Receiving both doses of the COVID-19 vaccination is shown to be highly effective at reducing severe infection and hospitalization and significantly reduces the community risk of COVID-19 in British Columbia.

At the start of Step 3 of BC's Restart plan, Communicable Disease plans replaced COVID-19 safety plans. Some public health practices for protecting workplaces through the pandemic continue to offer additional layers of protection. These include staying home when sick, screening for symptoms, good handwashing practices and being careful about social contact.

Dr. Henry wrote to employers with advice through this transition. Changes in the public health guidance may require additional measures to be temporarily added to communicable disease plans.

High levels of public health monitoring help identify the need to change communicable disease prevention plans. The BC Public Service follows the direction of Public Health and complies with WorksafeBC on how to manage communicable disease risk.

3. How will essential workers get a second vaccine?

Public Service employees who received an early vaccination continue to participate in the provincial vaccination clinic program for their second dose. If you haven't already, register online to make sure you get notified for your second vaccination.

The Immunize BC Plan is updated frequently with the most current information about vaccination, including arranging second doses.

4. When will I get vaccinated?

B.C.'s COVID-19 Immunization Plan has four phases. The focus in the early phases was to protect those most vulnerable to severe illness.

Public Health officials are now encouraging all British Columbians 12 and over to get fully vaccinated as the key strategy to ending the pandemic restrictions in B.C. The second dose is recommended to boost personal immunity, including protection from circulating variant strains of COVID-19.

B.C. is currently in Phase 4 of the immunization plan. All British Columbians 12 and older are eligible to register for vaccination. Registration links and scheduling information are available on the vaccination website. Those who received their first vaccination before April 6 are required to register online to be notified for their second dose.

All eligible British Columbians were able to receive their first dose before July 1, 2021. Beginning August 9, 2021, participants can receive their second COVID-19 vaccination 28 days after the first dose. Public Health shortened the vaccination schedule to achieve higher community immunity faster. Full vaccine immunity generally occurs 14 days after the second dose. Updated personal vaccine due dates are available on the Health Gateway application.

5. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

6. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

7. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

No. As mentioned in Lori Wanamaker's August 24 executive message, required proof of vaccination does not apply in BC Public Service workplaces at this time.

A very high portion of new COVID-19 infections are seen in people who are unvaccinated. COVID-19 infections range widely in severity of symptoms. Given the vaccine's high level of effectiveness and the low level of side effects, Public Health is encouraging all British Columbians ages 12 and up to learn about the benefits and safety of the vaccine. Receiving the vaccine protects you and those around you. Full vaccination is also a key recommendation from Public Health to prevent the spread of COVID-19 variant strains in the province.

Both doses of the COVID-19 vaccine are available for all B.C. residents ages 12 and up who want to get vaccinated. Public Health is also recommending mask wearing for individuals ages 12 and up who are not vaccinated or are less than 14 days after their second dose of the two dose vaccines.

8. Do I have to tell my supervisor or my ministry that I have been vaccinated? [UPDATED]

On August 23, 2021, government announced a public health order requiring proof of vaccination status for admission to many discretionary activities in areas where there is virus transmission. The requirement for proof of vaccination does not apply in BC Public Service workplaces for employees. Due to the essential nature of services provided by the BC Public Service, proof of vaccination will not apply to clients or the public attending our workplaces.

As workforce leaders plan the staffing in office locations, vaccination status should not be requested from employees as this is private medical information. Because of the individualized immune response to vaccination, it should not be a factor in workplace planning based on the current state of COVID-19.

However, vaccination status is important in managing exposure situations and close contacts. The July 2021 BCCDC Interim Guidelines for management of cases and contacts determines isolation requirements based on vaccination status. Fully vaccinated close contacts may be only required to self monitor. When managing any workplace exposure incidents, employees disclosing their vaccination status to those managing the incident may be able to avoid self-isolation. Sharing this information may also be relevant in the individualized assessment of an employee's request for medical accommodation.

9. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021 Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic and progress with the Restart BC Plan depends on ongoing regional population health monitoring and guidelines. Medical Health Officers have been delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health areas and regions. As has occurred in August in the Central Okanagan, regional guidance due to an outbreak may bring tighter workplace communicable disease controls. Attention to local health authorities' communications will impact workplace safety controls.

10. Do I need to do a workplace Daily Health Check? [UPDATED]

As BC moves through the restart plan, Public Health recommends anyone who is symptomatic should stay home and follow testing guidance. COVID-19 will continue to circulate at low levels with greater risk in those with lower immunity.

As vaccine based immunity develops in those receiving vaccination, Workplace Health and Safety recommends continuing workplace Daily Health Checks as a layer of protection for those in the workplace. This recommendation will be re-evaluated as the province prepares to enter Step 4.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorksafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors with updated guidance.

Consistent with current guidelines, BC Public Service workplaces have communicable disease plans in place, or exposure control plans where required to control risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

Layers of protection include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently this is reinforced with Daily Health Checks before starting work.
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues.
- Employees are supported with leave benefits to attend and participate in vaccination clinics.
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces.

- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices.
- In many workplaces, physical barriers between employees and clients have remained in place.
- Protocols are in place to manage symptomatic clients who need to attend a BC Public Service office providing service delivery.
- An August 24, 2021, the Provincial Health Officer announced a temporary mask order applying to BC Public Service workplaces. Masks are required in indoor public settings and in office areas where services to the public are provided.
- Employees can also choose to wear a mask in any workplace.
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service communicable disease plans.

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

On August 24, 2021, Lori Wanamaker provided an update regarding flexible work arrangements. Employees who wish to continue working remotely in the longer-term are required to have an approved telework agreement in place by September 7. However, the schedules set out in those agreements will not apply until October 12, after the Thanksgiving long weekend.

Employees who continue to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Maintaining barriers is evaluated regularly as the province moves through Step 3. Workplace communicable disease plans are being updated to reflect the August 24 order requiring masks to be worn in indoor public spaces and in areas of our workplaces where services to the public and clients are provided. There will be future updates as the province moves closer to Step 4.

Other safety protocols such as handwashing, checking for symptoms before attending the workplace and staying home when symptomatic, continue.

More information on the approach to flexible work arrangements is available on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Delta variant, Public Health provided additional guidance on August 25 regarding the use of masks in public and work settings. In addition, the same COVID-19 protocols we have been using, such as physical distancing, barriers, washing your hands and staying home when not feeling well, help protect you in the workplace.

Public Health is accelerating first and second doses of COVID-19 vaccinations and is recommending vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination (current vaccines require two doses) provides the highest level of personal protection and helps protect all of us in British Columbia from variant strains of COVID-19. Workplace Communicable Disease Plans guide infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates, reporting on evolving COVID-19 trends in health regions. During Step 3 and Step 4 of BC's Restart plan, workplaces are paying close attention to regional advice from local Medical Health Officers across B.C. MHO advice provides guidance and recommendations to continue preventing the spread of COVID-19.

14. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

On August 20, 2021, a Medical Health Officer order was issues for all areas of Interior Health Region. This order applies to all individuals, including in workplaces. Masks are to be worn by individuals in BC Public Service workplaces in the Interior Health region, except when working at their own workstation.

On August 24, the Provincial Health Officer announced an order for mandatory mask wearing for all individuals 12 years and older, regardless of vaccination status, in indoor public spaces. This order extends to areas of workplaces where services are provided to the public/clients. BC Public Service workplaces are equipped with client-facing signs to display directions aligned with local public health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

In BC Public Service workplaces, where not a public health requirement, mask wearing is also personal choice. Employees can manage their risk and the risk to those around them by wearing masks.

Ministries provide essential services to the public they cannot receive anywhere else. Efforts have been made to shift to virtual service or other types of services to limit contacts where possible. Clients will not be denied service on the basis of mask wearing or vaccination status. With high levels of vaccine participation in B.C. and other controls available such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

15. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

When the province entered Step 3 of BC's Restart plan, British Columbia workplace guidance shifted to communicable disease plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses such as seasonal influenza.

The provincial public health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable disease plans are updated with recent Interior Health and Central Okanagan orders and with current public health mask orders. The PSA continues to work with Public Health authorities on changes in the pandemic.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific worksite restrictions.

16. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry a level of exposure risk. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

17. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.

Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.

Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

18. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts

with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

19. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan? [UPDATED]

During Step 3 of BC's Restart Plan, Communicable disease plans will be updated based on Public Health guidance.

Current guidance includes the following :

- As per Public Health orders, masks covering the nose and mouth are required for individuals 12 years and older in indoor public settings, including office settings where services to the public are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, masks are required. Where clients cannot wear a mask and service must be delivered in person, use physical barriers or maintain physical distance wherever possible
- When booking in-person meetings, include a reminder for clients about current mask orders, physical distancing and ask them re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

20. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If

this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

21. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

22. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

23. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

24. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

25. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within 2 metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

26. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

27. I supervise an employee who tells me they have been medically advised to stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to remain at home to isolate because they are sick (or in hospital for treatment), they are eligible for sick leave.

28. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

29. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

30. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

31. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

32. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

33. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

34. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated September 21, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight EST.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

1. Where do I find out about the COVID-19 immunization programs? [UPDATED]

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. High levels of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. How will COVID-19 vaccination change workplace safety plans? [UPDATED]

Receiving both doses of the COVID-19 vaccination is shown to be highly effective at reducing severe infection and hospitalization and significantly reduces the community risk of COVID-19 in British Columbia.

At the start of step 3 of BC's Restart plan, COVID-19 safety plans were replaced with Communicable Disease Prevention Plans. Some public health practices that have protected workplaces through the pandemic continue to offer additional layers of protection. These include staying home when sick, screening for symptoms, good handwashing practices and being careful about social contact.

Dr. Henry has written to employers with advice through this transition. Changes in Public Health guidance require additional measures to be temporarily added to Communicable Disease Prevention plans.

High levels of public health monitoring help identify the need to modify Communicable Disease Prevention Plans. The BC Public Service follows the direction of Public Health and complies with WorksafeBC on how to manage communicable disease risks.

3. When will I get vaccinated? [UPDATED]

Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier – 28 days after the first dose. The second dose recommended to boost individual immunity, including protection from circulating variant strains of COVID-19. Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C. Public Health also recommends mask wearing for individuals age 12 and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following second dose) individuals are generally not required by Public Health to self isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

All eligible BC Public Service employees are encouraged to get both doses of the COVID-19 vaccine. Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns are encouraged to discuss and follow vaccination guidance with their care providers. Individuals with allergies to components of the vaccine are encouraged to also speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

4. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

5. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

6. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

As mentioned by Lori Wanamaker in an executive message, required proof of vaccination does not apply across all BC Public Service workplaces at this time.

However, orders from the PHO have impacted some public service workplaces, or when staff must attend other workplaces to complete their job duties. The COVID-19 Vaccination Status Information Order requires proof of vaccination in certain care settings operated by BC Public Service Employees.

The Gatherings and Events Order and the Food and Liquor Serving Premises Order require operators of a range of discretionary settings to obtain proof of vaccination from patrons. While ministries are working with operators to distinguish BC Public Service employees from patrons, there may be situations where an employee's vaccination status will impact their ability to complete their work tasks when they occur in a discretionary setting. Supervisors are encouraged to explain to employees where operators will require proof of vaccination so employees can determine if they will be able to attend these sites.

Supervisors can contact MyHR for assistance if they have situations where staff must attend locations requiring proof of vacation to complete their job duties.

7. Do I have to tell my supervisor or my ministry I have been vaccinated? [UPDATED]

On August 23, 2021, the B.C. government announced a Public Health order requiring proof of vaccination status for admission to many discretionary activities. The requirement for proof of vaccination does not apply in BC Public Service workplaces for employees.

When workforce leaders plan staffing in office locations, vaccination status should not be requested from employees as this is private medical information. Because of the individualized

immune response to vaccination, it should not be a factor in workplace planning based on the current state of COVID-19.

8. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination? [NEW]

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

9. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021 Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

10. How do regional Medical Health Officer Orders impact our workplaces? [NEW]

Provincial control of the COVID-19 pandemic and progress with B.C.'s restart plan depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health regions. Regional guidance due to increased transmission may bring tighter workplace communicable disease controls, such as the measured put in place in the Central Okanagan in August. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Plan.

11. Do I need to do a workplace Daily Health Check? [UPDATED]

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks as a layer of protection for those in the workplace. This recommendation will be re-evaluated with updated pandemic information and Public Health advice. In provincial regions with current outbreaks, Daily Health Checks are mandatory to work from a BC Public Service office.

12. Is it safe to return to the workplace? [NEW]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to Public Health and WorksafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

Layers of protection include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently, this is reinforced with Daily Health Checks before starting work.
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues.
- Employees are supported with leave benefits to attend and participate in vaccination clinics.

- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces.
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices.
- In many workplaces, physical barriers between employees and clients have remained in place.
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office.
- As of August 25, 2021 a PHO mask order requiring masks in indoor public settings and in applies to BC Public Service workplaces providing services to the public/clients
- Employees can also choose to wear a mask anywhere in workplace.
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans.

13. What is the current direction on returning to the workplace and remote work? [UPDATED]

On August 24, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The original implementation date of September 7 has been delayed. Employees wishing to continue working remotely in the longer-term are required to have an approved telework agreement in place by September 7. However, the flexible work arrangements set in telework agreements do not apply until October 12.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the August 25 Public Health order requiring masks to be worn in indoor public spaces and in those parts of workplaces providing services to the public/clients.

Other safety protocols, such as handwashing, checking for symptoms before attending work and staying home when symptomatic continue.

More information on the approach to flexible work arrangements is on MyHR.

14. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the same COVID-19 protocols used in BC Public Service workplaces since March 2020 help protect employees in the workplace. These include physical distancing, barriers, washing your hands and staying home when not feeling well.

Public Health is accelerating first and second doses of COVID-19 vaccinations and recommends vaccination for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of B.C.'s restart plan, workplaces must follow regional orders and guideline from local Medical Health Officers across B.C., as they will provide guidance and recommendations to continue preventing the spread of COVID-19.

15. Can we hold in-person staff meetings in our workplace? [NEW]

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. They must be limited to BC Public Service employees only. Workplaces must have a Communicable Disease Prevention Plan in place. Prevention procedures include:

- Using the largest meeting room available
- Spacing out attendees as much as possible
- Avoiding shared food and beverages

16. Our workplace wants to hold a meeting or learning event for 60 attendees at rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [NEW]

Item L in the Gatherings and Events Order excludes workers at a workplace when engaged in their work activities including staff meetings, employment related training and the use of any place for local, provincial or federal government purposes.

The BC Public Service can rent venues to hold meetings complying with the listed exclusions. Proof of vaccination is not required if there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place and the BC Public Service must only use the room up to 50% of its capacity. This algins with how most venues and hotels are currently renting space.

Attendees must comply with the current mask requirements and wear a mask while in or transiting indoor public spaces of the venue.

Hotels and other venues may be unaware of this exclusion or may institute their own policies above that of the provincial health order on proof of vaccination. When booking rentals be sure to inquire about their proof of vaccination and other COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

17. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Effective August 25, the Provincial Health Officer issued an order for mandatory mask wearing for all individuals 12 and over, regardless of vaccination status, in indoor public spaces. This includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. BC Public Service workplaces should post client-facing signs reflecting with provincial and/or local Public Health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in B.C. and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

18. Can BC Public Service employees wear a mask in the workplace? [UPDATED]

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, for most office workplace settings where there is no Public Health mask requirement and masks are not part of an exposure control plan, wearing a mask is the employee's personal choice. Each individual has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

19. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect the most recent Interior Health and Central Okanagan Orders Northern Health, and the current Public Health mask order. The PSA will continue to monitor changes and work with Public Health authorities any changes that affect the workplace. Information on regional health orders is posted on COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific workplace restrictions.

20. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry a level of exposure risk. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

21. I am uncomfortable returning to the workplace because of a co-worker refuses to be vaccinated [NEW]

All workplaces are equipped with Communicable Disease Prevention Plans designed to reduce transmission of many respiratory viruses, including COVID-19. Protocols such as daily health checks, hygiene practices and physical distancing reduce the risk of virus exposure. The best way for an employee to protect themselves is to be fully vaccinated. Recent guidance from the PHO recommends vaccination for the vast majority of British Columbians.

Workplace transmission in BC Public Service offices has been infrequent through the pandemic.

With high levels of vaccination across B.C., the risk in our workplaces is further reduced. Unvaccinated individual completing daily health checks, following Communicable Disease Prevention Plans and following physical distancing should not present a high risk in the workplace.

This situation is an important leadership issue for supervisors to manage. All employees are expected to contribute to a respectful and positive workplace. It's recommended to actively manage respectful and cohesive workplace behaviours among teams when managing this concern.

22. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

23. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

24. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan? [UPDATED]

During Step 3 of BC's Restart Plan, Communicable Disease Prevention Plans are updated based on Public Health guidance. Current guidance includes the following :

- By Public Health Order, masks covering the nose and mouth are required for individuals 12 and older in indoor public settings, including workplace areas where services to the public/clients are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, masks are required for both staff and the client. Where clients cannot wear a mask and service must be delivered in person, use physical barriers wherever possible or physical distancing
- When booking in-person meetings, include a reminder for clients about current mask orders, physical distancing and ask them to re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres

between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

25. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

26. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to

provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

27. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

28. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [NEW]

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks, including while exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires all participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

29. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

30. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

31. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

32. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

33. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave? [UPDATED]

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

34. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

35. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

36. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

37. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

38. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

39. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

40. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated October 1, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. How will COVID-19 vaccination change workplace safety plans?

Receiving both doses of the COVID-19 vaccination is shown to be highly effective at reducing severe infection and hospitalization and significantly reduces the community risk of COVID-19 in British Columbia.

At the start of step 3 of BC's Restart plan, COVID-19 Safety Plans were replaced with Communicable Disease Prevention Plans. Some public health practices that have protected workplaces through the pandemic continue to offer additional layers of protection. These include staying home when sick, screening for symptoms, good handwashing practices and being careful about social contact.

Dr. Henry has written to employers with advice through this transition. Changes in Public Health guidance require additional measures to be temporarily added to Communicable Disease Prevention plans.

High levels of public health monitoring help identify the need to modify Communicable Disease Prevention Plans. The BC Public Service follows the direction of Public Health and complies with WorkSafeBC on how to prevent communicable disease risks.

3. When will I get vaccinated?

Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier – 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19. Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C. Public Health also recommends mask wearing for individuals age 12 and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

All eligible BC Public Service employees are encouraged to get both doses of the COVID-19 vaccine. Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

4. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

5. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

6. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

As mentioned by Lori Wanamaker in an executive message, required proof of vaccination does not apply across all BC Public Service workplaces at this time.

However, orders from the PHO have impacted some public service workplaces, or when staff must attend other workplaces to complete their job duties. The COVID-19 Vaccination Status Information Order requires proof of vaccination in certain care settings operated by BC Public Service employees.

The Gatherings and Events Order and the Food and Liquor Serving Premises Order require operators of a range of discretionary settings to obtain proof of vaccination from patrons. While ministries are working with operators to distinguish BC Public Service employees from patrons, there may be situations where an employee's vaccination status will impact their ability to complete their work tasks when they occur in a discretionary setting. Supervisors are encouraged to explain to employees where operators will require proof of vaccination so employees can determine if they will be able to attend these sites.

Supervisors can contact MyHR for assistance if they have situations where staff must attend locations requiring proof of vaccination to complete their job duties.

7. Do I have to tell my supervisor or my ministry I have been vaccinated?

On August 23, 2021, the B.C. government announced a Public Health order requiring proof of vaccination status for admission to many discretionary activities. The requirement for proof of vaccination does not apply in BC Public Service workplaces for employees.

When workforce leaders plan staffing in office locations, vaccination status should not be requested from employees as this is private medical information. Because of the individualized immune response to vaccination, it should not be a factor in workplace planning based on the current state of COVID-19.

8. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

9. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart Plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

10. How do regional Medical Health Officer Orders impact our workplaces? [UPDATED]

Provincial control of the COVID-19 pandemic and progress with B.C.'s Restart Plan depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health regions. Regional guidance due to increased transmission may bring tighter workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September and in the Central Okanagan in August. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

11. Do I need to do a workplace Daily Health Check? [UPDATED]

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick. They offer an additional layer of protection for those in the workplace. This recommendation will be re-evaluated with updated pandemic information and Public Health advice. In provincial regions with current outbreaks, Daily Health Checks are mandatory to work from a BC Public Service office and can be ordered by a Medical Health Officer for their region or a specific area.

12. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On September 28, 2021 the PHO issued an updated face covering/mask order clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently, this is reinforced with Daily Health Checks before starting work
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices
- In many workplaces, physical barriers between employees and clients have remained in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can also choose to wear a mask anywhere in workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans

13. What is the current direction on returning to the workplace and remote work?

On August 24, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The original implementation date of September 7 has been delayed. Employees wishing to continue working remotely in the longer-term are required to have an approved telework agreement in place by September 7. However, the flexible work arrangements set in telework agreements do not apply until October 12.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the August 25 Public Health order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

14. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers, and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must follow regional orders and guideline from local Medical Health Officers across BC, as they will provide guidance and recommendations to continue preventing the spread of COVID-19.

15. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. They must be limited to BC Public Service employees only. Workplaces must have a Communicable Disease Prevention Plan in place. Prevention procedures include:

- Using the largest meeting room available
- Spacing out attendees as much as possible
- Avoiding shared food and beverages

16. Our workplace wants to hold a meeting or learning event for 60 attendees at rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Item L in the Gatherings and Events Order excludes workers at a workplace when engaged in their work activities including staff meetings, employment related training and the use of any place for local, provincial or federal government purposes.

The BC Public Service can rent venues to hold meetings complying with the listed exclusions. Proof of vaccination is not required if there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place and the BC Public Service must only use the room up to 50% of its capacity. This algins with how most venues and hotels are currently renting space.

Attendees must comply with the current mask requirements and wear a mask while in or transiting indoor public spaces of the venue.

Hotels and other venues may be unaware of this exclusion or may institute their own policies beyond the Provincial Health order on proof of vaccination. When booking rentals, inquire about their proof of vaccination and other COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

17. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Effective August 25, the Provincial Health Officer issued an order on face coverings, requiring mask wearing in indoor public spaces for all individuals 12 and over, regardless of vaccination status. This includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Public Health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

18. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO mask requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

19. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional health orders (e.g., Fraser East, Interior, Central Okanagan) and the provincial mask order.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific workplace restrictions.

20. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry some risk of exposure. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

21. I am uncomfortable returning to the workplace because a co-worker refuses to be vaccinated

All workplaces are equipped with Communicable Disease Prevention Plans designed to reduce transmission of many respiratory viruses, including COVID-19. Protocols such as daily health checks, hygiene practices and physical distancing reduce the risk of virus exposure. The best way for an employee to protect themselves is to be fully vaccinated. Recent guidance from the PHO recommends vaccination for the vast majority of British Columbians.

Workplace transmission in BC Public Service offices has been infrequent through the pandemic. With high levels of vaccination across B.C., the risk in our workplaces is further reduced. Unvaccinated individual completing daily health checks, following Communicable Disease Prevention Plans and following physical distancing should not present a high risk in the workplace.

This situation is an important leadership issue for supervisors to manage. All employees are expected to contribute to a respectful and positive workplace. It's recommended to actively manage respectful and cohesive workplace behaviours among teams when managing this concern.

22. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

23. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

24. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan?

During Step 3 of BC's Restart Plan, Communicable Disease Prevention Plans are updated based on Public Health guidance. Current guidance includes the following :

- By Public Health Order, masks covering the nose and mouth are required for individuals 12 and older in indoor public settings, including workplace areas where services to the public/clients are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, masks are required for both staff and the client. Where clients cannot wear a mask and service must be delivered in person, use physical barriers wherever possible or physical distancing
- When booking in-person meetings, include a reminder for clients about current mask orders, physical distancing and ask them to re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

25. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to

remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

26. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

27. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

28. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires all participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

29. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

30. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

31. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

32. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

33. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

34. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

35. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

36. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

37. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

38. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

39. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

40. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated October 5, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation. Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated? [UPDATED]

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier – 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been

found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C. Public Health also recommends mask wearing for individuals age 12 and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. More details on this policy, the process for disclosing proof of vaccination, and supporting resources will be available by November 1. For more information, please refer to the BC Public Service Vaccination Policy FAQ.

6. Do I have to tell my supervisor or my ministry I have been vaccinated? [UPDATED]

On August 23, 2021, the B.C. government announced a Public Health order requiring proof of vaccination status for admission to many discretionary activities. The requirement for proof of vaccination does not apply in BC Public Service workplaces for employees.

However, effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. Details on how to do this will be available by November 1. For more information, please refer to the BC Public Service Vaccination Policy FAQ.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart Plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic and progress with B.C.'s Restart Plan depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health regions. Regional guidance due to increased transmission may bring tighter workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September and in the Central Okanagan in August. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick. They offer an additional layer of protection for those in the workplace. This recommendation will be re-evaluated with updated pandemic information and Public Health advice. In provincial regions with current outbreaks, Daily Health Checks are mandatory to work from a BC Public Service office and can be ordered by a Medical Health Officer for their region or a specific area.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On September 28, 2021 the PHO issued an updated face covering/mask order clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently, this is reinforced with Daily Health Checks before starting work
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices
- In many workplaces, physical barriers between employees and clients have remained in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can also choose to wear a mask anywhere in workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

On October 5, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The implementation date of October 12 has been delayed. Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by November 22 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before November 22, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the August 25 Public Health order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must follow regional orders and guideline from local Medical Health Officers across BC, as they will provide guidance and recommendations to continue preventing the spread of COVID-19.

14. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. They must be limited to BC Public Service employees only. Workplaces must have a Communicable Disease Prevention Plan in place. Prevention procedures include:

- Using the largest meeting room available
- Spacing out attendees as much as possible
- Avoiding shared food and beverages

15. Our workplace wants to hold a meeting or learning event for 60 attendees at rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

Effective November 22, 2021, all BC Public Service employees will be required to provide proof of full vaccination. Details on the implications of this policy for meetings and events will be shared by November 1.

In the interim, item L in the Gatherings and Events Order excludes workers at a workplace when engaged in their work activities including staff meetings, employment related training and the use of any place for local, provincial or federal government purposes.

The BC Public Service can rent venues to hold meetings complying with the listed exclusions. Proof of vaccination is not required if there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place and the BC Public Service must only use the room up to 50% of its capacity. This algins with how most venues and hotels are currently renting space.

Attendees must comply with the current mask requirements and wear a mask while in or transiting indoor public spaces of the venue.

Hotels and other venues may be unaware of this exclusion or may institute their own policies beyond the Provincial Health order on proof of vaccination. When booking rentals, inquire about their proof of vaccination and other COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Effective August 25, the Provincial Health Officer issued an order on face coverings, requiring mask wearing in indoor public spaces for all individuals 12 and over, regardless of vaccination status. This includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Public Health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO mask requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan? [UPDATED]

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional health orders (e.g., Fraser East, Interior, Central Okanagan) and the provincial mask order.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry some risk of exposure. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

20. I am uncomfortable returning to the workplace because a co-worker refuses to be vaccinated [UPDATED]

All workplaces are equipped with Communicable Disease Prevention Plans designed to reduce transmission of many respiratory viruses, including COVID-19. Protocols such as daily health checks, hygiene practices and physical distancing reduce the risk of virus exposure. The best way for an employee to protect themselves is to be fully vaccinated. Recent guidance from the PHO recommends vaccination for the vast majority of British Columbians. Effective November 22, 2021, all BC Public Service employees will also be required to provide proof of full vaccination.

Workplace transmission in BC Public Service offices has been infrequent through the pandemic.

With high levels of vaccination across B.C. and the pending requirement for employees to be vaccinated, the risk in our workplaces is further reduced.

This situation is an important leadership issue for supervisors to manage. All employees are expected to contribute to a respectful and positive workplace. It's recommended to actively manage respectful and cohesive workplace behaviours among teams when managing this concern.

21. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

22. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

23. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan?

During Step 3 of BC's Restart Plan, Communicable Disease Prevention Plans are updated based on Public Health guidance. Current guidance includes the following :

- By Public Health Order, masks covering the nose and mouth are required for individuals 12 and older in indoor public settings, including workplace areas where services to the public/clients are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, masks are required for both staff and the client. Where clients cannot wear a mask and service must be delivered in person, use physical barriers wherever possible or physical distancing
- When booking in-person meetings, include a reminder for clients about current mask orders, physical distancing and ask them to re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

24. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to

remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

25. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

26. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

27. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires all participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

28. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

29. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

30. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

31. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

32. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

33. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do? [UPDATED]

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

34. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

35. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

36. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

37. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

38. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

39. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated October 14, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation. Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply and the details will be posted to BCCDC and on the Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier – 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been

found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C. Public Health also recommends mask wearing for individuals age 12 and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. More details on this policy, the process for disclosing proof of vaccination, and supporting resources will be available by November 1. For more information, please refer to the BC Public Service Vaccination Policy FAQ.

6. Do I have to tell my supervisor or my ministry I have been vaccinated?

On August 23, 2021, the B.C. government announced a Public Health order requiring proof of vaccination status for admission to many discretionary activities. The requirement for proof of vaccination does not apply in BC Public Service workplaces for employees.

However, effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. Details on how to do this will be available by November 1. For more information, please refer to the BC Public Service Vaccination Policy FAQ.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart Plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic and progress with B.C.'s Restart Plan depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health regions. Regional guidance due to increased transmission may bring tighter workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September and in the Central Okanagan in August. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick. They offer an additional layer of protection for those in the workplace. This recommendation will be re-evaluated with updated pandemic information and Public Health advice. In provincial regions with current outbreaks, Daily Health Checks are mandatory to work from a BC Public Service office and can be ordered by a Medical Health Officer for their region or a specific area.

11. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On September 28, 2021 the PHO issued an updated face covering/mask order clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently, this is reinforced with Daily Health Checks before starting work
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices
- In many workplaces, physical barriers between employees and clients have remained in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can also choose to wear a mask anywhere in workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans

12. What is the current direction on returning to the workplace and remote work?

On October 5, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The implementation date of October 12 has been delayed. Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by November 22 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before November 22, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the August 25 Public Health order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must follow regional orders and guideline from local Medical Health Officers across BC, as they will provide guidance and recommendations to continue preventing the spread of COVID-19.

14. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. They must be limited to BC Public Service employees only. Workplaces must have a Communicable Disease Prevention Plan in place. Prevention procedures include:

- Using the largest meeting room available
- Spacing out attendees as much as possible
- Avoiding shared food and beverages

15. Our workplace wants to hold a meeting or learning event for 60 attendees at rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Effective November 22, 2021, all BC Public Service employees will be required to provide proof of full vaccination. Details on the implications of this policy for meetings and events will be shared by November 1.

In the interim, item L in the Gatherings and Events Order excludes workers at a workplace when engaged in their work activities including staff meetings, employment related training and the use of any place for local, provincial or federal government purposes.

The BC Public Service can rent venues to hold meetings complying with the listed exclusions. Proof of vaccination is not required if there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place and the BC Public Service must only use the room up to 50% of its capacity. This algins with how most venues and hotels are currently renting space.

Attendees must comply with the current mask requirements and wear a mask while in or transiting indoor public spaces of the venue.

Hotels and other venues may be unaware of this exclusion or may institute their own policies beyond the Provincial Health order on proof of vaccination. When booking rentals, inquire about their proof of vaccination and other COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

On August 25, 2021, the Provincial Health Officer issued an order on face coverings, requiring masks in public indoor spaces, regardless of vaccination status. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The mask order includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.
BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Public Health orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO mask requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional health orders (e.g., Fraser East, Interior, Central Okanagan) and the provincial mask order.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry some risk of exposure. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

20. I am uncomfortable returning to the workplace because a co-worker refuses to be vaccinated

All workplaces are equipped with Communicable Disease Prevention Plans designed to reduce transmission of many respiratory viruses, including COVID-19. Protocols such as daily health checks, hygiene practices and physical distancing reduce the risk of virus exposure. The best way for an employee to protect themselves is to be fully vaccinated. Recent guidance from the PHO recommends vaccination for the vast majority of British Columbians. Effective November 22, 2021,

all BC Public Service employees will also be required to provide proof of full vaccination.

Workplace transmission in BC Public Service offices has been infrequent through the pandemic. With high levels of vaccination across B.C. and the pending requirement for employees to be vaccinated, the risk in our workplaces is further reduced.

This situation is an important leadership issue for supervisors to manage. All employees are expected to contribute to a respectful and positive workplace. It's recommended to actively manage respectful and cohesive workplace behaviours among teams when managing this concern.

21. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

22. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

23. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan?

During Step 3 of BC's Restart Plan, Communicable Disease Prevention Plans are updated based on Public Health guidance. Current guidance includes the following :

- By Public Health Order, masks covering the nose and mouth are required for individuals 12 and older in indoor public settings, including workplace areas where services to the public/clients are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms

- When working with clients, masks are required for both staff and the client. Where clients cannot wear a mask and service must be delivered in person, use physical barriers wherever possible or physical distancing
- When booking in-person meetings, include a reminder for clients about current mask orders, physical distancing and ask them to re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

24. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

In the May 25, 2021 update from Lori Wanamaker, Head of the BC Public Service, employees were advised returning to the workplace during Step 3 is voluntary. Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

25. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With

COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

26. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

27. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions

- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires all participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

28. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are 7 days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

29. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

30. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

31. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

32. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

33. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

34. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

35. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

36. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the

case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

37. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

For international travel, the Government of Canada and the Province of British Columbia currently recommend avoiding non-essential travel outside of Canada until further notice.

38. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

In March 2020, an Emergency Order under the Quarantine Act was implemented requiring any person entering Canada by air, sea or land to quarantine or self-isolate themselves for 14 days whether or not they have symptoms of COVID-19. Exemptions for fully vaccinated travellers have been implemented as of August 9 impacting quarantine requirements.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until assigned quarantine and other requirements have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for their self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Staff will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after their 14-day isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada website and the Travel Section of the BCCDC website for the latest quarantine and travel requirements.

39. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if recommended) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated November 9, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier at 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C.

Public Health also recommends mask wearing for individuals ages five and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19

vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service? [UPDATED]

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Do I have to tell my supervisor or my ministry I have been vaccinated? [UPDATED]

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. Employees must continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. However, effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

During Step 3 and Step 4 of BC's Restart Plan, local Public Health monitoring may identify new risks. All British Columbians must continue to follow Public Health orders and guidance until community immunity is achieved and the Provincial Health Officer rescinds or changes the orders and guidance.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic and progress with B.C.'s Restart Plan depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of outbreaks in their local health regions. Regional guidance due to increased transmission may bring tighter workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September and in the Central Okanagan in August. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick. They offer an additional layer of protection for those in the workplace. This recommendation will be re-evaluated with updated pandemic information and Public Health advice. In provincial regions with current outbreaks, Daily Health Checks are mandatory to work from a BC Public Service office and can be ordered by a Medical Health Officer for their region or a specific area.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and have benefit plans to support them. Currently, this is reinforced with Daily Health Checks before starting work
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied and cleaning protocols and supplies are in place for commonly shared surfaces
- Workers often have sufficient personal space in the office as flexible work arrangements have lowered the occupancy in offices
- In many workplaces, physical barriers between employees and clients have remained in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can also choose to wear a mask anywhere in workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans

12. What is the current direction on returning to the workplace and remote work?

On October 5, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The implementation date of October 12 has been delayed. Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by November 22 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before November 22, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. These continue to be updated with Public Health guidance.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must follow regional orders and guideline from local Medical Health Officers across BC, as they will provide guidance and recommendations to continue preventing the spread of COVID-19.

14. Can we hold in-person staff meetings in our workplace? [UPDATED]

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. They must be limited to BC Public Service employees only. Workplaces must have a Communicable Disease Prevention Plan in place. Prevention procedures include:

- Using the largest meeting room available
- Spacing out attendees as much as possible
- Avoiding shared food and beverages

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

The BC Public Service can rent venues to hold meetings complying with the listed exclusions. Proof of vaccination is not required if there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place and the BC Public Service must only use the room up to 50% of its capacity. This aligns with how most venues and hotels are currently renting space.

Attendees must comply with the current mask requirements and wear a mask while in or transiting indoor public spaces of the venue.

Hotels and other venues may be unaware of this exclusion or may institute their own policies beyond the Provincial Health order on proof of vaccination. When booking rentals, inquire about their proof of vaccination and other COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public?

The Provincial Health Officer issued an Order on Face Coverings, requiring masks in public indoor spaces, regardless of vaccination status. This order was issued in late August and updated on October 29, 2021. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The Order on Face Coverings includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.
BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Medical Health Officer orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO mask requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional Medical Health Officer orders (e.g., Fraser East, Interior, Central Okanagan) and the Provincial Health Officer order.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. What is the concern regarding workplace kitchen and social activities?

The Provincial Health Officer reported episodes of COVID-19 transmission in lunch and break rooms and during social activities in workplaces across the province earlier in the pandemic. Work associated activities such as carpooling, driving together to get lunch or workplace social events involving sitting together on breaks without distancing may increase the risk of a COVID-19 exposure. This concern is precautionary during Step 3 of BC's Restart Plan.

While there are currently low numbers of new COVID-19 cases, individual employee vaccination status or immunity levels can allow these type of close contact events to carry some risk of exposure. Public Health encourages individuals to monitor their personal risk status. Since workplace social events are influenced by peer pressure or have an implied expectation to participate, the caution against these events is to allow employees the comfort to limit their exposure.

Work associated events where transmission occurs can result in a Public Health closure of the workplace.

20. I am uncomfortable returning to the workplace because a co-worker refuses to be vaccinated

All workplaces are equipped with Communicable Disease Prevention Plans designed to reduce transmission of many respiratory viruses, including COVID-19. Protocols such as daily health checks, hygiene practices and physical distancing reduce the risk of virus exposure. The best way for an

employee to protect themselves is to be fully vaccinated. Recent guidance from the PHO recommends vaccination for the vast majority of British Columbians. Effective November 22, 2021, all BC Public Service employees will also be required to provide proof of full vaccination.

Workplace transmission in BC Public Service offices has been infrequent through the pandemic. With high levels of vaccination across B.C. and the pending requirement for employees to be vaccinated, the risk in our workplaces is further reduced.

This situation is an important leadership issue for supervisors to manage. All employees are expected to contribute to a respectful and positive workplace. It's recommended to actively manage respectful and cohesive workplace behaviours among teams when managing this concern.

21. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

22. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

23. Will workplaces maintain physical distancing when working with clients during Step 3 of BC's Restart Plan?

During Step 3 of BC's Restart Plan, Communicable Disease Prevention Plans are updated based on Public Health guidance. Current guidance includes the following :

- By Public Health Order, masks covering the nose and mouth are required for individuals 12 and older in indoor public settings, including workplace areas where services to the public/clients are provided
- Put up signs at office entrances asking clients to not enter the building and reschedule their appointment if they are sick, have a cough, have difficulty breathing or have been advised to quarantine or isolate following travel
- If clients appear unwell, ask them if they can reschedule or provide them a mask while they are in the common areas of the office
- If clients are coughing or sneezing, ask them to cover up using their elbow or a tissue
- Use signs to direct traffic and remind people of the benefits of physical distancing in lobbies and waiting rooms
- When working with clients, masks are required for both staff and the client. Where clients cannot wear a mask and service must be delivered in person, use physical barriers wherever possible or physical distancing

- When booking in-person meetings, include a reminder for clients about current mask Orders, physical distancing and ask them to re-schedule if they feel unwell
- Set up meeting rooms with reduced capacity and use the table or chairs to create two metres between participants
- Use tape to mark two-metre spacing on the floor for line-ups at service counters

24. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

Effective November 22, 2021, any employees wishing to continue working remotely can only do so with an approved telework agreement in place. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

25. A worker with a chronic health condition has asked about returning to the workplace. What do I advise them?

The BCCDC advises people with certain chronic health conditions may consider protective self-separation. People with chronic health conditions are at a higher risk of developing more severe illness from COVID-19. These conditions include heart disease, high blood pressure, lung disease, diabetes and cancer. Also included are people with weakened immune systems from a medical condition (e.g., HIV, chronic liver disease or organ transplant) or treatments such as chemotherapy and immunosuppressive medications.

Supervisors are expected to be flexible and support requests for remote working where operationally feasible. If there is an operational requirement for the employee to be in the workplace, employees should be informed of new or updated workplace safety procedures before the return to the worksite. This allows employees with chronic conditions to evaluate the level of risk for their condition, and their confidence in protecting themselves in the workplace. With

COVID-19, personal protective practices (distancing and hand hygiene) offer protection. These employees should be permitted to return to the workplace if they chose.

Employees are required to provide relevant and appropriate information to support a request for accommodation. Supervisors will often require information such as medical restrictions, limitations and prognosis as part of the accommodation process. Employees are not typically required to provide supervisors with their medical diagnosis. With complex accommodations, where further clarifying information is required, supervisors should contact MyHR for guidance. Supervisors can also implement accommodations arising from the pandemic based on information that has previously been provided to the ministry for a consistent purpose. (See the Managers' Guide to Reasonable Accommodation on MyHR for additional information).

26. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need to know basis and only with those authorized to receive it under FOIPPA.

27. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions

- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires all participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

28. I have an employee who has tested positive for COVID-19. What does this mean for coworkers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Coworkers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

Through an interview with the person who has contracted COVID-19, Public Health determines the level of risk of COVID-19 exposure to others. Public Health also considers the vaccination status of coworkers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

In general, those who are fully vaccinated and are seven days past receiving their second dose of vaccine are recommended to self-monitor for 14 days. Self-monitoring is also advised when the exposure occurs less than 91 days since recovery from a prior recent COVID-19 infection.

Non-vaccinated coworkers are advised to self-isolate when there is a high risk exposure or close contact with an exposure. This also applies to co-workers that have only received their first shot and have not passed 21 days since their first dose, since they have not yet built up a response to the vaccine.

Self-isolation is also be recommended for employees who are considered partially vaccinated when it has been 21 days since they received the first dose of the vaccine and the exposure is a household contact.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any

cleaning protocols put into place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you can contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

29. I supervise an employee who has developed mild symptoms, but they are not sure if it is COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check has employees focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the test negative but the employee remains unwell, manage as a regular sick leave. If the test is positive, see questions 24 and 32 for guidance.

30. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.

- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

31. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

32. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

33. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

34. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

35. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

36. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the

case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

37. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada? [UPDATED]

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19 and plan ahead by checking the places you are going are ready to welcome you.

38. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

39. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated November 16, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier at 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C.

Public Health also recommends mask wearing for individuals ages five and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running COVID-19 vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19

vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders? [UPDATED]

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces? [UPDATED]

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check? [UPDATED]

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work?

On October 5, 2021, Lori Wanamaker, Head of the BC Public Service, provided an update regarding flexible work arrangements. The implementation date of October 12 has been delayed. Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by November 22 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before November 22, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across BC.

14. Can we hold in-person staff meetings in our workplace? [UPDATED]

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. Physical distancing and capacity limits are no longer required but all workplaces must have a Communicable Disease Prevention Plan in place that includes practices for meetings.

Staff are not required to wear masks in a meeting room if the meeting only includes staff (including public service staff from other ministries or agencies). If you are using a meeting room for client service, masks must be worn by staff and clients (if they are able to) unless there is a physical barrier separating the client and the worker. There are no other COVID precautions required for meeting rooms. Check your ministry/agency Communicable Disease Prevention Plan for meeting room requirements (e.g. clean in/clean out).

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services including using a meeting room for client service. More information on the proof of vaccination requirements is available on MyHR.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

Workplaces must check for regional Medical Health Officer (MHO) orders that may restrict meeting sizes and require proof of vaccination prior to planning meetings that will be held offsite. As of November 16, the there are restrictions on hosting events in the Northern and Interior Health Authorities and in Fraser Valley East.

For areas without MHO restrictions the BC Public Service can rent venues to hold meetings up to 100 per cent of the rated room capacity. Proof of vaccination is not required if there are less than 50 attendees and there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place for the meeting. Attendees must comply with mask requirements and wear a mask while in, or transiting, indoor public spaces of the venue.

Hotels and other venues may institute their own policies (such as reduced occupancy limits) beyond the Provincial Health Officer order on proof of vaccination. When booking rentals, inquire about all their COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public?

The Provincial Health Officer issued an Order on Face Coverings, requiring masks in public indoor spaces, regardless of vaccination status. This order was issued in late August and updated on October 29, 2021. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The Order on Face Coverings includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Medical Health Officer orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace? [UPDATED]

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO face covering requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask or other face covering may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional Medical Health Officer orders (e.g., Fraser East, Interior, Northern health regions) and the Provincial Health Officer orders.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing by health authorities. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

20. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

21. Will workplaces maintain physical distancing for staff when we return to the workplace? What about when working with clients? [UPDATED}

During Step 3 of BC's Restart Plan and our return to the workplace all workplaces must have a Communicable Disease Prevention Plan that is created and updated based on Public Health

guidance. Currently, PHO and MHO orders do not require physical distancing or occupancy limits in workplaces or public settings. When serving clients/public staff must wear a mask if they are not separated form the client by a barrier, and clients/public must wear a mask if they are able.

22. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

Effective November 22, 2021, any employees wishing to continue working remotely can only do so with an approved telework agreement in place. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former StT02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure

manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

24. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

25. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Public Health determines the level of risk of COVID-19 exposure to others through an interview with the person who has contracted COVID-19. Public Health also considers the vaccination status of co-workers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

Co-workers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

In general, those who are fully vaccinated and are seven days past receiving their second dose of vaccine are recommended to self-monitor for any symptoms for 14 days if they have close contact with a COVID positive individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any cleaning protocols put in place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you may contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

26. I supervise an employee who has developed mild symptoms, but they are not sure if itis COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check enables employees to focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask that they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the COVID test is negative but the employee remains unwell, manage as a regular sick leave.

27. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

28. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

29. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

30. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

31. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

32. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

33. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

34. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

35. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

36. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated November 22, 2021

WHO TO CONTACT:

- For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
- For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
- Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
- For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under 12 years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier at 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C.

Public Health also recommends mask wearing for individuals ages five and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running COVID-19 vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19

vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

11. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by December 1 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before December 1, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across BC.

14. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. Physical distancing and capacity limits are no longer required but all workplaces must have a Communicable Disease Prevention Plan in place that includes practices for meetings.

Staff are not required to wear masks in a meeting room if the meeting only includes staff (including public service staff from other ministries or agencies). If you are using a meeting room for client service, masks must be worn by staff and clients (if they are able to) unless there is a physical barrier separating the client and the worker. There are no other COVID precautions required for meeting rooms. Check your ministry/agency Communicable Disease Prevention Plan for meeting room requirements (e.g. clean in/clean out).

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services including using a meeting room for client service. More information on the proof of vaccination requirements is available on MyHR.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

Workplaces must check for regional Medical Health Officer (MHO) orders that may restrict meeting sizes and require proof of vaccination prior to planning meetings that will be held offsite. As of November 21, there are restrictions on hosting events in the Northern and Interior Health Authorities and in Fraser Valley East.

For areas without MHO restrictions the BC Public Service can rent venues to hold meetings up to 100 per cent of the rated room capacity. Proof of vaccination is not required if there are less than 50 attendees and there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place for the meeting. Attendees must comply with mask requirements and wear a mask while in, or transiting, indoor public spaces of the venue.

Hotels and other venues may institute their own policies (such as reduced occupancy limits) beyond the Provincial Health Officer order on proof of vaccination. When booking rentals, inquire about all their COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public?

The Provincial Health Officer issued an Order on Face Coverings, requiring masks in public indoor spaces, regardless of vaccination status. This order was issued in late August and updated on October 29, 2021. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The Order on Face Coverings includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Medical Health Officer orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO face covering requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask or other face covering may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional Medical Health Officer orders (e.g., Fraser East, Interior, Northern health regions) and the Provincial Health Officer orders.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing by health authorities. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

20. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

21. Will workplaces maintain physical distancing for staff when we return to the workplace? What about when working with clients?

During Step 3 of BC's Restart Plan and our return to the workplace all workplaces must have a Communicable Disease Prevention Plan that is created and updated based on Public Health

guidance. Currently, PHO and MHO orders do not require physical distancing or occupancy limits in workplaces or public settings. When serving clients/public staff must wear a mask if they are not separated form the client by a barrier, and clients/public must wear a mask if they are able.

22. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

Effective December 1, 2021, any employees wishing to continue working remotely can only do so with an approved telework agreement in place. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure

manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

24. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

25. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Public Health determines the level of risk of COVID-19 exposure to others through an interview with the person who has contracted COVID-19. Public Health also considers the vaccination status of co-workers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

Co-workers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

In general, those who are fully vaccinated and are seven days past receiving their second dose of vaccine are recommended to self-monitor for any symptoms for 14 days if they have close contact with a COVID positive individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any cleaning protocols put in place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you may contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

26. I supervise an employee who has developed mild symptoms, but they are not sure if itis COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check enables employees to focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask that they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the COVID test is negative but the employee remains unwell, manage as a regular sick leave.

27. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

28. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

29. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

30. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

31. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

32. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

33. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

34. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

35. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

36. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated December 2, 2021

WHO TO CONTACT:
For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.
For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.
Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.
For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under five years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier at 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C.

Public Health also recommends mask wearing for individuals ages five and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running COVID-19 vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19

vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls, such as the measures put in place in Fraser Valley East in late September. Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

11. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

Employees wishing to continue working remotely in the longer-term must have an approved telework agreement in place by January 4, 2022 when the flexible work arrangements in those agreements will take effect. If you have an approved telework agreement and wish to activate it before January 4, 2022, you can do so in consultation with your supervisor.

Employees who have continued to work in their regular workplace throughout the pandemic due to operational requirements can continue to do so safely. There is a much lower level of community COVID-19 transmission and workplace infection control practices are in place.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 variants here in B.C. Is there anything my workplace should do differently?

COVID-19 variants spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the delta variant, Public Health provided additional guidance on August 25, 2021 regarding the use of masks in indoor public spaces and work settings. In addition, the COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees in the workplace. These include symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health accelerated first and second doses of COVID-19 vaccinations. Vaccination is recommended for all eligible British Columbians to prevent the further spread of COVID-19 and its variants. Complete vaccination provides the highest level of personal protection and helps protect British Columbians from variant strains of COVID-19. Effective November 22, 2021, all BC Public Service employees are required to provide proof of full vaccination.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. During Step 3 and Step 4 of BC's Restart Plan, workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across BC.

14. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. Physical distancing and capacity limits are no longer required but all workplaces must have a Communicable Disease Prevention Plan in place that includes practices for meetings.

Staff are not required to wear masks in a meeting room if the meeting only includes staff (including public service staff from other ministries or agencies). If you are using a meeting room for client service, masks must be worn by staff and clients (if they are able to) unless there is a physical barrier separating the client and the worker. There are no other COVID precautions required for meeting rooms. Check your ministry/agency Communicable Disease Prevention Plan for meeting room requirements (e.g. clean in/clean out).

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services including using a meeting room for client service. More information on the proof of vaccination requirements is available on MyHR.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

Workplaces must check for regional Medical Health Officer (MHO) orders that may restrict meeting sizes and require proof of vaccination prior to planning meetings that will be held offsite.

For areas without MHO restrictions the BC Public Service can rent venues to hold meetings up to 100 per cent of the rated room capacity. Proof of vaccination is not required if there are less than 50 attendees and there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place for the meeting. Attendees must comply with mask requirements and wear a mask while in, or transiting, indoor public spaces of the venue.

Hotels and other venues may institute their own policies (such as reduced occupancy limits) beyond the Provincial Health Officer order on proof of vaccination. When booking rentals, inquire about all their COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public?

The Provincial Health Officer issued an Order on Face Coverings, requiring masks in public indoor spaces, regardless of vaccination status. This order was issued in late August and updated on October 29, 2021. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The Order on Face Coverings includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Medical Health Officer orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO face covering requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask or other face covering may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional Medical Health Officer orders (e.g., Fraser East, Interior, Northern health regions) and the Provincial Health Officer orders.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing by health authorities. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

20. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

21. Will workplaces maintain physical distancing for staff when we return to the workplace? What about when working with clients?

During Step 3 of BC's Restart Plan and our return to the workplace all workplaces must have a Communicable Disease Prevention Plan that is created and updated based on Public Health

guidance. Currently, PHO and MHO orders do not require physical distancing or occupancy limits in workplaces or public settings. When serving clients/public staff must wear a mask if they are not separated form the client by a barrier, and clients/public must wear a mask if they are able.

22. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

Effective January 4, 2022, any employees wishing to continue working remotely can only do so with an approved telework agreement in place. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure

manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

24. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

The PHO updated the Indoor Exercise Requirements Order on June 15, 2021. All facilities or individuals providing or participating in indoor exercise must comply with the order. The order is also linked to the PHO Gatherings and Events Order. The PHO Order on Face Coverings also applies to gyms and indoor exercise spaces, allowing exercise without face masks.

Provisions of the Indoor Exercise Requirements Order include:

- Obtaining contact information from participants for potential contact tracing
- Ventilation requirements and prohibitions
- Cleaning and disinfection
- Completing a health check prior to entry
- Wearing masks unless exercising
- Recommended on-site staffing to ensure compliance (e.g. capacity limits, distancing, wearing masks)

The Gatherings and Events Order also requires participants to show proof of vaccination. Since employer provided gyms are a discretionary activity and not a mandatory part of work, employees wishing to use them must be willing to provide their vaccination status to use the gym.

Communicable Disease Prevention Plans must reflect the provisions of these orders and outline how all the requirements will be met.

Please contact Workplace Health and Safety via Ask MyHR for more information.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

25. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Public Health determines the level of risk of COVID-19 exposure to others through an interview with the person who has contracted COVID-19. Public Health also considers the vaccination status of co-workers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

Co-workers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

In general, those who are fully vaccinated and are seven days past receiving their second dose of vaccine are recommended to self-monitor for any symptoms for 14 days if they have close contact with a COVID positive individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any cleaning protocols put in place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you may contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

26. I supervise an employee who has developed mild symptoms, but they are not sure if itis COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check enables employees to focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask that they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the COVID test is negative but the employee remains unwell, manage as a regular sick leave.

27. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

28. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

29. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

30. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

31. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

32. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least 10 days have passed since onset of symptoms
- Fever has resolved without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

33. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

34. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

35. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

36. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated December 23, 2021

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under five years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get vaccinated?

On October 5, the BC Public Service announced employees are required to provide proof of full vaccination effective November 22, 2021. Both doses of the vaccine are available right now across British Columbia at drop-in clinics or through the provincial vaccine registration system. The second vaccine dose is now provided earlier at 28 days after the first dose. The second dose is recommended to boost individual immunity, including protection from circulating variant strains of COVID-19.

Vaccine technical information is regularly updated on the BCCDC website. The vaccine has a low risk of side effects and offers good protection from severe COVID-19 infection. The BCCDC reports, based on data from September 7, show unvaccinated individuals have a 10 times greater risk of infection, 47 times greater risk of hospitalization and 9 times the risk of death than vaccinated individuals.

Vaccination is a key Public Health recommendation for all British Columbians age 12 and older. A high level of vaccination participation is required to control COVID-19 circulating in many of our communities. Reporting since mid-June 2021 shows the majority of COVID-19 infections have been found in unvaccinated people. These infections are fuelling the fourth pandemic wave in B.C.

Public Health also recommends mask wearing for individuals ages five and up who are not vaccinated or are less than 14 days after their second dose in any setting where there is close contact with others, including indoor public spaces.

Receiving the vaccine protects you and those around you. Full vaccination reduces the risk of transmission from an exposure, and fully vaccinated (more than seven days following the second dose) individuals are generally not required by Public Health to self-isolate following a close contact.

New COVID-19 case data for British Columbia is indicating a very high population level of vaccination is required to suppress virus circulation in the community. Public Health teams continue to look at settings where transmission is occurring to develop interventions to control the risk.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will the Public Service be running COVID-19 vaccination clinics like yearly flu clinics at our workplaces?

No. The currently approved vaccines are provided at vaccination clinics arranged in communities and pharmacies across British Columbia.

4. Will I be able to take leave to get my vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine or to take their dependent children to get the COVID-19 vaccine. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19

vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact Ask MyHR with any questions.

5. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

7. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

8. Once I get vaccinated will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check?

As B.C. moves through BC's Restart plan, Public Health recommends anyone who is symptomatic should stay at home and follow testing guidance. COVID-19 continues to circulate in our communities, creating greater risk in those who are unvaccinated or have lower immunity.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

11. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

The BC Public Service has deferred the implementation of telework agreements and a new date has not been set at this time. There will be update on telework agreement implementation on January 17, 2022 with more information.

Our workplaces remain safe and open for those who need to or choose to be there, and those who wish to continue working from home may continue to do so for the time being.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.
More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 Omicron cases here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants, including Omicron, spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Omicron variant, Public Health issued new orders on December 22, 2021. The orders do not affect our workplaces, except for gyms and change rooms (see question 24).

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. The COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees. These include appropriate mask use, symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. Workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across B.C. or provincial Health Officer orders. Information on updating Communicable Disease Prevention Plans is on the COVID-19 information for BC Public Service employees page.

Stay informed, review your Communicable Disease Prevention Plan, monitor the health bulletins for new information and check for information when your booster dose is available.

14. Can we hold in-person staff meetings in our workplace?

Yes. Workplaces can hold in person staff meetings, workshops, learning events, etc. Physical distancing and capacity limits are no longer required but all workplaces must have a Communicable Disease Prevention Plan in place that includes practices for meetings.

Staff are not required to wear masks in a meeting room if the meeting only includes staff (including public service staff from other ministries or agencies). If you are using a meeting room for client service, masks must be worn by staff and clients (if they are able to) unless there is a physical barrier separating the client and the worker. There are no other COVID precautions required for meeting rooms. Check your ministry/agency Communicable Disease Prevention Plan for meeting room requirements (e.g. clean in/clean out).

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services including using a meeting room for client service. More information on the proof of vaccination requirements is available on MyHR.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Effective November 22, 2021, all employees are required to provide proof of full vaccination. In addition, effective December 13, 2021, any non-employees entering employee-only areas of public service workplaces must also provide proof of vaccination. This does not apply to members of the public accessing government services. More information on the proof of vaccination requirements is available on MyHR.

Workplaces must check for regional Medical Health Officer (MHO) orders that may restrict meeting sizes and require proof of vaccination prior to planning meetings that will be held offsite.

For areas without MHO restrictions the BC Public Service can rent venues to hold meetings up to 100 per cent of the rated room capacity. Proof of vaccination is not required if there are less than 50 attendees and there is no catering. If the meeting is catered (table service or buffet-style meals), the Food and Liquor Serving Premises Order requires attendees to provide proof of vaccination. Attendees going to a restaurant with table service, including a buffet or a cafe within a hotel, are required to provide proof of vaccination.

There must be a Communicable Disease Prevention Plan in place for the meeting. Attendees must comply with mask requirements and wear a mask while in, or transiting, indoor public spaces of the venue.

Hotels and other venues may institute their own policies (such as reduced occupancy limits) beyond the Provincial Health Officer order on proof of vaccination. When booking rentals, inquire about all their COVID-19 requirements.

For more information on off-site meetings or assistance with implementing a Communicable Disease Prevention Plan for off-site meetings, please contact Ask MyHR.

16. Are masks required in BC Public Service workplaces for clients or the public?

The Provincial Health Officer issued an Order on Face Coverings, requiring masks in public indoor spaces, regardless of vaccination status. This order was issued in late August and updated on October 29, 2021. On October 13, 2021, the age for wearing a mask was lowered from 12 to five.

The Order on Face Coverings includes areas of BC Public Service workplaces with unrestricted public access and where services are provided to the public/clients. Employees are not required to wear a mask when serving clients if they are separated from the client by a barrier. This includes at service counters, wickets or in meeting rooms.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

BC Public Service workplaces should post client-facing signs reflecting provincial and/or local Medical Health Officer orders. Workplaces should maintain a supply of non-medical masks to provide to clients if requested.

Masks are not required in employee-only areas of the workplace at this time, except in the Fraser East Region. In BC Public Service workplaces where it is not a Public Health requirement, employees can choose to wear a mask if they wish to. Employees can manage their personal risk and the risk to those around them by wearing masks in any area of the workplace.

Since many ministries provide essentials services to the public that they cannot receive anywhere else, clients are not denied service based on mask wearing or vaccination status. With high levels of vaccine participation in BC and other controls available, such as physical barriers, asking clients for proof of vaccination status is not necessary.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

For workplaces in the Eastern Fraser Valley

The MHO for Fraser Health issued a Gathering and Events Regional Measures Order on September 28, 2021. This order applies to the Health Service Delivery Area of the Fraser Health Region, known as Fraser East, and encompassing the communities of Hope, Chilliwack, Abbotsford, Mission and Agassiz/Harrison.

For workplaces in Fraser East, employees must wear a face mask in common areas of their workplace, including hallways, stairwells, lunch and break rooms and washrooms. Employees are not required to wear a face mask while at their desk, if behind a barrier or physical divider or when delivering a presentation and physical distancing can be maintained. Employees are also required to wear face masks in any indoor spaces where the public have unrestricted access.

Workplace in Fraser East are required to reinstitute their COVID-19 Safety Protocols from the COVID-19 Workplace Assessment Tool. For more information see Fraser East Public Health Restrictions on the COVID-19 information for BC Public Service employees page.

17. Can BC Public Service employees wear a mask in the workplace?

On June 29, 2021, Public Health guidance changed the province-wide recommendation for wearing a mask. Wearing a mask is still recommended for individuals who are less than 14 days after their second vaccination dose.

In addition to this recommendation, wearing a mask is the employee's personal choice for most office workplace settings where there is no PHO or MHO face covering requirement and masks are not part of an exposure control plan. Each employee has personal or family risks to manage and wearing a mask or other face covering may offer an additional layer of protection.

18. Do we have to review our COVID-19 Safety Plan (COVID-19 Workplace Assessment) because of the Provincial Health Officer's Orders or BC's Restart plan?

When the province entered Step 3 of BC's Restart Plan, British Columbia workplace guidance shifted to Communicable Disease Prevention Plans to provide general guidance. These plans include procedures to protect workplaces from infectious disease risks, including COVID-19 and other illnesses, such as seasonal influenza.

The provincial health emergency continues to be in effect and Public Health teams are actively monitoring and reporting on local disease risks in health regions. Communicable Disease Prevention Plans should be updated to reflect regional Medical Health Officer orders (e.g., Fraser East, Interior, Northern health regions) and the Provincial Health Officer orders.

The PSA continues to monitor changes and work with Public Health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

Active COVID-19 case tracking is also continuing by health authorities. If there is a workplace exposure, it may lead to specific workplace restrictions.

19. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

20. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

21. Will workplaces maintain physical distancing for staff when we return to the workplace? What about when working with clients?

During Step 3 of BC's Restart Plan and our return to the workplace all workplaces must have a Communicable Disease Prevention Plan that is created and updated based on Public Health

guidance. Currently, PHO and MHO orders do not require physical distancing or occupancy limits in workplaces or public settings. When serving clients/public staff must wear a mask if they are not separated form the client by a barrier, and clients/public must wear a mask if they are able.

22. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

Employees may continue to work remotely until further notice in January 2022. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

23. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure

manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

24. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

To align with the Public Health order to not permit adult exercise and fitness activities, including working out at gyms, the BC Public Service is closing employee gyms and indoor exercise spaces until January 18, 2022. Change rooms can remain open but must have COVID-19 prevention protocols in place. If your workplace has gyms or change rooms, review BC Public Service COVID-19 Workplace Measures - Gyms and Change Rooms to update your workplace's Communicable Disease Prevention Plan.

Part 3: Employee Exposure and Self-Isolation

For anyone who may have been exposed to a COVID-19 case, Public Health makes the decision and calls individuals who require self-isolation or self-monitoring based on the level of risk of COVID-19 exposure and their immunity against infection.

When Public Health determines someone who was in contact with a COVID-19 case must self-isolate or self-monitor, they are advised of the duration. It is often 14 days from the last contact with the case, but there may be variations based on individual circumstances and as new guidelines are updated.

25. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employee's who are newly diagnosed with COVID-19 should not come to the workplace.

Public Health determines the level of risk of COVID-19 exposure to others through an interview with the person who has contracted COVID-19. Public Health also considers the vaccination status of co-workers (unvaccinated, partially vaccinated, fully vaccinated, prior COVID-19 infection recovery in the last 90 days).

Co-workers of an employee who has tested positive are notified by Public Health contact tracers when there is a need for them to self-isolate or self-monitor. If Public Health does not call, you do not need to self-isolate or self-monitor.

In general, those who are fully vaccinated and are seven days past receiving their second dose of vaccine are recommended to self-monitor for any symptoms for 14 days if they have close contact with a COVID positive individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

Public Health will contact the workplace if there is a concern about COVID-19 transmission in the workplace or if they need assistance with contact tracing details for an employee. Be prepared to provide information to Public Health about the workplace if they contact you. Also identify any cleaning protocols put in place. Your ministry's Strategic Human Resources (SHR) has resources to assist with messaging or you may contact MyHR.

If there are further safety questions about managing the worksite, contact MyHR.

26. I supervise an employee who has developed mild symptoms, but they are not sure if itis COVID-19. They are wondering if they should come in to work or go get tested. What should I do?

Employees who are sick with COVID-19 or any other illness should not come to work and expose others to infection. The Daily Health Check enables employees to focus on new or worsening symptoms.

Have the employee use the BC COVID-19 Self Assessment Tool and ask that they follow the guidance. Other resources for determining symptoms include calling 811 or their primary care provider.

If the employee has been told COVID-19 testing is not recommended, manage the situation as you would with any sick leave.

If testing is recommended, the employee receives their test results by phone, text, or on the BCCDC test results site. Manage this situation as you would with any sick leave.

If the COVID test is negative but the employee remains unwell, manage as a regular sick leave.

27. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

28. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

29. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate? [NEW]

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals who had their final vaccination more than seven days previous to the exposure do not have to self isolate because of a close contact.

The person should self monitor their health for 14 days and if they feel unwell use the BC Centre for Disease Control's self assessment tool, call 811 or contact their primary care provider for advice.

30. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

31. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces

remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

32. I have an employee who wants to self-isolate. The employee doesn't have any COVID-19 symptoms, hasn't travelled out of Canada, and hasn't been directed by a medical professional to self-isolate. What are the options?

The workplace safety guideline appendices provide a guideline for discussing return to work with employees. An open conversation about the barrier to return to work is important. It may arise from daycare, public transit concerns, family issues or apprehension. It is recommended supervisors use a coaching approach to support employees in problem solving the situation.

See other answers in this guide to manage the situations that are identified. If you need assistance in managing issues related to self-imposed isolation, contact MyHR.

33. I have an employee coming back to work after recovering from an active COVID-19 infection. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least seven days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

34. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

35. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

36. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

37. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated December 29, 2021

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under five years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine? [NEW]

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age and the time since your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider. Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination? [UPDATED]

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Will vaccinations be mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

7. Once I get vaccinated or receive my booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

8. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

9. Do I need to do a workplace Daily Health Check? [UPDATED]

In their December 24,' 2021 briefing, Public Health recommends anyone who has even one symptom of COVID-19 should stay at home and follow testing guidance. All citizens of B.C. should be reviewing their health prior to leaving their residence and stay home if they feel unwell.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

10. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

11. What is the current direction on returning to the workplace and remote work?

The BC Public Service has deferred the implementation of telework agreements and a new date has not been set at this time. There will be update on telework agreement implementation on January 17, 2022 with more information.

Our workplaces remain safe and open for those who need to or choose to be there, and those who wish to continue working from home may continue to do so for the time being.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.

More information on the approach to flexible work arrangements is on MyHR.

12. I am hearing about COVID-19 Omicron cases here in B.C. Is there anything my workplace should do differently?

COVID-19 variants, including Omicron, spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Omicron variant, Public Health issued new orders on December 22, 2021. The orders do not affect our workplaces, except for gyms and change rooms (see question 24).

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. The COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees. These include appropriate mask use, symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. Workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across B.C. or provincial Health Officer orders. Information on updating Communicable Disease Prevention Plans is on the COVID-19 information for BC Public Service employees page.

Stay informed, review your Communicable Disease Prevention Plan, monitor the health bulletins for new information and check for information when your booster dose is available.

13. Can we hold in-person staff meetings in our workplace? [UPDATED]

Workplaces can hold staff meetings with the staff who are physically attending the workplace daily. All other participants, for example staff who are teleworking, guest speakers or staff from other worksites or ministries must attend virtually. The workplace must follow their communicable disease prevention plan for the meeting.

14. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

Due to the emergence of the Omicron variant, at this time BC Public Service workplaces should use virtual tools for meeting wherever possible and avoid gatherings. This will be reviewed by January 17, 2022, based on public health information.

15. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

In addition to the Provincial Health Officer Order on Face Coverings requiring masks in public indoor spaces for those 5 or older, as of December 29, 2021 the Public Service requires staff to use masks when two metres of physical distancing cannot be maintained from another person and there is not a physical barrier to prevent the transmission of COVID-19. This includes elevators, lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens, meeting rooms, file rooms, photocopier areas, Leading Workplace Strategy space and so on.

Staff do not have to wear a mask while seated at their workstation if they are two metres from others or they are separated by a barrier such as plexiglass or a cubicle divider.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

16. Do we have to review our communicable disease prevention plan because of the Provincial Health Officer's orders or the Omicron variant? [NEW]

Yes. Workplaces must use the communicable disease prevention plan update on MyHR to review and update their communicable disease prevention plan to increase protection measures during this time of high community transmission. Ensure staff are notified and trained in the new COVID-19 safety protocols for the workplace and post your updated communicable disease prevention plan.

The PSA continues to monitor changes and work with public health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

17. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

18. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

19. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

Employees may continue to work remotely until further notice in January 2022. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for

assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

20. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the Freedom of Information & Protection of Privacy Act (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

21. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

To align with the Public Health order to not permit adult exercise and fitness activities, including working out at gyms, the BC Public Service is closing employee gyms and indoor exercise spaces until January 18, 2022. Change rooms can remain open but must have COVID-19 prevention protocols in place. If your workplace has gyms or change rooms, review BC Public Service COVID-19 Workplace Measures - Gyms and Change Rooms to update your workplace's Communicable Disease Prevention Plan.

Part 3: Employee Exposure and Self-Isolation

Due to the emergence of the Omicron variant, Public Health may be unable to contact trace all COVID-19 positive cases. On December 24, 2021 Public Health directed that if you have any COVID-19-like symptoms you should assume you have COVID-19 and:

- **Self-isolate for 7 days if fully vaccinated, 10 days if not fully vaccinated**
- **Notify anyone you have been in close contact with indoors less than two metres apart while not wearing a mask for more than 15 minutes and inform them you are ill**

If you receive a call from someone informing you that you are a close contact:

- **If you are fully vaccinated monitor your heath for symptoms for 14 days**
  - **Do not attend the workplace if you have even 1 symptom**
  - **Use the BC Centre for Disease Control's self-assessment tool, call 811 or contact your primary care provider for advice**
- **Unvaccinated individuals must self-isolate for 10 days**

If a member of your household has COVID-19-like symptoms, consider yourself a close contact and take the measures above.

22. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public health contact tracers may not be able to complete all contact tracing due to rise of the Omicron variant. The unwell worker should contact anyone at the workplace that they had close contact with. This means people they were within two metres of for more than 15 minutes unmasked cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health for 14 days after they have close contact with a COVID positive or symptomatic individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

23. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes

cumulatively in a day while either party was unmasked

- Anyone who is exposed to the infectious body fluids of a case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before the started isolation
    - Anyone who lives with the case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the case, sleeping arrangement, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

24. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

25. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate?

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals who had their final vaccination more than seven days previous to the exposure do not have to self isolate because of a close contact.

The person should self monitor their health for 14 days and if they feel unwell use the BC Centre for Disease Control's self assessment tool, call 811 or contact their primary care provider for advice.

26. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

27. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces

remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

28. I have an employee coming back to work after recovering from an active COVID-19 infection or has been ill with COVID-19 like symptoms. That employee now feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of following criteria are met:

- At least seven days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

29. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

30. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

31. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

As of December 15, 2021 the Federal Government recommends avoiding non-essential travel outside Canada, regardless of vaccination status, and has posted an Omicron update.

As of October 30, 2021, all air and rail travellers in Canada must show proof of full vaccination. Fully vaccinated travellers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveller have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travellers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

32. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated January 4, 2022

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbia controlling COVID-19 in our communities and workplaces. Vaccination of the majority of British Columbians provides community protection from existing variants and reduces the risk of new variants. A high level of community protection also reduces the risk for youth under five years of age not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age and the time since your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions are on the ImmunizeBC website. Safety data now exists for millions of doses of the vaccine, which better informs health care providers. Anyone with concerns should discuss vaccination guidance with their care provider.

Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan to protect against COVID-19 transmission.

7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Effective June 9, 2021, Public Health post-exposure management allows for some vaccinated individuals to avoid self-isolation. Public Health is actively testing, conducting contact tracing and making recommendations to prevent any further spread of infection.

Part 2: Workplace Safety and Working from Home

8. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

9. Do I need to do a workplace Daily Health Check?

In their December 24, 2021 briefing, Public Health recommends anyone who has even one symptom of COVID-19 should stay at home and follow testing guidance. All citizens of B.C. should be reviewing their health prior to leaving their residence and stay home if they feel unwell.

Workplace Health and Safety recommends continuing workplace Daily Health Checks (DHC) as part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

10. Is it safe to return to the workplace?

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021 the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients. See question 17 for more information about mask use.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them. Daily Health Checks at the start of the workday reinforce this policy
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees can choose to wear a mask anytime and anywhere in a workplace
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

11. What is the current direction on returning to the workplace and remote work?

The BC Public Service has deferred the implementation of telework agreements and a new date has not been set at this time. There will be an update on telework agreement implementation on January 17, 2022 with more information.

Our workplaces remain safe and open for those who need to or choose to be there, and those who wish to continue working from home may continue to do so for the time being.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include handwashing, checking for symptoms before attending work and staying home when symptomatic.
More information on the approach to flexible work arrangements is on MyHR.

12. I am hearing about COVID-19 Omicron cases here in B.C. Is there anything my workplace should do differently?

COVID-19 variants, including Omicron, spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Omicron variant, Public Health issued new orders on December 22, 2021. The orders do not affect our workplaces, except for gyms and change rooms (see question 24).

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. The COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees. These include appropriate mask use, symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. Workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across B.C. or provincial Health Officer orders. Information on updating Communicable Disease Prevention Plans is on the COVID-19 information for BC Public Service employees page.

Stay informed, review your Communicable Disease Prevention Plan, monitor the health bulletins for new information and check for information when your booster dose is available.

13. Can we hold in-person staff meetings in our workplace?

Workplaces can hold staff meetings with the staff who are physically attending the workplace daily. All other participants, for example staff who are teleworking, guest speakers or staff from other worksites or ministries must attend virtually. The workplace must follow their communicable disease prevention plan for the meeting.

14. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Due to the emergence of the Omicron variant, at this time BC Public Service workplaces should use virtual tools for meeting wherever possible and avoid gatherings. This will be reviewed by January 17, 2022, based on public health information.

15. Are masks required in BC Public Service workplaces for clients or the public?

In addition to the Provincial Health Officer Order on Face Coverings requiring masks in public indoor spaces for those 5 or older, as of December 29, 2021 the Public Service requires staff to use masks when two metres of physical distancing cannot be maintained from another person and there is not a physical barrier to prevent the transmission of COVID-19. This includes elevators, lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens, meeting rooms, file rooms, photocopier areas, Leading Workplace Strategy space and so on.

Staff do not have to wear a mask while seated at their workstation if they are two metres from others or they are separated by a barrier such as plexiglass or a cubicle divider.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

16. Do we have to review our communicable disease prevention plan because of the Provincial Health Officer's Orders or the omicron variant?

Yes. Workplaces must use the communicable disease prevention plan update on MyHR to review and update their communicable disease prevention plan to increase protection measures during this time of high community transmission. Ensure staff are notified and trained in the new COVID-19 safety protocols for the workplace and post your updated communicable disease prevention plan.

The PSA continues to monitor changes and work with public health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

17. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

18. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

19. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this?

Employees may continue to work remotely until further notice in January 2022. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

20. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request.

Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

21. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

To align with the Public Health order to not permit adult exercise and fitness activities, including working out at gyms, the BC Public Service is closing employee gyms and indoor exercise spaces until January 18, 2022. Change rooms can remain open but must have COVID-19 prevention protocols in place. If your workplace has gyms or change rooms, review BC Public Service COVID-19 Workplace Measures - Gyms and Change Rooms to update your workplace's Communicable Disease Prevention Plan.

Part 3: Employee Exposure and Self-Isolation

[NEW]
Due to the emergence of the Omicron variant, Public Health may be unable to contact trace all COVID-19 positive cases. On December 24, 2021, Public Health directed that if you have any COVID-19-like symptoms you should assume you have COVID-19 and:

- Self-isolate for a minimum of five days if fully vaccinated, 10 days if not fully vaccinated
- Notify any workplace close contacts that you had in the 48 hours prior to your symptoms appearing; or if you are asymptomatic 48 hours prior to your test
    - Close contact means: indoor contact, less than two metres apart while not wearing a mask for more than 15 minutes cumulatively in a day
- After the self-isolation period (five days for fully vaccinated, 10 days if not), Public Health advises you to wear a mask in all situations, for a further five days.

If you receive a call from someone informing you that you are a close contact:

- If you are fully vaccinated monitor your health for symptoms for 14 days
    - Do not attend the workplace if you have even one symptom
    - Use the BC Centre for Disease Control's self-assessment tool, call 811 or contact your primary care provider for advice
- Unvaccinated individuals must self-isolate for 10 days

If a member of your household has COVID-19-like symptoms, consider yourself a close contact and take the measures above.

22. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers may not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker should contact anyone at the workplace that they had close contact with in the 48 hours prior to their symptoms appearing. This means people they were within two metres of for more than 15 minutes unmasked cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health for 14 days after they have close contact with a COVID-positive or symptomatic individual.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

23. What does "close contact" mean? [UPDATED]

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes, unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before they started isolation
    - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

24. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

25. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate?

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals who had their final vaccination more than seven days previous to the exposure do not have to self isolate because of a close contact.

The person should self monitor their health for 14 days and if they feel unwell use the BC Centre for Disease Control's self assessment tool, call 811 or contact their primary care provider for advice.

26. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

27. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and are now implementing Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and low levels of community transmission of the COVID-19 in many regions in B.C. Personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

With measures such as symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and vaccination rates continue to increase, BC Public Service workplaces remain safe. Employees have the option to wear mask if they choose to. Effective November 22, 2021, all employees are required to provide proof of full vaccination, providing a further level of safety in our workplaces.

If there are increased levels of risk locally, regionally, or within a workplace, the local Medical Health Officer or Provincial Health Officer will advise the employer on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

28. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. Public Health will provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved
- The person is able to wear a mask in the workplace as set out in the Communicable Disease Prevention Plan

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend 20 days of isolation based on the disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

29. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

30. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

31. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of December 15, 2021, the Federal Government recommends avoiding non-essential travel outside Canada, regardless of vaccination status, and has posted an Omicron update.

As of October 30, 2021, all air and rail travelers in Canada must show proof of full vaccination. Fully vaccinated travelers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after August 5, 2020 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travelers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

32. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated January 24, 2022

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination and booster as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbians for controlling COVID-19 in our communities and workplaces. The higher the vaccination rate, the stronger the community protection from existing variants and lowering the risk of new variants. High levels of community protection also reduce the risk for children under five years of age, as they are not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping to protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age and the timing of your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions on COVID vaccines are on the ImmunizeBC website. Safety data now exists for millions of doses of COVID vaccines, providing valuable clinical information for health care providers. Anyone with concerns should discuss vaccination guidance with their health care provider.

Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan and safety measures to protect against COVID-19 transmission.

7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Exposure and self-isolation information, including length of time before resuming work and other daily activities after experiencing COVID-19 or other illness symptoms, is addressed in Part 3 of these FAQs.

Part 2: Workplace Safety and Working from Home

8. My child's school or daycare is closed or has moved to online learning for a period of time. How do I manage this?

Where it is operationally feasible, ministries are expected to support employees who want to work from home and should be flexible in considering alternative work arrangements, including requests to work from home and look after children. Where an employee working from home is also the primary childcare provider, supervisors will work to explore options to accommodate an employee's needs while maintaining operational requirements to the extent possible.

Where an employee is sick or taking any form of leave, they are expected to access their leave banks as per usual. No employee is required to work from home except those required to self-isolate.

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check? [UPDATED]

Mandatory daily health checks for employees with their supervisors (or designates) have been reinstated as of January 17, 2022 for staff attending the workplace or completing field work. In the December 24, 2021 briefing, Public Health recommended that anyone who has even one symptom of COVID-19 should stay at home and follow testing guidance.

DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer's obligation to minimize communicable disease transmission in the workplace.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22, 2021 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of transmission of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021, the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them
- Mandatory Daily Health Checks for all employees with their supervisors (or designates) at the start of the workday reinforce the direction to stay home if experiencing illness symptoms
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees must wear a mask in all indoor areas of their workplace, except when seated at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

As announced Lori Wanamaker's January update, the BC Public Service has deferred the implementation of telework agreements and a new date has not been set at this time.

Our workplaces remain safe and open for those who need to or choose to be there, and those who wish to continue working from home may continue to do so for the time being.

BC Public Service workplaces are maintaining physical barriers as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring occupancy limits and masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Daily health checks for all employees with their supervisors are also mandatory if attending a public service workplace. Other safety protocols continue to be in effect including physical distancing, barriers, handwashing and workplace cleaning.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 Omicron cases here in B.C. Is there anything my workplace should do differently?

COVID-19 variants, including Omicron, spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Omicron variant, Public Health issued new orders in late December 2021 and early January 2022.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. The COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees. These include appropriate mask use, symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. Workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across B.C. or Provincial Health Officer orders. Information on updating Communicable Disease Prevention Plans is on the COVID-19 information for BC Public Service employees page.

Stay informed, review your Communicable Disease Prevention Plan, monitor the health bulletins for new information and check for information when your booster dose is available.

14. Can we hold in-person staff meetings in our workplace?

While in-person meetings are discouraged, workplaces may hold staff meetings with the staff who are physically attending the workplace daily. All other participants, for example staff who are teleworking, guest speakers or staff from other worksites or ministries must attend virtually. The workplace must follow their communicable disease prevention plan for the meeting, including mask wearing for all participants, even with reduced meeting room capacity and distancing between participants.

15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Due to the emergence of the Omicron variant, at this time BC Public Service workplaces should use virtual tools for meeting wherever possible and avoid gatherings. This will be reviewed and updated when new public health information is available.

16. Are masks required in BC Public Service workplaces for clients or the public?

Employees must wear a mask in all indoor areas of their workplace, except when at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation. Public service staff are also required to use masks when two metres of physical distancing cannot be maintained from another person and there is not a physical barrier to prevent the transmission of COVID-19. This includes elevators, lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens, meeting rooms, file rooms, photocopier areas, Leading Workplace Strategy space and so on.

Staff do not have to wear a mask while seated at their workstation if they are two metres from others or they are separated by a barrier such as plexiglass or a cubicle divider.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

17. Do we have to review our communicable disease prevention plan because of the Provincial Health Officer's Orders or the omicron variant?

Yes. Workplaces must use the communicable disease prevention plan update on MyHR to review and update their communicable disease prevention plan to increase protection measures during this time of high community transmission. Ensure staff are notified and trained in the new COVID-19 safety protocols for the workplace and post your updated communicable disease prevention plan.

The PSA continues to monitor changes and work with public health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.

18. Is it likely that building ventilation systems are a route of transmissionfor COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

19. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

20. I supervise an employee who has indicated they cannot or don't want to return to the workplace. How do I address this? [UPDATED]

Employees are encouraged to work from home, if operationally feasible, until further notice. More information on flexible work options is available on MyHR.

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee's situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee's concerns, the supervisor should contact MyHR for assistance. For further information see the Managers' Guide to Reasonable Accommodation.

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee's individual circumstances.

21. Managing employees' workplace needs can involve collecting medical information. How is this protected?

In responding to an employee's request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee's healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request. Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors' notes or the supervisor's (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee's workplace supervisory file (as per section 30 of the *Freedom of Information & Protection of Privacy Act* (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee's pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

22. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces?

Gyms and exercise areas may reopen on January 20, 2022 with increased protocols in place including occupancy limits and a detailed hygiene plan. Gym use must be monitored by the worksite for adherence to the hygiene plan and occupancy limits. If this cannot be done the gym cannot be reopened.

See the COVID-19 Tools and Resource page for current COVID-19 gym protocols.

Part 3: Employee Exposure and Self-Isolation

[UPDATED]
Due to the emergence of the Omicron variant, Public Health will be unable to contact trace all COVID-19 positive cases. Public Health has directed that if you have any COVID-19-like symptoms you should presume it could be COVID-19 and:

- Stay at home! As with any illness symptoms, stay at home and do not attend an indoor public service workplace.
- Every day that you are experiencing symptoms, use the BC Thrive app (COVID-19 self-assessment tool) to gauge if your symptoms suggest a COVID-19 test is warranted.
    - If the result from the BC Thrive app is that you don't need to get tested for COVID-19, stay at home until your symptoms resolve and return to work and other daily activities when you feel better
    - If the result from the BC Thrive app is a recommendation to get a COVID-19 test and self-isolate, assume you have COVID-19 and do the following:
        - Self-isolate for at least five days from the day your symptoms started if you are fully vaccinated, or at least 10 days if not fully vaccinated
        - Notify workplace close contacts (as defined below) that you had in the 48 hours prior to your symptoms appearing; or if you are asymptomatic 48 hours prior to your test
            - Close contact means: indoor contact, less than two metres apart while not wearing a mask, and without a barrier, for more than 15 minutes cumulatively in a day
        - Continue to monitor your symptoms and if they worsen engage with the health system and seek care
- After the self-isolation period (five days from symptom onset for fully vaccinated, 10 days if not), Public Health advises you to wear a mask in all situations, even in settings where a mask may not be required, for a further five days after ending isolation.

If a member of your household has COVID-19-like symptoms, or you are contacted by someone informing you that you are a close contact:

- If you are fully vaccinated continue to monitor your health daily for symptoms
    - If you are symptom-free, you may attend the workplace and go about your daily activities
    - If you have even one illness symptom, you must not attend the workplace
    - If you begin to experience symptoms while at work, inform your supervisor and leave the workplace immediately
    - Use the BC Thrive app (COVID-19 self-assessment tool), call 811 or contact your primary care provider for advice
- Those who are not yet fully vaccinated, must self-isolate for 10 days

23. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers will not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker should contact anyone at the workplace that they had close contact with in the 48 hours prior to their symptoms appearing. A close contact is a person that the ill/symptomatic worker was within two metres of for more than 15 minutes unmasked, cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health daily for symptoms. If symptom-free, staff may attend the workplace. If staff have even one illness symptom, they must not attend the workplace.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

24. What does "close contact" mean? [UPDATED]

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self-isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes, unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before they started isolation
    - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

With the policies and protocols in your Communicable Disease Prevention Plans, close contacts should not occur in your workplace. If workplace close contacts are identified, supervisors should investigate to ensure all COVID-19 safety measures are being followed appropriately or if additional or modifications to protocols are required.

25. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

26. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate? [UPDATED]

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals do not have to self-isolate because of a close contact.

Fully vaccinated means you received both doses of a two-dose series (e.g. AstraZeneca, PfizerBioNTech, or Moderna vaccine) more than seven days ago, or have received a single dose of a one-dose series (e.g. Janssen/Johnson and Johnson) more than 14 days ago.

Fully vaccinated individuals are not required to self-isolate, and can continue to participate in routine activities, including work, if they do not have any symptoms.

Employees must monitor their health daily for symptoms and use the Daily Health Check with their supervisor if they are attending the workplace. If they experience symptoms or feel unwell they should stay home, use the BC Thrive app (self assessment tool), call 811 or contact their primary care provider for advice.

27. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

28. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do? [UPDATED]

Workplaces have been following COVID-19 Safety Plans and have implemented Communicable Disease Prevention Plans following WorkSafeBC and BC Centre for Disease Control guidance. There are high levels of vaccination in British Columbia and personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

Effective November 22, 2021, all employees were required to provide proof of full vaccination, providing a high level of safety in our workplaces. With other measures including symptomatic employees staying home when sick, mask wearing in common areas, occupancy limits in meeting rooms, lunch rooms and common areas, hand washing, routine cleaning of surfaces and public vaccination rates continuing to increase, BC Public Service workplaces remain safe. Employees have the option to always wear a mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local and regional Medical Health Officers or the Provincial Health Officer will advise employers on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

29. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. If the employee is a confirmed case of COVID-19, Public Health may provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

- The person can wear a mask in the workplace as set out in the Communicable Disease Prevention Plan

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend additional days of isolation based on disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

30. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

31. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

32. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of December 15, 2021, the Federal Government recommends avoiding non-essential travel outside Canada, regardless of vaccination status, and has posted an Omicron update.

As of October 30, 2021, all air and rail travelers in Canada must show proof of full vaccination. Fully vaccinated travelers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after December 15, 2021 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travelers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

33. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated March 3, 2022

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination and booster as soon as can be scheduled to control transmission of COVID-19.

The BC Public Service requires all employees to provide proof of vaccination against COVID-19. More information on proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbians for controlling COVID-19 in our communities and workplaces. The higher the vaccination rate, the stronger the community protection from existing variants and lowering the risk of new variants. High levels of community protection also reduce the risk for children under five years of age, as they are not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping to protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age, and the timing of your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions on COVID vaccines are on the ImmunizeBC website. Safety data now exists for millions of doses of COVID vaccines, providing valuable clinical information for health care providers. Anyone with concerns should discuss vaccination guidance with their health care provider.

Individuals with allergies to components of the vaccine are encouraged to speak with an allergist

for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination against COVID-19, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan and safety measures to protect against COVID-19 transmission.

7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Exposure and self-isolation information, including length of time before resuming work and other daily activities after experiencing COVID-19 or other illness symptoms, is addressed in Part 3 of these FAQs.

Part 2: Workplace Safety and Working from Home

8. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

9. Do I need to do a workplace Daily Health Check? [UPDATED]

Mandatory daily health checks for employees with their supervisors (or designates) were reinstated as of January 17, 2022 for staff attending the workplace or completing field work. In the December 24, 2021, Public Health briefing, it was recommended that anyone who has even one symptom of COVID-19 should stay at home and follow public health guidance.

DHCs are a simple and effective means for employees to assess their health daily and be reminded of their obligation to stay home if sick. DHCs also contribute to the employer's obligation to minimize communicable disease transmission in the workplace.

10. Is it safe to return to the workplace? [UPDATED]

BC Public Service workplaces have been safe throughout the pandemic as public health and WorkSafeBC guidelines have been promptly adopted and implemented. The Public Service Agency actively reviews public health and safety updates and provides ministry leaders and supervisors updated guidance as required.

The Provincial Health Officer issued a new Workplace Safety order on February 16, 2021. The protocols and practices contained in public service workplace Communicable Disease Prevention Plans (or exposure control plans where required) meet and exceed the requirements set out in the order. Safe work practices and making health and safety management a priority keep the COVID-19 risk low in BC public service workplaces.

There are several "layers of protection" in our workplaces. The first and most important is the requirement for all employees to be fully vaccinated against COVID-19 illness. This requirement was effective November 22, 2021. The layers of protection in the workplace include:

- Mandatory Daily Health Checks for all employees with their supervisors (or designates) at the start of the workday reinforce the direction to stay home if experiencing illness symptoms
- Symptomatic employees are not to attend the workplace and leave immediately if they

begin to feel unwell. Employees have benefit plans to support them

- Employees must wear a mask in all indoor areas of their workplace, except when seated at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Regular reporting and guidance updates from Public Health continue to shape the BC Public Service Communicable Disease Prevention Plans
- Mandatory vaccination policies for all public service staff (See HR Policy 25) and contractors and others who enter employee-only areas of public service indoor workplaces (See HR Policy 4)

11. What is the current direction on returning to the workplace and remote work? [UPDATED]

The Workplace Safety order issued February 16, 2022, by the Provincial Health Officer removed the prior requirement for workers to work from home to reduce disease transmission. The preventive measures required by the order, reflected in the "layers of protection" noted in FAQ#11, are in place to ensure health and safety for staff in public service workplaces.

Given this change, telework agreements have begun to be implemented as of March 1. Your ministry should have information on how the implementation process rolls out within your workplace. All ministries are working to have all telework agreements fully implemented by April 4. Workplace Communicable Disease Prevention Plans are continually being updated to reflect public health and WorkSafeBC guidance and direction.

More information on the approach to flexible work arrangements is on MyHR.

12. Can we hold in-person staff meetings in our workplace? [UPDATED]

Workplaces may hold staff meeting (including bringing staff from other work locations) and must follow their communicable disease prevention plan for the meeting including mask wearing for all participants and reduced meeting room capacity to allow for distancing between participants.

13. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

The Provincial Health Officer removed the limitations on the number of people who can attend a gathering or event as long as participants are fully vaccinated. Mask use is mandatory and there there must be an event specific COVID-19 Safety plan in place. If you require assistance with creating a COVID-19 safety plan for an event, please contact Workplace Health and Safety using MyHR

Note: Some rental venues may have additional protocols in place that need to be followed to use their facilities.

14. Are masks required in BC Public Service workplaces for clients or the public?

Employees must wear a mask in all indoor areas of their workplace, except when at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation. Public service staff are also required to use masks when two metres of physical distancing cannot be maintained from another person and there is not a physical barrier to prevent the transmission of COVID-19. This includes elevators, lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens, meeting rooms, file rooms, photocopier areas, Leading Workplace Strategy space and so on.

Staff do not have to wear a mask while seated at their workstation if they are two metres from others or they are separated by a barrier such as plexiglass or a cubicle divider.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry's procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

15. When do we have to review and update our Communicable Disease Prevention Plan? [UPDATED]

Workplace Communicable Disease Prevention Plans must be kept up to date to reflect the latest guidance and direction from public health and WorkSafeBC. PSA Workplace Health and Safety continually monitors for any changes that affect workplaces. Information on any changes is posted on the COVID-19 Information for BC Public Service Employees page.

If and when changes and updates are made, ensure that staff are notified and trained in any new health and safety protocols for your workplace and post your updated Communicable Disease Prevention Plan.

16. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information

becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

17. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or

exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

18. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

As of March 1, 2022 employee gyms may remove occupancy limits but must continue with increased protocols including mask wearing and must have a detailed hygiene plan. Gym use must be monitored by the worksite for adherence to the hygiene plan.

See the COVID-19 Tools and Resource page for current COVID-19 gym protocols.

Part 3: Employee Exposure and Self-Isolation

Public Health is not contact tracing all COVID-19 positive cases. Public Health has directed that if you have any COVID-19-like symptomsyou should presume it could be COVID-19 and:

- Stay at home! As with any illness symptoms, stay at home and do not attend an indoor public service workplace.
- Every day that you are experiencing symptoms, use the BC Thrive app (COVID-19 self-assessment tool) to gauge if your symptoms suggest a COVID-19 test is warranted.
    - If the result from the BC Thrive app is that you don't need to get tested for COVID-19, stay at home until your symptoms resolve and return to work and other daily activities when you feel better
    - If the result from the BC Thrive app is a recommendation to get a COVID-19 test and self-isolate, assume you have COVID-19 and do the following:
        - Self-isolate for at least five days from the day your symptoms started if you are fully vaccinated, or at least 10 days if not fully vaccinated
        - Notify workplace close contacts (as defined below) that you had in the 48 hours prior to your symptoms appearing; or if you are asymptomatic 48 hours prior to your test
            - Close contact means: indoor contact, less than two metres apart while not wearing a mask, and without a barrier, for more than 15 minutes cumulatively in a day
        - Continue to monitor your symptoms and if they worsen engage with the health system and seek care
- After the self-isolation period (five days from symptom onset for fully vaccinated, 10 days if not), Public Health advises you to wear a mask in all situations, even in settings where a mask may not be required, for a further five days after ending isolation.

If a member of your household has COVID-19-like symptoms, or you are contacted by someone informing you that you are a close contact:

- Monitor your health daily for symptoms
    - If you are symptom-free, you may attend the workplace and go about your daily activities
    - If you have even one illness symptom, you must not attend the workplace
    - If you begin to experience symptoms while at work, inform your supervisor and leave the workplace immediately
    - Use the BC Thrive app (COVID-19 self-assessment tool), call 811 or contact your primary care provider for advice
- Those who are not yet fully vaccinated, must self-isolate for 10 days

19. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. Public Health no longer requires close contacts to self isolate, only to monitor their health.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes,

unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before they started isolation
    - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

20. When do I need to ask an employee for an STO2 form or doctor's note? [UPDATED]

In the circumstance of COVID-19 related absences, an STO2 form or certificate is often not required for sick pay (STIIP). Discussion between employee and supervisor can often resolve questions about prognosis. Supervisors and staff are reminded that 'close contacts' do not have to self isolate, they have to monitor their health and can attend work (see question 24). When an employee uses STIIP they are stating that they are unable to work in any capacity. Supervisors should work with staff to determine if they can complete modified duties.

Supervisors should use normal absence management practices to determine when to request an STO2 based on the situation, for example:

- where the employee has been absent for six consecutive scheduled days of work;
- on the third (or more) separate absence occurring in a six-month period which may indicate a pattern of concern;
- where at least 30 days have elapsed since the last statement was obtained and the employee has been in receipt of plan benefits throughout that period and there is a reason to believe the employee's prognosis has changed

An STO2 may be required for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work, including for COVID related illness.

The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

21. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers will not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker should contact anyone at the workplace that they had close contact with in the 48 hours prior to their symptoms appearing. A close contact is a person that the ill/symptomatic worker was within two metres of for more than 15 minutes unmasked, cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health daily for symptoms. If symptom-free, staff may attend the workplace. If staff have even one illness symptom, they must not attend the workplace.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

22. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate?

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals do not have to self-isolate because of a close contact.

Fully vaccinated means you received both doses of a two-dose series (e.g. AstraZeneca, PfizerBioNTech, or Moderna vaccine) more than seven days ago, or have received a single dose of a one-dose series (e.g. Janssen/Johnson and Johnson) more than 14 days ago.

Fully vaccinated individuals are not required to self-isolate, and can continue to participate in routine activities, including work, if they do not have any symptoms.

Employees must monitor their health daily for symptoms and use the Daily Health Check with their supervisor if they are attending the workplace. If they experience symptoms or feel unwell they should stay home, use the BC Thrive app (self assessment tool), call 811 or contact their primary care provider for advice.

23. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

24. I am nervous about coming to work and being exposedto COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and have implemented Communicable Disease Prevention Plans following WorkSafeBC and BC Centre for Disease Control guidance. There are high levels of vaccination in British Columbia and personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

Effective November 22, 2021, all employees were required to provide proof of full vaccination, providing a high level of safety in our workplaces. With other measures including symptomatic employees staying home when sick, mask wearing in common areas, occupancy limits in meeting rooms, lunch rooms and common areas, hand washing, routine cleaning of surfaces and public vaccination rates continuing to increase, BC Public Service workplaces remain safe. Employees have the option to always wear a mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local and regional Medical Health Officers or the Provincial Health Officer will advise employers on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

25. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do?

An ST02 or doctors note is not required. If the employee is a confirmed case of COVID-19, Public Health may provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved
- The person can wear a mask in the workplace as set out in the Communicable Disease Prevention Plan

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend additional days of isolation based on disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

26. I supervise an auxiliary employee who was required to self-isolate. Are they eligible

for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

27. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

28. An employee is questioning international travel restrictions and compliance expectations. How do I advise them? [UPDATED]

Employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

Currently travelers entering Canada must have a 14-day quarantine plan for their return in casethey do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada. Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met.

Employees who choose to travel internationally unrelated to work after December 15, 2021 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

29. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and

cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated March 15, 2022

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination and booster as soon as can be scheduled to control transmission of COVID-19.

The BC Public Service requires all employees to provide proof of vaccination against COVID-19. More information on proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbians for controlling COVID-19 in our communities and workplaces. The higher the vaccination rate, the stronger the community protection from existing variants and lowering the risk of new variants. High levels of community protection also reduce the risk for children under five years of age, as they are not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping to protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age, and the timing of your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions on COVID vaccines are on the ImmunizeBC website. Safety data now exists for millions of doses of COVID vaccines, providing valuable clinical information for health care providers. Anyone with concerns should discuss vaccination guidance with their health care provider.

Individuals with allergies to components of the vaccine are encouraged to speak with an allergist

for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination against COVID-19, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan and safety measures to protect against COVID-19 transmission.

7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Exposure and self-isolation information, including length of time before resuming work and other daily activities after experiencing COVID-19 or other illness symptoms, is addressed in Part 3 of these FAQs.

Part 2: Workplace Safety and Working from Home

8. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

9. Do I need to do a workplace Daily Health Check? [UPDATED]

To meet the intent of the revised PHO order for workplaces, any staff attending the workplace must complete the Daily Health Check. The DHC will be reviewed when the PHO rescinds the workplace safety order.

DHCs are a simple and effective means for employees to assess their health daily and be reminded of their obligation to stay home if sick. DHCs also contribute to the employer's obligation to minimize communicable disease transmission in the workplace.

10. Is it safe to return to the workplace? [UPDATED]

BC Public Service workplaces have been safe throughout the pandemic as public health and WorkSafeBC guidelines have been promptly adopted and implemented. The Public Service Agency actively reviews public health and safety updates and provides ministry leaders and supervisors updated guidance as required.

The Provincial Health Officer issued a Workplace Safety order in February 2022. The protocols and practices contained in public service workplace Communicable Disease Prevention Plans (or exposure control plans where required) meet and exceed the requirements set out in the order. Safe work practices and making health and safety management a priority keep the COVID-19 risk low in BC public service workplaces.

There are several "layers of protection" in our workplaces. The first and most important is the requirement for all employees to be fully vaccinated against COVID-19 illness. This requirement was effective November 22, 2021. The layers of protection in the workplace include:

- Mandatory Daily Health Checks for all employees with their supervisors (or designates) at the start of the workday reinforce the direction to stay home if experiencing illness symptoms
- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them

- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation
- Mask wearing is required for staff when interacting with clients where physical distancing cannot be maintained and there is no physical barrier between staff and client. Staff providing client service field work must wear a mask when indoors and distancing or a barrier is not in place, for example when attending a client's residence.
- Regular reporting and guidance updates from Public Health continue to shape the BC Public Service Communicable Disease Prevention Plans
- Mandatory vaccination policies for all public service staff (See HR Policy 25) and contractors and others who enter employee-only areas of public service indoor workplaces (See HR Policy 4)

11. What is the current direction on returning to the workplace and remote work? [UPDATED]

The Workplace Safety order issued by the PHO in February 2022 removed the prior requirement for workers to work from home to reduce disease transmission. The preventive measures required by the order, reflected in the "layers of protection" noted in FAQ#10, are in place to ensure health and safety for staff in public service workplaces.

Given this change, implementation of telework agreements began as of March 1. Your ministry should have information on how the implementation process rolls out within your workplace. All ministries are working to have all telework agreements fully implemented by April 4. Workplace Communicable Disease Prevention Plans are continually being updated to reflect public health and WorkSafeBC guidance and direction.

More information on the approach to flexible work arrangements is on MyHR.

12. Can we hold in-person staff meetings in our workplace? [UPDATED]

Workplaces may hold staff meetings (including bringing staff from other work locations) and must follow their communicable disease prevention plan for the meeting. The PHO workplace order requires employers to "prevent workers from crowding together of congregating in indoor common areas." All meeting organizers and attendees must work together to ensure there is no crowding and congregating during meetings. Masks are not required for staff only meetings, but are required when meeting with clients if there is no barrier between the client and staff.

13. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

The Provincial Health Officer removed the limitations on the number of people who can attend a gathering or event if participants are fully vaccinated. The event must have a specific COVID-19 Safety plan in place. If you require assistance with creating a COVID-19 safety plan for an event, please contact Workplace Health and Safety using MyHR

Note: Rental venues may have additional protocols in place that need to be followed to use their facilities.

14. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation.

Mask wearing is required for staff when interacting with clients where physical distancing cannot be maintained and there is no physical barrier between staff and client. Staff providing client service field work must wear a mask when indoors and distancing or a barrier is not in place, for example when attending a client's residence.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals, both providing protection for workers when serving clients.

15. When do we have to review and update our Communicable Disease Prevention Plan? [UPDATED]

Workplace Communicable Disease Prevention Plans must be kept up to date to reflect the latest guidance and direction from public health and WorkSafeBC. PSA Workplace Health and Safety continually monitors for any changes that affect workplaces. Information on any changes is posted on the COVID-19 Information for BC Public Service Employees page.

When any changes and updates are made, ensure that staff are notified and trained in any new health and safety protocols for your workplace and post your updated Communicable Disease Prevention Plan.

16. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

17. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate

any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

18. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

As of March 1, 2022 employee gyms may remove occupancy limits but must have a detailed hygiene plan. Gym use must be monitored by the worksite for adherence to the hygiene plan.

See the COVID-19 Tools and Resource page for current COVID-19 gym protocols.

Part 3: Employee Exposure and Self-Isolation

Public Health is not contact tracing all COVID-19 positive cases. Public Health has directed that if you have any COVID-19-like symptoms you should presume it could be COVID-19 and:

- Stay at home! As with any illness symptoms, stay at home and do not attend an indoor public service workplace.
- Every day that you are experiencing symptoms, use the BC Thrive app (COVID-19 self-assessment tool) to gauge if your symptoms suggest a COVID-19 test is warranted.
    - If the result from the BC Thrive app is that you don't need to get tested for COVID-19, stay at home until your symptoms resolve and return to work and other daily activities when you feel better
    - If the result from the BC Thrive app is a recommendation to get a COVID-19 test and self-isolate, assume you have COVID-19 and do the following:
        - Self-isolate for at least five days from the day your symptoms started if you are fully vaccinated, or at least 10 days if not fully vaccinated
        - Notify workplace close contacts (as defined below) that you had in the 48 hours prior to your symptoms appearing; or if you are asymptomatic 48 hours prior to your test
            - Close contact means: indoor contact, less than two metres apart while not wearing a mask, and without a barrier, for more than 15 minutes cumulatively in a day
        - Continue to monitor your symptoms and if they worsen engage with the health system and seek care
- After the self-isolation period (five days from symptom onset for fully vaccinated, 10 days if not), Public Health advises you to wear a mask in all situations, even in settings where a mask may not be required, for a further five days after ending isolation.

If a member of your household has COVID-19-like symptoms, or you are contacted by someone informing you that you are a close contact:

- Monitor your health daily for symptoms
    - If you are symptom-free, you may attend the workplace and go about your daily activities
    - If you have even one illness symptom, you must not attend the workplace
    - If you begin to experience symptoms while at work, inform your supervisor and leave the workplace immediately
    - Use the BC Thrive app (COVID-19 self-assessment tool), call 811 or contact your primary care provider for advice
- Those who are not yet fully vaccinated, must self-isolate for 10 days

19. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. Public Health no longer requires close contacts to self isolate, only to monitor their health.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes,

unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before they started isolation
    - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
    - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
    - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

20. When do I need to ask an employee for an STO2 form or doctor's note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is often not required for sick pay (STIIP). Discussion between employee and supervisor can often resolve questions about prognosis. Supervisors and staff are reminded that 'close contacts' do not have to self isolate, they have to monitor their health and can attend work (see question 24). When an employee uses STIIP they are stating that they are unable to work in any capacity. Supervisors should work with staff to determine if they can complete modified duties.

Supervisors should use normal absence management practices to determine when to request an STO2 based on the situation, for example:

- where the employee has been absent for six consecutive scheduled days of work;
- on the third (or more) separate absence occurring in a six-month period which may indicate a pattern of concern;
- where at least 30 days have elapsed since the last statement was obtained and the employee has been in receipt of plan benefits throughout that period and there is a reason to believe the employee's prognosis has changed

An STO2 may be required for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work, including for COVID related illness.

The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

21. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers will not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker should contact anyone at the workplace that they had close contact with in the 48 hours prior to their symptoms appearing. A close contact is a person that the ill/symptomatic worker was within two metres of for more than 15 minutes unmasked, cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health daily for symptoms. If symptom-free, staff may attend the workplace. If staff have even one illness symptom, they must not attend the workplace.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

22. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate?

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals do not have to self-isolate because of a close contact.

Fully vaccinated means you received both doses of a two-dose series (e.g. AstraZeneca, PfizerBioNTech, or Moderna vaccine) more than seven days ago, or have received a single dose of a one-dose series (e.g. Janssen/Johnson and Johnson) more than 14 days ago.

Fully vaccinated individuals are not required to self-isolate, and can continue to participate in routine activities, including work, if they do not have any symptoms.

Employees must monitor their health daily for symptoms and use the Daily Health Check with their supervisor if they are attending the workplace. If they experience symptoms or feel unwell they should stay home, use the BC Thrive app (self assessment tool), call 811 or contact their primary care provider for advice.

23. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

24. I am nervous about coming to work and being exposed to COVID-19. What can I

do?

Workplaces have been following COVID-19 Safety Plans and have implemented Communicable Disease Prevention Plans following WorkSafeBC and BC Centre for Disease Control guidance. There are high levels of vaccination in British Columbia and personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

Effective November 22, 2021, all employees were required to provide proof of full vaccination, providing a high level of safety in our workplaces. With other measures including symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and public vaccination rates continuing to increase, BC Public Service workplaces remain safe. Employees have the option to always wear a mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local and regional Medical Health Officers or the Provincial Health Officer will advise employers on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

25. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. If the employee is a confirmed case of COVID-19, Public Health may provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved
- The person wears a mask in all situations until 10 days have passed since the onset of symptoms

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend additional days of isolation based on disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

26. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

27. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

28. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

Employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

Currently travelers entering Canada must have a 14-day quarantine plan for their return in casethey do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada. Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met.

Employees who choose to travel internationally unrelated to work after December 15, 2021 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

29. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and

cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.

BRITISH COLUMBIA BC Public Service | Where ideas work

BC PUBLIC SERVICE COVID-19 RESPONSE FAQs

Updated March 22, 2022

WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control's self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service's response to COVID-19 (including this document) is available on the MyHR website.

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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination and booster as soon as can be scheduled to control transmission of COVID-19.

The BC Public Service requires all employees to provide proof of vaccination against COVID-19. More information on proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbians for controlling COVID-19 in our communities and workplaces. The higher the vaccination rate, the stronger the community protection from existing variants and lowering the risk of new variants. High levels of community protection also reduce the risk for children under five years of age, as they are not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping to protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age, and the timing of your second dose.

More information on booster vaccines can is on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions on COVID vaccines are on the ImmunizeBC website. Safety data now exists for millions of doses of COVID vaccines, providing valuable clinical information for health care providers. Anyone with concerns should discuss vaccination guidance with their health care provider.

Individuals with allergies to components of the vaccine are encouraged to speak with an allergist

for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee's assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination against COVID-19, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan and safety measures to protect against COVID-19 transmission.

7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders?

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Exposure and self-isolation information, including length of time before resuming work and other daily activities after experiencing COVID-19 or other illness symptoms, is addressed in Part 3 of these FAQs.

Part 2: Workplace Safety and Working from Home

8. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region's Medical Health Officer and document them in their Communicable Disease Prevention Plans.

9. Do I need to do a workplace Daily Health Check? [UPDATED]

To meet the intent of the revised PHO order for workplaces, any staff attending the workplace must complete the Daily Health Check. The DHC will be reviewed when the PHO rescinds the workplace safety order.

DHCs are a simple and effective means for employees to assess their health daily and be reminded of their obligation to stay home if sick. DHCs also contribute to the employer's obligation to minimize communicable disease transmission in the workplace.

10. Is it safe to return to the workplace? [UPDATED]

BC Public Service workplaces have been safe throughout the pandemic as public health and WorkSafeBC guidelines have been promptly adopted and implemented. The Public Service Agency actively reviews public health and safety updates and provides ministry leaders and supervisors updated guidance as required.

The Provincial Health Officer issued a Workplace Safety order in February 2022. The protocols and practices contained in public service workplace Communicable Disease Prevention Plans (or exposure control plans where required) meet and exceed the requirements set out in the order. Safe work practices and making health and safety management a priority keep the COVID-19 risk low in BC public service workplaces.

There are several "layers of protection" in our workplaces. The first and most important is the requirement for all employees to be fully vaccinated against COVID-19 illness. This requirement was effective November 22, 2021. The layers of protection in the workplace include:

- Mandatory Daily Health Checks for all employees with their supervisors (or designates) at the start of the workday reinforce the direction to stay home if experiencing illness symptoms
- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them

- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation
- Mask wearing is required for staff when interacting with clients where physical distancing cannot be maintained and there is no physical barrier between staff and client. Staff providing client service field work must wear a mask when indoors and distancing or a barrier is not in place, for example when attending a client's residence.
- Regular reporting and guidance updates from Public Health continue to shape the BC Public Service Communicable Disease Prevention Plans
- Mandatory vaccination policies for all public service staff (See HR Policy 25) and contractors and others who enter employee-only areas of public service indoor workplaces (See HR Policy 4)

11. What is the current direction on returning to the workplace and remote work? [UPDATED]

The Workplace Safety order issued by the PHO in February 2022 removed the prior requirement for workers to work from home to reduce disease transmission. The preventive measures required by the order, reflected in the "layers of protection" noted in FAQ#10, are in place to ensure health and safety for staff in public service workplaces.

Given this change, implementation of telework agreements began as of March 1. Your ministry should have information on how the implementation process rolls out within your workplace. All ministries are working to have all telework agreements fully implemented by April 4. Workplace Communicable Disease Prevention Plans are continually being updated to reflect public health and WorkSafeBC guidance and direction.

More information on the approach to flexible work arrangements is on MyHR.

12. Can we hold in-person staff meetings in our workplace? [UPDATED]

Workplaces may hold staff meetings (including bringing staff from other work locations) and must follow their communicable disease prevention plan for the meeting. The PHO workplace order requires employers to "prevent workers from crowding together of congregating in indoor common areas." All meeting organizers and attendees must work together to ensure there is no crowding and congregating during meetings. Masks are not required for staff only meetings, but are required when meeting with clients if there is no barrier between the client and staff.

13. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination? [UPDATED]

The Provincial Health Officer removed the limitations on the number of people who can attend a gathering or event if participants are fully vaccinated. The event must have a specific COVID-19 Safety plan in place. If you require assistance with creating a COVID-19 safety plan for an event, please contact Workplace Health and Safety using MyHR

Note: Rental venues may have additional protocols in place that need to be followed to use their facilities.

14. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation.

Mask wearing is required for staff when interacting with clients where physical distancing cannot be maintained and there is no physical barrier between staff and client. Staff providing client service field work must wear a mask when indoors and distancing or a barrier is not in place, for example when attending a client's residence.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals, both providing protection for workers when serving clients.

15. When do we have to review and update our Communicable Disease Prevention Plan? [UPDATED]

Workplace Communicable Disease Prevention Plans must be kept up to date to reflect the latest guidance and direction from public health and WorkSafeBC. PSA Workplace Health and Safety continually monitors for any changes that affect workplaces. Information on any changes is posted on the COVID-19 Information for BC Public Service Employees page.

When any changes and updates are made, ensure that staff are notified and trained in any new health and safety protocols for your workplace and post your updated Communicable Disease Prevention Plan.

16. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

> "COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.
>
> Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.
>
> Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens' Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of AHSRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

17. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, "Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer."

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.

Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate

any possible risk of aerosol transmission.

BCCDC says "smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission."

For indoor spaces, measures for reducing transmission risk focus on reducing the "three Cs" (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

18. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

As of March 1, 2022 employee gyms may remove occupancy limits but must have a detailed hygiene plan. Gym use must be monitored by the worksite for adherence to the hygiene plan.

See the COVID-19 Tools and Resource page for current COVID-19 gym protocols.

Part 3: Employee Exposure and Self-Isolation

Public Health is not contact tracing all COVID-19 positive cases. Public Health has directed that if you have any COVID-19-like symptoms you should presume it could be COVID-19 and:

- Stay at home! As with any illness symptoms, stay at home and do not attend an indoor public service workplace.
- Every day that you are experiencing symptoms, use the BC Thrive app (COVID-19 self-assessment tool) to gauge if your symptoms suggest a COVID-19 test is warranted.
    - If the result from the BC Thrive app is that you don't need to get tested for COVID-19, stay at home until your symptoms resolve and return to work and other daily activities when you feel better
    - If the result from the BC Thrive app is a recommendation to get a COVID-19 test and self-isolate, assume you have COVID-19 and do the following:
        - Self-isolate for at least five days from the day your symptoms started if you are fully vaccinated, or at least 10 days if not fully vaccinated
        - You may choose to notify workplace close contacts; close contacts are not required to self-isolate if they don't have symptoms
            - Close contact means: indoor contact, less than two metres apart while not wearing a mask, and without a barrier, for more than 15 minutes cumulatively in a day
        - Continue to monitor your symptoms and if they worsen engage with the health system and seek care

If a member of your household has COVID-19-like symptoms, or you are contacted by someone informing you that you are a close contact:

- Monitor your health daily for symptoms
    - If you are symptom-free, you may attend the workplace and go about your daily activities
    - If you have even one illness symptom, you must not attend the workplace
    - If you begin to experience symptoms while at work, inform your supervisor and leave the workplace immediately
    - Use the BC Thrive app (COVID-19 self-assessment tool), call 811 or contact your primary care provider for advice
- Those who are not yet fully vaccinated, must self-isolate for 10 days

19. What does "close contact" mean?

Public Health determines whether an individual has had a high-risk exposure or close contact. Public Health no longer requires close contacts to self isolate, only to monitor their health.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes, unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
    - Anyone who lived with someone with COVID-19 before they started isolation

  - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
  - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
  - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact

20. When do I need to ask an employee for an STO2 form or doctor's note? [UPDATED]

In the circumstance of COVID-19 related absences, an STO2 form or certificate is often not required for sick pay (STIIP). Discussion between employee and supervisor can often resolve questions about prognosis. Supervisors and staff are reminded that 'close contacts' do not have to self isolate, they have to monitor their health and can attend work (see question 24).

Supervisors should work with staff on an individual case by case basis to assess whether modified duties are available. For further assistance, Supervisors can contact MyHr.

Supervisors should use normal absence management practices to determine when to request an STO2 based on the situation, for example:

- where the employee has been absent for six consecutive scheduled days of work;
- on the third (or more) separate absence occurring in a six-month period which may indicate a pattern of concern;
- where at least 30 days have elapsed since the last statement was obtained and the employee has been in receipt of plan benefits throughout that period and there is a reason to believe the employee's prognosis has changed.

An STO2 may be required for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work, including for COVID related illness.

The ST02 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis.

The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician's Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2 14

21. I have an employee who has tested positive for COVID-19. What does this mean for

co-workers? Do we need to close that workplace?

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers will not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker may choose to advise workplace close contacts; this is voluntary. A close contact is a person that the ill/symptomatic worker was within two metres of for more than 15 minutes unmasked, cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health daily for symptoms. If symptom-free, staff may attend the workplace. If staff have even one illness symptom, they must not attend the workplace.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

22. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate?

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals do not have to self-isolate because of a close contact.

Fully vaccinated means you received both doses of a two-dose series (e.g. AstraZeneca, PfizerBioNTech, or Moderna vaccine) more than seven days ago, or have received a single dose of a one-dose series (e.g. Janssen/Johnson and Johnson) more than 14 days ago.

Fully vaccinated individuals are not required to self-isolate, and can continue to participate in routine activities, including work, if they do not have any symptoms.

Employees must monitor their health daily for symptoms and use the Daily Health Check with their supervisor if they are attending the workplace. If they experience symptoms or feel unwell they should stay home, use the BC Thrive app (self assessment tool), call 811 or contact their primary care provider for advice.

23. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?

Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

24. I am nervous about coming to work and being exposed to COVID-19. What can I do?

Workplaces have been following COVID-19 Safety Plans and have implemented Communicable

Disease Prevention Plans following WorkSafeBC and BC Centre for Disease Control guidance. There are high levels of vaccination in British Columbia and personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

Effective November 22, 2021, all employees were required to provide proof of full vaccination, providing a high level of safety in our workplaces. With other measures including symptomatic employees staying home when sick, hand washing, routine cleaning of surfaces and public vaccination rates continuing to increase, BC Public Service workplaces remain safe. Employees have the option to always wear a mask if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local and regional Medical Health Officers or the Provincial Health Officer will advise employers on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

25. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. If the employee is a confirmed case of COVID-19, Public Health may provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.

In some instances, Public Health may recommend additional days of isolation based on disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

26. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the

case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.

Part 4: Employee Exposure Related to Travel

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Yes. As of July 1, 2021, under BC's Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

28. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

Employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.

Currently travelers entering Canada must have a 14-day quarantine plan for their return in casethey do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada. Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met.

Employees who choose to travel internationally unrelated to work after December 15, 2021 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

29. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and

cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can't work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.