

COVID-19 Response Protocols

Updated: October 23, 2020



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Purpose

These protocols outline measures sites should implement in the event an individual is identified as experiencing COVID-19 symptoms or is confirmed to have COVID-19. As new information about COVID-19 is available, the protocols will continue to be updated.

COVID-19 Symptoms:

People with COVID-19 have had a wide range of symptoms reported – ranging from mild symptoms to severe illness. Symptoms may appear **2-14 days after exposure to the virus**. People with these symptoms may have COVID-19:

- Fever or chills
- Cough
- Shortness of breath or difficulty breathing
- Fatigue
- Muscle or body aches
- Headache
- New loss of taste or smell
- Sore throat
- Congestion or runny nose
- Nausea or vomiting
- Diarrhea

This list does not include all possible symptoms. The Centre for Disease Control (CDC) will continue to update this list as we learn more about COVID-19. (*source: Centre for Disease Control and Prevention [CDC]*).

Teck has developed a [Take 5 to Limit the Spread](#) screening tool to assist individuals identify if they should be self-isolating or seek medical attention.

1. Site Response Teams

Each Teck operating site is asked to designate COVID-19 response leads and a designated response team who will coordinate implementation of the following protocols.

These response teams will also be asked to participate in response protocol training sessions with Teck's Medical Director Dr. Lawley and Corrine Balcaen, Director, Occupational Health & Hygiene. Training sessions will be scheduled as required.

Each team will be comprised of **at least one senior management team representative** as well as appropriate representatives such as:

- Chair of the site crisis management team
- Most senior HR person at site
- Most senior health and safety person at site
- Other site health and safety representatives as determined by site
- Emergency response personnel (i.e. mine rescue team)
- Other team members as determined by site

2. Response Procedure – Symptomatic Individuals (Employee or Contractor) at Home

Response procedure in the event an individual contacts their supervisor from home to advise they are now experiencing symptoms consistent with COVID-19:

Engaging with the Individual (Employee or Contractor)

1. Ask the individual not to come into work and to self-isolate for at least 10 to 14 days, depending on local Public Health Authority requirements. (At this time, Alaska and Chile require 14 days; Alberta and BC require 10 days after the onset of symptoms). Advise the individual to contact the Public Health Authority who will provide guidance on self-isolation and/or possible testing.
2. Supervisors should tell the individual that the site COVID Response Team Lead(s) will be calling them very shortly. Supervisors should immediately contact the site COVID Response Team Lead(s), who will telephone the individual to go through the [COVID-19 Contact Tracing Form](#). The Response Team Lead must email the completed COVID-19 Contact Tracing Form to the site Occupational Health Nurse (OHN) and Dr. Lawley. If there is no OHN on site, the form must be submitted to a designated site representative (e.g. HS Lead) and Dr. Lawley. (**NOTE:** If applicable, in reviewing the outcomes of the contact tracing for an individual, site response teams should identify people on site that have been in close contact* (defined below) with a person with symptoms that has recently been on site. These individuals may be requested to pre-emptively self-isolate.)
3. The Public Health Authority may recommend that the individual be tested for COVID-19. The individual cannot be asked to share their test results, however if the individual feels comfortable, they can share their results with the site OHN or Dr. Lawley (tom.lawley@teck.com)
4. Provide the employee with the access information to the [Employee and Family Assistance Program](#) (EFAP) and give them the telephone number and the EFAP website.
5. Provide the employee the applicable information for the site sick leave program and a HR contact number.

3. Response Procedure – Symptomatic Individual (Employee or Contractor) at site

Response procedure in the event an individual is identified at site as experiencing symptoms consistent with COVID-19:

Engaging with the Individual (Employee or Contractor)

1. Identify the individual's current location within the operation and ask them to stay there if possible and safely stop their work or vehicle.
2. The Response Team member(s) shall first don PPE as required by the PPE Protocol below.
3. Dispatch COVID-19 Response Team member to provide the individual with an N95 / KN95 respirator mask and ask them to don it immediately (*where available*, an N95 / KN95 *without* an exhalation valve should be provided). See **Response Team PPE Protocol** below.
4. Provide the individual with hand sanitizer and ask them to use immediately. Nitrile gloves and disposable coveralls shall also be provided and donned immediately.
5. Send individual home following the **Transportation Protocol** as below;
6. Ask the individual to self-isolate for at least 10 to 14 days, depending on local Public Health Authority requirements. (At this time, Alaska and Chile require 14 days; Alberta and BC require 10 days after the onset of symptoms). Advise the individual to contact the Public Health Authority who will provide guidance on self-isolation and/or possible testing.
7. As soon as possible, the COVID-19 Response Team lead shall arrange a discussion with the individual to complete the [COVID-19 Contact Tracing Form](#). The Response Team Lead must email the completed COVID-19 Contact Tracing Form to the site Occupational Health Nurse (OHN) and Dr. Lawley. If there is no OHN on site, the form must be submitted to a designated site representative (e.g. HS Lead) and Dr. Lawley. (**NOTE:** In reviewing the outcomes of the contact tracing form for an individual, site response teams should identify people on site that have been in close contact* (defined below) with a person(s) with symptoms that have been sent home to self-isolate. These individuals may be requested to pre-emptively self-isolate.)
8. The Public Health Authority may recommend that the individual be tested for COVID-19. The individual cannot be asked to share their test results, however if the individual feels comfortable, they can share their results with the OHN or Dr. Lawley (tom.lawley@teck.com).
9. Provide employees with the EFAP telephone number and website for access to [EFAP support](#).
10. Provide employees the applicable site sick leave program and HR contact information.

4. Transportation Protocol

This Protocol is for transporting an individual at site who is experiencing COVID-19 like symptoms:

Note: Each operation must identify an isolating and waiting station for the individual to wait until they are transported. This could be near the site's health center if one exists, first aid area, gate house etc.

1. Response Team member will meet the individual at the "waiting" area
2. The Response Team member, driver and other escorts must don PPE as per **COVID-19 PPE Protocol** below.
3. Provide the individual with hand sanitizer, have them use it properly. Provide them with an N95/KN95 respirator, have them don it properly (as per protocol below)
4. If the individual is exhibiting mild symptoms:
 - a. Drive them to their residence or to their vehicle so they can drive themselves to their residence (At VHO, follow the Return to Office protocol)
 - b. Ask them to call ahead to ensure someone is at their residence to meet them.
 - c. If the person lives alone, please note this and advise their supervisor so a Response Team member can be assigned to make contact with them at regular intervals.
5. If the individual is exhibiting more severe symptoms e.g. difficulty breathing:
 - a. Drive them to the hospital as per ERT or site protocols
 - b. Call ahead to the hospital as per ERT or site protocols
 - c. At VHO, follow the Return to Office protocol
6. Provide the hospital with any information that the individual has provided to you (e.g. from the COVID-19 Contact Tracing Form), as well as any other relevant information you may have.

5. Workspace Cleaning and Decontamination Protocol

Areas where an individual with COVID-19 symptoms or confirmed COVID-19 diagnosis has worked shall be cleaned and disinfected as follows:

1. Clean all areas and surfaces where the person was or may have been present as identified in the [COVID-19 Contact Tracing Form](#).
2. Use regular cleaning products (e.g. Pine Sol, Mr. Clean etc.).
3. Disinfect by mixing 1:100 parts bleach with water (e.g. 10 mL of bleach per 990 mL of water) and applying it to areas that the person was known or suspected to have touched such as counters, door handles, desks, tabletops, equipment they may have operated or ridden in, phones, keyboards, tablets etc.

Note: Hard-surface disinfectants approved by Health Canada may also be used. It is especially important to use bleach on surfaces shared with others such as bathroom fixtures toilets, light switches etc.

4. Frequently touched electronics such as phones, computers and other devices may be disinfected with 70% alcohol (e.g. alcohol prep wipes), or the 1:100 bleach solution.

Liquid Bleach Type	Amount of Bleach	Amount of cool tap water
2% Sodium Hypochlorite Active Ingredient	15 mL	240 mL
3% Sodium Hypochlorite Active Ingredient	10mL	240 mL
4% Sodium Hypochlorite Active Ingredient	7.5 mL	240 mL
5% Sodium Hypochlorite Active Ingredient	6 mL	240 mL
6% Sodium Hypochlorite Active Ingredient	5 mL	240 mL
7% Sodium Hypochlorite Active Ingredient	4.5 mL	240 mL
8% Sodium Hypochlorite Active Ingredient	3.75 mL	240 mL
9% Sodium Hypochlorite Active Ingredient	3.5 mL	240 mL
10% Sodium Hypochlorite Active Ingredient	3 mL	240 mL

5. All used disposable contaminated items (e.g. documents, magazines, newspapers etc.) should be placed in a lined container before disposing of them with other household waste.

6. Management of Close Contacts (see Appendix B)

In the event that a symptomatic individual has been in close contact with anyone at the work site, the following guidance should apply to close contacts (defined below):

1. Close contact must self-isolate until the symptomatic individual receives test results.
 - a. If the symptomatic individual test results are negative, close contacts can return to work if the contact is free of symptoms. **[Green on Appendix B]**
 - b. If the symptomatic individual test result is pending, the close contact must self-isolate until the test result is received. **[Yellow on Appendix B]**
 - c. If the symptomatic individual results are positive, close contacts must contact the local Public Health Authority and continue to self-isolate for 14 days from the last contact with the positive case and monitor for symptoms (testing may be requested*). **[Red on Appendix B]**
 - i. If the close contact is tested for COVID-19 and the result is negative, they can return to work after the 14 day self-isolation period and if they are symptom free. The 14 day period is to ensure the close contact are not able to infect others. *The testing is done to help with Public Health database as well as the contact status.
2. If a close contact develops symptoms of COVID-19 or test positive for COVID-19, refer to Symptomatic Return to Work decision tree (Appendix C).

7. Notification of a positive COVID-19 case

1. If an individual reports a positive COVID-19 test, notify the individual's supervisor and the designated site representative (e.g. HS Lead, OHN).
2. The designated site representative must contact Dr. Lawley, the HS Lead and OHN (if there is one at the site/BU) immediately so actions can be discussed with the site Response Team based on the outcomes of the completed COVID-19 Contact Tracing Form.
3. **The Individual's medical privacy and confidentiality MUST be preserved.**
4. The designated site representative can notify the local response team of a positive case, but must limit the identification to those individuals that need to implement the protocol.
5. The Site Health and Safety Lead or designate will notify the Teck COVID-19 Response Committee of a positive case.
6. The sites/ BU must develop a communication process in consultation with the site/ BU, OHN and Dr.Lawley.

8. Return to Work

1. Teck will continue to follow the requirements of local Public Health Authorities for return to work, which may include a combination of a period of self-isolation and COVID-19 test results.
2. The decision tree below (Appendix B) was adapted from the BC Center for Disease Control (BCCDC) to support our decisions.
3. If a decision cannot be made using the decision tree, contact the OHN and/or Dr. Lawley for further guidance.
4. Individuals shall be advised of the requirements for medical clearance and return to work:

Asymptomatic Positive Case

1. Worker must self-isolate for 14 days from the date positive results were received.

Symptomatic Positive Case

2. Worker must self-isolate for at least 10 days after the onset of symptoms, or until symptoms resolve, whichever is longer.

Close Contact with confirmed Positive Case

3. Worker must self-isolate for 14 days from the last contact with the positive case.
4. Worker can return to work after 14 days if no symptoms develop
5. If an individual is tested during self-isolation and the test result is negative, then the individual can go back to work **after** the 14 day self-isolation period **AND** after the individual's symptoms resolved – **whichever is longer**.
6. If individuals develop symptoms during 14 day self-isolation and they are NOT tested for COVID-19, then they must continue the 14 day self-isolation period due to the exposure, or self-isolate for 10 days after onset of symptoms, or until symptoms are gone – **whichever is longer**.
7. If an individual tests positive for COVID-19, the individual must self-isolate for at least 10 days after onset of symptoms or until the symptoms are gone – **whichever is longer**.

Hospitalized Individuals: The individual require medical clearance by an attending healthcare provider in order to return to work.

9. At Risk Groups

1. Individuals with one or more serious chronic health conditions (e.g. lung disease, heart disease, immunocompromised, kidney or liver disease) should contact their health provider or an alternative medical practitioner to discuss their health status and precautions to be taken specific to COVID-19.
2. Any work limitations or accommodations required by a physician should be discussed with their supervisor and HR.
3. The individual's medical diagnosis must not be shared with the supervisor or HR.

10. Response Team PPE Protocol

This protocol is based on the precautionary principle; it has been adapted to utilize PPE commonly available at Teck operations.

Personal Protective Equipment Required for Response Team Members:

1. N95 / KN95 respirator if available. If not available, fit-tested half-face respirator with particulate cartridges (please note that half-face respirators provide a higher level of protection than disposable respirators)
2. Goggles or face shield

3. Nitrile Gloves
4. Coveralls – use disposable coveralls.

Donning your PPE

1. Put on your coveralls and do up the buttons or zipper all the way to the top
2. Put on your respirator, make sure to perform negative and positive fit checks
3. Put your goggles or face shield on; ensure they are adjusted and worn properly
4. Put on your nitrile gloves – make sure they cover the cuff of your coveralls

Make sure you:

1. Keep your hands away from face
2. Limit the surfaces you touch
3. Change your gloves if they are torn or contaminated (perform proper hand hygiene – e.g. wash your hands with soap and running water for at least 20, seconds or use 70% isopropyl alcohol-based hand sanitizer)

Taking Off Your PPE (Doffing)

Coveralls:

Coveralls must be considered contaminated

1. Roll coveralls down from your body and place disposable coveralls into a hazardous waste receptacle.
2. Reusable coveralls must be sealed in a plastic bag and labeled as “contaminated with COVID 19”.
Note: *Cleaning personnel responsible for laundering reusable coveralls **must** follow the PPE protocols for COVID 19 Response Teams.*
3. If your hands get contaminated while removing your coveralls, immediately wash your hands with soap and running water, or use a 70% isopropyl alcohol-based hand sanitizer

Goggles or Face Shield:

1. Outside of goggles or face shield are contaminated!
2. If your hands get contaminated during goggle or face shield removal, immediately wash your hands with soap and running water for at least 20 seconds, or use a 70% isopropyl alcohol-based hand sanitizer
3. Remove goggles or face shield from the back by lifting head band or earpieces
4. Clean goggles with soap and water or discard into a hazardous waste receptacle.

Respirator:

1. The outside of respirators must be considered contaminated.
2. Remove respirator as per normal respirator removal process
3. Dispose of the cartridges in a hazardous waste container
4. Wash the respirator in soap and water
5. Decontaminate with an alcohol wipe

Gloves:

1. The outside surfaces of gloves are contaminated!

2. Using a gloved hand, grasp the palm area of the other gloved hand and peel off first glove
3. Hold removed glove in gloved hand
4. Slide fingers of ungloved hand under remaining glove at wrist and peel off second glove over first glove
5. Discard gloves into a hazardous waste container.
6. If your hands get contaminated during glove removal, ***immediately wash hands with soap and running water for at least 20 seconds***, or use a 70% isopropyl alcohol-based hand sanitizer

*After removing all PPE **immediately wash hands with soap and running water for at least 20 seconds**, or use a 70% isopropyl alcohol-based hand sanitizer.*

12. Mental Health Support

Ensure employees and families are aware of and have access to EFAP support.

1. Support apps, posters and literature are available from our EFAP provider.
2. The Akira/Medisys app can be used to find a healthcare provider and also sends out Timely Mental Health and COVID related articles to your email.
3. During regular team meetings, remind individuals to think about their mental health, and their co-workers and family's mental health.

Appendix A - Definitions

Self-isolate:

- Stay at home and monitor symptoms, even if mild, for 10-14 days (as directed by local Public Health Authority).
- Avoid contact with others.
- At this time, self-isolation periods for Alaska and Chile require at least 14 days, BC and Alberta require at least 10 days.

Isolate:

- If experiencing symptoms and have been diagnosed with COVID-19 or waiting for results of COVID-19 test, stay at home until your Public Health Authority advises you that you are no longer at risk of spreading the virus to others.
- Avoid contact with other people.

*Close contact:

Close contacts are those that are likely to be at a higher risk of being infected. These scenarios

Close contact is defined as any person who has:

- provided care for a probable or confirmed case, including healthcare workers, family members or other caregivers, or who had other similar close physical contact (e.g. intimate partner) *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 person was ill, OR
- had direct contact with infectious bodily fluids of a probable or confirmed case (e.g. was coughed or sneezed on) *while not wearing recommended PPE*.
- living in the same household or household-like setting (e.g. shared section of in a hostel) with a probable or confirmed case
- face-to-face contact in any setting within two metres of a probable or confirmed case for 15 minutes or more
- been in a closed environment (e.g. a classroom, hospital waiting room, or vehicle) within 2 metres of a probable or confirmed case for 15 minutes or more *while not wearing recommended PPE*

Casual contact:

Any person with exposure to the case who does not meet the criteria for close contact.

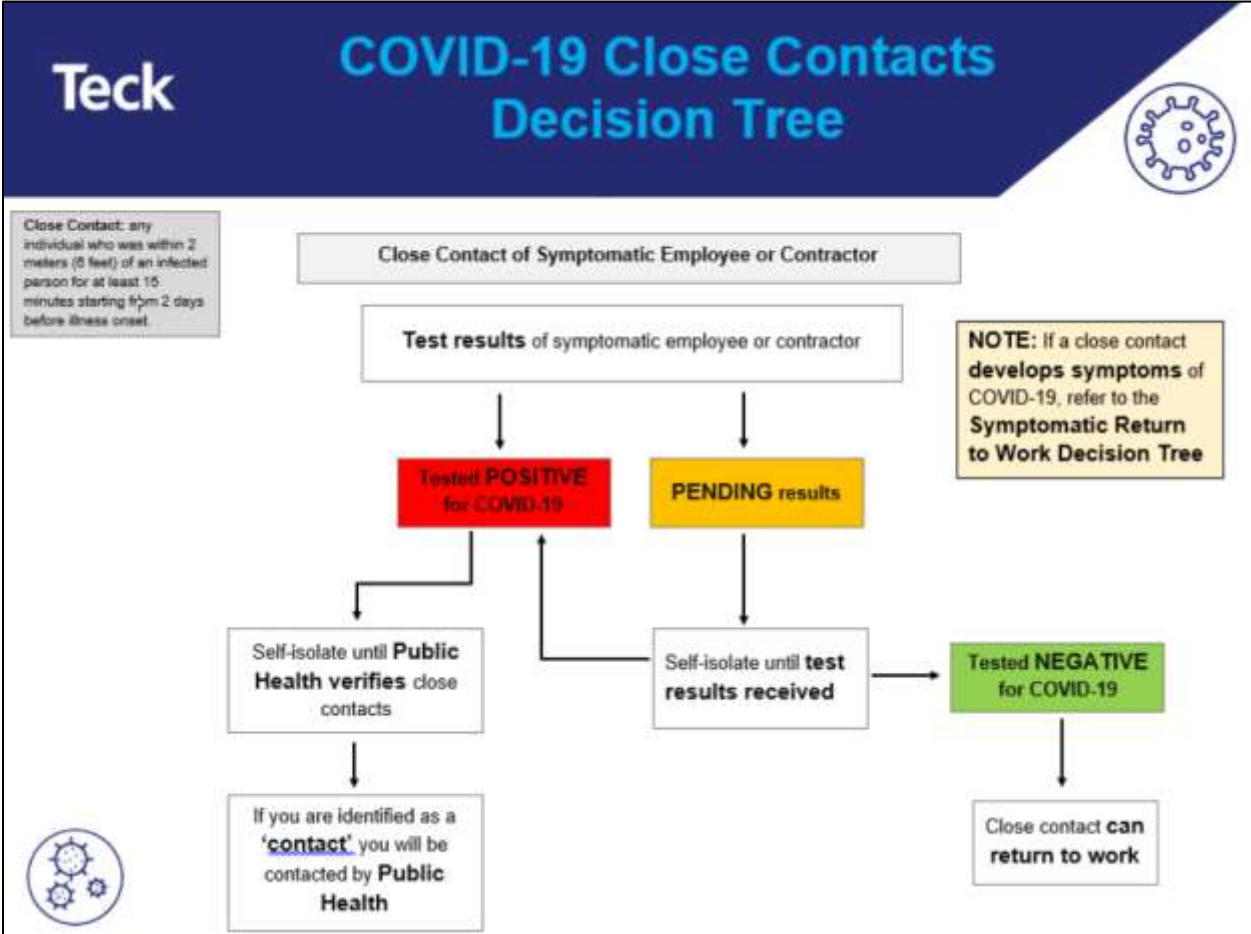
If further medical guidance is required, please contact the onsite Occupational Health Nurse (OHN) if applicable, or if an OHN is not available, contact Dr. Lawley.

**Probable Case

A person:

- with fever (over 38 degrees Celsius) and/or new onset of (or exacerbation of chronic) cough
AND
- who meets the COVID-19 exposure criteria
AND
- in whom a clinical / laboratory diagnosis of COVID-19 is inconclusive

Appendix B – Close Contact decision tree diagrams



Appendix C – Individual with Symptoms decision tree diagram

