WHO TO CONTACT:

- For work-related questions not addressed in the FAQ, contact the Workplace Health & Safety branch (BC Public Service Agency) using MyHR.
- In the case of a workplace safety emergency call 1-250-952-0911.
- For non-medical-related questions about COVID-19, 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 if you are concerned you may have been exposed to or 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: Workplace Safety and Working from Home

1. What is being done to address workplace cleanliness and hygiene?

The Ministry of Citizens’ Services is working with Facilities Management Units in each ministry to support requests for increased cleaning services and hygiene supplies.

Janitorial service increases will focus on high-touchpoint areas (i.e. door handles, counters, elevator buttons, etc.), using approved procedures and disinfectants. Programs that deliver services directly to the public (e.g., social services and child support services) and buildings with high public access (e.g., courthouses) will be given priority for increased cleaning services.

The Ministry of Citizens’ Services is working with suppliers to provide additional cleaning supplies where needed.

2. What is meant by “social/physical distancing” and how can it be practiced in the workplace?

The Provincial Health Officer has recently started using the phrase “physical distancing” in place of “social distancing” for clarity, but they both mean the same thing. 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:

- 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 Skype or instant messaging rather than face-to-face conversations.
- If meeting with a group, use the largest room available and use every other seat around the table, or space yourselves apart.
- Sit at least 2 metres apart in mobile work spaces if possible.
- Use automatic door openers to avoid touching door handles.
- Wipe down shared surfaces in mobile work spaces, 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.

3. **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 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 2 metres between participants.
• Rearrange or remove some of the waiting room furniture to allow for physical distancing.
• Use tape to mark out 2 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 2 metres distance between yourself and clients at counters and in interview or meetings rooms.

4. **I have staff that cannot work at home, how do we take steps to protect them from COVID-19?**

Follow the tips for physical distancing in the office (see above). If you have some staff working from home, this creates opportunities to space staff out in the office. Ask staff to move further from each other using different workstations or areas to create the recommended 2 metres distance. Use board rooms and meeting rooms as workspace if necessary.

5. **What do I advise an employee who works directly with the public who refuses to attend work or refuses to do client facing work?**

Reassure the employee that COVID-19 can be controlled with basic precautions, including physical distancing. With routine hand washing, the risk of contracting COVID-19 from receiving client documents, or passing documents, pens etc. back and forth is very low.

Workers can remind clients of the preventative measures in place. Ask them to cover their mouths if they are coughing, if they look unwell ask if they wish to reschedule or come another time (if possible). Contact MyHR for assistance if this does not resolve the situation.
6. **What is the BC Public Service doing to support employees who want to work from home and employees who have children at home due to the suspension of in-class learning in K-12 schools or unexpected closure of childcare programs?**

   More people working from home helps support the social/physical distancing practices recommended by public health officials. Where it is operationally feasible, ministries are expected to encourage and 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 child care provider, supervisors will work to explore options to accommodate an employee’s needs while maintaining operational requirements to the extent possible.

   Any decisions to deny working from home opportunities will be made at the ADM level. 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 due to travel or possible exposure to COVID-19.

   The government is actively working to ensure that as many daycare spaces as possible remain open and essential services employees have access to spaces for their children. Ministries are also working on operational plans to safely continue services during this challenging time, including ministry-specific approaches to maintaining essential service staffing levels.

   Resources on effective mobile working practices are available on the [MyHR website](#).

7. **How does the government’s March 26 announcement regarding essential services impact BC Public Service employees?**

   Under the provincial state of emergency, on March 26 government and the Provincial Health Officer identified essential services as those daily services essential to preserving life, health, public safety and basic societal functioning. This is distinct from essential service designations under the Labour Code and applies to the unique context of the COVID-19 response. The list of essential services includes all government functions and services.

   These essential services should and are encouraged to remain open. They must, however, follow the orders and guidance provided by the Provincial Health Officer to ensure safe operations and reduce the risk of transmission of COVID-19. This is consistent with how the BC Public Service has approached its response to the pandemic to date, and we will continue to adapt our approach as needed to adhere to the directions of the Provincial Health Officer. Ministries will continue developing and implementing operational plans to safely continue services during this challenging time.

   This does not impact how most of us are working, and we continue to support and encourage employees to work from home where they wish to and it is operationally
feasible. However, as part of the essential services action government has also directed child care providers and schools providing care and/or in-class instruction for children to prioritize placements for those children whose parents are employed in Health and Health Services, Social Services, Law Enforcement, First Responders, and Emergency Response. See the details of the essential services list for details on which specific services are included in this group. Details on access to childcare spaces are still to be confirmed.

8. **(UPDATED)** 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.

9. Why were the masks provided in workplace earthquake kits removed and will they be replaced?

At the request of Emergency Management BC, ministries are collecting N95 masks from earthquake kits to provide them to front line health care workers across B.C. to help ensure access to a continued supply of personal protective equipment (PPE) as the COVID-19 pandemic has increased demand around the world. The Ministry of Health and EMBC are also working to procure PPE from other sources in B.C. that may have surplus supplies available.

While earthquake preparedness is important, B.C.’s front line heath care workers have an urgent need for N95 masks for work that is central to keeping all of us safe. These masks are not required to be included in workplace earthquake kits by WorkSafeBC, but we will
arrange to have them replenished as soon as possible after the COVID-19 response is complete.

10. **(UPDATED)** What are the considerations needed when planning for a work event or large meeting while there is the potential for exposure to COVID-19? If an event is already scheduled, should the event be cancelled?

The Provincial Health Officer has ordered that all events being planned with over 50 people should be cancelled. This does not mean workplaces with more than 50 people need to close (see above for more on practicing physical distancing and other protection measures in the workplace).

In-person events or meetings with fewer than 50 people should only proceed if absolutely necessary to enable to essential work. Even small meetings should only happen in-person where physical distancing, cleaning and other hygiene measures can be applied. Wherever possible, virtual meeting options should be used. Anyone who is sick should stay home and not attend any event in person.

**Part 2: Employee Exposure and Self-Isolation**

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

The employee who is sick with COVID-19 symptoms must stay home and away from others. In terms of co-workers, determine the level of interaction with the employee. Low risk exposure to a confirmed COVID-19 case includes walking by the person or briefly being in the same room. If low risk, the co-workers should self-monitor for symptoms and practice good hand hygiene and social distancing in public, at home and at work.

Contact surfaces in both client and employee areas should be wiped down with a disinfecting cleaner. Take the opportunity to remind workers that hand hygiene and not touching the face can stop the spread of infection. Public health officials will be in contact with the COVID-positive worker. Only co-workers who are “close contacts” (defined in the next question) are recommended to be in 14-day self-isolation.

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

12. What does “close contact” mean?

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 meters) 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.

*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.

13. 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 STO2 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.

14. (UPDATED) I supervise an employee who is sick with a fever and 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?

If the employee is sick, they should be placed on sick leave unless they are able to work from home. The common cold or seasonal influenza is far more common than COVID-19, and employees should seek treatment advice from their health care provider. These employees, who have mild respiratory symptoms that can be managed at home can return to their routine activities, including work, once the following criteria are met:

A. At least 10 days have passed since onset of symptoms; AND
B. At least 72 hours have passed since resolution of fever; AND
C. Symptoms (respiratory, gastrointestinal, and systemic) have improved.

Coughing after recovery may persist for several weeks and does not mean the individual is infectious and is not required to self isolate.
15. 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.

16. I supervise an employee whose spouse or child (no travel or known contact) is sick with mild respiratory symptoms that can be managed at home. Should this employee self-isolate?

Workers can use the information in the BCCOVID-19 Symptoms Self Assessment Tool and should review the definitions of probable and confirmed cases on the Public Health Agency of Canada website. If the spouse or child meets the definition of probable or confirmed, then the employee would be recommended to self-isolate.

If the spouse or child doesn’t meet the definition above, employees who wish to work from home should be encouraged to do so where operationally feasible. But there is no current public health recommendation for self-isolation in this situation. The employee can remain at work with a recommendation to self-monitor for symptoms and practice good personal hygiene and physical distancing in public, at home and at work.

17. I have an employee who was given a medical recommendation to self-isolate for 14 days as a precautionary measure because of close contact to a person sick with COVID-19. This may be the employee’s spouse or child. The employee is doing well, with no symptoms, and would like to return to work. What should I do?

Individuals who have been medically recommended by a health care professional to self-isolate, will be asked to closely monitor for symptoms during their self-isolation and will have daily checklists to complete. This recommendation is given when there is exposure to a lab confirmed COVID-19 case or a case with travel exposure. At the end of the 14 days of self-isolation, and in the absence of symptoms, the health care provider/public health recommendation will end and the worker can return to their usual routines.

18. 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 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 that routine cleaning can be done. The BCCDC states that asymptomatic transmission from employees who are well, or transmission from viruses on a work surface are the exception.
Most people become ill from being in close contact with someone who showed symptoms such as coughing and sneezing. 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.

19. 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, social distancing and hand washing are effective preventative measures.

20. 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?

Where it is operationally feasible, ministries are expected to encourage and support employees who want to work from home and should be flexible in considering alternative work arrangements.

Employees with underlying medical conditions (e.g. heart disease, hypertension, diabetes, chronic respiratory diseases) or who have a compromised immune system from a medical condition or treatment are at increased risk of developing severe illness should they contract COVID-19. Supervisors are encouraged to be flexible and creative with solutions to reduce or eliminate the risk of exposure.

If you need assistance in managing issues related to self-imposed isolation, contact MyHR.
21. **(UPDATED)** 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 the following criteria are met:

a. At least 10 days have passed since onset of symptoms; AND  
b. At least 72 hours have passed since resolution of fever; AND  
c. 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) who recovered from COVID-19 infection may require specialized direction for return to work.

22. 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.

23. 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 Center for Disease Control [http://www.bccdc.ca/Health-Info-Site/Documents/Self-monitoring.pdf](http://www.bccdc.ca/Health-Info-Site/Documents/Self-monitoring.pdf). 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.

24. (NEW) Will wearing a personal (non-medical) mask provide enhanced protection for me from contracting COVID-19 in the workplace?

Wearing a non-medical mask (for example a homemade cloth mask) in the community has not been proven to protect the person wearing it. Non-medical masks alone will not prevent the spread of COVID-19. The best steps to protect yourself are to consistently and strictly adhere to good hygiene and public health measures, including frequent hand washing and physical distancing.

Physical distancing is designed to protect us from someone who is symptomatic (coughing, sneezing) with COVID-19. On April 6, Dr. Henry, BC’s Provincial Health Officer, stated the following about the use of non-medical masks:

“We’ve been reviewing evidence from around the world. It’s not a recommendation — it’s a permissive use, if you will. This virus can’t jump six feet. When you’re outside, maintaining physical distance works, and we’ve seen that here in B.C.

A handmade cloth face-covering that we’ve seen people using in other places — for short term, they can protect others around you from your droplets. So, it’s not going to protect you from getting this virus. But, in the short term, it is a similar analogy to coughing into your sleeve or coughing into your tissue.”

Wearing a non-medical mask may help protect others around you by preventing your respiratory droplets from contaminating others or landing on surfaces. Just like the recommendation not to cough into your hands (instead, cover your cough with tissues or your sleeve, then wash your hands), a mask can reduce the chance that others are coming into contact with your respiratory droplets.

Wearing a non-medical mask is NOT a replacement for physical distancing, hand washing and monitoring your health. If you feel unwell do not put on a mask and attend the workplace – instead, stay home and self-isolate for 10 days (refer to question 14 for information about returning to work).

In a workplace that is practicing physical distancing the use of a non-medical face mask may impede communications, causing the wearer to raise their voice creating more droplets that create a damp mask that needs to be replaced and safely discarded. Clients with moderate levels of hearing impairment may have difficulties understanding communications from
staff wearing a mask. Clients may believe that a staff member wearing a mask is sick and request someone that is not wearing a mask.

While the above is applicable for most office-based and client-focused work, individual ministries may adopt different approaches for masks and transmission control measures based on the work being performed. Non-medical masks are not required personal protective equipment for employees and are not provided by the employer.

If you choose to use a non-medical face mask:

- You should wash your hands immediately before putting it on and immediately after taking it off (in addition to practicing good hand hygiene while wearing it).
- It should fit well (non-gaping).
- You should not share it with others.
- You should still practice social distancing of 2 metres.

Face masks can become contaminated on the area that you breathe through, including the outside, or when touched by your hands. When wearing a mask, take the following precautions to protect yourself and others:

- Avoid touching your face mask while using it.
- Change a mask by only touching the straps or ear-loops, as soon as it gets damp or soiled by putting it directly into the washing machine or a bag that can be emptied into the washing machine and then disposed of. Cloth masks can be laundered with other items using a hot cycle, and then dried thoroughly.
- Wash your hands immediately after removing a mask.
- Non-medical masks that cannot be washed should be discarded and replaced as soon as they get damp, soiled or crumpled. Dispose of masks properly in a lined garbage bin.
- Do not place a used non-medical on any work surface, common area or equipment. There is a potential risk of infection due to droplet transfer.
- Continue physical distancing and wash your hand often.

25. 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 3: Employee Exposure Related to Travel**

26. **Should employees cancel work-related travel plans to minimize risk of exposure?**

The Provincial Health Officer recommends B.C. residents avoid all non-essential travel outside Canada. If an employee travels anywhere outside Canada, they must self-isolate for 14 days upon return to Canada.

Effective March 30, 2020, the federal government has also ordered that nobody with symptoms related to COVID-19 will be allowed to board domestic flights or rail transportation.

Given the constantly changing context, we recommend virtual meeting options to replace travel where possible.

27. **An employee returned from travel outside of Canada before the new self-isolation order was implemented (i.e. before March 12, 2020). Does the 14-day self-isolation retroactively apply to my employee?**

No, this recommendation is not retroactive, except for those returning from Iran, Italy, or Hubei China. For these returning employees, the previous recommendations from that time remain (i.e. the 14-day self-isolation starts from the date they returned to Canada even if before March 13, 2020).

28. **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.
29. An employee has returned from Italy, Iran, or Hubei province China. Are there any additional measures apart from self-isolation?

The Public Health Agency of Canada (PHAC) and BCCDC recommend travelers returning from Italy, Iran or Hubei province, China, or who have been in close contact with someone who has recently visited Italy, Iran or the Hubei province in China, must call the public health office in their health authority within 24 hours and self-isolate for 14 days.

Maintain contact with your employees during their self-isolation. Near the end of 14 days of isolation, ask them to provide any medical clearance to return to work they may have already received. A separate STO2 (Doctor’s Certificate form) is not required, as any person being medically followed under the relevant procedures will be provided with appropriate clearance by those medical authorities.

30. (UPDATED) 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?

On March 25th, 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.

Employees are expected to comply with this order and will not be permitted to return to work until the 14 days have elapsed. During this time, they can work from home or access sick leave. Contact MyHR if you have questions about the application of the order to employees who are essential workers.

31. (UPDATED) I have an employee who traveled outside of Canada and is returning to work soon. They are doing well and are not feeling sick. Should I be concerned about spread of the novel coronavirus?

No. In accordance with the federal Minister of Health’s Emergency Order under the Quarantine Act, employees returning from outside Canada, including the United States, must self-isolate for 14 days to observe for any developing symptoms in order to help prevent the spread of the disease. If the employee becomes ill during isolation, they should contact their health care provider and notify local public health authorities through 811. 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.
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?

If you are satisfied your employee can effectively work from home, you should authorize this arrangement. If you are not satisfied your employee can effectively work from home, you should put the employee under STIIP (Short Term Illness and Injury Plan) for the duration of the self-isolation.