

# COVID-19 SAFETY PLAN LOIS LAKE

June 2020

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### Introduction

This document outlines the safety protocols that are in place to protect the staff members of Fuerste Vaccination Services during an outbreak of COVID-19. This safety plan has been written specifically for vaccinating services at Lois Lake. For the safety plan at another site serviced by Fuerste Vaccination Services, please refer to that specific document.

Fuerste Vaccination Services takes the health and safety of our employees very seriously. With the spread of COVID-19, Fuerste Vaccination Services will stay vigilant in mitigating the outbreak. Fuerste Vaccination Services is a proud part of the aquaculture industry which has been deemed essential during this Declared National Emergency. In order to be safe and maintain operations, we have developed this COVID-19 Safety Plan to be implemented to the extent feasible and appropriate, throughout Fuerste Vaccination Services and at all of our job sites. Fuerste Vaccination Services' Human Resource Department will also monitor the related guidance that the BC Centre for Disease Control and Public Health Officer make available.

This plan is based on information made available from the BCCDC and Public Health Officer at the time of its development and is subject to change based on further information provided by the BCCDC, Public Health Officer and other public officials. Fuerste Vaccination Services may also amend this Plan based on operational needs.

Prior to service commencing at Lois Lake, an Infection Prevention & Control Coordinator who will be attending the work site will be appointed by the Management Team.

## Responsibilities of the Infection Prevention & Control Coordinator

As per the Order of the Provincial Health Officer, the Coordinator will:

- Act as a liaison between Fuerste Vaccination Services and the Health Officer or Provincial Infection Prevention and Control Officer
- Oversee the implementation and follow through of all safety procedures, policies and protocol as listed in this
  document
- Monitor the health of workers daily for symptoms of COVID-19 (fever, sore throat, coughing, sneezing or
  difficulty breathing), keep a daily record of monitoring activities and inform the Health Officer or Provincial
  Infection Prevention and Control Officer if any staff member exhibits symptoms of COVID-19.
- Oversees the manner in which workers are transported between their accommodation and worksite to ensure that workers are transported in a way that it limits the risk of transmission of COVID-19 between the workers and to the driver to the extent practical.
- Monitor the compliance of workers with the requirements imposed upon them by this safety plan and the Order(s) of the Provincial Health Officer.
- Inform the Health Officer or Provincial Infection Prevention and Control Officer of any failure to implement the Safety Plan or Order(s) of the Provincial Health Officer on part by Fuerste Vaccination Services or if a worker fails to comply with the requirements imposed upon the worker by the Order(s) of the Provincial Health Officer.

## Responsibilities of Managers & Supervisors

All Managers and Supervisors must be familiar with this Plan and be ready to answer questions from employees. Managers and Supervisors must set a good example by following this plan at all times. This involves practicing good Page 2 of 25

personal hygiene and work site safety practices to prevent the spread of the virus. Managers and Supervisors must encourage this same behaviour from all employees.

### Responsibilities of Employees

Fuerste Vaccination Services is asking every one of our employees to help with our prevention efforts while at work. In order to minimize the spread of COVID-19 every must play their part. As set forth below, Fuerste Vaccination Services has instituted various sanitization, social distancing and other best practices at our worksites. All employees must follow these. In addition, employees are required to report to their Managers or Supervisors if they are experiencing signs or symptoms of COVID-19, as described below. If you have a specific question about this Plan or COVID-19, please ask your Manager or Supervisor. If they cannot answer your question, please contact Jennifer Llewellyn, HR & Payroll Generalist.

## **Safety Control Measures**

## **Screening of Workers**

All Crew Members are expected to be aware of any possible symptoms they may be experiencing and report those symptoms immediately to the Coordinator while maintaining physical distancing (2 meters). Crew Members are required to submit their daily self-declaration to the Coordinator each and every morning **before** leaving their accommodations to attend the work area. Any Crew Member who does not submit their self-declaration information and attends the work area will be immediately sent back to their accommodations until the form has been completed and submitted to the Coordinator. Disciplinary action may be taken by the employer if Crew Members fail to comply with this safety measure.

## **Areas of Congregation**

All areas where staff will potentially congregate together have been assessed and risk mitigation measures have been put in place. The safety control measures for these areas have been outlined below and will be enforced by the Infection Prevention & Control Officer. Failure to adhere to the safety control measures below will lead to discipline up to and including termination.

#### 1. Head Office

- a. During a high-risk outbreak, no staff member will be permitted inside the Head Office, including Administrative Staff. Only one designated personnel will be permitted to enter to retrieve necessary equipment, vehicle keys and documents that are required to perform essential services. The designated personnel is required to disinfect any items or office equipment that was touched upon arrival and before departing the Office. This includes but is not limited to door handles, alarms, printers, cupboards and handles and the washroom. The front door code will be changed in order to prevent unauthorized entry and a notice will be posted on the front door. Administrative staff will be required to work from home and the Office will be considered closed.
- b. During a moderate risk outbreak, a maximum of 5 people will be permitted to enter the office while maintaining physical distancing of 2 meters. Any staff members that enters the premises will again be required to disinfect any items or office equipment that was touched upon arrival and before departing the Office (see suggested list above). Proper hygienic measures are to be followed such as hand washing and cough/sneeze etiquette.
- c. During a low risk outbreak, the Office will be open to staff if physical distancing is maintained and proper hygienic measures are followed such as hand washing, cough/sneeze etiquette and sanitization of used equipment or items.
- d. During any phase, no one is permitted to enter the Office if experiencing any symptoms of COVID-19, has been exposed to someone who has experienced symptoms of COVID-19 in the last 10 days or has been out of the country within the last 14 days. Please see the Exposure Control Policy for more information.

#### 2. Company Vehicles

- a. During a high-risk outbreak, a maximum of 3 Crew Members may ride in the White and Blue Nissan vans and a maximum of 2 Crew Members in the Caravan, including the driver. All Crew Member entering the vehicles must wash or sanitize their hands first. Crew Members are not permitted to swap vehicles at the end of the day. Staff must ride home in the same van and in the same spot that they rode up to the work site in. The sanitization checklist must be completed after every single use by the driver of the vehicle. Staff must enter and leave the vehicle one by one while leaving a minimum of 2 meters between each person. Face masks must be worn while travelling in the company vehicle. No personal items or garbage is permitted to be left in the van without its owner.
- b. During a moderate risk outbreak, a maximum of 4 Crew Members may ride in the White or Blue Nissan vans and all Crew are required to wear masks. Three Crew Members may ride in the Caravan with masks being worn at all times in the vehicle. An exception to wearing a mask can be made when travelling with your normal work pod.
- c. A low risk outbreak will mirror a moderate risk outbreak.

#### 3. Ferries

a. During all outbreak risk levels, staff will not be permitted to leave the vehicle on the ferry unless it is absolutely necessary. If a staff member does need to leave the vehicle, a mask and nitrile gloves must be worn. Gloves must be removed, hands washed and/or sanitized immediately before re-entering the vehicle. All Crew Members must ensure to have a mask on hand when taking the ferries or boarding will be refused by BC Ferries personnel.

#### 4. Water Taxi

a. A maximum of 6 Crew Members will be permitted on the water taxi at one time. Crew Members are required to sanitize before boarding the boat and must wear a face mask for the duration of the trip. Two trips will be made to transport the entire Crew. Crew Members will not share the water taxi with any persons who are not considered to be a part of the work pod.

#### 5. Vaccination Area/Hatchery

- a. During all risk levels of an outbreak, if a barrier is installed, Crew must remain within the barrier and ensure to sanitize the barrier at the end of every shift. If no barrier is in place, face masks must be worn during vaccination. All equipment and the work areas must be sanitized before and after use (start of shift, breaks and end of shift). The daily sanitizing checklist must be completed by each Crew Member.
- b. During a high risk outbreak, no unnecessary staff or visitors are permitted to be on site.
- c. During a moderate to low risk outbreak, additional staff may attend the worksite if necessary to complete job duties but physical distancing and sanitization protocols must be followed and PPE such as nitrile gloves must be worn.

#### 6. Break Areas

a. During all risk levels of an outbreak, Crew Members must maintain physical distancing during all coffee and lunch breaks. Meal sharing is not permitted and all touched surfaces must be sanitized. All utensils and dishes must be thoroughly washed after use.

#### 7. Shared Washrooms

a. During all risk levels of an outbreak, staff are required to sanitize commonly touched areas when entering the washroom and when leaving. This includes but is not limited to door handles, sink taps/faucet, the toilet, shower and light switch. Paper towel will be provided by the hatchery so hand towels do not need to be shared when washing hands.

#### **Job Tasks & Processes**

All job tasks and processes that could potentially put staff at risk of contracting the virus have been assessed and risk mitigation measures have been put in place. The safety control measures for these job tasks and processes have been outlined below and will be enforced by the Infection Prevention & Control Officer. Failure to adhere to the safety control measures below will lead to discipline up to and including termination.

#### 1. Vaccine Sign Out

a. Only one Crew Member will be designated to sign out vaccine for Crew Members in order to limit the amount of people entering the vaccine fridge and sign out area. Vaccine bags and sign out area must be disinfected at the beginning and end of each shift. Each vaccine bag must be sprayed down with disinfectant before handing over to the respective Crew Member. This process applies to each level of risk of an outbreak.

#### 2. Equipment & Station Set Up

a. During all risk levels of an outbreak, Crew Members will maintain social distancing while navigating the vaccinating area and obtaining their equipment. Crew will take what they need for the entire day, sanitize the equipment and keep it at their work station. Equipment is not permitted to be shared with other staff members for the duration of the shift and for the duration of the week if possible. All equipment must be sanitized at the end of every shift. Work station areas must be disinfected at the end of every shift. The daily sanitizing checklist must be completed by each Crew Member.

Equipment & tools that must not be shared and must be disinfected at the end of each shift include but are not limited to: pipettes, vaccination guns, packs of needles, pliers, hoses, pencils and notebooks.

Aprons are not permitted to leave the vaccinating area and Crew Members must utilize the same apron for the duration of the week. As per the daily sanitization checklist, aprons must be hung separately from Crew Members aprons and disinfected at the end of each shift.

#### 3. Vaccination

a. Nitrile gloves must be worn at all times and changed frequently including at each break. Crew Members must not reach across barriers that are in place on the vaccination table and remain within their safe working bubble.

#### 4. End of Shift

a. Crew Members are required to disinfect and put away all equipment for the day in a place where they can easily identify the same equipment for perusal the next day. Crew should maintain physical distancing while moving throughout the vaccinating area. Nitrile gloves should be exposed of (please see document on proper removal of gloves) and aprons disinfected and hung where they can be easily identified by the wearer for the next shift.

### **Showing Symptoms at Work**

Crew Members who develop common cold or influenza like symptoms or symptoms compatible with COVID-19 are required to remove themselves from the work areas immediately, isolate in their designated living space and report their symptoms to the Coordinator, while ensuring physical distancing.

Crew Members who fall ill while in camp, must self-isolate in their designated living area (bedroom) immediately following the onset of symptoms. Crew Members will not be permitted to leave the camp site until the self-isolation period has been completed. The ill Crew Member will receive monitoring, care and resources from the employer during their period of isolation.

Should the ill Crew Member require hospitalization, the Coordinator must be notified immediately in order to arrange transport to the nearest hospital. A Fuerste Vaccination Services staff member who is First Aid Trained must escort the employee and notify the management team immediately.

Should two or more Crew Members develop symptoms of COVID-19, the Coordinator will report an outbreak to the Island Health Authority:

Phone: (250) 519-3401 Email: info@viha.ca

## **Exposure Control Policy**

Fuerste Vaccination Services is committed to providing a safe and healthy work environment for its staff and will strive to find ways to control or eliminate exposure to pandemic influenza or flu-like illness by developing and implementing proper controls, safe work procedures and educating and training its workers. During an official outbreak, Fuerste Vaccination Services will follow direction and controls as specified by the BC Centre for Disease Control and the local Health Authority's Medical Health Officer.

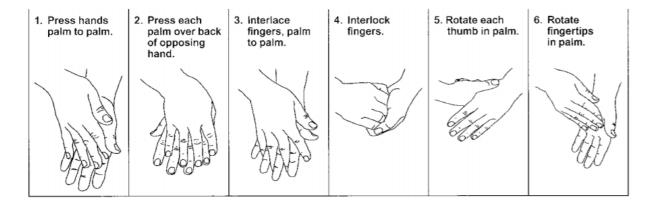
#### **Safe Work Procedures**

Hand Washing

Hand washing is one of the most effective ways to minimize the risk of infection. Proper hand washing helps prevent the transfer of infectious materials from the hands to other parts of the body – particularly the eyes, nose and mouth – or to other surfaces that are touched. Wash your hands immediately:

- Before entering or leaving the work area
- At the start and end of each break
- · After handling materials that may be contaminated
- Before eating, drinking, smoking, handling your contact lens or glasses, etc

#### Hand Washing Procedure



Use soap and warm running water; it does not have to be hot to be effective. If water is unavailable, use a waterless hand cleanser that has at least 60% alcohol. These are available throughout the hatcheries or can be purchased from stores if the Crew Member is at a camp location. Follow the manufacturer's instructions on how to use the cleanser. Wash and rinse your hands for at least twenty seconds.

#### Cough/Sneeze Etiquette

Crew Members are expected to follow cough/sneeze etiquette, which is a combination of measures that minimizes the transmission of diseases via droplet or airborne routes. Cough/sneeze etiquette includes the following components:

- Cover your mouth and nose with a sleeve or tissue when coughing or sneezing
- Use tissues to contain secretions, and dispose of them promptly in a waste container
- Turn your head away from others when coughing or sneezing
- Wash hands regularly

#### **Showing Symptoms of Influenza**

During an outbreak, Crew Members should stay home if they become ill with COVID-19 symptoms. If a Crew Member develops symptoms of influenza while at work, to minimize the potential spread, they are required to immediately notify the Site Manager or Crew Leader/Supervisor, put on a mask and isolate in the hatchery until arrangements are made to get the Crew Member home as soon as possible. All items that the Crew Member came into contact with, must be disinfected immediately. The Crew Member must self-isolate for 10 days and only return once they have recovered from the illness and are no longer showing symptoms. At the onset of symptoms, Crew Members are required to complete the Confirmation of Illness Form which is available through the Human Resource Department. If the Crew Member is severely ill (difficulty breathing, chest pain), 911 must be called immediately and a First Aid Attendant must stay with the Crew Member until paramedics arrive.

During an outbreak, Crew Members will be required to complete a Self-Declaration Form at the beginning and end of every shift to screen Crew Members for illness or exposure.

Any Crew Member who has left the country or come in contact with an individual showing symptoms or testing positive for COVID-19 must self-isolate for 14 days before returning to work.

#### **Implementation Plan**

In the event of a pandemic alert, the following risk control measures will be instituted:

#### Low Risk:

- All Crew Members will be instructed in hand washing and cough/sneeze etiquette
- Sick workers will be instructed to stay home

#### Moderate Risk:

- All Crew Members will be instructed in hand washing and cough/sneeze etiquette
- Sick workers will be instructed to stay home
- PPE may be made available
- Safe distancing from each other will be implemented
- Additional disinfecting materials will be made available

#### High Risk:

- All Crew Members will be instructed in hand washing and cough/sneeze etiquette
- Sick workers will be instructed to stay home
- PPE will be made available
- Mandatory use of PPE will be enforced
- · Safe distancing from each other will be implemented
- Disinfection of all equipment, vehicles, workspaces, clothing and Crew Members will be required
- Head Office will be closed to all Crew Members

## Violence in the Workplace Policy

We understand that frustration and tension may be higher than usual due to COVID-19. Fuerste Vaccination Services will maintain a work environment free from threats and acts of violence and will not tolerate any type of workplace violence committed by or against any of our Crew. The following Violence in the Workplace Policy will be upheld and made available to all staff during the COVID-19 crisis.

Crew Members are prohibited from making threats or engaging in any violent activity. The following behaviours, while not exhaustive, provides an example of conduct that is prohibited:

- Causing physical injury to another person
- Making threatening remarks
- Acting out in an aggressive or hostile manner that creates reasonable fear of injury to another person or subjects another individual to emotional distress
- Intentionally damaging employer property or property of a Crew Member
- Possessing a weapon while on employer or customer property or while on duty

If a threat of violence arises, staff are to isolate themselves from the situation immediately by moving themselves to a locked (washroom or vehicle) or open (outside) area. Staff are not permitted to attempt to deescalate the situation themselves as this will be dealt with by someone on the management team. Any potentially dangerous situations must be reported immediately to the Site Manager, Crew Supervisor and Human Resources. Fuerste Vaccination Services will take appropriate action at any indication of a potentially hostile or violent situation.

## **Training Plan**

All staff are required to undergo training on the Safety Plan for COVID-19 for their specific site prior to commencing work. Training on this document will be delivered by one or more individual from the Management Team at the Head Office. Physical distancing will be maintained during training sessions and the number of attendees will be limited to a number dependent on the risk level of outbreak at the time training is delivered. All new staff as well as returning staff members will receive the same training and will not be permitted to work until training has been completed.

All staff will be provided with in-person training, provided a copy of this Safety Plan and a copy of the Safety Plan will be available on site at Lois Lake in the Health & Safety binder.

Posters that highlight key information and policies from this Safety Plan will be displayed at the worksite by the Coordinator.

The appointed Coordinator will receive training by the HR Department and Site Manager on their responsibilities and expectations prior to attending the worksite.

All trained First Aid Attendants will receive additional training on providing First Aid to Crew Members during a COVID-19 outbreak as per the OFAA Protocols during the COVID-19 pandemic document provided by WorkSafe BC. This training will occur by either the Site Manager or Crew Supervisor prior to the commencement of work.

## **Appendix**

The following checklist is required to be completed by each driver of the vehicles on a daily basis and then submitted to the Coordinator.

Daily Van Checklist
Date:
/ehicle:
Name of Driver:
This checklist is MUST be completed by the driver each and every time a Fuerste Vaccination Services vehicle is used to transport Crew Members to a worksite.
☐ Driver has wiped/sprayed all door handles inside and out, inside door panel, dashboard and steering wheel before crew gets in
☐ Driver opens one front window and one back window for clean air flow
☐ All crew members use the provided hand sanitizer before entering vehicle
☐ No more than 3 crew members in the Nissan and 2 in the Caravan with social distancing between them
☐ Arriving at the hatchery all crew is to sanitize hands leaving the van and one person to spray/wipe all handles, door panels, dashboard and steering wheel
☐ Anyone entering the van throughout the day needs to sanitize their hands and touched surfaces ie: door handle
☐ Once back at the office ensure windows are closed, spray/wipe all surfaces inside and outside handles

please explain and return this form to a member of management.

The following checklist is required to be completed by each Vaccinator every shift and then submitted to the Coordinator.

### Fuerste Vaccination Services Health & Safety Checklist

For Va	ccinating Crew Date:
All staf	f are required to initial each box daily to confirm compliance with the following protocols:
l,	(employee full name)
	Did not enter the boot room while another Crew Member was present
	Used every hand sanitizer available as moving throughout the hatchery
	Did not remove vaccine from the fridge or touched the sign-out sheet unless I was the designated Crew Member for vaccine sign out
	Maintained social distancing (opposite ends of the table) while working at the vaccinating tables if no barrier is provided
	Ensured that all required tools and supplies were kept on the vaccinating table
	Wore the same apron throughout the day and sprayed my apron with alcohol before hanging my apron for breaks. I did not store my apron close to another Crew Members apron
	Used the same vaccinating glove throughout the day. My glove was stored with my apron and was not left lying around
	Ensured my apron and gloves were washed at the end of my shift
	Left my gun on the provided holder on the table at the end of my shift with the needle removed, and sprayed it down with alcohol
	For Brailer: wore nitrile gloves while brailing
	For Brailer: sprayed/wiped handheld controls, radio and surfaces in my area throughout the day
Hygie	<u>ne:</u>
	Placed my dishes and cutlery into the dishwasher to be run on the sanitize cycle. I did not handwash my dishes
	Sanitized the kitchen area before and after use ie: fridge handles, microwave handles and buttons, front of dishwasher, tables and chairs, sink and taps
	Sanitized the washrooms before and after use, including toilet, sink and taps, light switch and doorknobs
	Used my cough pocket when coughing, sneezing or clearing throat
	Left the table to blow my nose and immediately washed my hands with soap and water- ensuring that gloves and Kleenex are disposed of properly
	Wiped down all light switches, fan switches and door handles with sanitizer throughout the day
	Ensured there was an adequate supply of cleaners and sanitizer in my area and notified my Crew Leader if more was needed

Did you have any safety concerns while performing your duties at the hatchery today? If so, please explain and return this form to a member of management.	

The following posters and signage will be hung at the worksites and on-site accommodations by the appointed Coordinator as it applies.

Hand Hygiene Poster



# HOW TO WEAR A MEDICAL MASK SAFELY

who.int/epi-win

# Do's →



Wash your hands before touching the mask



Inspect the mask for tears or holes



Find the top side, where the metal piece or stiff edge is



Ensure the colored-side faces outwards



Place the metal piece or stiff edge over your nose



Cover your mouth, nose, and chin



Adjust the mask to your face without leaving gaps on the sides



Avoid touching the mask



Remove the mask from behind the ears or head



Keep the mask away from you and surfaces while removing it



Discard the mask immediately after use preferably into a closed bin



Wash your hands after discarding the mask

# Don'ts →



Do not wear a loose mask



Do not touch the front of the mask



Do not remove the mask to talk to someone or do other things that would require touching the mask



Do not Use a ripped or damp mask



Do not wear the mask only over mouth or nose



Do not leave your used mask within the reach of others



Do not re-use the mask

Remember that masks alone cannot protect you from COVID-19. Maintain at least 1 metre distance from others and wash your hands frequently and thoroughly, even while wearing a mask.





# How to Properly Remove Gloves

# To protect yourself, use the following steps to take off gloves:

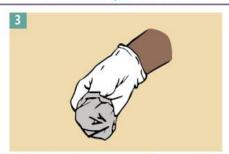


Grasp the outside of one glove at the wrist.

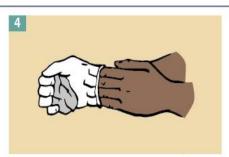
Do not touch your bare skin.



Peel the glove away from your body, pulling it inside out.



Hold the glove you just removed in your gloved hand.



Peel off the second glove by putting your fingers inside the glove at the top of your wrist.



Turn the second glove inside out while pulling it away from your body, leaving the first glove inside the second.



Dispose of the gloves safely. Do not reuse the gloves.



Clean your hands immediately after removing gloves.



# Coronavirus COVID-19



BC Centre for Disease Control | BC Ministry of Health

## **Coronavirus Prevention**





Wash your hands often with soap and water for at least 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer.





Avoid touching your eyes, nose, and mouth with unwashed hands.





Cover your cough or sneeze with a tissue, then throw the tissue in the trash.





Avoid close contact with people who are sick.





Clean and disinfect frequently touched objects and surfaces.





Stay home when you are sick.





WEARING A MASK IS NOT AN EFFECTIVE MEASURE TO KEEP YOURSELF SAFE FROM VIRAL INFECTION.







If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.





# Coronavirus COVID-19

BC Centre for Disease Control | BC Ministry of Health



#### CLEANING AND DISINFECTANTS FOR PUBLIC SETTINGS

Good cleaning and disinfection are essential to prevent the spread of COVID-19 in BC.

This document provides advice to public groups, transit, schools, universities, and other institutions in BC on cleaning for non-health care settings.

Make sure to wash hands with plain soap and water after cleaning or use an alcohol-based hand sanitizer.



OR



Cleaning: the physical removal of visible soiling (e.g., dust, soil, blood, mucus). Cleaning removes, rather than kills, viruses and bacteria. It is done with water, detergents, and steady friction from cleaning cloth.

Disinfection: the killing of viruses and bacteria. A disinfectant is only applied to objects; never on the human body.

All visibly soiled surfaces should be cleaned before disinfection.

Cleaning for the COVID-19 virus is the same as for other common viruses. Cleaning products and disinfectants that are regularly used in households are strong enough to deactivate coronaviruses and prevent their spread.

#### Recommendations:

- General cleaning and disinfecting of surfaces should occur at least once a day.
- Clean and disinfect highly touched surfaces at least twice a day and when visibly dirty (e.g., door knobs, light switches, cupboard handles, grab bars, hand rails, tables, phones, bathrooms, keyboards).
- Remove items that cannot be easily cleaned (e.g., newspapers, magazines, books, toys).

#### Cleaning .....

For cleaning, water and detergent (e.g., liquid dishwashing soap), or common household cleaning wipes should be used, along with good physical cleaning practices (i.e., using strong action on surfaces).

#### Disinfection ......

For disinfection, common household disinfectants such as ready-to-use disinfecting wipes and pre-made solutions (no dilution needed) can be used. Use the figure and table below for guidance. Always follow the manufacturer's instructions printed on the bottle.

IPC v2.0



Ministry of Health

BC Centre for Disease Control

If you have fever, a new cough, or are having difficulty breathing, call 8-1-1.

Non-medical inquiries 1-888-COVID19 (1888-268-4319) (ex. travel, physical distancing): or text 604-630-0300





## Notice of Office Closure

The Office is currently CLOSED due to COVID-19. Entry is not permitted by anyone other than designated personnel.

If you require assistance, please contact hr@fuerstevaccinations.com or kkirschner@fuerstevaccinations.com and we will be happy to help you.

Thank you for your patience during this time,

The Management Team



## Notice of Occupancy Limit for Head Office

Please note that a maximum of five (5) people are permitted to occupy the Office due to COVID-19 at this time.

- Please knock and someone will advise whether entry is possible.
- If you are experiencing any symptoms of COVID-19 (cough, sore throat, difficulty breathing, fever), you are not permitted to enter the building and must go home, call 811 and isolate for 10 days.
- If you have been out of the country in the last 14 days or have come in contact with someone who has displayed symptoms of COVID-19, you are not permitted to enter the building and must go home and isolate.
- All sanitization, hygiene and physical distancing measures are in effect.

Thank you for your patience during this time,

The Management Team



## The Office is Open Notice

- If you are experiencing any symptoms of COVID-19 (cough, sore throat, difficulty breathing, fever), you are not permitted to enter the building and must go home, call 811 and isolate for 10 days.
- If you have been out of the country in the last 14 days or have come in contact with someone who has displayed symptoms of COVID-19, you are not permitted to enter the building and must go home and isolate.
- All sanitization, hygiene and physical distancing measures are in effect.

Thank you for your patience during this time,

The Management Team



#### COVID-19 Self Declaration Form

Disclosure of exposure or illness is required in order to safeguard the health and safety of our Crew and

restrict the outbreak within Fuerste Vaccination Services and the hatcheries which we attend. Information collected will be kept safely and any personal information will not be disclosed unless as required by law or with the Crew Member's express consent.						
Click or ta	p here to enter text.					
Employee N	lame					
Question	naire – to be complete	ed and returned to Jennife	er .			
	<ol> <li>Have you travelled outside of Canada and returned on or after March 12, 2020?</li></ol>					
b	<ul> <li>2. Have you been in close contact with a person diagnosed with, or suspected of being infected by COVID-19?  Yes No</li> <li>If yes,</li> <li>a. What is your relationship with this person? Click or tap here to enter text.</li> <li>b. Do you live in the same home as this person? Yes No</li> <li>c. What was the last date of contact? Click or tap here to enter text.</li> </ul>					
3. H	ave you or are you ex	periencing any of the fol	owing symptoms:			
C D	ever ough ifficulty Breathing ate the symptoms firs	☐ Yes ☐ No ☐ Yes ☐ No ☐ Yes ☐ No :t appeared: Click or tap h	ere to enter text.			
If you have answered yes to any of the questions above, you must self-isolate for a period of 14 days from the date you returned to Canada (as of March 12, 2020), from the last date of contact with a person diagnosed with, or suspected of being infected by COVID-19, or the date you first experienced symptoms.						
If you are experiencing symptoms, please call 811 for medical advice.						
I confirm that the above information is accurate:						
Click or tag text.	here to enter text.	Click or tap here t	enter text.	Click or tap here to enter		
Name/Sign	ature	Phone Number		Date		

#### **CREW MEMBER CONFIRMATION OF ILLNESS FORM**

Please only complete this form if your absence is due to symptoms of COVID-19, you are pending test results, or if you have a clinical diagnosis of COVID-19.

In recognition of the increasing pressure on our medical clinics and hospitals due to the COVID-19 pandemic, we will not, at the outset, require an Attending Physician's Statement in order to substantiate your absence if your absence is due to COVID-19 symptoms, or a clinical diagnosis of the virus. This is a time limited exception as we move through the current situation.

In the absence of an Attending Physician's Statement, we require confirmation of your symptoms, your test results, and any medical treatment you may have received for your condition. Accordingly, please complete and sign this form and return it to Jennifer at <a href="mailto:hr@fuerstevaccinations.com">hr@fuerstevaccinations.com</a>.

1. P	lease confirm:			
Crev	Member Name: Click or	tap here to enter text.		
Date	symptoms first appeared:	Click or tap to enter a date.		
First	day absent from work:	Click or tap to enter a date.		
2. F	lease indicate the symptoms	associated with your illness:		
	Fever		Decreased appetite	
	Cough		Runny nose	
	Fatigue		Nausea	
	Muscle aches		Vomiting	
□ Sore throat □			Headache	
	Shortness of breath			
	Other Click or tap here to en	ter text.		
	you have any other health po	oblems that might affect your	r recovery (e.g. diabetes, heart disease, respiratory illn	ess)?  4. A) Date of medical consultation relation to
COVI	<b>D-19</b> : Click or tap to enter a	date.		relation to
	B) Who was the medical	consultation with (e.g.: physic	cian/clinic/hospital/Public Health authority)?	
Click	or tap here to enter text.			

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A) Date of COVID-19 test: Click or tap to enter a date.

B) Name, address and phone number of facility where test conducted:

5.

Click or tap here	to enter text.					
C) Test result:						
	Positive					
	Negative					
□ Attach	☐ Pending – if pending, date expected: Click or tap to enter a date.  Attached test resulted if available.					
6. Have you been	instructed to quarantine?					
	Yes, as of this date: Click of	or tap to enter a date.				
	No					
<ul> <li>When do you expect the quarantine to end? Click or tap to enter a date.</li> <li>When are you next seeing your physician? Click or tap to enter a date.</li> <li>When do you expect to return to work? Click or tap to enter a date.</li> </ul> 7. Any other details relating to your illness you would like us to know:						
Click or tap here	to enter text.					
certify that the sta	atements in this form are true	and complete and understa	and that further information may be req	uired to validate my		
Name: Click or to	ap here to enter text.	Phone Number:	Click or tap here to enter text.			
Email: Click or ta	p here to enter text.	Cell Phone Number:	Click or tap here to enter text.			
Signature:		Date:	Click or tap to enter a date.			

For more information on the novel coronavirus, go to the Public Health Agency of Canada's website at:  $\underline{ https://www.canada.ca/en/public-health.html}$