**Pandemic Preparedness (COP)**

1. **Purpose**

The purpose of the Pandemic Preparedness Code of Practice (COP) is to set a minimum standard and provide operational guidance for minimizing worker exposure prevent infection and.

**2.0 Scope**

This Pandemic Preparedness Code of Practice applies to all worksites and encompasses all work activities. Contractors are expected to have their own management program in place that offers an equivalent level of awareness and safety. This Pandemic Preparedness Code of Practice supersedes any prior revisions.

**3.0 What is a Pandemic?**

A pandemic is a worldwide outbreak of a communicable disease that affects a large proportion of the population. Concerns exist that a pandemic involving an influenza virus will occur.

**3.1 Health Effects**

Influenza is an infection of the lungs and airways caused by an influenza virus. Pandemic influenza occurs when a new influenza virus, with an ability to spread easily from human to human, circulates worldwide. Because most people will have no immunity to the pandemic influenza virus, infection, illness rates and number of deaths are expected to be higher than during seasonal epidemics of normal influenza.

The symptoms of pandemic influenza may be more severe than seasonal influenza. Influenza is different from the common cold or the stomach flu: refer to Appendix 1 for a comparison of the symptoms.

**3.2 How is a pandemic influenza treated**

Currently, there is no pandemic influenza vaccine available. The vaccine for pandemic influenza can be produced only after the virus has been identified. Once identified, it will take approximately 4 – 6 months to produce the new pandemic influenza vaccine.

**3.3 Pandemic Management Program**

As a result of the health risks associated with influenza, all worksites should have a management program. The pandemic management program must be implemented and shall consist of the following items:

* Reduce employee interpersonal exposure.
* Reduce close contact with customers or co-workers through the use of physical barriers when possible; increase use of mail, fax, telephone, or email communication.
* Postpone customer interactions.
* When customer service must be done in person consider creating a buffer zone of at least 2 metres between an employee and a customer and keep meetings as short as possible.
* Work from home.
* Assignment of immuno-compromised or pregnant workers to lower pandemic influenza exposure job tasks.
* Avoid locations or activities that may represent a high risk of exposure to influenza.
* Seek and follow travel advice provided by public health officials.

**3.3.1 Pandemic Influenza exposure**

During pandemic influenza, you may contact the virus inside and outside of the workplace. How can you protect workplace health and safety? How will employment standards apply during pandemic influenza? Read on.

Pandemic influenza is a potential biological hazard you need to consider during hazard assessment. and emergency planning. When pandemic influenza is identified by the World Health Organization (WHO) and the Alberta Pandemic Influenza Plan (APIP) is activated, repeat the hazard assessment to: • assess the increased risk of exposure to pandemic influenza virus in job tasks and put appropriate controls in place • assess workplace hazards due to absenteeism, resulting from illness or caring for ill family and friends, to establish controls addressing any new hazards or operational changes.

**3.3.2 Hazard Assessment**

The hazard assessment tool focuses on potential and actual health and safety issues during pandemic influenza and methods for controlling or reducing the risk of exposure to pandemic influenza in the workplace. Information is included on workplace emergency preparation for pandemic influenza. The final section of this document includes information to assist in developing policies to address employment standard issues.

The scope of work or individual procedures will dictate the number of persons required to safely carry out a task. If workers cannot be present due to exposure or contraction of the disease a new Hazard Assessment must be conducted. The client must be involved to determine if the job can safely proceed.

Options to explore are:

* Replace the worker with one of equal job skills
  + Utilizing current employees and approved contractors
* If multiple employees become unavailable, evaluate all ongoing work and prioritize which jobs will continue and which may require a temporary work stoppage.
* Can the job scope be modified to safely continue with less workers?

Factors to consider are:

* Would the job be considered essential or non-essential for the industry?
* Maintenance and repair of existing infrastructure should be given priority over new projects
* Can various clients meet and agree on a triage of utilizing reduced level of service?

Office workers deemed non-essential should self-isolate.

Office workers that are required to support the field staff should work from home if possible.

Maintain open lines of communication with client representatives if a significant reduction of field staff levels occurs.

**3.3.3 Exposure**

Exposure to a pandemic influenza virus may occur in a variety of ways such as:

* Shaking hands with an infected person or touching a surface contaminated with the virus followed by touching one’s eyes, nose, or mouth
* Infectious droplets (from a coughing or sneezing person) landing in the eye or onto the mucosa (moist inner surface) of the nose or mouth
* Breathing in air containing smaller sized droplets or particles containing influenza viruses (generated, for example, from coughing, sneezing, and aerosol-generating medical procedures in infected patients)
* Sharing food items or utensils with an infected person.

**3.3.4 Pandemic Hazard Controls**

Safety First Muirhead’s will reduce workers’ exposure at worksites by ensuring control strategies are implemented in the following order, and in combination where necessary:

1. Elimination/substitution

2. Engineering controls

3. Administrative controls

4. Personal protective equipment (PPE)

**3.3.4.1 Elimination/Substitution**

During and outbreak where a high potential of contraction exists eliminating services provided or working remotely away from others should be evaluated as a potential strategy. Social distancing while away from work should be recommended to employees. When customer service must be done in person consider creating a buffer zone of at least 2 metres between an employee and a customer and keep meetings as short as possible. Assignment of immuno-compromised or pregnant workers to lower pandemic influenza exposure job task.

**3.3.4.2 Engineering Controls**

* Physical barriers to isolate, for example, Plexiglas
* Ventilation (American Industrial Hygiene Association, 2006) - General ventilation that ensures the flow of non-contaminated to potentially contaminated air throughout the facility

**3.3.4.3 Administrative Controls**

Administrative controls may be used in combination to protect and reduce workplace exposures during Pandemic Influenza. Administrative controls include: training; hand hygiene, respiratory hygiene, social distancing; alternate work arrangements, workplace cleaning, restricting workplace entry, prophylactic antiviral medication and promotion of pandemic influenza vaccine when available. Encourage workers to avoid large crowed gatherings during times of outbreaks.

Identify areas that have a high likelihood of contamination such as where hand contact is frequent. Implement a cleaning procedure and specify a frequency.

**RESOURCES**

Work practices shall be implemented to reduce potential exposure. These include but are not limited to the following:

* + Educate workers of the hazard associated with exposure.
  + Conduct pre-job hazard assessments.
  + Use available engineering controls to minimize the risk of exposure.
  + Consider exposure in procedures where close contact is likely.

**3.3.4.4 Personal Protective Equipment (PPE) Controls**

Where engineering and administrative controls are neither feasible nor effective, personal protective equipment shall be used.

Prophylactic antiviral medications (for example, Tamiflu) that have shown some effectiveness in slowing or minimizing seasonal influenza virus, may be limited in prevention usefulness and availability for pandemic influenza. The Public Health Agency of Canada makes recommendation for the use of antiviral drugs.

**Respiratory Protective Equipment (RPE)**

The level of respiratory protection required depends on the atmospheric concentration of benzene and duration of exposure.

Where the workplace hazard assessment identifies the need for RPE or respirators (N95 or better) the specific legislated requirements are outlined in the Alberta OHS Act, Regulations and Code

Medics should wear eye protection and gloves when in close contact with a symptomatic patient.

**4.0 Roles and Responsibilities The following responsibilities apply to this practice:**

**Roles and Responsibilities Role Description**

|  |  |
| --- | --- |
| Safety First Muirhead’s Leadership | Ensure all practices will be reviewed and updated on a yearly cycle or more frequently as required. |
| Supervision and Site Leadership | Ensure training is provided to employees.  Keep records of employee training in the Training records/data files. |
| Safety First Muirhead’s Ltd Site Supervisors | Communicate pandemic control procedures to workers. • Notify workers of protocol or job description changes made to reduce exposure • Ensure the appropriate PPE is available. • Ensure employees use PPE when required. • Respond to worker questions directly or by seeking additional feedback from H&S personnel. • Provide feedback to the asset team and corporate management concerning the value and effectiveness of this COP and all associated procedures. • Ensure workers have been oriented to the hazards and the controls that are in place. The LMS or other suitable means to track competency may be used for this purpose. • Ensure contractors engaged to do work on behalf have practices to manage hazards that the contractor’s employees may encounter while working on worksites.  Apply this COP to worksites under their control and establish the necessary competencies for those who may be engaged to support the development and implementation of the COP requirements. |
| Workers | * Familiarize themselves with this COP and all associated procedures. * Be aware of the hazards of exposure and adhere to the controls that are in place to protect their health and safety. * Apply recommended practices and procedures, including PPE. * Seek clarification concerning any practice or procedure through their immediate Supervisor. * Report to their Supervisor any incidents and/or unusual conditions that may occur during the work and stop the work if necessary. |
| Contractors | • Review any practices and procedures provided to them.  • Apply information from practices and procedures as minimum work standards as appropriate to their work situation.  • Seek clarification concerning any practice or procedure through their immediate Supervisor. |

**5.0 Training**

Pandemic Preparedness Code of Practice training is to maintain a baseline competency that includes an understanding of benzene hazards and controls.

**5.1 Training**

Frontline supervisors and workers should review this document prior to influenza season or notice of pending epidemic. Employees are encouraged to obtain appropriate immunization.

**6.0 Quality Assurance**

**6.1 Performance Measurement**

Compliance with this practice and program effectiveness shall be assessed through program assessments and internal audits, or other measurement criteria as specified in the companies QA Standard. Measurement can also be accomplished through the tracking of appropriate Key Performance Indicators (KPI).

Management of Change

Practice Verification

6.2 The document owner will complete and document reviews of this practice, as follows:

6.3

* at minimum once every three years
* if there is a significant regulation or industry best practice change that indicates the need for review
* if an incident investigation indicates the causes were related to unclear or inadequate written instructions described within this practice

If frequent and multiple variances are required due to operational needs, the reason(s) will be investigated, and the document owner will determine if there is a business need to update the practice.

If submitted MOC requests indicate gaps or significant improvement opportunities, the document owner will determine if there is a business need to update the practice.

**7.0 Glossary**

The following definitions and acronyms are used in this document:

**Terms and Definitions Term Definition**

Acronyms, Initialisms and Abbreviations

COP- Code of practice

PPE- Personal protective equipment

RPE- Respiratory protective equipment

MOC – Management of Change

*8.0 References*

*8.1 External Documents The following external documents support this practice:*

*WHO*

*Public Health Agency of Canada*

[*http://employment.alberta.ca/documents/WHS/WHS-PUB\_PE002.pdf*](http://employment.alberta.ca/documents/WHS/WHS-PUB_PE002.pdf)

[*www.pandemicflu.gov/plan/businesschecklist.html*](http://www.pandemicflu.gov/plan/businesschecklist.html)

[*www.health.alberta.ca*](http://www.health.alberta.ca)

[*www.alberta.ca/coronavirus-info-for-albertans.aspx*](http://www.alberta.ca/coronavirus-info-for-albertans.aspx)

[*www.ccohs.ca/pandemic/tools.html*](http://www.ccohs.ca/pandemic/tools.html)

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**Appendix B**

**Benzene Detection Procedure**

1 **Policy**

1.1. All Safety First Muirhead’s Ltd. employees/contractors must follow Safety First procedure for Benzene testing during any integrity breaks where benzene may be present that could be harmful or alter atmospheric conditions.

2 **Equipment**

2.2. Possible Equipment required:

* SCBA/ SABA for gas tester
* SCBA for back up rescue personnel
* Passive four head monitor
* UltraRAE 3000
* Benzene tubes
* Benzene Case Equipped with Charging dock, Charcoal filter, Filters, Benzene tubes, PID Lamp Cleaning Kit, Calibration Certificate, UltraRAE300 Users Guide, Safety First Benzene Code of Practice.
* Benzene Calibration Cylinder

**3 Procedure:**

3.1 Calibration

The UltraRAE3000 must be calibrated before work commences as per manufactures specifications refer to page. 45 (20.1) This must be performed at the Safety First Muirhead’s Ltd. shop prior to leaving to site in case system fails.

The UltraRAE3000 must be calibrated weekly if on a continues job this can either be done on the jobsite or at the Safety First Muirhead’s Ltd shop.

4.1 Zeroing

The UltraRAE300 must be Zeroed every working day onsite as per manufactures specifications refer to page. 55 (22.2)

**4.2** RAE-SEP Tubes

Representative to read the back of the tube container prior to using.

**5.0 To complete initial benzene test**:

* Confirm calibration is done
* Place tube in monitor
* Safety first representative shall don SABA or SCBA.
* Enter area of integrity break to perform gas test.
* Safety First representative must ensure that monitor is within calibration window and monitor has passed test.
* Representative must ensure that detector tubes are appropriate for the detector and have not expired.
* Representative while under SCBA/SABA shall hold the monitor no closer than 12inch from the opening of the expected release point.
* Test will be no longer than 60 sec.
* Tube to be replace after each test.
* Once gas testing is complete, results of test are to be provided to client in writing and contractor representative. If they deem the area to be safe and atmosphere acceptable for working without SABA, the crew can proceed without breathing apparatus at the Client and/or contractor representative’s direction. No Safety First Muirhead’s Ltd. employee or contractor is authorized to give direction on whether the atmosphere is deemed safe for removal of SABA.

Please note a member of the crew may be utilized for the initial test given they are properly trained and follow COP and under direct supervision of the client representative or Safety first Muirhead’s ltd representative.

I\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Acknowledge that I have read and understand the contents of this material.

Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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