



COVID SAFETY PLAN

Responsible: VP Operations

Accountable: President

Consulted: VP Operations, Operations Manager, Intake Team Lead

SOMA's Joint Health and Safety Committee has developed a plan to address the risks within the office. This plan is posted on the Health & Safety Committee bulletin board and a digital copy can be accessed within the Health & Safety folder.

Preamble: In response to the pandemic of the novel coronavirus, COVID-19, SOMA will employ the following precautions to ensure the health and safety of our employees and all stakeholders.

Please reference the Standard Operating Procedure (SOP) entitled 'SOP-COVID-19 Response and Procedures Update' for additional information.

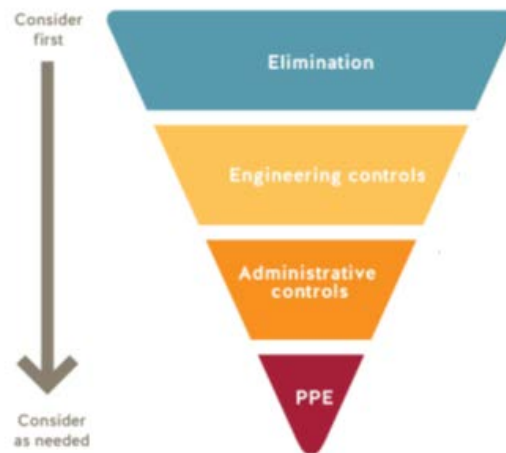
STEP 1: RISK ASSESSMENT

Measures for protecting workers from exposure to, and infection with, COVID-19 depend on the type of work being performed and exposure risk, including potential for interaction with infectious people and contamination of the work environment. In order to develop appropriate infection control strategies SOMA has conducted a risk assessment, using appropriate combinations of administrative controls, safe work practices, sanitization and personal protective equipment (PPE).

In evaluating risk, the following were considered:

1. Unknown exposure potential resulting from claimants, transportation workers, interpreters, couriers and other non-SOMA personnel entering the physical office.
2. Unknown exposure resulting from gathering areas, such as assessment rooms, reception area, meeting and lunch rooms.
3. SOMA employees working in the office who are or may have been exposed to high risk environments (i.e. hospitals, nursing homes, etc.)
4. Identification of employees or other stakeholders who have travelled in the recent past.
5. Identification of equipment that staff / assessors share while working (printer / photocopier).
6. Identified surfaces that people touch often, such as doorknobs, badge scanners and light switches.
7. Involvement of the Joint Health and Safety Committee.

STEP 2: CONTROL AND PREVENTION



First level protection (elimination): Limit access to clinics, number of staff within the workplace and ensure physical distance whenever possible.

Measures in place:

- a. Building access: The main entrance to 8800 Dufferin Street building management has provided a sanitization station and has put in place signage regarding safety measures, such as wearing a mask and social distancing.
- b. Office access: The main entrance to Suite 105 is now locked. Employees can gain access with their access badges. There is signage on the door and a door bell. Visitors to the office are requested to ring the doorbell than stand 6 ft from the door, allowing staff to answer the door and address enquiries or complete the screening protocols (see Screening Questions).
- c. Courier packages are to be left at the office door/slid under the door to maintain social distancing from delivery personnel. The courier will ring the doorbell and wait for the staff member to open the door to collect packages left outside of the office. The package is collected by the staff member once the courier has exited the building and is sanitized and stored (up to three days) prior to being entered into the system.
- d. Staff have returned to the office on a hybrid work schedule. An office schedule can be located on the shared T-drive for staff to access to review their days in the office.
- e. All staff are directed to stay home if they experience any symptoms that could be related to COVID, and to remain home until they are no longer symptomatic and/or they are medically cleared to return to work (i.e. confirmation of negative COVID-19 diagnostic testing or clear of symptoms for 14 days). A Rapid Antigen Test is available within the office (to be conducted by trained staff) if indicated.
- f. Staff who are scheduled to attend the office must complete a COVID screen at home prior to leaving their home; if there are any issues / or red flags identified they are to contact management to discuss further prior to attending the office.
- g. All staff in the office are required to practice social distancing in the course of their workday, maintaining at least a 2-metre distance from other employees at all times.
- h. A face covering must be worn by all employees in the workplace at any time that they are, or may be, unable to maintain at least two metres from anyone else while in the workplace (“social distance”). See Fourth level of protection section.

- i. All common surfaces are cleaned with disinfectant at the beginning and end of each shift, and intermittently as required (i.e. after visits from non-SOMA personnel).
- j. SOMA staff have been directed to follow the WHO / Public Health recommended prevention protocols throughout their shift (see Individual Prevention Protocols).
- k. Waiting room furniture has been re-organized to ensure at least 2 metres between chairs.
- l. Reception area has a red line / yellow circles on the floor indicating the 2-metre distance from the reception desk. Additional yellow circles on the floor indicates restricted access at a 2-metre distance to the employee stationed within this area.
- m. Claimants are be advised not to bring other people with them to the assessments, as they may be requested to wait outside the building or in their vehicle, as no additional individuals will be permitted in the examination or waiting area with the claimant unless medically necessary.
- n. In assessment rooms, chairs are positioned 2 metres apart. In the event an interpreter is present, a larger assessment room is utilized.
- o. An occupancy limit has been established within the office / clinical area, allowing for social distancing and the protocols for number of people allowed to gather at one time as set out by Public Health:
 - i. Kitchen: 1 staff member at a time; chairs have been eliminated within this area; staff is to complete task in the kitchen, clean as indicated and vacate room, consuming food or beverages in another area.
 - ii. Boardroom: can accommodate up to 6 staff members allowing for the 2 metre social distancing. For assessment purposes can accommodate up to 3 people, allowing for testing materials.
 - iii. Assessment Rooms 1, and 5: up to 3 people.
 - iv. Assessment Room 3 and 4: up to 2 people.
 - v. Reception area: up to 6 people.
 - vi. Offices: due to design of work space varies from 1 up to 4 employees allowing for social distancing.
- p. COVID screening questionnaires from visitors to the office are stored for a period of three months to assist with contact tracing. Examinee COVID questionnaires are uploaded to their case. Emergency numbers for staff are accessible by management and the H&S Committee.
- q. All staff are requested to review the COVID screen prior to leaving home. If they are ill or have identified any red flags or concerns, prior to leaving their home or arrival at the office the staff member is to contact a management representative and discuss the concerns and next steps as identified. Depending on the individual case, the staff member may be asked to work from home, follow up with their health care practitioner, attend for COVID testing, or self-isolation as per guideline from Public Health. The staff members have the ability to work from home in the event that another member of the household has tested positive or been in contact with someone who has tested positive.

Second level protection (engineering): Barriers and partitions

Measures in place:

- a. Plexiglas barriers/partitions are available to separate the staff member/assessor from the claimant. This are utilized within the assessment rooms, for interview of claimants and completion of paper tasks; utilized in common work areas for staff.

- b. Indicated areas, marked with red tape / yellow circles devoid of furniture within the reception area provide an additional barrier limiting access to staff.
- c. Assessment rooms (including assessment tools) will be thoroughly cleaned and all surfaces disinfected after each assessment.
- d. All common surfaces are cleaned with disinfectant at the beginning and end of each shift, and intermittently as required (i.e. after visits from non-SOMA personnel).

Third level protection (administrative): Rules and guidelines

Measures in place:

- a. Additional signage pertaining to COVID-19 risks, environmental sanitation, physical distancing and personal hygiene has been put in place throughout the office.
- b. We have clearly communicated these rules and guidelines to employees or other stakeholders.
- c. Common areas and assessment rooms (including assessment tools) are thoroughly cleaned and all surfaces disinfected after each use, using single use disposable products and sanitization products which have been identified to be effective against the virus.
- d. Common areas, such as the kitchen area and printer room, is to be used by one staff member at a time, with limited prolonged stay in the area.
- e. External assessment facilities have been contacted to ensure they are following guidelines set out by Public Health, Professional Colleges and the AIAC. They have been provided with requirements to conduct assessments by SOMA.
- f. Please reference the SOP COVID-19 Response and Procedures Update for additional information.

Fourth level protection: Using masks (optional measure in addition to other control measures)

Measures in place:

- a. There is proper signage regarding the placement and removal of PPE, social distancing and washing / sanitizing of hands throughout the office.
- b. The examinee / assessors are provided with PPE when they arrive at the office, which may include masks, gloves and, if indicated, facial shields.
- c. Staff has access to masks within the office / clinics and have been instructed on proper usage, how to properly don and doff, and proper disposal procedures.
- d. Staff has been instructed to frequently wash their hands with soap and water for at least 20 seconds. When soap and running water are unavailable, they are to use an alcohol-based hand rub with at least 60% alcohol. Staff is instructed to immediately wash their hands if they are visibly soiled.
- e. Staff has been instructed to avoid touching their eyes, nose, or mouth with unwashed hands.
- f. Staff has been instructed to maintain social distancing (2 metres).
- g. A face covering must be worn by all employees in the workplace at any time that they are, or may be, unable to maintain at least two metres from anyone else while in the workplace (“social distance”). Therefore, an employee in their private office does not need to wear a face covering so long as that employee is alone in their private office. Likewise, if social distance can certainly be maintained between staff in administrative areas, then a face covering need not be worn. However, if staff in administrative areas are mobile throughout the day, sit near each other, or engage in-person with members of the public, we would recommend that they wear face

coverings at all times given the fact that social distancing may not always be possible. Even if staff in administrative areas are stationary for the majority of their day and can certainly maintain a social distance from other staff and members of the public, a face covering must still be worn by staff when they get up from their workstations to move around the workplace. Exceptions are made for any employee who is unable to wear a face covering for physical/medical reasons (e.g. a chronic lung disease that causes difficulty breathing while wearing a face covering), with a medical note from their physician. Likewise, more broadly, face coverings can be removed temporarily for health and safety purposes. Face coverings can also be removed temporarily to eat and/or drink.

To reduce the risk of surface transmission, effective cleaning and hygiene practices have been implemented, such as:

- a. Proper signage throughout the office / clinical areas.
- b. Common areas and assessment rooms (including assessment tools) are thoroughly cleaned and all surfaces disinfected after each use, using single use disposable products and sanitization products which have been identified to be effective against the virus.
- c. We have implemented cleaning protocols for all common areas and surfaces — e.g., kitchen facilities, washrooms, shared tables, light switches, and door handles, etc. This includes the frequency that these items must be cleaned as well as the specific protocols.
- d. Employees utilizing common equipment such as kitchen items / utensils, have been instructed to clean this items and have been provided with proper cleaning supplies.
- e. Our contracted cleaning company cleans and sanitizes the office area weekly, in compliance with our updated COVID-19 expectations.
- f. Detailed information regarding cleaning and disinfecting products are available to all staff within our WHMIS manual.
- g. The office / clinical area has enough handwashing facilities on site for employees, assessors and clients. Handwashing locations are visible and easily accessed.
- h. 'Handwashing' and 'Cover Coughs and Sneezes' posters are posted within the office.
- i. SOMA's protocols have been shared with all rental facilities and assessors conducting assessments in their own offices to ensure compliance for off-site assessments.

STEP 3: Development of Policies, including communication and training with staff and stakeholders.

All of the above noted requirements and protocols are addressed in our SOP 'COVID-19 Response and Procedures Update'. This is a live document, updated regularly to address all current Public Health and Ministry of Health guidance and recommendations. This document is shared with the entire staff, and other stakeholders as required, and all effected parties are apprised of updates via email, as they occur.

There are regular discussions with the President of SOMA and the Health & Safety staff and management representative to discuss concerns or adjustments to policies based on Public Health recommendations. Human Resources is consulted in the event of a positive COVID test, exposure to a person who has tested positive to COVID-19 by a staff member, or the direction of a health care practitioner for the staff member to self-isolate.

STEP 4: Assess, monitor and update Control and Prevention plans to evaluate and reduce risks on an ongoing basis.

All current policies and procedures have been communicated to all staff, whether they are working remotely or in the office. Staff working in the office (regularly or intermittently) were/are provided training on their first shift in the office, and training is updated regularly as protocols change. Further risk assessments will be conducted as we prepare for resumption of more regular operations, and the potential need for increasing the number of staff in the office versus working remotely. This will include any further physical distancing measures required (i.e. physically changing office/work spaces to accommodate physical distancing).

Fully Vaccination Definition

* As per the Office of the Chief Medical Officer of Health a person is fully vaccinated against COVID-19 if,

(a) they have received,

(i) the full series of a COVID-19 vaccine authorized by Health Canada, or any combination of such vaccines,

(ii) one or two doses of a COVID-19 vaccine not authorized by Health Canada, followed by one dose of a COVID-19 mRNA vaccine authorized by Health Canada, or

(iii) three doses of a COVID-19 vaccine not authorized by Health Canada; and

(b) they received their final dose of the COVID-19 vaccine at least 14 days before seeking access to the premises.

Review History:

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Approved by: Mark Wigle, President