

Issue Date	05/28/2020	IAMC-HSE-2-001	Originator	Brad Huber
Revision	Initial		Approver	IAMC IMSC

# IAMC-TMX INDIGENOUS MONITORING PROGRAM COVID-19 PROTOCOLS

HEALTH & SAFETY

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## Note from the Chair

As the Indigenous Advisory & Monitoring Committee for TMX (IAMC-TMX), Indigenous representatives have worked to be at the table and on the ground to protect our lands and waters. The Indigenous Monitoring Subcommittee (IMSC) works with federal regulators to ensure that Monitors are on site working with federal regulators during compliance verification activities and surveillance activities. Our top priority is to ensure that Monitors are working safely and return home safely to their families and communities. With the arrival of COVID-19, we face a new risk to the health and safety of Monitors.

Our communities have been clear; so long as construction is continuing, inspections need to continue. Where inspections continue, our Monitors need to be boots on the ground, addressing critical issues and risks on behalf of our communities. In order to support a safe return to the field, the IAMC-TMX supported the creation of a COVID safety plan for Monitors. It was developed in collaboration with our communities, with input and advice from federal regulators, and with occupational health and safety experts and emergency management expertise. Our goal has always been to have Monitors on-site protecting our lands and waters, and return home safe. COVID-19 adds another layer of responsibility to protect the safety of our Monitors, their families and their communities. This plan supports our strategic direction and goals.

I wish to thank Marc Pauze and Kathryn Eagles from the CER, Anthony Cotter and Marie-Luise Ermisch from Natural Resources Canada, William Brewis and Alston Bonamis from DFO, Jennifer Wasylyk from Parks Canada, Indigenous representatives on the IAMC-TMX and IMSC, and every Indigenous community and Monitor that participated in the drafting of this document. A special thanks to Isaac Commandante and Bradley Huber from Behr Integrated Solutions for their work in the drafting and orientation of this COVID safety plan.

### **Ray Cardinal**

*Chair, Indigenous Monitoring Subcommittee  
IAMC Member*

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## Introduction to this Resource Manual (COVID-19 Protocols)

The IAMC-TMX Indigenous Monitoring Program contracted BEHR Integrated Solutions (BEHR) to co-develop and implement standardized procedures, tools, and training for Partner Communities and Organizations (Employers) and Indigenous Monitors to minimize COVID-19-related risks to the health and safety of individuals and communities involved in the program.

The Guidance was co-developed in collaboration with the IMSC, federal regulators and Employers. Employers were invited to provide input at numerous points throughout the process, including through interviews, written feedback and/or the sharing of community COVID-19 guidance documents.

### Review of this Manual is Mandatory

COVID-19 OHS Guidance training and document review remains mandatory for all Monitors to participate in in-person Compliance Verification Activities (CVAs). It is anticipated that the training and document review will take six hours to complete – it consists of a one-hour video, which will be provided to Employers by the IMSC, and a detailed desktop review of this manual.

**The IMSC requires all Monitors who have not taken the training or are new to the Program to sign below affirming that they have watched the one-hour training video, and have read and understood the content of this manual.** This signed document must be returned to [REDACTED] in order for that Monitor to be eligible for in-person CVAs.

**By signing below, I hereby acknowledge that I have completely read and fully understand the IAMC-TMX Indigenous Monitoring Program COVID-19 Protocols contained in this manual. I also confirm that I have watched and understand the content of the IAMC-TMX Indigenous Monitoring Program COVID-19 Protocol video.**

**Monitor Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Monitor Signature:** \_\_\_\_\_

**Employer:** \_\_\_\_\_

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## Preparing for the inspection

### 1.0 Summary of required COVID-specific PPE

For in-field inspections, Monitors should bring the following COVID-19 specific PPE:

**Personal Hygiene Kit:** It is strongly recommended that Monitors carry their own. *The kit includes wipes, gloves, alcohol-based hand sanitizer, and face coverings.* As Monitors may stay at a hotel during in-person Compliance Verification Activities, Employers may also may also choose to provide Monitors with basic cleaning supplies.

**Face covering:** This is required on site. If Monitors are not required to go into a hot zone, there are no specific requirements for what kind of face covering you need to wear.

**PPE Bag:** A bag to store PPE outside of the Monitor’s home or lodgings. Any kind of bag/container will do (e.g. duffle bag, plastic bag, box).

**In addition to this, ensure that Monitors also bring all the standard mandatory PPE as they would normally.** Monitors need to ensure they take the required precautions when they store and clean their PPE.

Monitors should bring copies of the following tools:

- **“COVID-19 Daily Health Screening Tool”** – Monitors should use on a daily basis to monitor their health during and after the Compliance Verification Activity (Appendix B; page 101)
- **“Self Isolation Plan”** – Monitors should fill this out prior to each inspection, and have it approved by their Employer, to ensure they have a plan in place should a possible infection occur while on site (Appendix B; page 105).

During the Compliance Verification Activity, please make note of any feedback or comments regarding these COVID-19 Safe Work Procedures so they can be addressed.

### 2.0 Vehicle Requirements When Driving During an Inspection

The federal inspection team will confirm the need for a vehicle and discuss vehicle requirements with Monitors in advance of each Compliance Verification Activity (CVA). Most CVAs will require driving on site.

**To decrease the risk of the transmission of COVID-19, Indigenous Monitors and federal regulators are required to drive in separate vehicles at all times.** When two Monitors are assigned to an inspection, the Monitors may drive together in one vehicle or drive separately in two vehicles. It is up to the Employers and Monitors to decide what is most appropriate for the Monitors. **Should more than one Monitor be in the vehicle at one time, the appropriate IAMC-TMX COVID-19 Safe Work Procedures must be followed. These include IAMC-HSE-2-006/007 (Driving) and IAMC-HSE-2-012/013 (Close Proximity Work/Interactions With Others)**

**For CVAs requiring driving on site, the Monitor(s) must have a vehicle that is adequate for driving on the pipeline right-of-way (4WD, high clearance, valid and sufficient insurance per Trans Mountain).** It is recommended that Monitors carry basic vehicle safety accessories (e.g. fire extinguisher, first aid kit, buggy whip, beacon light, reverse beeper, one traffic cone and a small spill kit) on their vehicle at all times in order to be prepared

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for any circumstance. In some cases additional safety accessories may be required by the company for vehicles travelling on the Project footprint – this will be communicated to the Employer and Monitor by the federal inspection team. All required vehicle safety accessories are the responsibility of the Employer/Monitor and must be on their vehicle before arriving on site. All required vehicle safety accessories are an eligible expense under the IAMC-TMX IM Program. Additional vehicle insurance costs associated with fieldwork are also an eligible expense (TMX requires a minimum \$2, 000, 000.00 insurance) – the reimbursable amount will be prorated against the number of days requiring fieldwork under the IAMC-TMX Indigenous Monitoring Program.

Vehicle rentals are an eligible expense. Should a vehicle be rented for the Monitor(s), request the “construction package” from the rental agency. Not all rental agencies will have this package, and Employers may need to identify an agency in a neighboring town or region.

Should the Monitor be unable to drive but able to participate in the inspection, please inform [REDACTED] upon confirmation of participation in the CVA.

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## 1.0 Pandemic Plan

### 1.0 Purpose

This pandemic preparedness plan is to be used to protect personnel while working as an IAMC-TMX Indigenous Monitor. This Pandemic Preparedness Plan guides preparedness and responses to a pandemic, with the intent of:

- Limiting the impact of a pandemic event on the project and/or communities,
- Taking responsible actions to limit the spread of a pandemic and alleviating a disease, suffering and death, and;
- Sustaining critical infrastructure and reducing the economic impact to the project and the communities in which we work.

### 1.1 Responsibilities

It will be the responsibility of the Monitor’s Employer to ensure there is a Pandemic Plan implemented in their area of responsibility and that appropriate plans and resources are in place for preparedness, response, and recovery.

All **Employees** are required to comply with this Pandemic Plan and local requirements. They will report their illness to their supervisor and follow quarantine requirements.

### 1.2 What is a Pandemic?

A pandemic is a disease outbreak that occurs over a wide geographic area and affects a high population proportion. Pandemic influenza (flu) is due to the emergence of a new flu virus, which is markedly different from recently circulating strains. Few, if any, people will have any immunity to this new virus. As much as a quarter, or more, of the population, may be affected. When and how the flu virus might undergo the change necessary to cause a pandemic is unknown. Nevertheless, experts believe a pandemic is inevitable and unavoidable. Pandemic flu can occur under the following circumstances:

- A large change occurs in the genetic structure of a human flu virus (genetic shift);
- A flu virus that previously has not affected humans (such as an avian flu virus) gains the ability to infect people.

Three criteria that must be met for a flu virus to be able to infect people worldwide and cause a pandemic to include:

- A new virus subtype must emerge to which people have little or no immunity;
- The new virus must be able to infect people and cause substantial illness and death;
- The new virus must be easily transmitted from person to person
- For example, when the H1N1 virus emerged, it met the first two conditions. When the COVID-19 virus emerged, it met all three conditions. As long as the virus circulates in the population, there is a continuing risk of H1N1 developing into a pandemic strain capable of efficient and sustained human-to-human transmission. Each area of the world can be hit by two or more separate episodes of wide-spread infection, known as “pandemic waves.” Each wave could span 8-12 weeks.

During these periods, it is possible that:

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- Normal services (water, food, sanitation) may falter;
- Businesses and factories may close;
- Medical facilities will be overwhelmed, especially in developing countries;
- International/Regional travel could be severely restricted;
- Infrastructure of all kinds will be degraded, including transportation and communication;
- Absenteeism may run 25 to 50% due to illness, fear of commuting, public transit disruption, daycare/school closures and caring for sick family members, etc.

### 1.3 Pandemic Phases

The World Health Organization has divided a pandemic into "Phases," referring to an increased risk of a pandemic occurrence. Preparedness planning responses are keyed to these phases.

### 1.4 World Health Organization (WHO) Pandemic Phases

If necessary, and depending upon an assessment of risk to personnel, the employer may declare pandemic phases before or after the WHO makes its formal declaration of pandemic phase escalation. The Project Preparedness Plan guides appropriate actions for Pandemic Phases 3, 4, 5, and 6. These actions will need to remain flexible in their execution, since the timing, geographic origin, and global evolution of the pandemic are not predictable.

PRE-PANDEMIC PERIOD	1	No new influenza subtypes have been detected in humans. An influenza subtype that has caused human infection may be present in animals. If present in animals, the risk of human infection or disease is considered to be low.
	2	No new influenza subtypes have been detected in humans. However, a circulating animal influenza virus subtype poses a substantial risk of human disease.
PANDEMIC ALERT PERIOD	3	Human infection(s) with a new subtype. No human-to-human spread or, at most, rare instances of spread to a close contact.
	4	Small cluster(s) with limited human-to-human transmission. Spread of the disease is highly localized suggesting that the virus is not well adapted to humans.
	5	Larger cluster(s), but human-to-human spread is still considered localized, suggesting that the virus is becoming increasingly better adapted to humans but may not yet be fully transmissible (substantial pandemic risk).
PANDEMIC PERIOD	6	<b>PANDEMIC:</b> Increased and sustained human-to-human transmission in the general population.

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### 1.5 Employer Pandemic Response Team

Upon the WHO declaration of a Phase 4 Pandemic event, the **Employer** will appoint a Pandemic Coordinator (PC), who is normally the HSE Manager or designate.

The PC will act as the single point of contact for all pandemic-related issues for the employer/community.

The PC will:

- Organize a Response Team (RT) to implement the Pandemic Preparedness Plan;
- Monitor pandemic planning by local authorities, to include local public health measures such as travel restrictions, control of antiviral medications/vaccine, group gatherings, isolation, quarantine, or other relevant government policies;
- Evaluate the potential impact of such policies on the project and report such back to the employer management;
- Report new information regarding pandemic threats;
- Report any cases of a pandemic disease in employees to the Centres for Disease Control and Prevention (CDC)

A summary checklist of key actions is shown in **Appendix A**.

### 1.6 Communication

In the event of a pandemic, there will be a great demand for accurate information. Rumors and misinformation are likely to circulate as the dynamic situation progresses. Crisis communication must be timely, coordinated, accurate, and consistent.

The PC will (or designate) monitor developments, with special attention to information being provided by the World Health Organization (WHO), Centres for Disease Control and Prevention (CDC), and Public Health Agency of Canada (PHAC), provincial & local ministries of health. Public health authorities will be making recommendations based on currently available information, such as isolation, quarantine, antiviral/vaccine recommendations, and travel restrictions. Pandemic Coordinators will be responsible for monitoring local information sources and reporting to the CDC on any developments.

The Employer will follow its Emergency Response Plan communications protocol, which will include notification to key contacts, including customers and suppliers, in the event an outbreak has impacted the Employer's ability to perform services. Once operations resume, these key contacts will be notified the employer has resumed operations.

A summary checklist of key communications is shown in **Appendix A**.

### 1.7 Employee Education

Educating employees is an important part of pandemic preparedness. During Pandemic Phases 3 and 4, the information will be provided on:

- What is influenza? How is it transmitted? How can it be prevented, stopping the spread?
- How is a pandemic different from seasonal influenza? Why was the scientific community alarmed about avian influenza A/H1N1 or COVID-19?

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- Will there be shortages of vaccines and medication? How will use be prioritized?
- What is the employer doing? What are the contingency plans being made?
- What are the employer policies concerning illness?
- The draft Communications Plan is outlined in Appendix A.

The information program will include the following options:

- Pandemic Helpline
- Face to face group meetings
- Written brochures, produced by provincial/local health and other specialists,
- Postings on the employer and government websites
- Broadcast health alert e-mails
- Visual aids, such as posters, to remind personnel of personal hygiene and respiratory etiquette procedures

During Pandemic Phase 3, brochures, visual aids, and other materials will be identified and procured. Information packs will be provided to PCs. As the pandemic progresses, staff should be regularly updated, with particular focus on pandemic preparedness actions. Each PC should know what is expected at each stage of the pandemic.

## 1.8 Risk Reduction

### Reducing Exposure and Spread

Early in the pandemic, the focus will be on avoiding infection. Later in the pandemic, when avoiding infection is no longer possible, the emphasis shifts to minimizing the infection's impact. As the pandemic strain becomes established and better understood, further methods of risk reduction may become evident.

Risk reduction strategies differ by location. In more developed countries, there is likely to be a pandemic plan and stocks of antiviral drugs. In countries with limited resources, planning will be less extensive, and there may not be centers of medical excellence.

If you have any these symptoms, you are **legally required to isolate for at least ten days** from the start of your symptoms or until they resolve, whichever is longer:

- Fever
- Cough (new cough or worsening chronic cough)
- Shortness of breath or difficulty breathing (new or worsening)
- Runny nose
- Sore throat

If you have any of these other symptoms, stay home, and minimize contact with others until your symptoms resolve:

- Chills
- Painful swallowing
- Stuffy nose
- Headache
- Muscle or joint aches
- Feeling unwell, fatigue, or severe exhaustion.
- Gastrointestinal symptoms (nausea, vomiting, diarrhea or unexplained loss of appetite)
- Loss of sense of smell or taste
- Conjunctivitis, commonly known as pink eye

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Monitor your health and call [Health Link 811](#) if you have questions or concerns. Call 911 immediately if experiencing severe symptoms of COVID-19, including difficulty breathing, severe chest pain, feelings of confusion, or loss of consciousness.

If symptoms arise while at the worksite, put on all PPE, including face covering, and report to your supervisor immediately.

### **Social (Physical) Distancing**

Social distancing is a public health measure that is employed to reduce the spread of a pandemic virus. It includes isolating infected people and quarantining contacts. Early in the evolution of a pandemic, and before the virus has spread widely, social distancing may help prevent an international pandemic, or at least delay the spread of the virus. The Canadian health agencies (national, provincial, and local) are expected to issue public health guidelines, including the national and international use of social distancing. Employer offices and employees will be subject to those guidelines as implemented by national authorities. These may include:

- School/daycare closures, closure of workplaces, closure of entertainment venues
- Restrictions on travel
- Restrictions on large or crowded gatherings
- Cancellation of large public gatherings
- Sani – wipes/Hand Sanitizer/Housekeeping/Cleaning Procedures

### **Self-Assessment**

Prompt self-awareness of symptoms allows earlier segregation of those infected from the general community. Employer employees affected by the pandemic will be encouraged to monitor their health. A Self-Assessment Questionnaire (Appendix A) will be used at Employer offices and projects to promote self-awareness of symptoms and provide guidance on appropriate actions. This screening process will achieve the following:

- Reduce the risk of the disease being brought into the workplace
- Reduce the risk of health workers being exposed
- Reduce the spread of the disease

If an employee, including Monitors, is found to have symptoms of COVID-19 while at work, they will be required to self-isolate at their hotel for 14 days. (Contact the IAMC-TMX Indigenous Monitoring Program for information on reimbursement or expenses).

Employees will be introduced to the questionnaire and self-assessment process during Pandemic Phase 5:

- In FLU/COVID-19 AFFECTED areas once Pandemic Phase 4 is declared
- In ALL areas once Pandemic Phase 5 is reached in any single country
- The self-assessment instructions may be modified based upon the actual pandemic Environment

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## Symptoms

Human influenza is an infection of the lungs and airways caused by a virus. Symptoms can include fever, headache, muscle pain, runny nose, sore throat, and extreme fatigue, and possible vomiting.

COVID-19 symptoms include cough, fever, difficulty breathing, pneumonia in both lungs, and in severe cases, the infection can lead to death.

## Personal Hygiene

Good personal hygiene and respiratory etiquette practices and other non-medical interventions will be the principal methods used to protect against, or at least delay, infection during a flu pandemic. As it is unknown which virus will cause the next pandemic, it is not possible to fully predict how the pandemic virus will behave. It may have an infectivity period similar to current human flu viruses, or it may remain infectious for longer periods. Persons infected with seasonal human flu are infectious for one day before they show symptoms. In most cases, adults remain infectious for up to five days, and children up to seven days, after the onset of illness (may vary by influenza strain). Hand washing is a vital personal hygiene practice. Indirect transmission by droplets when an infected person coughs, sneezes, or talks (i.e., from hand-to-hand, or hand to contaminated object and the contaminated object to hand) is an important way influenza is passed from person to person.

The Employer will provide handwashing facilities, antiseptic hand cleansers/towelettes, and educational programs to reiterate the need for routine and frequent handwashing, beginning with Phase 4 of the alert period. The flu virus is relatively easy to destroy. Washing with plain soap and water, or alcohol or other antiseptic-based hand wash products eliminates the virus. Hand sanitization stations should be made available where soap and water are not accessible i.e., lunchrooms, worksites, and places where people congregate. Protective gloves are not a substitute for handwashing.

In Phase 3, each project location will review office and washroom cleaning procedures and plan for changes to frequency and type in phases 4, 5, and 6.

## Self-Care Guidelines

Especially during Pandemic Phase 6, it is likely that public medical services will be used to maximum capacity. They may be completely overwhelmed, and antiviral drug supplies may rapidly become exhausted. In Phase 5, the PC will make available self-care guidelines, as developed by "WHO," national health authorities, and International SOS, and coordinate with local medical advisors.

### Antiviral Medicines & Vaccinations

Early in a flu pandemic, before a specific vaccine is available, antiviral drugs are likely to be the only influenza-specific pharmaceutical intervention available to potentially reduce the pandemic's morbidity and mortality. If taken early, when people are developing flu symptoms, these drugs may significantly reduce the severity of the illness. However, it is not possible to evaluate these drugs' real effectiveness until the virus is circulating. If effective, it is also possible that the pandemic flu virus may develop resistance to the antiviral drugs over time.

The Employer will be subject to the guidelines established by national, provincial, and local health authorities in prioritizing and distributing available stocks of antiviral drugs. These drugs will be more readily available in some

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countries than in others. Although current flu vaccines are not expected to protect against a pandemic flu strain, these annual vaccinations are still recommended and should be obtained by as many employees as possible. The Employer will communicate information on the available public vaccination clinics.

As the virus for the next flu pandemic is unknown, it is impossible to produce a vaccine in advance. In the event of a pandemic, it will take at least several months for vaccine manufacturers to begin testing and producing substantial pandemic vaccine quantities. Once a vaccine becomes available, it is unlikely that there will be sufficient supply to meet demand, and governments can be expected to direct limited supplies toward priority groups of the population. The PC will stay abreast of government planning in each employer location.

### Workplace Cleaning

Virus transmission can be reduced by cleaning the environment and hard surfaces (i.e., sinks, handles, railings, objects, counters) with a disinfectant solution. The cleaning product must be labeled as a disinfectant and contain chlorine as an active ingredient.

Respiratory illnesses can spread in inadequately ventilated internal spaces. These spaces should be well ventilated; HVAC systems should be maintained regularly according to standards and building codes.

Respiratory illnesses can be spread by droplet transmission or our hands carrying bacteria and viruses to our faces where we breathe them into our lungs. This makes extensive cleaning of all commonly touched surfaces **essential**. During a pandemic, janitorial staff may be in short supply. **The solution will be a combination of well-informed cleaning staff and employees cleaning their areas.**

The frequency of cleaning will depend on the location and risk of exposure. However, it is recommended that each person cleans their workspace once per shift.

In addition: When the Employer is notified that an employee has been sent home exhibiting flu-like symptoms, the Employer will schedule a facility clean up to wet wipe all horizontal surfaces, personal workspace, telephone, mouse, keyboard within the employee's work area using a disinfectant wipe. This should be done immediately.

1. Listed below are additional recommended cleaning measures:

- Wet wipe all surfaces listed below daily using the disinfectant and a clean cloth:
  - door handles entering the buildings, washroom, kitchens
  - handrails in the stairwells
  - elevator buttons, outside and inside
  - horizontal surfaces i.e., reception counters, desks, filing cabinets, exposable shelving
  - telephones especially the mouth and earpiece

2. General Supplies

- Antiseptic cleansers (contain chlorine as an active ingredient)

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- Containers of cleaning products must be labeled as a disinfectant or poison, and a copy of the SDS is a readily available reference.
- All cleaning products must be used according to the manufacturer's recommendations.
- All cleaners are required to use chemical resistant gloves (neoprene, nitrile, vinyl, or latex) when mixing disinfectants.
- Alcohol-based hand sanitizer that contains at least 60% alcohol.
- Non-sterile disposable gloves (impervious/nitrile)
- N95 masks
  - N95 FFRs can filter out all types of particles, including bacteria and viruses.
  - Surgical Masks do NOT provide the wearer with a reliable level of protection from inhaling smaller airborne particles and is not considered respiratory protection. These may only prevent the wearer from spreading their virus.

## 1.9 Business Continuity

In coordination with the Employer, the PC will monitor the pandemic's spread from continent-to-continent or country-to-country, as different regions may be affected by the pandemic at different times. In Pandemic Phase 6, absenteeism may be expected to run between 25% and 50%. In addition to illness, staff commuting may be constrained by government-imposed restrictions on public transport. Employees may also need to remain at home to care for sick family members or children whose daycares/schools are closed.

Human resource policies will need to be tailored to local factors, i.e., the severity of the pandemic and official guidelines set out by local authorities. Employees should stay home if they are sick or in quarantine. As a general policy, otherwise, employees will be expected to come to work unless they are advised not to attend. This information will be communicated to all staff via e-mail, employer website, safety meetings, etc. All sources will be updated regularly, and HR will keep informed of the most current corporate policy decisions. The employer will develop policies that guide employee questions, such as:

- Under what circumstances can I work from home?
- What happens if I need to stay home in quarantine or care for sick dependents or to care for dependents because daycares/schools have been closed?
- I am on an assignment, and my family is in a Phase 5 country, and I want to go home to care for them. What happens?
- I am not ill, but I do not want to travel by public transport. What happens?
- The transport system has been disrupted—will I be paid if I don't get to work?
- Will I be forced to make a business trip?
- What happens to my pay if the payroll department and/or my bank is closed?

Dramatically reduced staffing levels will occur; nonetheless, it will be necessary to provide for continuity of a critical project. The employer shall identify those key personnel who will be required to support project requirements and,

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where necessary, work from home if office/project locations are forced to close. Personnel identified will require adequate equipment to support work from home.

### 1.10 Travel Restrictions and Evacuations

International air travel poses a significant risk of being the main means by which the pandemic flu virus is spread from one country/continent to another. Although it is unlikely that travel restrictions will stop the spread of pandemic flu, they may well slow propagation. National travel restrictions are likely to be introduced suddenly at the onset of the pandemic. Employees on business trips may be stranded in certain regions/countries, and expatriates may be unable to leave their country of employment.

#### Travel Restrictions

The Employer or designate will ensure compliance with national or international restrictions that may be imposed. Public Health Agency of Canada will issue appropriate travel advisories for Canadians traveling to other countries affected by the pandemic. These will be monitored and posted by the Pandemic Coordinator (PC). Employer policies on restricted travel should be followed. Although WHO decisions on moving from one pandemic phase to another are based on local conditions concerning the spread of the pandemic in specific countries, the Pandemic Phase declaration is made on a global basis. It is anticipated that the following travel policy will apply, although final decisions will be made in the context of the actual pandemic environment:

- Travel during Pandemic Phase 3 is not restricted;
- Where possible, following the declaration of Pandemic Phase 4, travelers should be equipped with a Personal Travel Pack.
- Travel will be immediately restricted to any country in which local conditions have caused the WHO to declare Pandemic Phase 4. Such travel will require prior written approval by the Employer or designate and will be limited to essential business travel;
- Travel will not be authorized to countries in which local conditions have caused WHO to declare Pandemic Phase 5;
- In addition, once Phase 5 has been declared, all travel to any destination, regardless of region, will require the prior approval.
- When Pandemic Phase 6 is declared, all travel will cease.

#### Returning Travelers

Inbound/returning travelers from regions/countries where local conditions have caused the WHO to declare Pandemic Phase 4 will be asked to monitor their health. Should they experience fever greater than 38 degrees Celsius/100.4 F or other symptoms of concern, they should seek medical care, advise their manager, and not return to work until they have been medically cleared.

Returning travelers from countries where local conditions have caused WHO to declare Pandemic Phase 5 should work from home for 14 days, regardless of symptoms or the absence thereof. They should return to work only if they are healthy and free from symptoms.

### 1.11 Evacuation

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Evacuation of staff and dependents to Muster areas will be considered for all offices and project locations, with special attention to those located in areas with poor pandemic planning and limited medical resources. During Pandemic Phase 3, the PPC will conduct a preliminary evaluation of all offices/Projects. Decisions on evacuations will be made by the Employer or designate, in the context of the actual pandemic situation. Guidelines for these decisions include:

- Evacuation to be considered in Pandemic Phase 4, if the location is within the city or province where local conditions have caused Pandemic Phase 4 to be declared. Evacuation may be to another city within the country where there is no documented human to human transmission or another country.
- In the event of a Phase 5 declaration, the evacuation may apply to all staff and dependents in the country where local conditions have caused the increased state of pandemic alert. The evacuation of other offices and projects in the immediate region will also be considered.

Exceptions to these guidelines will be considered for countries with adequate Pandemic Preparedness and a medical infrastructure capable of managing the situation. If evacuation is not accomplished quickly, there is a growing risk that countries will institute travel restrictions and quarantines that could make evacuation impractical.

#### 1.12 Drills and Evaluation

As part of the employer's Emergency Response Plan (ERP), the Pandemic Plan will be included in the Drills and evaluations held regularly. The employer will add any opportunities for improvements (OFI) to its corrective action log. The OFI will be assigned a responsible person and date for implementation.

See Appendix A for the following attachments:

- Attachment A – Actions Checklist (Suggested)**
- Attachment B – Communications Plan**
- Attachment C – Self Assessment Questionnaire**

		<p style="text-align: center;">SAFETY MANAGEMENT SYSTEM</p>			
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## 2.0 General Hygiene Practices

### 2.0 Introduction

Safety is a collective responsibility of all participants of the IAMC-TMX Indigenous Monitoring Program. This document is a Guide to Good Personal Hygiene Practices that will enhance personal safety and help prevent illness and the spread of COVID-19.

General Hygiene Practices (GHP's) are requirements established by the Monitor(s) Employer to assure that employees, contractors, visitors, and the general public are protected during the company's ongoing operations.

### 2.1 Responsibilities

The Monitor(s) Employer's primary safety objective is to reduce workplace risk to the lowest reasonably practicable level by taking preventative measures. The Employer will work with any other employers or contractors sharing the workplace so that everybody's health and safety are protected.

#### 2.1.1 Employer

- Responsible for ensuring that the GHP program is implemented and is functioning to the standards specified in this practice.
- Responsible for participating and reviewing the detailed GHP training and implementation program (developed by Behr Integrated Solutions). The program's minimum requirements include establishing qualified trainers, training documents (GHP Standard, presentations), documentation for training, and frequency of training.
- Responsible for providing documented training for all Monitors on the GHP program.
- Responsible for reviewing Monitor's documented observations and reviewing GHP program elements, with notification to appropriate persons if unsatisfactory conditions are noted. All corrective actions / preventative actions must be documented to ensure that repeat issues do not occur.
- Responsible for the annual refresher training of all employees.
- Responsible for providing GHP program orientation for newly hired Monitors and/or Logistics Coordinators.

#### 2.1.2 Supervisors or Logistics Coordinators

- Supervision must be an example and set the GHP standards by demonstrating the knowledge and leadership of the GHP program through everyday work practices (Lead by Example).
- Responsible for establishing and maintaining GHP's updates.
- Responsible for investigating and correcting any GHP program failures.
- Responsible for monitoring Monitors and reporting any person who, self-evaluation, the person's acknowledgment, or supervisory observation, is shown to have, or appears to have COVID-19 symptoms.
- Responsible for the oversight of Monitors (both permanent and temporary) and all visitors regarding GHP's specific during job assignments.
- They instruct Monitors to notify their supervisor(s) if they have or if there is a reasonable possibility that they have a health condition.

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- Responsible for documented observations and review of GHP program elements in all areas. All corrective actions / preventative actions must be documented on the Corrective Action / Preventive Action form, per this standard.

### 2.1.3 Monitors

- Responsible for following all requirements and guidelines specified in this standard.
- Responsible for reporting observed GHP violations to the person responsible for addressing issues or to their immediate supervisor.
- Responsible for maintaining adequate personal hygiene.
- Responsible for notifying their Logistics Coordinator and supervisor of any medical diagnosis of all COVID-19 symptoms with possible public health significance as outlined in this GHP standard.

This includes:

- Cough
  - Fever
  - Sneezing or sniffing/runny nose
  - Difficulty breathing
  - Pneumonia in both lungs
- Wearing, where appropriate, in an effective manner, personal protective equipment such as gloves, masks, and glasses.

### 2.2 Trans Mountain COVID Daily Screening

Trans Mountain Corporation has implemented active daily screening of workers, volunteers, and visitors for symptoms of fever, sore throat, cough, runny nose, or difficulty breathing.

Anyone who is sick with cold-like symptoms such as cough, fever, runny nose, sore throat, or shortness of breath, **MUST NOT** be in the workplace.

- Visitors with these symptoms will not be allowed in the workplace and advised to return home.
- There will be no disincentive for workers to stay home while sick or isolating.
- Changes to the Canadian Employment Standards Code will allow full and part-time employees to take 14 days of job-protected leave if they are:
  - required to isolate; and/or
  - caring for a child or dependent adult who is required to isolate.
- Employees are not required to have a medical note.

To enable quick contact with workers, Trans Mountain will maintain an up-to-date contact list for all workers and contractors, including names, addresses, and phone numbers.

To trace close contacts, Trans Mountain will be able to indicate:

- Roles and positions of workers.
- Visitors' names and contact information.
- Who was working on-site at any given time.

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- If a worker worked with anyone else on any given shift.

### 2.3 Social (Physical) Distancing

Trans Mountain will put measures to maintain social (physical) distancing wherever possible, on arrival and departure.

Where possible, you should maintain 2 metres between people by:

- observing signs to remind workers and visitors of social distancing guidance
- avoiding sharing workstations
- observing floor tape or paint to mark areas to help people keep to a 2 metres distance
- observing one-way traffic through the workplace (if applicable)
- For Driving protocols, see IAMC-HSE-02-006/007-Driving (Highway/Off-road) w/wo passenger's and/or IAMC-HSE-02-012/013- Close Proximity Work/Interactions with others.

Social distancing applies to all parts of the business, not just the offices, but also vehicles, breakrooms, and anywhere workers congregate. These are often the most challenging areas to maintain social distancing.

Trans Mountain may stagger arrival and departure times to reduce crowding into and out of the workplace.

### 2.4 Workplace Washrooms

Trans Mountain will maintain washrooms and any associated amenities in a clean and sanitary condition. The frequency of cleaning and disinfection will vary depending on usage.

Trans Mountain will consider the physical distancing of users to prevent the spread of COVID-19. The use of partitioned stalls can facilitate distancing, decommissioning toilets, or urinals that are less than 2 meters apart or staggering entry into washrooms so that fewer users are present at a time.

Signage will be posted in bathroom areas that inform users of how to mitigate risks of COVID-19 transmission (E.g., hand hygiene, respiratory etiquette).

There will be an adequate supply of soap, paper towels, toilet paper, hand sanitizer, and other supplies in all the washrooms. They will be periodically inspected to ensure these supplies do not run out.

For workers on-site, they will be required to report any washroom facilities that are not correctly maintained immediately to the Prime Contractor.

### 2.5 Cleaning and Disinfecting (against COVID-19)

Cleaning refers to the removal of visible soil. Cleaning does not kill germs but is highly effective at removing them from a surface. Disinfecting refers to using a chemical to kill germs on a surface. Disinfecting is only effective after surfaces have been cleaned.

Use a “wipe-twice” method to clean and disinfect. Wipe surfaces with a cleaning agent to clean off soil and wipe again with a disinfectant.

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The cleaning and disinfecting of high traffic areas, common areas, public washrooms and high-touch/shared surfaces such as doorknobs, light switches, toilet handles, faucets and taps, elevator buttons, railings, phones, computers, remote controls, keyboards, desktops, conference room equipment, surface counters, equipment handles, hand tools, machinery control panels, seat belt buckles, steering wheels and controls on powered mobile equipment, communal areas such as staffrooms, kitchens and washrooms will be done frequently using one or more of the following practices;

- Regular household cleaning and disinfecting products are effective against COVID-19 when used according to the directions on the label.
- Use a disinfectant with a Drug Identification Number (DIN) and a viricidal claim (efficacy against viruses).
- Alternatively, use a bleach-water solution with 20 ml (4 teaspoons) of unscented, household bleach to 1000 ml (4 cups) water. Ensure the surface remains wet with the bleach water solution for 1 minute.
- Health Canada has approved several hard-surface disinfectants and hand sanitizers for use against COVID-19. Use these lists to look up the DIN number or NPN number of the product you are using or to find an approved product.
- Make sure to follow instructions on the product label to disinfect effectively.
- Disposable towels and spray cleaners, or disposable wipes, should be available to workers, visitors, and (as necessary) patrons to regularly clean commonly used surfaces.
- Remove all communal items that cannot be easily cleaned, such as newspapers and magazines.

The Prime Contractor is responsible for cleaning and disinfecting on the project site.

## 2.6 Hand Hygiene and Respiratory Etiquette

Management and Supervision will promote and facilitate frequent and proper hand hygiene for employees, visitors, and contractors.

Trans Mountain will provide a means to sanitize hands at points of entry and locations throughout the location. Hand sanitizers should be isopropyl alcohol-based sanitizers, such as Alpet 3E or comparable products.

Employers will instruct their workers to wash their hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer (higher than 60% alcohol content).

Hand-washing with soap and water is required if the employee, visitor, or contractor has visibly dirty hands.

Follow these five steps every time;

1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. **Scrub** your hands for at least 20 seconds.
4. **Rinse** your hands well under clean, running water.
5. **Dry** your hands using a clean towel or air dry them. Use another paper towel to open doors (if applicable). A garbage can should be placed near exit doors to throw away towels after use.

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Glove use alone is not a substitute for hand hygiene. Hands should be cleaned before and after using gloves.

Our hands can quickly become re-contaminated by the many activities performed or items we touch. For all employees, hands must be washed and sanitized:

- a. Before starting work.
- b. At any time when the hands may have become soiled or contaminated;
  - i. After coughing, sneezing, blowing the nose, etc.
  - ii. After eating.
  - iii. After using the restroom.
  - iv. After touching anything unsanitary (pallets, floors, boxes, brooms, totes, scratching head, etc.).
  - v. After leaving and returning to work areas.

Workers will make every effort to encourage respiratory etiquette (e.g., coughing or sneezing into a bent elbow, promptly disposing of used tissues in a lined garbage bin) is followed.

The use of posters that remind workers, volunteers, and patrons to practice respiratory etiquette and hand hygiene will be utilized in work areas where they are easily seen (e.g., entrances, washrooms, and staff rooms).

Additional garbage bins with removable linings will be placed at all entrances and exits. Garbage bins will be checked and emptied regularly.

- Employees must always practice good personal hygiene and hygienic behavior to prevent the spread of COVID-19.

**During the COVID-19 pandemic, you should also clean hands:**

- After you have been in a public place and touched an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic cashier registers/screens, etc.
- Before touching your eyes, nose, or mouth because that's how germs enter our bodies.

The Prime Contractor is responsible for ensuring all hand-washing notices are posted in appropriate areas.

## 2.7 Personal Protective Equipment

The Employer will ensure that hazard assessment is conducted to identify existing and potential hazards related to COVID-19. Where the elimination of these hazards is not possible or reasonable, they should be controlled. PPE is based on the risk of exposure. PPE that is chosen should be appropriate to the hazard.

When hazards related to COVID-19 cannot be eliminated, the following hierarchy of controls should be followed:

**First choice:** Isolate the hazard (Engineering controls) These control the hazard at the source by isolating the hazard and by physically directing actions to reduce the opportunity for human error. Examples include placing barriers or partitions between workers, removing seats from lunchrooms and dining areas, re-arranging lockers, restricting general access to the business, and increasing ventilation.

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**Second choice:** Change behavior (Administrative controls) These controls change the way workers, volunteers, and patrons interact through the implementation of policies, procedures, training, and education. Examples include policies for physical distancing, limiting hours of operations and respiratory etiquette and providing adequate facilities, supplies, and reminders for hand hygiene, and developing appropriate worker-to-patron ratios, Increased frequency of cleaning, as outlined above, is also required.

**Third choice:** Use Personal Protective Equipment (PPE) PPE controls are the last tier in the hierarchy and should not be relied upon exclusively. PPE is dependent on the type of activity and risk of exposure to a pathogen/sick person. PPE is necessary when administrative and engineering controls cannot maintain physical distancing of 2 meters or physical barriers. PPE controls the hazard at the worker, volunteer, and patron level. Examples of PPE include gloves, eye protection, gown, face protections, face masks.

When a hazard cannot be controlled by a single control method, a combination of these controls will be utilized to provide an acceptable level of safety.

PPE should be stored, used, and maintained as per the manufacturer's instruction for use, so it can perform its intended function to protect workers and contractors.

If a hazard assessment determines that PPE is necessary, the Monitor's Employer will ensure that the Monitor has the necessary PPE, and that it fits the workers effectively. If a mask is deemed, necessary, surgical and procedural masks will likely be sufficient. Respirators (e.g., N95 masks) are only required when the work might cause large droplets containing COVID-19 to be aerosolized into tiny airborne particles<sup>1</sup>. This is not common in the majority of business settings.

PPE, such as eye protection, may be reused by the same user, only if the manufacturer allows it and has provided clear cleaning and disinfecting instructions.

Assign a user's name and store separately from other PPE after cleaning and disinfecting.

## 2.8 General sanitation

- Only approved chemicals should be used and handled carefully following instructions stated in the standard or according to the manufacturer's instructions.
- Management will ensure all sanitation has been monitored and verified by conducting a routine inspection of the premises and equipment.

## 2.9 References

1. <https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/covid-19-novel-coronavirus>
2. <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/symptoms.html>
3. <https://www.gov.uk/guidance/working-safely-during-coronavirus-covid-19/shops-and-branches>

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## 3.0 Emergency Preparedness and Response

### 3.0 Purpose

The purpose of an Emergency Preparedness and Response Plan (ERP) is to establish and develop procedures that will address potential issues that may arise from emergencies or disasters while working as an IAMC-TMX Monitor at the Trans Mountain Expansion and Existing Pipeline. The goal of this ERP is to provide the earliest possible coordinated and managed response to any emergencies and/or disasters to assure the following:

- Minimize the effects of the emergency or disaster to personnel and their communities, subcontractors, and visitors.
- Early warning to neighboring businesses and communities to prevent any 3<sup>rd</sup> party losses to people, equipment, or property.
- The protection and preservation of health, safety, property, and the environment.
- The timely return to normal services and activities.

It is expected that Employers have health and safety policies based on principles aimed at the protection of people, the environment, and property through responsible and safe operations. These principles are embodied in this emergency response plan. This emergency response plan follows the standards set out by the IAMC-TMX Indigenous Monitoring Program and applicable legislative requirements. It is the responsibility of the Employers' Management to ensure compliance with the requirements and procedures in this plan.

Occupational Health and Safety indicates that a workplace must have a written emergency plan that is appropriate for the hazards of the workplace. The plan must address emergency conditions that may arise from within the workplace and from adjacent businesses. This process is in place to identify potential emergencies through the use of a site-specific emergency response plan. The plan must be developed and implemented in consultation with affected workers and the communities in which they live. The plan must be kept up-to-date to reflect current circumstances at the workplace and the fluid situation with the current COVID-19 pandemic. In addition, the plan must contain elements identifying areas where smoking is prohibited, the use and accessibility to portable fire extinguishing equipment, and proper storage and handling of flammable and combustible liquids.

Employees, contractors, and sub-contractors should be actively involved in the development, and review, of the emergency response procedures and plans.

### 3.1 Responsibilities

There are seven (7) levels of responsibility within the Emergency Response Plan. The Logistics Coordinators and Monitors could fall under multiple roles within this plan.

1. Management
2. Supervision
3. Emergency response Team (ERT)
4. First Aider

#### 3.1.1 Management

Managers are responsible for establishing and maintaining the Emergency Response Plan. Their roles and responsibilities include;

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- Establishing levels of acceptable risk,
- Allocating sufficient resources,
- Overseeing system performance,
- Modifying policies and goals, as necessary,
- Setting up Incident command in the event of a serious incident
- Review and update the Emergency Response Plan

### 3.1.2 Supervision

Supervisors are responsible for the implementation of the Emergency Response Plan. Their roles and responsibilities include;

- Ensure training (Mock Drills) is being performed,
- Identify any individuals that require further training or updated training,
- Review any concerns brought forward by employees, contractors, visitors

### 3.1.3 Emergency Response Team (ERT)

The **ERT** will be **responsible** for managing and directing the activities of the various departments that will be **involved** in emergency response and recovery. Their roles and responsibilities include;

- Participate in any required training,
- Follow the direction of the incident commander,
- Participate in Emergency Drills,
- Ensure training is kept current (i.e., ERT, First Aid, Site-specific training)

### 3.1.4 First Aider

First Aiders are responsible for providing first aid treatment to injured workers. Their roles and responsibilities include;

- Promptly providing injured workers with a level of care within the scope of each attendant's training.
- Objectively recording reported signs and symptoms of injuries and/or exposures.
- Referring injured workers to medical treatment if injuries are serious or beyond the scope of an attendant's training.
- Being physically and mentally capable of safely and effectively performing all related duties.
- Ensure to keep training current,
- Take direction from the incident commander and/or ERT members,
- Participate in drills as required.

Under the IAMC-TMX Indigenous Monitoring Program's mandatory training, all Monitors are required to have Standard First Aid + CPR-C for in-person Compliance Verification Activities (CVAs).

### 3.1.5 Worker

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Workers, including Monitors, are responsible for following their training and any direction given by the ERT. Additional responsibilities include;

- Muster as directed and participate in drills as required,

### 3.2 Emergency Numbers

The emergency numbers below will be contacted as per the IAMC-TMX Incident Reporting Protocol outlined below.

IAMC Contacts		
Name	Title	Phone
Raymond Cardinal	Chair, IAMC-TMX Indigenous Monitoring Subcommittee	5-██████████
Dan Kelly	Program Manager, IAMC-TMX Indigenous Monitoring Program	██████████

#### Emergency Contact Numbers:

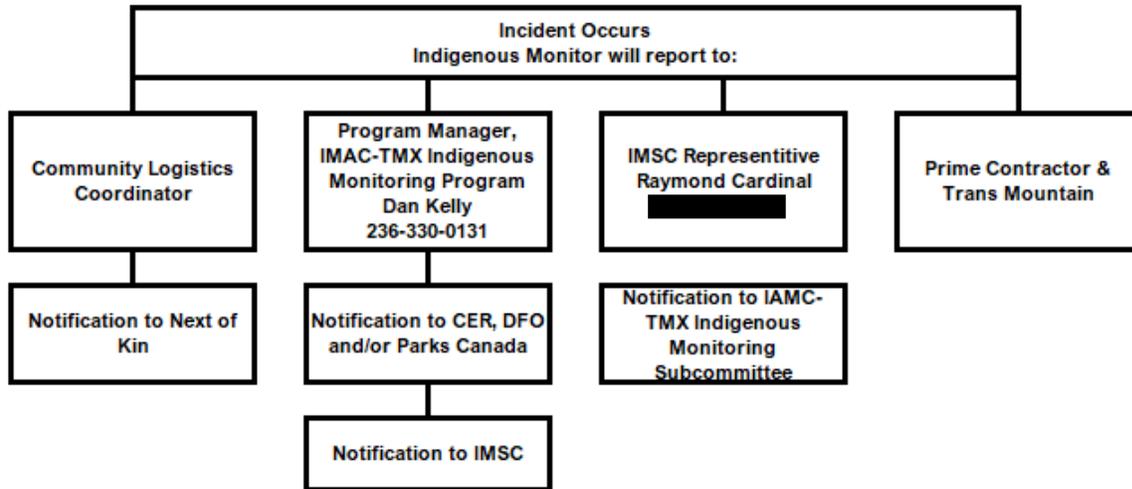
<b>Site Emergency Trans Mountain (BC Operations)</b> .....	1-800-663-3456
<b>Trans Mountain Operations Control Center (OCC)</b> .....	1-888-876-6711
24-hour Incident Reporting Line .....	587-590-6081
Emergency Ground Service (Ambulance) .....	911
Fire Dept. ....	911
AADAC Help Line.....	1-866-332-2322
ICE* (In Case of Emergency).....	On Personal Cell
University of Alberta Hospital (8440 112 <sup>th</sup> Street N.W., Edmonton AB T6G 2B7).....	1-780-407-8822
Alberta Environment.....	1-800-222-6514
Alberta Energy Regulator.....	1-800-222-6514
BC Oil & Gas Commission.....	1-800-663-3456
Alberta Region, Department of Indigenous Services Canada.....	
Regional Medical Officer on call.....	780-495-6380
Regional Environmental Health Offices .....	780-719-8782
BC First Nations Health Authority .....	604-693-6500 (daytime) 844-666-0711 (after hours)
Health Emergency Management BC (HEMBC) .....	1-855-554-3622 (24 hour)
Dangerous Goods/Disaster Services .....	1-800-272-9600
Electrical Power (ATCO).....	1-800-668-2248

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Natural Gas (ATCO).....	1-780-420-5585
Buried Utility Locations-Alberta One Call .....	1-800-242-3447
BC One Call .....	1-800-474-6886
B.C./Alberta Wildfire Report Line (*5555 on a cellphone) .....	1-800-663-5555
B.C. Conservation Officer Service RAPP Line .....	1-877-952-7277
Alberta OH&S .....	1-866-415-8690
WorkSafe BC .....	1-888-621-7233
Poison Control Centre.....	1-800-332-1414

### 3.3 Incident Reporting Protocol

[Note to Employers: This section is currently being updated by the IMSC.]



### 3.4 Site Emergencies

Should an emergency occur while you are on the project site:

- Always remain calm, do not panic.
- Always call 9-1-1.
- Listen to the type of alarm.
- Listen and follow all announcements.
- Listen and follow directions from Trans Mountain Emergency Response Team.

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During normal activities, the following potential emergencies have been identified:

#### 3.4.1 Site Evacuation

1. Listen for instructions from Trans Mountain Emergency Response Team.
2. Do not return for personal belongings.
3. Keep calm and walk quickly. Please do not use cell phones while evacuating.
4. Do not take any items that will cause danger or hazard while evacuating.
5. If the exit route is compromised, go to the secondary exit route.
6. Proceed to the exit routes; then proceed to the MUSTER POINT.

#### 3.4.2 Shelter in place

1. Listen for instructions from Trans Mountain Emergency Response Team.
2. Stay in your assigned area, remain calm.
3. If possible, gather at the designated muster areas.
4. Check for stragglers, especially in offices and washrooms.
5. Be prepared to move yourself or others to another area in the building.
6. Be prepared to close and secure yourself in the offices.
7. Do not leave the area until directed to do so by the Trans Mountain Emergency Response Team or Emergency Services Personnel.

#### 3.4.3 Bomb Threat

1. Attract the attention of another person and have them contact 9-1-1 immediately.
2. Keep the caller on the phone as long as possible.
3. Ask the person questions to get as much information as possible.
4. Once the call is completed, write down everything you remember about the phone call and the person that called.
5. Report the occurrence to Trans Mountain Emergency Response Team immediately.
6. The decision to evacuate will be left up to Trans Mountain Emergency Response Team. In the event, physical evidence of a bomb is found, evacuate the building immediately.

#### 3.4.4 Suspicious Package

1. At all times, be aware of your office area and the items within the area.
2. Immediately report any suspicious items to Trans Mountain Emergency Response Team.
3. Contact 9-1-1 if necessary.
4. Move away from the area; do not touch or interact with the package in any way.
5. Do not use cell phones, radios, or other electronic items around the package.

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### 3.4.5 Workplace Violence

1. Stay calm, and if possible, leave the area immediately.
2. Call 9-1-1 once safe to do so.
3. If unable to leave, remain calm. Summon a member of the Trans Mountain Emergency Response Team.
4. Be sympathetic and do not antagonize the person.
5. Protect yourself at all times and look for opportunities to leave the area safely.

### 3.4.6 Fire

1. Pull the nearest fire pull station.
2. Call 9-1-1 and provide the building address or closest Shoe Fly (SF).
3. Inform the Trans Mountain fire warden. Alert all others in the immediate area.
4. Do not attempt to fight a fire that appears to be out of control or threatens your safety.
5. Close, but do not lock the door to the room where the fire is located and all doors in the immediate area.
6. Check all doors, including the stairwells (if applicable), for heat and smoke prior to opening them.
7. Keep calm and walk quickly to the nearest evacuation area. Do not use cell phones while evacuating.
8. Do not take any items that will cause danger or hazard while evacuating.
9. Follow the announcements from the Trans Mountain Emergency Response Team.

### 3.4.7 Medical Emergency

1. Call 9-1-1 and provide the building address or closest Shoe Fly (SF).
2. Notify as per the IAMC-TMX Indigenous Monitoring Program and Trans Mountain Incident Notification Protocols.
3. Provide first aid services as appropriate to the I.P.
4. Have somebody meet the Emergency Services at the front door.

### 3.4.8 Civil Disturbance

1. Stay out of the main corridors and away from the exterior windows of the building.
2. Lock all doors except your main entrance door. Lock the main entrance if the demonstrators come to your floor. Do not unlock your door or have any contact with the demonstrators.
3. Notify all employees and visitors about the civil disturbance, warning them to avoid any contact with the demonstrators.
4. Ask all employees and visitors to avoid leaving the building.
5. If demonstrators enter the building, warn all employees and visitors to be alert for unattended and suspicious items that were carried in by demonstrators. If any suspicious items are found, follow Trans Mountain procedures.

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### 3.4.9 Flood or Water

1. Move away from the affected area.
2. Ensure any electrical devices are turned off if it is safe to do so.
3. Contact the Trans Mountain Building Manager
4. Only an attempt to prevent damage if safe to do so.

### 3.4.10 Power Outage

1. Contact the Trans Mountain Office Management Team to determine the extent of the power outage.
2. Locate an alternate light source such as a battery-operated lamp or flashlight.
3. Ensure any electrical items in your office are unplugged.
4. The emergency service personnel will provide information and instruction as necessary.

### 3.4.11 Gas Leak

1. Contact the Trans Mountain building/site manager. Use a phone away from the area gas is suspected.
2. Isolate the area and keep other personnel away from the area.

### 3.4.12 Severe Weather

1. Move to the core of the building, away from the windows.
2. Ensure your office and area is secured.
3. Follow instructions from the Trans Mountain Emergency Response Team.

### 3.4.13 Human-Wildlife Conflict

If you observe dangerous wildlife in or around the work area, you are to report it immediately as per the Wildlife Reporting requirements set out by Trans Mountain and/or the prime contractor. Do not feed or interact with the wildlife. It's important that we empower ourselves to reduce the chances of negative encounters and our impact on these incredible animals. Caring for wildlife means putting our needs after the needs of every animal so that it can feed, tend to its young, and move around safely in its natural habitat. Along with our personal safety, their wellbeing is of utmost importance.

Please remember that no encounter should be considered 'typical,' and you may have to take actions in your particular circumstances that are not recommended in the material below. Being aware of your surroundings is the first step to effective wildlife safety. Always report wildlife activity.

The following are examples of wildlife that workers could be exposed to:

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Rattle snakes - Great Basin Gopher snake (non-venomous), Night Snake (a slight resemblance to the rattlesnake. Although they are venomous, the venom is quite weak and harmful only to the small prey they hunt), Rubber Boa, Western Yellow-bellied Racer, Northern Pacific Rattlesnake (is the only venomous snake that inhabits B.C.), Sharp-tailed snake, Garter snakes (3)-Common, Northwestern, Western Terrestrial.

Bees, Hornets, Wasps-Wasps, and bumblebees can sting more than once because they are able to pull out their stinger without injury to themselves. If you are stung by a wasp or bumble bee, the stinger is not left in your skin. The two greatest risks from most insect stings are allergic reactions (which occasionally, in some individuals, could be fatal) and infection (more common and less serious).

Ticks-20 species of ticks in British Columbia, but only three species normally bite humans. The Rocky Mountain Wood Tick (this tick causes tick paralysis in humans), The Western Black-Legged Tick (This tick does not cause paralysis; however, it is a carrier of the microorganism responsible for Lyme disease in North America).

Bears-British Columbia has two bear species, the black bear (*Ursus americanus*) and the grizzly bear (*Ursus arctos*). Both bears species are responsible for serious injuries and deaths to humans in B.C., and both should be treated with extreme caution.

Moose - A moose encounter has the potential to be just as dangerous as a bear encounter. Therefore, similar measures must be taken to avoid these large ungulates. Moose are especially aggressive in the spring (calving season) and the fall (rutting season).

Cougars, Wolves & Coyotes - Wolves, and coyotes are generally not a threat to humans. Wolves are secretive; usually, once a wolf has detected a human, it will run away without the person even knowing it was there. Wild coyotes are naturally curious animals; however, they are timid and will usually run away if challenged.

### 3.4.14 Forest Fires

To **report a wildfire** or irresponsible behaviour that could start a **wildfire in Alberta/British Columbia**, please call 1 800 663-5555 or (\*5555 from a cell phone) as soon as possible. Ensure to report to Trans Mountain and evacuate the area immediately.

### 3.4.15 Pandemic Response (COVID-19)

The following steps detail how an Employer should respond when a Monitor tests positive for the coronavirus;

1. Daily screening of all workers, contractors, and visitors for symptoms of fever, sore throat, cough, runny nose, sore throat, or shortness of breath.
2. Anyone who is sick with cold-like symptoms will not be allowed in the workplace.
3. Employees who have **COVID-19 symptoms** (i.e., fever, cough, or shortness of breath) should notify their supervisor and stay home or at their hotel. Follow the Incident Reporting Protocol to notify the IAMC-TMX Indigenous Monitoring Subcommittee immediately.
4. Employees who appear to have symptoms upon arrival at work or who become sick during the day should immediately be separated from other employees, customers, vendors, and visitors, and sent to their home or hotel.

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5. Protect Other Employees- If an employee is confirmed to have COVID-19, the IAMC-TMX Indigenous Monitoring Program team will make notifications to all parties who participated in the Compliance Verification Activity of their possible exposure but will maintain confidentiality.
6. Monitors should self-monitor for symptoms. Monitors that have been in contact with a confirmed COVID-19 case will be asked to self-isolate for 14 days.
7. Perform enhanced cleaning and disinfection if required (i.e if the Monitor has recently been in the office) after persons suspected or confirmed to have COVID-19 have been confirmed.
8. Sick Monitors should follow the [CDC-recommended steps](#). Monitors should not return to work until the criteria to [discontinue self isolation](#) are met, in consultation with healthcare providers and provincial and local health departments.
9. **Stay home.** Most people with COVID-19 have mild illness and can recover at home without medical care. Do not leave your home, except to get medical care. Do not visit public areas. Wear appropriate Personal Protective Equipment when leaving isolation.
10. **Take care of yourself.** Get rest and stay hydrated. Follow the direction of your health care professional.
11. **Stay in touch with your doctor.** Call before you get medical care. Be sure to get care if you have trouble breathing, or have any other [emergency warning signs](#), or if you think it is an [emergency](#).
12. **Avoid public transportation**, ride-sharing, or taxis.

**As much as possible, stay in a specific room** and away from other people and pets in your home. If possible, you should use a separate bathroom. If you need to be around other people or animals in or outside of the home, wear a cloth face covering.

Additional guidance is available for those living in [close quarters](#) and [shared housing](#).

See [COVID-19 and Animals](#) if you have questions about pets.

### Monitor your symptoms

[Symptoms](#) of COVID-19 fever, cough, or other symptoms.

**Follow care instructions from your healthcare provider and local health department.** Your local health authorities may give instructions on checking your symptoms and reporting information.

### When to Seek Emergency Medical Attention

Look for **emergency warning signs\*** for COVID-19. If someone is showing any of these signs, **seek emergency medical care immediately**

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake

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- Bluish lips or face

\*This list is not all possible symptoms. Please call your medical provider for any other symptoms that are severe or concerning to you.

**Call 911 or call ahead to your local emergency facility:** Notify the operator that you are seeking care for someone who has or may have COVID-19.

### 3.5 Hazard Identification and Assessment

The Trans Mountain Emergency Response Plan will identify all potential emergencies that all participants of the IAMC-TMX Indigenous Monitoring Program may be exposed to. Since fire and medical emergencies are common to all worksites, they are included. Other potential emergencies include, but are not limited to, threatening persons, severe weather, earthquakes, vehicle accidents, equipment rollovers, chemical spills, and/or gas release and pandemic (COVID-19).

Where the safety of workers, the general public, and the environment may be at risk and the need to rescue or evacuate workers from the project site may arise, Trans Mountain will conduct hazard identification and assessment for all operations, site-specific conditions, and job-specific duties and will assess the probabilities and consequences connected with hazards arising from human activities, technological events, and natural perils.

This listing of potential emergency scenarios, and the required control plans, will be documented and will be updated annually, or more frequently should experience demand.

Engineering controls and/or operational changes throughout the life of the project that may have an effect on emergency response procedures must also be identified and reflected in plan maintenance and implementation procedures.

For each emergency scenario, non-medical emergency supplies (e.g., fire extinguishers, flashlights, spill kits, SCBA's) meeting legislated requirements, if applicable, must be identified.

Site-specific emergency procedures should be reviewed with workers before work begins at the site. This is typically completed during the pre-job safety meeting/ toolbox talk.

The emergency procedures shall contain an emergency evacuation plan and a full description of the procedures to be followed.

### 3.6 Emergency Drills

A minimum number of drills should be performed and practiced by Trans Mountain. It is the responsibility of Trans Mountain to execute these drills. It is possible that the Monitors may not ever participate in a drill onsite. However, it is important that the Monitors review this standard and the site-specific emergency response plans to become competent with its contents.

The Drills should include the following:

- Medical Emergencies (annual)

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- Site Evacuation (annual)
- Natural Disasters (annual)
- Fire (annual)

### 3.7 Emergency Response Plan (Updates & Distribution)

Emergency response planning is a process that requires continuous adjustments to take into account factors such as operational, organizational, personnel, and regulatory changes, and lessons learned from real-life events or exercises. This and any site-specific emergency response plan is regularly maintained to reflect its accuracy and up-to-date information specific to relevant hazards, response procedures, and personnel.

An Employer’s Emergency Response Plan must be updated whenever there are changes to operations, equipment, and/or personnel. When changes to the Emergency Response Plan occur, Monitors must be re-trained.

In addition to annual reviews and reviews done when circumstances at the workplace change, a review, and evaluation process will also take place after an emergency to ensure that critical components of the overall emergency response are reviewed and evaluated in order to allow for continuous improvements to the program.

This Emergency Response Plan has been developed in coordination with the IAMC-TMX Indigenous Monitoring Subcommittee and Employers and shall be distributed to all those involved in administration and response procedures within the plan. This emergency response plan shall be available for all Monitors by Employer Logistics Coordinators.

### 3.8 Incident Reports and Investigations

Any event that results in harm, injury, illness, or damage must be investigated according to Employer Incident Investigation Protocols. This should be done in collaboration with the IAMC Indigenous Monitoring Subcommittee.

### 3.9 Definitions

- Incident:** An uncontrolled or unplanned event that results in damage to persons, property, or the environment.
- Dangerous Substance:** Substance, when released in such a quantity, may result in harm to life, property, or the environment. These substances are defined in the transportation of Dangerous Goods Act.
- Emergency:** Any event that arises suddenly and requires immediate coordination of actions or special direction of persons or assets to protect the health, safety, or welfare of people, limit damage to property and the environment.
- Emergency Response Plan:** A written plan of emergency measures to be developed by Employer or Prime Contractor to mitigate the effects of an emergency or local disaster.
- Hazard:** A condition with a possibility for human injury, damage to property, damage to the environment, or combination of.

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**Emergency Meeting Point:** A designated location where employees will meet in the event of an emergency. A roll call is conducted, and instructions are given at this location.

**Emergency Responders:** Persons or organizations (internal or external) named in the plan responsible for actions intended to reduce the risk, loss, and/or damage resulting from an emergency.

**Risk:** A measure of the probability and severity of and adverse effect on health, property, or the environment.

**Risk Reduction:** Reducing risks by lessening the chance and/or consequences of a hazardous event.

**Spill:** Unintentional release of a liquid or solid material from its proper containment due to container failure or upset.

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## 4.0 First Aid Protocols during COVID-19 Pandemic

### 4.0 Purpose

During the COVID-19 pandemic, Trans Mountain Occupational First Aid Attendants will continue to provide treatment to workers as necessary. Because of the possibility of infection from COVID-19, the following procedures are to be followed should you be required to provide First Aid. Remember to only provide First Aid that is appropriate to the level of First Aid training you have received.

### 4.1 Responsibilities

The primary objective is to provide First Aid to those injured on the job site in an efficient and safe manner. This applies to both the injured person (IP) and the First Aid Attendant (FAA).

#### 4.1.1 Trans Mountain Management

- Responsible for providing the appropriate training and resources (first aid supplies, trained first aid personnel) at the worksite as per legislative requirements. (Alberta-Part 11, Schedule 2/British Columbia-Part 3.16, Schedule 3).

#### 4.1.2 Trans Mountain Employees

- Responsible for following all requirements and guidelines specified in this standard.

#### 4.1.3 First Aider

First Aiders are responsible for establishing and maintaining the Safety Management System. Their roles and responsibilities include;

- Ensure to keep training current (Standard First and including CPR),
- Take direction from the incident commander and/or Emergency Response Team (ERT) members,
- Participate in drills as required

#### 4.1.4 Visitors

- All visitors are expected to complete a site-specific orientation prior to entering company premises.
- All visitors (including regulatory, vendors, and contractors) working in or passing through the company's premises are expected to follow general hygiene practices. This includes IAMC-TMX Indigenous Monitors.

### 4.2 Procedure

- When you receive a call for First Aid, if possible, gather the following information;
  - What are the circumstances surrounding the call for assistance?
  - Are critical interventions likely required? If so, call 911 or have an emergency transport vehicle prepared.
  - Are there any obvious signs of COVID-19? If so, send the patient home or to the hospital.
- If no critical interventions are required, if possible and appropriate, interview the patient from a distance. Ask the following questions;
  - Is anyone sick or in self-isolation in your household?

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- Have you been in contact with anybody who has been sick?
3. When you arrive at the patient's location, assess the situation:
    - Does the patient have a minor injury that the patient can self-treat while you provide direction and supplies?
    - If Yes, direct the patient to self-treat per your First Aid Protocols.
  4. If the patient can't self-treat, don the appropriate level of personal protective equipment (PPE) for the situation. PPE could include the following items:
    - Face shield or surgical-type mask
    - Pocket mask
    - Gloves
    - Coveralls (disposable or washable)
    - Apron or lab coat
    - Glasses or goggles
    - Hand Sanitizer
  5. After treatment, sanitize all equipment with either soap and water or 70% isopropyl alcohol. Remove and wash any PPE that is not disposable, as well as any exposed clothing. Wash your hands thoroughly.
  6. If critical interventions are required, and there is no way of determining background information, don the appropriate PPE, and limit access to the patient to the number of people required to deal with the critical intervention. It is important to limit the exposure of others.

#### 4.2.1 Scenario: Self-treatment with direction

A First Aid trained person receives a call stating a worker has injured her hand. The attendant collects as much information about the severity of the injury as possible. The injury is deemed to be minor with no other concerns, so the attendant goes to the worker, but stays 2 meters (approximately 6 feet) away. On arrival, the attendant asks:

- Is anyone sick or in self-isolation in your household?
- Are you able to administer first aid to yourself if I tell you what to do and how to do it?

After the first aid attendant has conducted the interview, the attendant visually assesses the patient and the wound from a distance and asks the patient about any underlying conditions relating to the injury.

The attendant then places the required first aid supplies on a surface 2 meters from the patient. The attendant steps back and directs the patient to pick up and apply the supplies. The first aid attendant then verbally conducts a modified secondary survey and documents the findings.

#### 4.2.2 Scenario: Employer Emergency Transport Vehicle for transport with intervention

A First Aid Attendant receives a call about a worker who has been struck in the head and is unresponsive. The attendant immediately ensures that 911 has been contacted. On approaching the scene, the first aid attendant conducts a scene assessment and dons the appropriate PPE. Once PPE is on, the attendant approaches the patient and conducts a primary survey to determine what, if any, critical interventions are required. The attendant positions the patient in the three-quarter-prone position to ensure that the airway is open and clear, and no further interventions are needed. Only one person (the attendant) needs to be in contact with the patient; all others can stay 2 meters away. The attendant monitors the patient until the ambulance arrives.

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#### 4.2.3 Scenario: First Aid with an intervention (Advanced First Aid/Level 3)

A First Aid Attendant receives a call about a worker who has been struck in the head and is unresponsive. The attendant immediately arranges for the Emergency transport Vehicle to be ready. On approaching the scene, the first aid attendant conducts a scene assessment and dons the appropriate PPE. Once PPE is on, the attendant approached the patient and ensured an open airway. Once the airway is open and clear, the attendant stabilizes the patient's head with an inanimate object (to free the attendant's hands) and inserts an oropharyngeal airway (OPA) to protect and maintain the airway. The attendant then conducts a primary survey to determine what, if any, further critical interventions are required. Only one person (the attendant) needs to be in contact with the patient; all others can stay 2 meters away.

A helper will be needed to assist the first aid attendant in lifting the patient into the basket and ETV. Use any PPE or other measures available to provide a barrier between the helpers and the patient, including covering the patient with a blanket. Once the patient is loaded, ensure the helpers remove their PPE and wash or sanitize their hands.

#### 4.3 First Aid Requirements for Companies

Under the IAMC-TMX Indigenous Monitoring Program, all Monitors are required to have Standard First Aid + CPR-C for in-person Compliance Verification Activities (CVAs). It is also recommended that IAMC-TMX Indigenous Monitors always carry a Basic First Aid kit in their vehicle while on site.

For reference, Occupational First Aid Requirements for companies operating in British Columbia and Alberta are listed below.

#### Worksafe BC Occupational First Aid

Table 1: **low risk** of injury and that is **more than 20** minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1	Personal first aid kit		
2	2-5	Basic first aid kit		
3	6-30	Level 1 first aid kit	Level 1 certificate	
4	31-50	Level 1 first aid kit ETV Equipment	Level 1 certificate with Transportation Endorsement	
5	51-75	Level 3 first aid kit Dressing station ETV equipment	Level 3 certificate	
6	76 or more	Level 3 first aid kit First aid room ETV equipment	Level 3 certificate	ETV

Table 2: **low risk** of injury and that is **less than 20** minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1			

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2	2-10	Basic first aid kit		
3	11-50	Level 1 first aid kit	Level 1 certificate	
4	51-100	Level 1 first aid kit Dressing Station	Level 1 certificate	
5	101 or more	Level 2 first aid kit First Aid Room	Level 2 certificate	

Table 3: **moderate risk** of injury and that is **more than** 20 minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1	Personal first aid kit		
2	2-5	Level 1 first aid kit	Level 1 certificate	
3	6-15	Level 1 first aid kit ETV equipment	Level 1 certificate Transportation Endorsement	
4	16-50	Level 3 first aid kit Dressing station ETV equipment	Level 3 certificate	ETV
5	51-100	Level 3 first aid kit First aid room ETV equipment	Level 3 certificate	ETV
6	101-300	Level 3 first aid kit First aid room Industrial ambulance equipment	Level 3 certificate	Industrial ambulance
7	301 or more	Level 3 first aid kit First aid room Industrial ambulance equipment	2 attendants, each with Level 3 certificates	Industrial ambulance

Table 4: **moderate risk** of injury and that is **less than** 20 minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1	Personal first aid kit		
2	2-5	Basic first aid kit		
3	6-25	Level 1 first aid kit	Level 1 certificate	
4	26-75	Level 2 first aid kit Dressing Station	Level 2 certificate	
5	76 or more	Level 2 first aid kit First Aid Room	Level 2 certificate	

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Table 5: **high risk** of injury and that is **more than** 20 minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1	Personal first aid kit		
2	2-5	Level 1 first aid kit	Level 1 certificate	
3	6-10	Level 1 first aid kit ETV equipment	Level 1 certificate Transportation Endorsement	
4	11-30	Level 3 first aid kit Dressing station ETV equipment	Level 3 certificate	ETV
5	31-50	Level 3 first aid kit First aid room ETV equipment	Level 3 certificate	ETV
6	51-200	Level 3 first aid kit First aid room Industrial ambulance equipment	Level 3 certificate	Industrial ambulance
7	201 or more	Level 3 first aid kit First aid room Industrial ambulance equipment	2 attendants, each with Level 3 certificates	Industrial ambulance

Table 6: **high risk** of injury and that is **less than** 20 minutes of surface travel time away from a hospital

Item	Number of Workers (per shift)	Supplies, Equipment, Facilities	Level of First Aid Training	Transportation
1	1	Personal first aid kit		
2	2-15	Level 1 first aid kit	Level 1 certificate	
3	16-30	Level 2 first aid kit Dressing station	Level 2 certificate	
4	31-300	Level 2 first aid kit First aid room	Level 2 certificate	
5	301 or more	Level 2 first aid kit First aid room	2 attendants, with Level 2 certificates	

Table 7: BC Personal First Aid Kit Contents

Product	Quantity
Compress Pressure Bandage with Crepe Ties, 11.4 x 15.2cm (4.5" x 6")	1
Plastic Adhesive Bandages - 1.9 x 7.6cm (3/4" x 3")	3
Fabric Adhesive Bandages - 2.5 x 7.6cm (1" x 3")	3

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Benzalkonium Chloride Antiseptic Towelettes	6
Waterproof Waste Bag	1

Table 8: BC Basic First Aid Kit Contents

Product	Quantity
Benzalkonium Chloride Antiseptic Towelettes	6
Plastic Adhesive Bandages - 1.9 x 7.6cm (3/4" x 3")	5
Fabric Adhesive Bandages - 2.5 x 7.6cm (1" x 3")	5
Sterile Gauze Pads - 10.2 x 10.2cm (4" x 4")	6
Compress Pressure Bandage with Crepe Ties, 11.4 x 15.2cm (4.5" x 6")	1
Triangular Bandage - 102 x 102 x 142cm (40" x 40" x 56")	1
Paramedic Scissors - 15.2cm (6")	1
Cloth Adhesive Tape - 2.5 cm x 4.5 m (1" x 5 yd)	1
Elastic Wrap Bandages - 7.6 cm (3")	1
Pairs of Vinyl Examination Gloves	3
Waterproof Waste Bag	1

Table 9: BC Level 1 First Aid Kit Contents

Product	Quantity
Multi Fibre Rescue Blankets - <b>add option if required</b>	1
Benzalkonium Chloride Antiseptic Towelettes	24
Plastic Adhesive Bandages - 1.9 x 7.6cm (3/4" x 3")	15
Fabric Adhesive Bandages - 2.5 x 7.6cm (1" x 3")	10
Knuckle Adhesive Bandages	5
Fabric Fingertip Adhesive Bandages	5
Fabric Patch Adhesive Bandages - 5 x 7.6cm (2" x 3")	5
Junior Adhesive Bandages	10
Sterile Gauze Pads - 10.2 x 10.2cm (4" x 4")	10
Compress Bandage with Elastic Tails - 10 cm x 16.5 cm (4" x 6.5")	4
Elastic Wrap Bandages - 7.6 cm (3")	2

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Conforming Gauze Bandage Roll - 7.6cm (3")	2
Adhesive Tape - 2.5 cm x 4.5 m (1" x 5 yd)	1
Triangular Bandage - 102 x 102 x 142cm (40" x 40" x 56")	2
Quick Straps (Zap/Fracture Straps)	2
Windlass Style Tourniquet	1
Paramedic Scissors 5.5"	1
Stainless Steel Splinter Forceps - 11.5 cm (4.5")	1
CPR Pocket Mask With One-Way Valve and O2 Inlet In Case	1
Pairs of Vinyl Examination Gloves	6
Waterproof Waste Bag	1
Accident Record Book	1

Table 10: BC Level 2 First Aid Kit Contents

Product	Quantity
Multi Fibre Rescue Blankets - <b>add option if required</b>	1
Benzalkonium Chloride Antiseptic Towelettes	24
Plastic Adhesive Bandages - 1.9 x 7.6cm (3/4" x 3")	15
Fabric Adhesive Bandages - 2.5 x 7.6cm (1" x 3")	10
Knuckle Adhesive Bandages	5
Fabric Fingertip Adhesive Bandages	5
Fabric Patch Adhesive Bandages - 5 x 7.6cm (2" x 3")	5
Junior Adhesive Bandages	10
Sterile Gauze Pads - 10.2 x 10.2cm (4" x 4")	20
Compress Bandage with Elastic Tails - 10 cm x 16.5 cm (4" x 6.5")	4
Abdominal / Combine Pad - 20.32 cm x 25.4 cm (8" x 10")	4
Triangular Bandage - 102 x 102 x 142cm (40" x 40" x 56")	4
Adhesive Tape - 5.1 cm x 4.5 m (2" x 5 yd)	2
Conforming Gauze Bandage Roll - 7.6cm (3")	2
Elastic Wrap Bandages - 7.6 cm (3")	2

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Paramedic Scissors 5.5"	1
Stainless Steel Splinter Forceps - 11.5 cm (4.5")	1
Quick Straps (Zap/Fracture Straps)	2
Windlass Style Tourniquet	1
CPR Pocket Mask With One-Way Valve and O2 Inlet In Case	1
Pairs of Vinyl Examination Gloves	6
Waterproof Waste Bag	1
Accident Record Book	1

Table 11: BC Level 3 First Aid Kit Contents

Product	Quantity
Multi Fibre Rescue Blankets - <b>add option if required</b>	1
Benzalkonium Chloride Antiseptic Towelettes	24
Plastic Adhesive Bandages - 1.9 x 7.6cm (3/4" x 3")	15
Fabric Adhesive Bandages - 2.5 x 7.6cm (1" x 3")	10
Knuckle Adhesive Bandages	5
Fabric Fingertip Adhesive Bandages	5
Fabric Patch Adhesive Bandages - 5 x 7.6cm (2" x 3")	5
Junior Adhesive Bandages	10
Sterile Gauze Pads - 10.2 x 10.2cm (4" x 4")	20
Compress Bandage with Elastic Tails - 10 cm x 16.5 cm (4" x 6.5")	4
Abdominal / Combine Pad 20.32 cm x 25.4 cm (8" x 10")	4
Triangular Bandage - 102 x 102 x 142cm (40" x 40" x 56")	6
Adhesive Tape - 5.1 cm x 4.5 m (2" x 5 yd)	2
Conforming Gauze Bandage Roll - 7.6cm (3")	4
Elastic Wrap Bandages - 7.6 cm (3")	4
Paramedic Scissors 5.5"	1
Stainless Steel Splinter Forceps - 11.5 cm (4.5")	1
Quick Straps (Zap/Fracture Straps)	4

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Windlass Style Tourniquet	1
CPR Pocket Mask With One-Way Valve and O2 Inlet In Case	1
Pairs of Vinyl Examination Gloves	6
Waterproof Waste Bag	1
Penlight	1
Accident Record Book	1
Patient Assessment Chart	3

**Alberta Occupational Health and Safety First Aid**

Table 12: **low risk** of injury

Item	Number of Workers (per shift)	Close work site (up to 20 minutes)	Distant work site (20-40 minutes)	Isolated work site (over 40 minutes)
1	1	Type P First Aid Kit	Type P First Aid Kit	Type P First Aid Kit
2	2-9	No. 1 First Aid Kit	1 Emergency First Aider No. 2 First Aid Kit	1 Standard First Aider No. 2 First Aid Kit
3	10-49	1 Emergency First Aider No. 1 First Aid Kit	1 Emergency First Aider No. 2 First Aid Kit	1 Standard First Aider No. 2 First Aid Kit
4	50-99	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit	2 Standard First Aiders No. 2 First Aid Kit
5	100-199	1 Emergency First Aider 2 Standard First Aiders No. 3 First Aid Kit Designated area for first aid services	1 Emergency First Aider 2 Standard First Aiders No. 3 First Aid Kit 3 blankets, stretcher, splints Designated area for first aid services	3 Standard First Aiders No. 3 First Aid Kit 3 blankets, stretcher, splints Designated area for first aid services
6	200 or more	1 Emergency First Aider 2 Standard First Aiders <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers No. 3 First Aid Kit Designated area for first aid services	1 Emergency First Aider 2 Standard First Aiders <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers No. 3 First Aid Kit 3 blankets, stretcher, splints Designated area for first aid services	3 Standard First Aiders <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers No. 3 First Aid Kit 3 blankets, stretcher, splints Designated area for first aid services

Table 13: **medium risk** of injury

Issue Date	05/28/2020	IAMC-HSE-2-004	Originator	Brad Huber
Revision	Initial	<b>First Aid Protocols during COVID-19 Pandemic</b>	Approver	IAMC IMSC

Item	Number of Workers (per shift)	Close work site (up to 20 minutes)	Distant work site (20-40 minutes)	Isolated work site (over 40 minutes)
1	1	Type P First Aid Kit	Type P First Aid Kit	Type P First Aid Kit
2	2-9	1 Emergency First Aider No. 1 First Aid Kit	1 Standard First Aider No. 2 First Aid Kit 3 blankets	1 Standard First Aider No. 2 First Aid Kit 3 blankets
3	10-19	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit 3 Blankets	2 Standard First Aiders No. 2 First Aid Kit 3 Blankets
4	20-49	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit 3 Blankets	2 Standard First Aiders No. 2 First Aid Kit 3 Blankets
5	50-99	2 Emergency First Aiders 1 Standard First Aider No. 3 First Aid Kit	2 Emergency First Aiders 1 Standard First Aider No. 3 First Aid Kit 3 blanket	3 Standard First Aiders No. 3 First Aid Kit 3 blankets
6	100-199	2 Emergency First Aiders 2 Standard First Aiders No. 3 First Aid Kit Designated area for first aid services	2 Emergency First Aiders 2 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints Designated area for first aid services	1 Advanced First Aider 3 Standard First Aiders No. 3 First Aid Kit 3Blankets, stretcher, splints Designated area for first aid services
7	200 or more	2 Emergency First Aiders 2 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room	2 Emergency First Aiders 2 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room	4 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room

Table 14: **high risk** of injury

Item	Number of Workers (per shift)	Close work site (up to 20 minutes)	Distant work site (20-40 minutes)	Isolated work site (over 40 minutes)
1	1	Type P First Aid Kit	Type P First Aid Kit	Type P First Aid Kit
2	2-4	1 Emergency First Aider No. 1 First Aid Kit	1 Standard First Aider No. 2 First Aid Kit 3 Blankets	1 Standard First Aider No. 2 First Aid Kit 3 Blankets

Issue Date	05/28/2020	IAMC-HSE-2-004	Originator	Brad Huber
Revision	Initial	<b>First Aid Protocols during COVID-19 Pandemic</b>	Approver	IAMC IMSC

3	5-9	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit	2 Standard First Aiders No. 2 First Aid Kit 3 Blankets	2 Standard First Aiders No. 2 First Aid Kit 3 Blankets
4	10-19	1 Emergency First Aider 1 Standard First Aider No. 2 First Aid Kit 3 Blankets	2 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints	2 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints
5	20-49	2 Emergency First Aiders 1 Standard First Aider No. 2 First Aid Kit 3 Blankets	3 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints	3 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints
6	50-99	2 Emergency First Aiders 2 Standard First Aiders No. 3 First Aid Kit 3 Blankets	2 Emergency First Aiders 3 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints	1 Advanced First Aider 4 Standard First Aiders No. 3 First Aid Kit 3 Blankets, stretcher, splints
7	100-199	2 Emergency First Aiders 2 Standard First Aiders 1 Advanced First Aider First Aid Room	4 Standard First Aiders 1 Advanced First Aider First Aid Room	4 Standard First Aiders 1 Advanced First Aider First Aid Room
8	200 or more	2 Emergency First Aiders 2 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room	4 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room	1 Advanced First Aider 4 Standard First Aiders 1 Nurse or 1 EMT-P <b>PLUS</b> 1 Standard First Aider for each additional increment of 1 to 100 workers First Aid Room

Table 15: Alberta # 1 First Aid Kit Contents

Product	Quantity
Compress Bandages (10cm x 10cm)	2
Compress Bandages (15cm x 15cm)	2
Triangular Bandages (102cm x 102cm x 142cm)	3
Conform Bandages (7.5cm x 4.5m)	2
Elastic Support Bandages (7.5cm x 4.5m)	1
Kit Tweezers	1
Gauze Pads (10cm x 10cm)	10
Nitrile Gloves (Large pair per bag)	6

Issue Date	05/28/2020	IAMC-HSE-2-004	Originator	Brad Huber
Revision	Initial	<b>First Aid Protocols during COVID-19 Pandemic</b>	Approver	IAMC IMSC

Face Shield	1
SJA First Aid Pocket Guide	1
Safety Pins – Assorted (6/bag)	1
Waterproof Waste Bag	1
First Aid Scissors	1
Wound Washer with Benzalkonium 0.02% (5cm x 5.5cm)	10
Tape (2.5cm x 4.5m)	1
Adhesive Bandages – Assorted (25 pcs)	1

Table 16: Alberta # 2 First Aid Kit Contents

Product	Quantity
Compress Bandages (10cm x 10cm)	3
Compress Bandages (15cm x 15cm)	3
Abdominal Pad (20cm x 25cm)	1
Triangular Bandages (102cm x 102cm x 142cm)	4
Conform Bandages (7.5cm x 4.5m)	2
Eye Pad (Sterile, oval)	1
Elastic Support bandages (7.5cm x 4.5m)	2
Sterile Pressure Dressings with crepe ties	3
Forceps Stainless Steel	1
Gauze Pads (10cm x 10cm)	20
Nitrile Gloves (Large pair per bag)	6
Face Shield	1
First Aid Pocket Guide	1
Safety Pins – Assorted (12/bag)	1
Waterproof Waste Bag	1
Bandage Scissors	1
Wound Washer with Benzalkonium 0.02% (5cm x 5.5cm)	10
Tape (2.5cm x 4.5m)	1

Issue Date	05/28/2020	IAMC-HSE-2-004	Originator	Brad Huber
Revision	Initial	<b>First Aid Protocols during COVID-19 Pandemic</b>	Approver	IAMC IMSC

Adhesive Bandages (Assorted 25 pcs)	2
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Table 17: Alberta # 3 First Aid Kit Contents

Product	Quantity
Compress Bandages (10cm x 10cm)	6
Abdominal Pads (20cm x 25cm)	4
Triangular Bandages (102cm x 102cm x 142cm)	12
Conform Bandages (7.5cm x 4.5m)(5cm x 5.5cm)(15cm x 15cm)	6
Tape (2.5cm x 4.5m)	2
Adhesive Bandages – Assorted (100 pcs)	1
First Aid Pocket Guide	1
Tubular Finger Bandage with Applicator	1
Eye pads (Sterile, oval)	2
Elastic Support Bandages (7.5cm x 4.5m)	4
Forceps Stainless Steel	1
Gauze Pads (10cm x 10cm)	50
Nitrile Gloves (Large pair per bag)	12
Face Shield	1
Safety Pins – Assorted (12/bag)	1
Waterproof Waste Bag	2
Bandage Scissors	1
Wound Washer with Benzalkonium 0.02% (5cm x 5.5cm)	24

Table 18: Alberta Type P First Aid Kit Contents

Product	Quantity
Fabric adhesive strips	2
Elastoband knuckles	1
Fabric elastoband fingertips	1
Plastic adhesive strips	6
Alcohol prep pads	5

Issue Date	05/28/2020	IAMC-HSE-2-004	Originator	Brad Huber
Revision	Initial	<b>First Aid Protocols during COVID-19 Pandemic</b>	Approver	IAMC IMSC

Gauze pads	5
Bandage compress	1
Triangular bandage	1
Large nitrile gloves	1

#### 4.4 References

4. WorkSafe BC OFFA protocols
5. Alberta occupational health and safety legislation
6. British Columbia health and safety legislation
7. BC Self-Assessment Tool- <https://bc.thrive.health/>
8. Alberta Self-Assessment Tool- [https://myhealth.alberta.ca/journey/covid-19/Pages/COVID-Self-Assessment.aspx?fbclid=IwAR3eoniUQI5SVzkA72upls\\_-CSXuVM60TNB6a\\_madAC5iVZvJReZbMplC40](https://myhealth.alberta.ca/journey/covid-19/Pages/COVID-Self-Assessment.aspx?fbclid=IwAR3eoniUQI5SVzkA72upls_-CSXuVM60TNB6a_madAC5iVZvJReZbMplC40)

		SAFETY MANAGEMENT SYSTEM			
Issue Date	05/28/2020	<i>IAMC-HSE-2-005</i>		Originator	<i>Brad Huber</i>
Revision	<i>Initial</i>	<b>Working Alone Standard</b>		Approver	<i>IAMC IMSC</i>

## 5.0 Working Alone Standard

### 5.0 Purpose

A Working Alone Procedure and a Working Alone Hazard Assessment are legislated responsibilities of every employer. One working alone hazard assessment may fit multiple worksites, providing that the working conditions are the same. These assessments shall be available for the workers to review. All working alone hazards shall be mitigated to a reasonable and practical level of risk. Every worker who works alone must have a designated "Working Alone Contact." Activities, dates, and times of contact shall be documented and filed. The "Working Alone Contact" maybe a co-worker, a 24/7 third-party emergency answering service, or an automated working alone tracking system.

For Compliance Verification Activities, IAMC-TMX Indigenous Monitors are part of an inspection team and should not be alone on the Trans Mountain worksite. However, it is anticipated that Monitors will be alone while in transit to and from the work site. The appropriate Working Alone Safety Protocols should be followed at this time.

The above applies where:

- a) A worker is working alone at a worksite, and
- b) Assistance is not readily available (while onsite or travelling) if there is an emergency or the worker is injured or ill.

Furthermore, Employers recognizes that working alone and or in isolation is a hazard for the purpose of meeting its hazard assessment, elimination, and control requirements under the respective provincial OH&S Act, Regulation, and Codes.

### 5.1 Application

Employers will develop a Site-Specific Procedure (SSP) for Working Alone based on a risk assessment of the Working Alone Situation; the SSP will be documented, approved by management, and signed by every company worker impacted by the Working Alone situation.

### 5.2 Potential Hazards

Potential hazards include:

- Loss of communication needed for requesting assistance;
- Delays in reporting times;
- Injury requiring assistance;
- Weather and road conditions; and
- Transportation problems.

### 5.3 Equipment and Training Requirements

#### **Working Alone or at Isolated Place of Employment**

		SAFETY MANAGEMENT SYSTEM			
Issue Date	05/28/2020	<i>IAMC-HSE-2-005</i>		Originator	<i>Brad Huber</i>
Revision	<i>Initial</i>	<b><i>Working Alone Standard</i></b>		Approver	<i>IAMC IMSC</i>

(1) Employers should, for any worker working alone, provide an effective communication system consisting of:

- (a) Radio communication;
- (b) Landline or cellular telephone communication; or
- (c) Some other effective means of electronic communication that includes regular contact by the company or designate at intervals appropriate to the nature of the hazard associated with the worker's work.

Despite subsection (1), if effective electronic communication is not practicable at the worksite, the Employer should ensure that:

- (a) The worker contacts the Employer or designates at intervals appropriate to the nature of the hazard associated with the worker's work.

The Working Alone Procedure and Response Plan for the overdue worker, as it relates to the IAMC-TMX Indigenous Monitoring Program, are to be specific agenda items for Employer safety meetings in order to ensure a suitable level of acceptance and involvement from all personnel is achieved.

Supervisors and members of the management shall discuss the plan with IAMC-TMX Logistics Coordinators and Monitors in order to ensure a high level of awareness and preparedness is maintained at all times.

#### 5.4 Procedures

##### 1. **Low Risk Working Alone Procedure for Indigenous Monitors:**

(eg. Greenfield Operations, Daylight Hours, Normal Weather Conditions)

- a) Notify your "Working Alone Contact" of check-in times and locations of work;
- b) If multiple travel routes are an option, then the route selected will also be noted; and
- c) If your arrival at a check-in location is delayed by more than one (1) hour, you must notify your "Working Alone Contact" of your new estimated time of arrival.

##### 2. **High Risk Working Alone Procedure:**

(eg. Sour Gas Operations, Call-outs, Adverse Weather Conditions)

- a) Notify your "Working Alone Contact" prior to departure, and advise your contact of your estimated time of arrival at the location;
- b) Notify your "Working Alone Contact" of arrival at the location;
- c) Assess the problem or job scope, notify your contact, discuss the nature of the problem or job, work procedure to be used, and any additional required safeguards, and provide an estimation of how long you will be at the location;
- d) Notify your "Working Alone Contact" when you are finished and ready to leave the location and estimated time of arrival at next worksite, base, hotel or home; and
- e) Notify your "Working Alone Contact" of arrival at the next checkpoint, base, or home.

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Revision	Initial	<b>Working Alone Standard</b>	Approver	IAMC IMSC

- If you are delayed or expect to be delayed arriving at your next check-in point by more than one (1) hour, notify your “Working Alone Contact” of amended estimated time of arrival, and
- During adverse weather conditions, notify your “Working Alone Contact” of your exact route to be followed. Shorter check-in time intervals are recommended.

**Note:** Every Monitor has both the right and responsibility to decline to travel when weather conditions are such that they represent an undue hazard to the health and safety of the individual.

### 3. Overdue Worker Response Plan

- The Overdue Worker Response Plan shall be initiated when a Monitor is one (1) hour overdue, (shorter grace periods may be instituted during bad weather or at high-risk worksites), and
- After the one (1) hour grace period has expired, the worker’s “Working Alone Contact” shall:
  - Attempt to contact the overdue Monitor by cell phone or the radio;
  - Immediately notify the Monitor’s supervisor of the circumstances;
  - The supervisor will discuss options with the "Working Alone Contact," and together they will agree on an action plan; and
  - The action plan may include any or all of the following:
    - Continued attempts to contact the overdue Monitor by cell phone or the radio;
    - The “Working Alone Contact” or another designated individual will drive the route taken by the overdue Monitor in an attempt to contact the worker. Specific PPE safety equipment may be required for rescue activities by those involved with the Overdue Worker Response Plan;
    - The “Working Alone Contact” or the supervisor may request search assistance from industry workers in the area who have been identified in the contact list;
    - The “Working Alone Contact” or supervisor will call the local hospital(s) to establish whether an injured person has been admitted; and
    - The “Working Alone Contact” or supervisor may notify the local police or RCMP of the circumstances with a request for assistance.

#### 5.5 Documentation

- Each individual Monitor shall be required to provide a detailed list of the “Working Alone Contacts” (colleagues, supervisor, answering service, and/or industry co-workers) that they intend to use;
- A copy of this list is to be kept by all “Working Alone Contacts,” the Logistics Coordinator and the Monitor’s supervisor;
- The contact list should be reviewed or updated every three months;
- A Working Alone Log is mandatory and must contain the following information:
  - Worker name;
  - Date;

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Revision	Initial	<b>Working Alone Standard</b>	Approver	IAMC IMSC

- Scheduled check-in time;
- Actual check-in time;
- Location and work activity; and
- Working Alone Logs shall be made available for audit purposes and filed for three years, one audit cycle.

#### 5.6 Other Considerations

Working alone and/or in isolation is considered a hazard as identified within the majority of provincial occupational health and safety regulations. With this in mind, Employers should include working alone activities in their emergency response plans in order to meet all applicable provincial regulatory requirements.

In addition, Employers should provide Monitors with clear direction in terms of when this procedure applies and when it does not. If in doubt, the Monitors must apply the procedure or call his/her supervisor and/or Logistics Coordinator, who will advise.

#### 5.7 Related References

- WorkSafe BC Part 4-Working Alone or in isolation
- Alberta Occupational Health & Safety Part 28-Working Alone

Issue Date	05/28/2020	IAMC-HSE-2-006	Originator	Brad Huber
Revision	Initial	Driving Task Hazard Assessment	Approver	IAMC IMSC

Job Title:	MONITORS	THA #	006	Assessment Date	2020-01-01	Location:	Calgary, Alberta	Control # IAMC-HSE-2-006	Risk Matrix																																								
Task:	Driving (Highway/Off-road) w/w/o passengers							<input checked="" type="checkbox"/> New	<table border="1"> <tr> <td></td> <td>A</td> <td>B</td> <td>C</td> <td>D</td> <td>E</td> </tr> <tr> <td>I</td> <td>5</td> <td>11</td> <td>15</td> <td>21</td> <td>25</td> </tr> <tr> <td>II</td> <td>4</td> <td>8</td> <td>12</td> <td>16</td> <td>20</td> </tr> <tr> <td>III</td> <td>3</td> <td>6</td> <td>9</td> <td>12</td> <td>15</td> </tr> <tr> <td>IV</td> <td>2</td> <td>4</td> <td>6</td> <td>8</td> <td>11</td> </tr> <tr> <td>V</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </table>						A	B	C	D	E	I	5	11	15	21	25	II	4	8	12	16	20	III	3	6	9	12	15	IV	2	4	6	8	11	V	1	2	3	4	5
	A	B	C	D	E																																												
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II	4	8	12	16	20																																												
III	3	6	9	12	15																																												
IV	2	4	6	8	11																																												
V	1	2	3	4	5																																												
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<input type="checkbox"/> Revision #																																											
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.																																											
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15																																												
PPE, Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face Coverings (as required)						Additional Controls (Site Specific if required): Observe Physical Distancing while performing any task. Follow Good hygiene Practices at all times. Check Maintenance Schedule prior to performing this task.																																											
Material Required: Vehicle, Pre-Inspection checklist, Journey Management (if applicable)						Risk (w controls)	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w controls)	Critical Step																																
						C	III	9	Yes																																								
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control			Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w controls)	Critical Step																																			
			Health	Safety				Control			Risk																																						
1	Perform COVID-19 Daily Self-Assessment.	Signs/symptoms COVID-19	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Do not leave to site and self-isolate 14 days Report following the Emergency Reporting Protocol			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	II	12	<input checked="" type="checkbox"/>																																			
2	Inspect vehicle (pre-use inspection) for damage/defects-note defects.	Slips/Trips/Falls-possible ice/water/grease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Housekeeping, Proper foot ware, Traction aids			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	V	2	<input type="checkbox"/>																																			
		Pinch points-doors/hood	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Hand awareness, Appropriate gloves			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input type="checkbox"/>																																			
3	Journey Management/Pre-Job Hazard Assessment driving.	Vehicle Breakdown	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Journey Management Procedure/Training			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	9	<input checked="" type="checkbox"/>																																			
		Medical Emergency	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Procedure			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	9	<input type="checkbox"/>																																			
4	Passenger positioning (Physical Distancing Practices).	Physical distancing, COVID -19 exposure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Use PPE as appropriate (face coverings when physical distancing cannot be maintained.) Position passengers facing forward Install shield (plexiglass barrier), for physical separation			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	V	2	<input checked="" type="checkbox"/>																																			
5	Start trip-Don't drive fatigued.	Falling asleep, accident, death	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Fit for duty, Journey management, Hazard Assessment			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	IV	2	<input checked="" type="checkbox"/>																																			

Issue Date	05/28/2020	IAMC-HSE-2-006	Originator	Brad Huber
Revision	Initial	<b>Driving Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w/ controls)	Critical Step
			Health	Safety		Control			Risk			
5	Start trip-Don't drive fatigued	Distraction (cellphone, food, drink) accident	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Bluetooth technology, hands free system, follow distracted driving laws	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	V	1	<input type="checkbox"/>
		Inclement Weather	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Prior to leaving ensure you have ample supplies	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
6	Off-Pavement Driving.	Lose load, accident, Damage to others	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Vehicle equipped with 4x4, proper tires Vehicle Emergency Kit	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	II	12	<input checked="" type="checkbox"/>
		Rollover, Personal injury	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Stay on designated right of way, defensive driving	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	9	<input type="checkbox"/>
7	Load securement (if applicable). Field of view (FOV).	Lose load, accident, Damage to others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Load securement guidelines, Proper straps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	II	8	<input type="checkbox"/>
		Loss of clear view (mud/debris/damaged window)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Ongoing inspections/Clean windows regularly/report any damage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	V	1	<input type="checkbox"/>
8	Refueling.	Touching contaminated surfaces	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Cleaning and Sanitizing IAMC-HSE-02-008/009	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
9	Field of view (FOV).	Fire/Explosion hazards	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Ensure no sources of ignition when refueling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
10	Refueling. Accessing private property. Post inspection on vehicle.	Chemical Exposure/Spills	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Wear gloves when refueling/Do not overfill	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	IV	6	<input type="checkbox"/>
		Violence/Harassment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Verify landowners have been notified and agreement is in place. Respect of property: do not leave trash, stay on agreed upon right of way, secure gate, use assigned washroom facilities, follow close	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	2	<input type="checkbox"/>
		Equipment damage	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Inspection Program/Report all damage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	2	<input checked="" type="checkbox"/>
11	Clean and Sanitize vehicle.	Contaminated (COVID-19) commonly touched surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wipe surfaces with cleaning wipes (follow cleaning/sanitizing protocols) Sanitize hands	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	9	<input checked="" type="checkbox"/>
12	Hand sanitizer in vehicle.	Fire/Explosion (alcohol-based product)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Remove hand sanitizer from vehicle daily.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	9	<input checked="" type="checkbox"/>

Issue Date	05/28/2020	IAMC-HSE-2-006	Originator	Brad Huber
Revision	Initial	<b>Driving Task Hazard Assessment</b>	Approver	IAMC IMSC

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-007	Originator	Brad Huber
Revision	Initial	Driving Procedure	Approver	IAMC IMSC

Driving (Highway/Off-road) w/wo passengers						
SJP#	007	Assessment Date:	2020-08-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control # IAMC-HSE-02-007	
Developed by:	Bradley Huber	Risk (w controls)	Likelihood	Consequence	Risk Ranking	ALARP
Approved by:	IAMC IMSC		C	III	9	Yes
<b>Other Safety Considerations Required:</b> No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19. While onsite PPE will be required.						
<b>Tools &amp; Equipment Required:</b> First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, appropriate gloves for the task						
<b>Potential Hazards (H=High/M=Medium/L=Low):</b> COVID-19 exposure from person to person and/or surface contact (H), Other Drivers on highway/right of way/Collision (L), Vehicle breakdown (L), Refueling/Fire and/or Explosion Hazard (M)						
PPE Requirements:	 PROTECTIVE GLOVES	 DUST MASK				
This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety.						
Steps to Safely perform this work are:						
Step # 1	All drivers must have a valid driver's license appropriate for the vehicle they are operating.					
Step # 2	The driver should perform a pre-trip walk-around inspection (IAMC-HSE-2-021 Pre/Post Operating Inspection (COVID-19 prior to operation of any company vehicle. Any defects must be reported to the supervisor immediately. All inspections should be documented.					
Step # 3	Vehicle interior housekeeping must be maintained to reduce the risk of accident and injury caused by a loose object. There should be no loose objects (e.g., laptops, tools, etc.) left unsecured in the cab.					
Step # 4	When travelling in winter conditions, prepare for extreme temperatures by having warm clothing and emergency equipment on board. The company approved survival/roadside kit will be made available.					
Step # 5	Drivers must obey all posted speed limits and drive in a prudent manner when road conditions deteriorate. Driving infractions or accidents deemed to be caused by the vehicle driver will result in discipline up to and including termination.					
Step # 6	Seat belts must be worn at all times. The driver is responsible for ensuring that all passengers have belts secured before moving the vehicle.					
Step # 7	Drivers should inspect glass and mirrors at the beginning of their shift and when their visibility becomes impaired.					
Step # 8	Any deficiencies in the fore mentioned safety devices must be reported to the supervisor immediately.					

Issue Date	05/28/2020	IAMC-HSE-2-007	Originator	Brad Huber
Revision	Initial	<b>Driving Procedure</b>	Approver	IAMC IMSC

Step # 9	When multiple occupants are in the vehicle, they must use mitigation measures where there is no alternative but to work within 2m to minimize the risk of transmission, including Clear signage to outline social distancing measures in place (i.e., stickers, cards, handout), Single person or contactless refueling where possible, Using physical screening, provided this does not compromise the safety, for example, through reducing visibility, Sitting side-by-side not face-to-face and increasing ventilation where possible.
Step # 10	Ensure regular cleaning of vehicles, in particular, between different users. Clean all buttons, dials, and switches, including for climate control and stereo. Flat surfaces such as the dash, console, armrest, and door pads should also be cleaned. And here's one you might forget: the rear-view mirror. If you've adjusted it, you've touched it. You want to disinfect all the "high-touch" surfaces, including the obvious ones like the steering wheel and center touch screen. But you might not realize just how much you touch. This includes the door handles, inside and outside, and the grab handles to close the door; the key fob; the turn signal and wiper stalks; shift lever; starter button; lock, window, and power mirror switches; and the seat adjusters, whether power- or manually-adjustable.
Step # 11	Having sufficient quantities of hand sanitizer /wipes within vehicles to enable workers to clean hands regularly. Hand sanitizer should not be left in the vehicle (Fire/Explosion Hazard).
Step # 12	There's still a lot we don't know about COVID-19, but it appears the highest risk of transmission is through droplets from an infected person – they cough onto a surface, and you touch it. It's believed the virus can stay active on a surface for days. Even if you're always alone in your car, you could transfer the virus from outside surfaces. And, of course, carrying passengers increases the risk. Cleaning and sanitizing the vehicle regularly is important.
Step # 13	Provide guidance and explanation on social distancing and hygiene (refer to Personal Hygiene SWP) to and passengers when they enter the vehicle. Employees should ensure that they are practicing good hygiene and that if hand washing facilities are not available, employees have access to hand sanitizer as a form of personal protective Equipment.
Step # 14	Where possible, maximizing the use of electronic paperwork where possible (i.e., zoom meetings), and reviewing procedures to enable safe exchange (i.e., email) of paper copies where needed, for example, required tailgate or Hazard Assessment documents.
Step # 15	If the driver or passenger needs to leave the vehicle for any reason (i.e., use washroom facilities, porta-potty), they should be washing and/or using hand sanitizer prior to re-entry to the vehicle.
Step # 16	Driving off-road is only permitted while driving on designated routes (pipeline/construction access). The vehicle must be equipped with 4X4 transmission, proper tires, and a recovery system (i.e., ditch hitch, winch).
Step # 17	<b>At the Gas Pump</b> Take the same precautions as with any other outside surface. If you can't wash your hands after using the pump, use a disinfecting wipe or hand sanitizer. You could also carry disposable latex or plastic gloves for filling up.

Issue Date	05/28/2020	IAMC-HSE-2-007	Originator	Brad Huber
Revision	Initial	<b>Driving Procedure</b>	Approver	IAMC IMSC

Step # 18	All vehicles must be shut down while being refueled. Smoking is prohibited during refueling operations. Other nearby sources of ignition, such as burning and welding, also must be halted during refueling operations.
Step # 19	In an emergency, for example, an accident, fire, or medical emergency, people do not have to stay 2m apart if it would be unsafe. Ensure to use the proper PPE when interacting with others, even in an emergency. Remember to protect yourself first.
Step # 20	People involved in the provision of assistance to others should pay particular attention to sanitation measures immediately afterward, including washing hands.
Step # 21	Always park light vehicles by reversing into a parking area. Ensure that the vehicle is left secured against movement and unauthorized access.
Step # 22	Clearing workspaces and removing waste and belongings from the vehicle at the end of a shift.

Issue Date	05/28/2020	IAMC-HSE-2-008	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing Task Hazard Assessment</b>	Approver	IAMC IMSC

Job Title:	MONITORS	THA #	008	Assessment Date	2020-01-01	Location:	Calgary, Alberta	Control # IAMC-HSE-2-008	Risk Matrix																																								
Task:	<b>General Hygiene Practices/Cleaning and Sanitizing</b>							<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	<table border="1"> <tr> <td></td> <td>A</td> <td>B</td> <td>C</td> <td>D</td> <td>E</td> </tr> <tr> <td>I</td> <td>5</td> <td>11</td> <td>15</td> <td>21</td> <td>25</td> </tr> <tr> <td>II</td> <td>4</td> <td>8</td> <td>12</td> <td>16</td> <td>20</td> </tr> <tr> <td>III</td> <td>3</td> <td>6</td> <td>9</td> <td>12</td> <td>15</td> </tr> <tr> <td>IV</td> <td>2</td> <td>4</td> <td>6</td> <td>8</td> <td>11</td> </tr> <tr> <td>V</td> <td>1</td> <td>2</td> <td>3</td> <td>4</td> <td>5</td> </tr> </table>						A	B	C	D	E	I	5	11	15	21	25	II	4	8	12	16	20	III	3	6	9	12	15	IV	2	4	6	8	11	V	1	2	3	4	5
	A	B	C	D	E																																												
I	5	11	15	21	25																																												
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III	3	6	9	12	15																																												
IV	2	4	6	8	11																																												
V	1	2	3	4	5																																												
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.																																											
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15																																												
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15																																												
PPE, Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face Coverings (as required)						Additional Controls (Site Specific if required): Observe Physical Distancing while performing any task. Follow Good Hygiene Practices at all times. Check the Maintenance Schedule prior to performing this task.																																											
Material Required: Vehicle, Pre-Inspection checklist, Journey Management (if applicable)						<b>Risk (w controls)</b>	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w controls)	Critical Step																																
							C	II	12	Yes																																							
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control			Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w controls)	Critical Step																																			
			Health	Safety				Control			Risk																																						
1	Personnel Daily Screening	COVID-19 infected worker	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-03-019 COVID-19 Daily Screening Form			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>																																			
		Signs or Symptoms of COVID-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-001 Pandemic Plan			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>																																			
2	Hand Hygiene & Respiratory Etiquette	PPE or Hand Sanitizer not available	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>																																			
		Exposure through sneezing & coughing	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Signs and posters for hand hygiene and respiratory Etiquette posted or available to workers.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>																																			
		Exposure to COVID-19 through touch	<input checked="" type="checkbox"/>	<input type="checkbox"/>				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>																																			
3	Cleaning and Disinfecting (use of cleaning products)	Exposure to COVID-19 through contaminated surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing, Wear appropriate gloves, glasses, and face covering			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>																																			
		Exposure to chemicals	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wear appropriate PPE (latex gloves, safety glasses). Review SDS.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	III	9	<input type="checkbox"/>																																			

Issue Date	05/28/2020	IAMC-HSE-2-008	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
4	Personal Protective Equipment	Contaminated PPE with COVID-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wash PPE IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	II	8	<input checked="" type="checkbox"/>
		Unavailable PPE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC provides resources to purchase appropriate PPE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
5	Workplace Washroom Facilities (includes in-field)	Unsanitary conditions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Report unsanitary conditions to Prime contractor, PPE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	III	9	<input type="checkbox"/>
6	Hotel Room	Contaminated surfaces COVID-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	II	6	<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Personal cleaning supply kit (supplied by IAMC)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	I	10	<input type="checkbox"/>
		Close proximity with others	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-012/013 Close Proximity Work/Interactions with others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
7	Vehicle	Close proximity work	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-012/013 Close Proximity Work/Interactions with others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Contaminated Surfaces COVID-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>
8	Return to the community after shift	Possibility of transporting COVID-19 back to the community	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Clean vehicle, IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
					IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>
					Clean PPE, IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>
					Continue to self-monitor for symptoms.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
9	Meetings	Contaminated surfaces (chairs, tables, doorknobs,	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-HSE-02-002/008/009 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>

Issue Date	05/28/2020	IAMC-HSE-2-008	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing Task Hazard Assessment</b>	Approver	IAMC IMSC

		pens, computer, shared equipment)			Use hand sanitizer, gloves as appropriate.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	III	9	<input type="checkbox"/>
					Limit touching surfaces, sharing of equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	II	12	<input type="checkbox"/>

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-009	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing</b>	Approver	IAMC IMSC

General Hygiene Practices/Cleaning and Sanitizing						
SJP#	009	Assessment Date: 2020-08-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control # IAMC-HSE-02-009		
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	III	9	Yes
<b>Other Safety Considerations Required:</b> No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19 when onsite PPE is required.						
<b>Tools &amp; Equipment Required:</b> First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, gloves (rugged and latex)						
<b>Potential Hazards (H=High/M=Medium/L=Low):</b> COVID-19 exposure from person to person and/or surface contact (H), Chemical Exposure (M)						
<b>PPE Requirements:</b>						
	DUST MASK	PROTECTIVE GLOVES	PROTECTIVE EYE WEAR			
This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety.						
Steps to Safely perform this work are:						
Step # 1	<p><b><u>Screening</u></b>            Trans Mountain has implemented active daily screening of workers, volunteers, and visitors for symptoms of fever, sore throat, cough, runny nose, or difficulty breathing. Anyone who is sick with cold-like symptoms such as cough, fever, runny nose, sore throat, or shortness of breath, <b>MUST NOT</b> be in the workplace.            -Visitors with these symptoms, including IAMC-TMX Indigenous Monitors, will not be allowed in the workplace and advised to return home.            -There will be no disincentive for workers to stay home while sick or isolating.            -Changes to the Canadian Employment Standards Code will allow full and part-time employees to take 14 days of job-protected leave if they are:            1. required to isolate; and/or            2. caring for a child or dependent adult who is required to isolate.            To enable quick contact with visitors, such as Monitors, the Trans Mountain will maintain an up-to-date contact list for all workers, contractors and visitors, including names, addresses, and phone numbers.            For the purposes of tracing close contacts, Trans Mountain will be able to indicate:            -roles and positions of workers.            -visitors' names and contact information.            -who was working onsite at any given time.            -if a worker worked with anyone else on any given shift.</p>					
Step # 2	<b><u>Social (Physical) Distancing</u></b>					

Issue Date	05/28/2020	IAMC-HSE-2-009	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing</b>	Approver	IAMC IMSC

	<p>The Monitor will follow protocols in place to maintain social (physical) distancing wherever possible, on arrival and departure. This can include the contractors or IAMC protocols, whichever is more stringent.</p> <p>Where possible, you should maintain 2m between people.</p> <p>For Driving protocols see IMAC-HSE-02-301-Driving (Highway/Off-Road) w/wo passenger's</p> <p>Social distancing applies to all parts of the project site, not just the offices, but also vehicles, breakrooms, and anywhere workers congregate. These are often the most challenging areas to maintain social distancing.</p> <p>Trans Mountain may stagger arrival and departure times at work to reduce crowding into and out of the workplace.</p>
Step # 3	<p><b><u>Workplace Washrooms</u></b></p> <p>Trans Mountain will maintain washrooms and any associated amenities in a clean and sanitary condition. The frequency of cleaning and disinfection will vary depending on usage. If a washroom facility onsite is found to be unsanitary, the worker will report it immediately.</p> <p>Trans Mountain will consider the physical distancing of users in order to prevent the spread of COVID-19. Distancing can be facilitated by the use of partitioned stalls, decommissioning toilets, or urinals that are less than 2 meters apart or staggering entry into washrooms so that fewer users are present at a time.</p> <p>Signage will be posted in washroom areas that inform users of how to mitigate risks of COVID-19 transmission (E.g., hand hygiene, respiratory etiquette).</p> <p>There will be an adequate supply of soap, paper towels, toilet paper, hand sanitizer, and other supplies in all the washrooms. They will be periodically inspected to ensure these supplies do not run out.</p>
Step # 4	<p><b><u>Cleaning and Disinfecting (against COVID-19)</u></b></p> <p>Cleaning refers to the removal of visible soil. Cleaning does not kill germs but is highly effective at removing them from a surface. Disinfecting refers to using a chemical to kill germs on a surface. Disinfecting is only effective after surfaces have been cleaned.</p> <p>Use a "wipe-twice" method to clean and disinfect. Wipe surfaces with a cleaning agent to clean off soil and wipe again with a disinfectant.</p> <p>The cleaning and disinfecting of high traffic areas, common areas, public washrooms, vehicles, and hotel rooms and high-touch/shared surfaces such as doorknobs, light switches, toilet handles, faucets and taps, elevator buttons, railings, phones, computers, remote controls, keyboards, desktops, conference room equipment, surface counters, equipment handles, hand tools, machinery control panels, seat belt buckles, steering wheels and controls on powered mobile equipment, communal areas such as staffrooms, kitchens and washrooms will be done frequently by Trans Mountain using one or more of the following practices;</p> <ul style="list-style-type: none"> <li>-Regular household cleaning and disinfecting products are effective against COVID-19 when used according to the directions on the label.</li> </ul>

Issue Date	05/28/2020	IAMC-HSE-2-009	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing</b>	Approver	IAMC IMSC

	<p>-Use a disinfectant that has a <a href="#">Drug Identification Number (DIN)</a> and a viricidal claim (efficacy against viruses).</p> <p>-Alternatively, use a bleach-water solution with 20 ml (4 teaspoons) of unscented, household bleach to 1000 ml (4 cups) water. Ensure the surface remains wet with the bleach water solution for 1 minute.</p> <p>-Health Canada has approved several hard-surface disinfectants and hand sanitizers for use against COVID-19 (see hyperlinks below). Use these lists to look up the DIN number or NPN number of the product you are using or to find an approved product.</p> <p>-Make sure to follow instructions on the product label to disinfect effectively.</p> <p>-Disposable towels and spray cleaners, or disposable wipes, should be available to workers, visitors, and (as necessary) patrons to regularly clean commonly used surfaces.</p> <p>-Remove all communal items that cannot be easily cleaned, such as newspapers and magazines.</p> <p><b>Hotel Rooms</b> <b>Environmental Cleaning</b></p> <p>Upon arrival at their hotel the Monitors should pay particular attention to sanitizing all the high touch surfaces in their room. The initial wipe down will include door handles, light switched, countertops, phones, lamps, alarm clock, bathroom surfaces (sink, sink handles, shower taps and shower head, toilet), and fridge handle. It will be up to the discretion of the worker to utilize housekeeping services as needed. Worker should repeat the “initial wipe down” of the room each time housekeeping enters their room.</p>
Step # 5	<p><b><u>Hand Hygiene and Respiratory Etiquette</u></b></p> <p>Trans Mountain Management and Supervision will promote and facilitate frequent and proper hand hygiene for employees, visitors, and contractors.</p> <p>Trans Mountain will provide a means to sanitize hands at points of entry and locations throughout the location. Hand sanitizers should be isopropyl alcohol-based sanitizers, such as Alpet 3E or comparable products.</p> <p>Trans Mountain employees, visitors (including Monitors), or contractors will wash their hands often with soap and water for at least 20 seconds or use an alcohol-based hand sanitizer (greater than 60% alcohol content).</p> <p>Handwashing with soap and water is required if the employee, visitor (including Monitors), or contractor has visibly dirty hands.</p> <p>Follow these five steps every time;</p> <ol style="list-style-type: none"> <li>1. Wet your hands with clean, running water (warm or cold), turn off the tap, and apply soap.</li> <li>2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.</li> <li>3. Scrub your hands for at least 20 seconds.</li> <li>4. Rinse your hands well under clean, running water.</li> </ol>

Issue Date	05/28/2020	IAMC-HSE-2-009	Originator	Brad Huber
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	<p>5. Dry your hands using a clean towel or air dry them. Use another paper towel to open doors (if applicable). A garbage can is to be placed near exit doors to throw away towels after use.</p> <p>Glove use alone is not a substitute for hand hygiene. Hands should be cleaned before and after using gloves.</p> <p>Our hands can easily become re-contaminated by the many activities performed or items we touch. For all employees, visitors (including Monitors), or contractors, hands must be washed and sanitized:</p> <ol style="list-style-type: none"> <li>1. Before starting work.</li> <li>2. At any time when the hands may have become soiled or contaminated; <ul style="list-style-type: none"> <li>-After coughing, sneezing, blowing the nose, etc.</li> <li>-After eating.</li> <li>-After using the restroom.</li> <li>-After touching anything unsanitary (pallets, floors, boxes, brooms, totes, scratching head, etc.).</li> <li>-After leaving and returning to work areas.</li> </ul> </li> </ol> <p>All employees, visitors (including Monitors), or contractors will make every effort to encourage respiratory etiquette (e.g., coughing or sneezing into a bent elbow, promptly disposing of used tissues in a lined garbage bin) is followed.</p> <p>The use of posters that remind workers, volunteers, and patrons to practice respiratory etiquette and hand hygiene will be utilized by Trans Mountain in work areas where they are easily seen (e.g., entrances, washrooms, and staff rooms).</p> <p>Additional garbage bins with removable linings will be placed at all entrances and exits. Garbage bins will be checked and emptied regularly.</p>
<p>Step # 6</p>	<p><b><u>Personal Protective Equipment</u></b></p> <p>Trans Mountain workers will ensure that a hazard assessment is conducted to identify existing and potential hazards related to COVID-19. Where the elimination of these hazards is not possible or reasonable, they should be controlled. PPE is based on the risk of exposure. PPE that is chosen should be appropriate to the hazard. The federal inspection team will inform Indigenous Monitors and Logistics Coordinators should additional PPE be required for a specific inspection, meaning PPE outside the PPE that is mandatory under the IAMC-TMX Indigenous Monitoring Program.</p> <p>When hazards related to COVID-19 cannot be eliminated, the following hierarchy of controls should be followed:</p> <p><b>First choice:</b> Isolate the hazard (Engineering controls) These control the hazard at the source by isolating the hazard and by physically directing actions to reduce the opportunity for human error. Examples include placing barriers or partitions between workers, removing seats from lunchrooms and dining areas, re-arranging lockers, restricting general access to the business, and increasing ventilation.</p>

Issue Date	05/28/2020	IAMC-HSE-2-009	Originator	Brad Huber
Revision	Initial	<b>General Hygiene Practices Cleaning and Sanitizing</b>	Approver	IAMC IMSC

	<p><b>Second choice:</b> Change behavior (Administrative controls) These controls change the way workers, volunteers, and patrons interact through the implementation of policies, procedures, training, and education. Examples include policies for physical distancing, limiting hours of operations and respiratory etiquette and providing adequate facilities, supplies, and reminders for hand hygiene, and developing appropriate worker-to-patron ratios, Increased frequency of cleaning, as outlined above, is also required.</p> <p><b>Third choice:</b> Use Personal Protective Equipment (PPE) PPE controls are the last tier in the hierarchy and should not be relied upon exclusively. PPE is dependent on the type of activity and risk of exposure to a pathogen/sick person. PPE is necessary when physical distancing of 2 meters or physical barriers cannot be maintained by administrative and engineering controls. PPE controls the hazard at the worker, volunteer, and patron level. Examples of PPE include gloves, eye protection, gown, face protections, face masks.</p> <p>When a hazard cannot be controlled by a single control method, a combination of these controls will be utilized to provide an acceptable level of safety. PPE should be stored, used, and maintained as per the manufacturer’s instruction for use, so it can perform its intended function to protect workers and contractors. If a hazard assessment determines that PPE is necessary, the Monitor will ensure that the PPE fits effectively. If a mask is deemed, necessary, surgical and procedural masks will likely be sufficient. Respirators (e.g., N95 masks) are only required when the work might cause large droplets containing COVID-19 to be aerosolized into tiny airborne particles. This is not common in the majority of business settings. PPE, such as eye protection, may be reused by the same user, only if the manufacturer allows it and has provided clear cleaning and disinfecting instructions. Assign a user’s name and store separately from other PPE after cleaning and disinfecting.</p>
Step # 7	<p><b><u>General sanitation</u></b></p> <ol style="list-style-type: none"> <li>1. Only approved chemicals should be used and handled carefully in accordance with instructions stated in the standard or according to the manufacturer’s instructions.</li> <li>2. Trans Mountain Management will ensure all sanitation has been monitored and verified by conducting routine inspections of the premises and Equipment.</li> </ol>
Resources	<p><a href="https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html">https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html</a></p> <p><a href="https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html#tbl1">https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/list.html#tbl1</a></p> <p><a href="https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/hand-sanitizer.html">https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/hand-sanitizer.html</a></p> <p><a href="https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/products-accepted-under-interim-measure.html">https://www.canada.ca/en/health-canada/services/drugs-health-products/disinfectants/covid-19/products-accepted-under-interim-measure.html</a></p>

Issue Date	05/28/2020	IAMC-HSE-2-010	Originator	Brad Huber
Revision	Initial	First Aid Task Hazard Assessment	Approver	IAMC IMSC

Job Title:	MONITORS	THA #	010	Assessment Date	2020-01-01	Location:	Calgary, Alberta	Control # IAMC-HSE-2-010	Risk Matrix								
Task:	First Aid Protocols						<input checked="" type="checkbox"/> New										
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<input type="checkbox"/> Revision											
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.											
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15												
P.P.E., Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face Coverings (as required)						Additional Controls (Site Specific if required): Observe Physical Distancing while performing any task. Follow Good Hygiene Practices at all times. Check the Maintenance Schedule before performing this task.											
Material Required: First Aid Kit, Cleaning Kits (wipes, gloves, alcohol-based hand sanitizer, face coverings)						<b>Risk (w controls)</b>	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
							C	III	9	Yes							
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control			Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step			
			Health	Safety				Control			Risk						
1	Administer First Aid	Possible COVID-19 infected Injured Person (IP)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>			
			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pandemic Plan IAMC-HSE-02-001			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>			
		I.P. is unable to self-treat	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Administer first aid-First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>			
		Exposure to Bloodborne pathogens	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Wear Appropriate P.P.E. (Gloves, Glasses, face Covering), Follow First Aid/C.P.R. training.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	D	IV	8	<input type="checkbox"/>			
		Transportation of IP-Possible contamination from COVID-19	<input type="checkbox"/>	<input type="checkbox"/>	Activate Prime Contractor Emergency response Plan			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>			
			<input type="checkbox"/>	<input type="checkbox"/>	Wear Appropriate P.P.E. (Gloves, Glasses, face Covering), Follow First Aid/C.P.R. training.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	D	IV	8	<input type="checkbox"/>			
P.P.E. unavailable	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Verify you have appropriate P.P.E. before departure			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>					

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Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
					IAMC-TMX Indigenous Monitoring Program/Employers provides resources for PPE	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	A	I	5	<input type="checkbox"/>
					Pre-trip inspection (will verify supplies are available)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
					If rental-discuss requirements with the rental company to provide first aid kit in the vehicle	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		Incllement weather	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Awareness of weather conditions	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
2	Wildlife Interactions	Large Animal Interaction (Bear, Cougar, etc.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-402, Bear Awareness training	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	II	8	<input type="checkbox"/>
		Venomous snake, venom	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-402	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	II	8	<input type="checkbox"/>
		Ticks, spiders	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-402	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
		Mosquito's	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-402	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	2	<input type="checkbox"/>
3	Cleaning and sanitizing P.P.E. and equipment after treatment	Possible COVID-19 contaminated surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	IAMC-HSE-02-402 General Hygiene Practices/Cleaning and Sanitizing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>
			<input checked="" type="checkbox"/>	<input type="checkbox"/>	Place P.P.E. in a separate bag when done shift/When returning home leave bag of P.P.E. in a dry area for 48 hours before washing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input checked="" type="checkbox"/>

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-011	Originator	Brad Huber
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First Aid Protocols during the COVID-19 pandemic						
SJP#	011	Assessment Date: 2020-08-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control # IAMC-HSE-02-011		
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	III	9	Yes
<b>Other Safety Considerations Required:</b> No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19 when onsite PPE is required.						
<b>Tools &amp; Equipment Required:</b> First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, gloves (rugged and latex)						
<b>Potential Hazards (H=High/M=Medium/L=Low):</b> COVID-19 exposure from person to person and/or surface contact (H), Exposure to Bloodborne Pathogens (M), Wildlife Encounters (L)						
<b>PPE Requirements:</b>	 PROTECTIVE GLOVES	 DUST MASK				
This document sets guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and it does not supersede any Provincial or Federal Legislation relating to health and safety.						
Steps to Safely perform this work are:						
Step # 1	When you receive a call for First Aid, if possible, gather the following information; -What are the circumstances surrounding the call for assistance? -Are critical interventions likely required? If so, call 911 or have an emergency transport vehicle prepared. -Are there any visible signs of COVID-19? If so, send the patient home or to the hospital.					
Step # 2	If no critical interventions are required, if possible and appropriate, interview the patient from a distance. Ask the following questions; -Is anyone sick or in self-isolation in your household? -Have you been in contact with anybody who has been sick?					
Step # 3	When you arrive at the patient's location, assess the situation: -Does the patient have a minor injury that the patient can self-treat while you provide direction and supplies? -If Yes, direct the patient to self-treat per your First Aid Protocols.					
Step # 4	If the patient can't self-treat, don the appropriate level of personal protective Equipment (PPE) for the situation. PPE could include the following items: -Face shield or surgical-type mask -Pocket mask -Gloves -Coveralls (disposable or washable) -Apron or lab coat -Glasses or goggles					

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Step # 5	<p>After treatment, sanitize all Equipment with either soap and water or 70% isopropyl alcohol. Remove and wash any PPE that is not disposable, as well as any exposed clothing. Wash your hands thoroughly.</p>
Step # 6	<p>If critical interventions are required, and there is no way of determining background information, don the appropriate PPE, and limit access to the patient to the number of people required to deal with the critical intervention. It is essential to limit the exposure of others.</p>
Step # 7	<p><b><u>Scenario: Self-treatment with direction</u></b> A First Aid Attendant receives a call stating a worker has injured her hand. The attendant collects as much information about the severity of the injury as possible. The injury is deemed to be minor with no other concerns, so the attendant goes to the worker, but stays 2 meters (approximately 6 feet) away. On arrival, the attendant asks: -Is anyone sick or in self-isolation in your household? -Are you able to administer first aid to yourself if I tell you what to do and how to do it?</p> <p>After the first aid attendant has conducted the interview, the attendant visually assesses the patient and the wound from a distance and asks the patient about any underlying conditions relating to the injury. The attendant then places the required first aid supplies on a surface 2 meters from the patient. The attendant steps back and directs the patient to pick up and apply the supplies. The first aid attendant then verbally conducts a modified secondary survey and documents the findings.</p>
Step # 8	<p><b><u>Scenario: Employer ETV for transport with intervention</u></b> A First Aid Attendant receives a call about a worker who has been struck in the head and is unresponsive. The attendant immediately ensures that 911 has been contacted. On approaching the scene, the first aid attendant conducts a scene assessment and dons the appropriate PPE.</p> <p>Once PPE is on, the attendant approaches the patient and conducts a primary survey to determine what, if any, critical interventions are required. The attendant positions the patient in the three-quarter-prone position to ensure that the airway is open and transparent, and no further interventions are needed. Only one person (the attendant) needs to be in contact with the patient; all others can stay 2 meters away. The attendant monitors the patient until the ambulance arrives.</p>
Step # 9	<p><b><u>Scenario: First Aid with an intervention (Advanced First Aid/Level 3)</u></b> A First Aid Attendant receives a call about a worker who has been struck in the head and is unresponsive. The attendant immediately arranges for the Emergency transport Vehicle to be ready. On approaching the scene, the first aid attendant conducts a scene assessment and dons the appropriate PPE.</p> <p>Once PPE is on, the attendant approached the patient and ensured an open airway. Once the airway is open and transparent, the attendant stabilizes the patient's head with an inanimate object (to free the attendant's hands) and inserts an oropharyngeal airway (OPA) to protect and maintain the airway.</p> <p>The attendant then conducts a primary survey to determine what, if any, further critical interventions are required. Only one person (the attendant) needs to be in contact with the patient; all others can stay 2 meters away.</p>

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	<p>A helper will be needed to assist the first aid attendant in lifting the patient into the basket and ETV. Use any PPE or other measures available to provide a barrier between the helpers and the patient, including covering the patient with a blanket. Once the patient is loaded, ensure the helpers remove their PPE and wash or sanitize their hands.</p>
Step # 10	<p>Wildlife Interactions can range from a bite/irritation to a significant trauma like bite or loss of limb up to and including death. The following are some guidelines and resources for dealing with Wildlife interactions;</p> <p><b>Mosquitos-Bug Bite Prevention and First Aid-</b> Aside from causing pain, itching, redness, and swelling, many bugs – such as mosquitoes and ticks – can also spread several diseases. Some people can also experience more severe reactions to stings and bug bites, such as anaphylaxis, which is a severe allergic reaction. While not common, anaphylaxis can be life-threatening and requires emergency care.</p> <p>Symptoms include:</p> <ul style="list-style-type: none"> <li>• Shock, which may occur if the circulatory system cannot get enough blood to the vital organs</li> <li>• Coughing, wheezing, trouble breathing, or a feeling of fullness in the mouth or throat</li> <li>• Swelling of the lips, tongue, ears, eyelids, palms of the hands, soles of the feet, and mucous membranes (angioedema)</li> <li>• Light-headedness and confusion</li> <li>• Nausea, diarrhea, and stomach cramps</li> <li>• Raised, red, itchy bumps called hives and reddening of the skin.</li> </ul> <p>Bug Bite Prevention The most common insect bites during the summer months are caused by mosquitoes, midges, ticks, spiders, bees, and wasps. Ultimately, the best way to protect yourself from all of these is to limit your skin's exposure: Cover-up. Wear light-colored clothing that covers your body, such as long-sleeved shirts and long pants - particularly when out hiking.</p> <p>Use insect repellent when venturing into the woods or other areas where you may come into contact with insects. Just keep the following guidelines in mind when using repellents: Apply repellants safely. When using DEET-containing repellent, choose the concentration appropriate to your age and planned time outdoors.</p> <p>If also using sunscreen, the CDC recommends that you apply the sunscreen first and the insect repellent second.</p> <ul style="list-style-type: none"> <li>• Remove the repellent with soap and water after returning indoors.</li> <li>• Avoid heavily-scented products during the summer months as they can attract insects.</li> <li>• Don't panic. If you encounter bees, hornets, or wasps, don't wave your arms around and try to swat them – simply move away slowly.</li> </ul> <p><b>Bears/Moose/Cougars/Wolves/Coyotes-</b> The first thing you should do when faced with life-threatening external bleeding is to immediately apply direct pressure and then call EMS/911.</p>

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1. Apply firm, direct pressure to the wound.
2. While maintaining direct pressure, apply a dressing, and bandage in place.
3. If blood soaks right through the bandage, apply another bandage on top.
4. If direct pressure does not control the bleeding, consider using a tourniquet.

**Rattlesnakes-**

If a venomous snake bites you, call 911 or your local emergency number immediately, especially if the bitten area changes color, begins to swell, or is painful. Many emergency rooms stock antivenom drugs, which may help you.

If possible, take these steps while waiting for medical help:

1. Protect the Injured Person and safely move them beyond the snake's striking distance.
2. Have the person lie down with a wound below the heart.
3. Keep the person calm and at rest, remaining as still as possible to keep the venom from spreading.
4. Cover the wound with a loose, sterile bandage.
5. Remove any jewelry from the area that was bitten.
6. Remove shoes if the leg or foot was bitten.
7. Clean the wound with soap and water. Cover it with a clean, dry dressing.

**Caution**

- Don't use a tourniquet or apply ice.
- Don't cut the wound or attempt to remove the venom.
- Don't drink caffeine or alcohol, which could speed your body's absorption of venom.
- Don't try to capture the snake.
- Try to remember its color and shape so that you can describe it, which will help in your treatment. If you have a smartphone with you and it won't delay your getting help, take a picture of the snake from a safe distance to help with identification.

**Symptoms**

Most snake bites occur on the extremities. Typical symptoms of the bite from a nonvenomous snake are pain and scratch at the site.

Usually, after a bite from a venomous snake, there is severe burning pain at the site within 15 to 30 minutes. This can progress to swelling and bruising at the wound and all the way up the arm or leg. Other signs and symptoms include nausea, labored breathing, and a general sense of weakness, as well as an odd taste in the mouth.

**Spiders-**

Most spider bites cause only minor injury. A few spiders can be dangerous.

Seek emergency care immediately if:

- You were bitten by a black widow or brown recluse spider.
- You are unsure whether the bite was from a poisonous spider.
- You have severe pain, abdominal cramping or a growing ulcer at the bite site
- The person who was bitten isn't breathing

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To take care of a spider bite:

Clean the wound. Use mild soap and water and apply an antibiotic ointment.

Apply a cool compress. Use a cloth dampened with cold water or filled with ice. This helps reduce pain and swelling. If the bite is on an arm or leg, elevate it.

**Bees, Hornets, Wasps-**

For mild reactions. To take care of an insect bite or sting that causes a mild reaction:

- Move to a safe area to avoid more bites or stings.
- If needed, remove the stinger.
- Wash the area with soap and water.
- Apply a cool compress. Use a cloth dampened with cold water or filled with ice. This helps reduce pain and swelling. If the injury is on an arm or leg, elevate it. Usually, the signs and symptoms of a bite or sting disappear in a day or two. If you're concerned — even if your reaction is minor — call your doctor.

**Ticks-**

Most tick bites are painless and cause only minor signs and symptoms, such as redness, swelling, or a sore on the skin. But some ticks transmit bacteria that cause illnesses, including Lyme disease and Rocky Mountain spotted fever. In general, to transmit Lyme disease, a tick needs to be attached for at least 36 hours. Other infections can be transferred in a few hours or even a few minutes. British Columbia is home to over twenty species of ticks, but only three of them bite humans: the American dog tick, the Rocky Mountain wood tick (each also called wood ticks), and the black-legged tick (also called deer ticks).

To take care of a tick bite.

- Remove the tick promptly and carefully. Use fine-tipped forceps or tweezers to grasp the tick as close to your skin as possible. Gently pull out the tick using a slow and steady upward motion. Avoid twisting or squeezing the tick. Don't handle the tick with bare hands. Experts don't recommend using petroleum jelly, fingernail polish, or a hot match to remove a tick.
- If possible, seal the tick in a container. Put the container in a freezer. Your doctor may want to see the tick if you develop new symptoms. Wash your hands and the bite site. Use warm water and soap, rubbing alcohol, or an iodine scrub.

When to seek emergency care.

Call 911 or your local emergency number if you develop:

A severe headache, Difficulty breathing, Paralysis, Heart palpitations

When to contact your doctor

You aren't able to completely remove the tick. The longer the tick remains attached to your skin, the greater your risk of getting a disease from it. The rash gets bigger. A small red bump may appear at the site of the tick bite. This is normal. But if it develops into a larger rash, perhaps with a bull's-eye pattern, it may indicate Lyme disease. The rash usually appears within three to 14 days.

Also, consult your doctor if signs and symptoms disappear because you may still be at risk of the disease. Your risk of contracting a disease from a tick bite depends on where you live or travel to, how much time you spend outside in woody and grassy areas, and how well you protect yourself.

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You develop flu-like signs and symptoms. Fever, chills, fatigue, muscle, and joint pain, and a headache may accompany the rash.  
 You think the bite site is infected. Signs and symptoms include redness or oozing.  
 You think you were bitten by a deer tick. You may need antibiotics.

**Amputations-**

Ensure to protect yourself first by wearing the appropriate PPE to be in close proximity to the injured person.

There are two types of amputation:

Complete amputation: a body part is completely removed. Partial amputation: a large portion of the body part is cut off, but it remains attached to the body.

The ideal outcome of an accidental amputation is the reattachment of the body part. This isn't always possible, and the success depends on:

- What body part was affected
- The condition of the amputated body part
- How much time has elapsed since the amputation
- The health of the injured person
- Call 9-1-1 or your local emergency number
- Stop the bleeding by having the injured person lie down, if possible, and elevating the injured area.

If you suspect a head, neck, back, or leg injury, do not move or reposition the victim

Using a clean towel or cloth, apply steady and direct pressure to the wound (if there's an object lodged in the wound, apply pressure around the object).

- Monitor and treat for shock by calming the victim down and covering them with a coat or blanket.
- Save the amputated body part for emergency personnel.
- Rinse it with clean water to remove dirt or debris, but do not scrub or use soap.
- Wrap the part in sterile gauze or a clean cloth and place it in a clean plastic bag.
- Pack the bag in ice.

**Head Trauma**

Keep the person still. Until medical help arrives, keep the injured person lying down and quiet, with the head and shoulders slightly elevated. Don't move the person unless necessary, and avoid moving the person's neck. If the person is wearing a helmet, don't remove it.

Stop any bleeding. Apply firm pressure to the wound with sterile gauze or a clean cloth. But don't apply direct pressure to the wound if you suspect a skull fracture.

Watch for changes in breathing and alertness. If the person shows no signs of circulation — no breathing, coughing, or movement — begin CPR.

Head trauma that's associated with other symptoms of a concussion, such as nausea, unsteadiness, headaches, or difficulty concentrating, should be evaluated by a medical professional.

Call 911 or your local emergency number if any of the following signs or symptoms are apparent, because they may indicate a more serious head injury.

**Adults**

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- Severe head or facial bleeding
- Bleeding or fluid leakage from the nose or ears
- Severe headache
- Change in level of consciousness for more than a few seconds
- Black-and-blue discoloration below the eyes or behind the ears
- Cessation of breathing
- Confusion
- Loss of balance
- Weakness or an inability to use an arm or leg
- Unequal pupil size
- Slurred speech
- Seizures

**Heat Stroke/Heat Exhaustion**-Ensure to protect yourself first by wearing the appropriate PPE to be in close proximity to the Injured person.

Heat exhaustion is one of the heat-related syndromes. Symptoms range in severity from mild heat cramps to heat exhaustion to potentially life-threatening heatstroke. Heat exhaustion can begin suddenly or over time, usually after working or playing in the heat, perspiring heavily, or being dehydrated.

Heat exhaustion signs and symptoms include:

- Cool, moist skin with goosebumps when in the heat, Heavy sweating, Faintness, Dizziness, Fatigue, Weak, rapid pulse,
- Low blood pressure upon standing, Muscle cramps, Nausea, Headache.
- Untreated, heat exhaustion can lead to heatstroke, which is a life-threatening condition.

If you suspect heat exhaustion, take these steps immediately:

1. Move the person out of the heat and into a shady or air-conditioned place.
2. Lay the person down and elevate the legs and feet slightly.
3. Remove tight or heavy clothing.
4. Have the person drink cool water or other non-alcoholic beverage without caffeine.
5. Cool the person by spraying or sponging with cool water and fanning.
6. Monitor the person carefully.

Contact a doctor if signs or symptoms worsen or if they don't improve within one hour.

Call 911 or your local emergency number if the person's condition deteriorates, especially if he or she experiences:

Fainting, Agitation, Confusion, Seizures, Inability to drink, Core body temperature — measured by a rectal thermometer — of 104 F (40 C) (heatstroke)

**Dehydration**-Ensure to protect yourself first by wearing the appropriate PPE to be in close proximity to the Injured person.

1. Carry out a quick overview survey of the patient to identify his/her situation. To identify these symptoms/signs accurately, get exposed to those during first aid courses and training.
2. Call for emergency services if the above-mentioned signs of severe dehydration are present.

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3. If the patient is unconscious, quickly assess the airway, breathing (look, listen, and feel) and circulation (pulse).
4. If not breathing, attend to basic life support; establish the airway by head tilt, chin lift maneuvers, and commence CPR.
5. If the patient is vomiting, turn the victim to him/her side to prevent aspiration.
6. Be careful about administering oral fluids in severely dehydrated victims as these may cause aspiration due to an altered level of consciousness.
7. For mild/moderate dehydration, give as much as fluids to drink; water is preferable to fruit juices or carbonated beverages in adults.
8. For infants and children, use an oral rehydration solution like Pedialyte as these supply water plus electrolytes in optimal amounts to replenish losses as well as to enhance the water absorption from the gut.
9. If these are unavailable in an emergency, make your own rehydration solution by mixing carefully measured ½ teaspoon of salt, 6 level teaspoons of sugar, and 1 liter of safe drinking water to use on older children and adults.
10. In all cases, keep records of how much fluid given and how much were the losses (volume of urine passed, vomited, stools).
11. In vomiting patients, give a small amount of fluid at a time and wait for a few minutes.

**Hypothermia**-Ensure to protect yourself first by wearing the appropriate PPE to be in close proximity to the Injured person.

Seek immediate medical attention for anyone who appears to have hypothermia. Until medical help is available, follow these first-aid guidelines for hypothermia. Remember, when coming in close proximity, you should protect yourself first.

**First-aid tips**

- Be gentle. When you're helping a person with hypothermia, handle him or her gently. Limit movements to only those that are necessary. Don't massage or rub the person. Excessive, vigorous, or jarring movements may trigger cardiac arrest.
- Move the person out of the cold. Move the person to a warm, dry location if possible. If you're unable to move the person out of the cold, shield him or her from the cold and wind as much as possible. Keep him or her in a horizontal position if possible.
- Remove wet clothing. If the person is wearing wet clothing, remove it. Cutaway clothing, if necessary, to avoid excessive movement.
- Cover the person with blankets. Use layers of dry blankets or coats to warm the person. Cover the person's head, leaving only the face exposed.
- Insulate the person's body from the cold ground. If you're outside, lay the person on his or her back on a blanket or other warm surface.
- Monitor breathing. A person with severe hypothermia may appear unconscious, with no apparent signs of a pulse or breathing. If the person's breathing has stopped or appears dangerously low or shallow, begin CPR immediately if you're trained.
- Provide warm beverages. If the affected person is alert and able to swallow, provide a warm, sweet, non-alcoholic, noncaffeinated beverage to help warm the body.
- Use warm, dry compresses. Use a warm first-aid compress (a plastic fluid-filled bag that warms up when squeezed) or a makeshift compress of warm water in a plastic bottle or a dryer-warmed towel. Apply a compress only to the neck, chest wall, or groin.

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- Don't apply a warm compress to the arms or legs. Heat applied to the arms and legs forces cold blood back toward the heart, lungs, and brain, causing the core body temperature to drop. This can be fatal.
- Don't apply direct heat. Don't use hot water, a heating pad, or a heating lamp to warm the person. The extreme heat can damage the skin or, even worse, cause irregular heartbeats so severe that they can cause the heart to stop.

### First aid for an unresponsive person during COVID-19

According to the Public Health Agency of Canada, the COVID-19 situation is rapidly evolving, and an individual's risk is variable depending on location. If someone's heart stops, and the First Aider is concerned they may have had respiratory symptoms, it is at the individual's discretion to perform or not perform mouth-to-mouth breaths based on personal preference. It's still important to call emergency medical services and find an AED. If the individual chooses to perform breaths, they can also use a barrier device, such as a pocket mask, to help protect themselves.

CPR with breaths is recommended for people who have been trained in CPR, but as an alternative, hands-only CPR can be performed until help arrives if the First Aider is unsure about putting their mouth on a stranger's mouth or has concerns the person may have COVID-19. If the individual chooses to perform hands-only CPR, they should first call 9-1-1, lay a cloth, a towel, or clothing over the person's mouth and nose to prevent any potential spread of the virus through contaminated air or saliva, and then push hard and fast in the center of the person's chest until advanced help arrives. If the First Aider believes the person may have COVID-19, they should state their concerns to the emergency response telecommunicator so everyone who responds can be aware of the potential for COVID-19 transmission.

### Additional Resources

<https://cdn2.sportngin.com/attachments/document/6c90-2181569/ofaa-protocols-covid-19-pdf-en.pdf>  
<https://www.sja.ca/English/Safety-Tips-and-Resources/Pages/Summer%20Safety/bug-bite-prevention-first-aid.aspx>  
<https://www.mayoclinic.org/first-aid/first-aid-snake-bites/basics/art-20056681>  
<https://www.mayoclinic.org/first-aid/first-aid-spider-bites/basics/art-20056618>  
<https://www.mayoclinic.org/first-aid/first-aid-insect-bites/basics/art-20056593>  
<https://newsnetwork.mayoclinic.org/discussion/taking-care-of-a-tick-bite>  
<https://www.mayoclinic.org/first-aid/first-aid-tick-bites/basics/art-20056671>  
<https://www.mayoclinic.org/first-aid/first-aid-head-trauma/basics/art-20056626>  
<https://www.mayoclinic.org/first-aid/first-aid-heat-exhaustion/basics/art-20056651>  
<https://newsnetwork.mayoclinic.org/discussion/the-polar-vortex-and-treating-hypothermia>  
<https://www.redcross.ca/training-and-certification/first-aid-tips-and-resources/first-aid-tips/first-aid-protocols-for-an-unresponsive-person-during-covid-19>

Issue Date	05/28/2020	<b>IAMC-HSE-2-012</b>		Originator	Brad Huber
Revision	Initial	<b>Close Proximity Work Task Hazard Assessment</b>		Approver	IAMC IMSC

Job Title:	<b>MONITORS</b>	THA #	<b>012</b>	Assessment Date	2020-01-01	Location:	Calgary, Alberta	<b>Control # IAMC-HSE-2-012</b>	<b>Risk Matrix</b>						
<b>Task:</b>	<b>Close Proximity Work/Interactions with others</b>						<input checked="" type="checkbox"/> New								
							<input type="checkbox"/> Revision								
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.									
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15										
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15										
P.P.E., Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face coverings (as required)				Additional Controls (Site Specific if required): All activities need to be planned and organized to avoid all unnecessary close proximity between workers and others, to minimize the risk of spread of infection.											
Material Required: Vehicle, Pre-Inspection checklist, Journey Management (if applicable)				<b>Risk (w controls)</b>	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
				C	II	12	Yes								
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control		Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step		
			Health	Safety			Control			Risk					
1	Safety Meetings	Exposure to COVID-19 virus through close proximity interactions			Physical Distancing (2 meters) between workers. When 2 meters cannot be maintained, a face mask is mandatory.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	II	12	<input type="checkbox"/>		
					General Hygiene Practices/Cleaning and Sanitizing IMAC-HSE-02-002/008/009		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	D	IV	8	<input checked="" type="checkbox"/>		
2	Interaction with Workers, Public, Contractors			<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Use of electronic devices (phone, tablet, computer, radios). Platforms such as email, zoom, go to meeting		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input type="checkbox"/>	
						Training and education (COVID-19 Orientation)		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>	
3	Driving with multiple occupants					Driving (Highway/Off-road) w/wo passengers (refer to IAMC-HSE-02-006/007. thorough cleaning of all contactable surfaces and equipment – plus preventing unnecessary sharing of items or equipment.		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input type="checkbox"/>	
4	Public establishments (restaurants, gas station, hotels)														
5		Possible contaminated surfaces-Washrooms,	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	General Hygiene Practices/Cleaning and Sanitizing IMAC-HSE-02-002/008/009		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>		

Issue Date	05/28/2020	IAMC-HSE-2-012	Originator	Brad Huber
Revision	Initial	<b>Close Proximity Work Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
	Office Work (working in the office environment and the sharing of common office supplies/tools)	doorknobs, Microwave, Water cooler, refrigerator, first aid supplies, chairs, tables, computer equipment, switches, copier			Wearing appropriate P.P.E. (Mask and Gloves)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	IV	6	<input type="checkbox"/>
					Assignment of tools and work area to specific workers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	2	<input type="checkbox"/>
					Work staggered start times, awareness posters	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	4	<input type="checkbox"/>
6	Administer First Aid	Exposure to COVID-19 virus	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IMAC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
					Wear Appropriate P.P.E. (Gloves, Mask)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input type="checkbox"/>
					Training and education (COVID-19 Orientation)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	III	3	<input checked="" type="checkbox"/>
7	Site Inspections	Close proximity interactions	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Site Inspection (COVID-19) IAMC-HSE-02-014/015	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	IV	6	<input checked="" type="checkbox"/>
8	Use of Personal Protective Equipment	P.P.E. not available	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-TMX Indigenous Monitoring Program mandatory PPE, Inspect PPE prior to deployment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input type="checkbox"/>
		Hand sanitizer not available	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Employers to provide Hand Sanitizer to Monitors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		Not properly trained in P.P.E. use, maintenance, limitations, and care.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		COVID-19 Training	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input type="checkbox"/>	
9	Washroom facilities	Possible contaminated surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Use of gloves and mask and hand hygiene after use	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	V	3	<input type="checkbox"/>
10	Use of Common Tools	Company Vehicles not properly cleaned	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Pre/post-use cleaning	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input type="checkbox"/>
		Radios/Laptop computers, not sanitized.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Assignment of tools and work area to specific workers	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	V	2	<input type="checkbox"/>

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11	Worker calls in sick	Expecting workers to fill in were not adequately trained	<input type="checkbox"/>	<input type="checkbox"/>	Worker training and COVID orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
					Employer selection of adequately trained monitors	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
12	Worker presenting signs and/or symptoms of COVID-19	Possible contamination of COVID-19	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Do not travel to the site and self-isolate 14 days.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
					Follow Pandemic Preparedness IAMC-HSE-2-001/Section 6.0 Risk Reduction/Sub-Section 6.1 Reducing Exposure and Spread	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	V	3	<input type="checkbox"/>
		Contaminated Surfaces	<input checked="" type="checkbox"/>	<input type="checkbox"/>	General Hygiene Practices/Cleaning and Sanitizing IMAC-HSE-02-002/008/009	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	C	III	9	<input checked="" type="checkbox"/>

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-013	Originator	Brad Huber
Revision	Initial	Close Proximity Work Procedure	Approver	IAMC IMSC

**Close Proximity Work/Interactions with others**

SJP#	013	Assessment Date: 2020-08-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control #	IAMC-HSE-02-013	
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	II	12	Yes

**Other Safety Considerations Required:** No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19. When on-site PPE will be required.

**Tools & Equipment Required:** First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, gloves (rugged and latex)

**Potential Hazards (H=High/M=Medium/L=Low):**  
 COVID-19 exposure from person to person and/or surface contact (H), Others in Work Area (H)

<b>PPE Requirements:</b>	 PROTECTIVE GLOVES	 DUST MASK		
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This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety. Workplaces and businesses can contribute to the transmission of respiratory pathogens, such as the virus that causes COVID-19. It is important to implement appropriate measures to prevent and reduce the spread of COVID-19 among all those who may be present in the workplace (e.g., employees, contractors, clients). Remind the workforce daily about social distancing, hygiene, and other necessary mitigating measures.

Steps to Safely perform this work are:

Step # 1	<p><b>Eliminate close working where possible</b></p> <p>Firstly, seek to eliminate the need for any type of close proximity working by e.g.</p> <ul style="list-style-type: none"> <li>• Planning and arranging tasks and any other activity so they can be done by one person, or by maintaining social distancing measures (2 meters) and preventing overcrowding</li> <li>• Considering mechanical aids to reduce worker interface and proximity</li> </ul>
Step # 2	<p><b>Where closer proximity working is necessary and unavoidable.</b> In line with the current government guidelines, where it is not possible to follow social distancing guidelines in full for a particular activity, then:</p> <ul style="list-style-type: none"> <li>• “consider whether that activity needs to continue for the business to operate.”</li> </ul> <p>If this is so;</p> <ul style="list-style-type: none"> <li>• “take all mitigating actions possible” (applying the hierarchy of measures below) to reduce the risk of transmission between workers and others.</li> <li>• Comprehensive hygiene and clearing measures must apply at all times (government/Health guidelines/Best Practices)</li> <li>• Increase fresh air ventilation in any indoor/enclosed spaces.</li> </ul>
Step # 3	<p><b>Reduce</b></p>

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	<p>Where social (physical) distancing measures (minimum 2 meters) cannot be applied:</p> <ul style="list-style-type: none"> <li>• Minimize the frequency and time workers are within 2 meters of each other</li> <li>• Minimize the number of workers involved in the task</li> </ul> <p>Workers should work side by side or face away from each other: avoid face to face working wherever possible.</p>
Step # 4	<p><b>Isolate</b></p> <p>If workers must work within 2 meters of each other, keep the team:</p> <ul style="list-style-type: none"> <li>• Together (do not change workers within teams)</li> <li>• As small as possible</li> <li>• Away from other workers or others, where possible</li> </ul>
Step # 5	<p><b>Control</b></p> <p>Where it is essential to carry out a task and work within 2 meters:</p> <ul style="list-style-type: none"> <li>• Keep the activity as short as possible</li> <li>• Consider using a permit or other authorization process for close proximity activities</li> <li>• Provide designated supervision (which may include a 'compliance champion') to monitor and manage compliance with close proximity preventative measures</li> <li>• Consider any scope for temporary barriers between workers which can include PPE or fixed barriers</li> </ul>
Step # 6	<p><b>Travel to Work-</b></p> <p>The Site Operating Procedures outlines that workers should "travel to the site alone using their own transport." If Monitors have no option but to share transport:</p> <ul style="list-style-type: none"> <li>• Journeys should be shared with the same individuals and with the minimum number of people at any one time</li> <li>• Good ventilation (i.e., keeping the windows open) and facing away from each other may help to reduce the risk of transmission</li> <li>• The vehicle should be cleaned regularly using gloves and standard cleaning products, with particular emphasis on handles and other areas where passengers may touch surfaces</li> </ul>
Step # 7	<p><b>Parking Arrangements:</b></p> <p>Parking arrangements for additional vehicles and bicycles (follow site-specific requirements)</p> <p>Other means of transport to avoid public transport, e.g., cycling</p> <p>Providing hand cleaning facilities at entrances and exits. This should be soap and water wherever possible or hand sanitizer if:</p> <ul style="list-style-type: none"> <li>• soap and water are not available</li> <li>• How someone is taken ill would get home</li> <li>• Where public transport is the only option for workers, you should consider:</li> <li>• Changing and staggering site hours to reduce congestion on public transport</li> </ul>
Step # 8	<p><b>Driving at Work</b></p> <p>When travelling at work or between site locations, Monitors should travel alone. However, if Monitors have no option but to share a vehicle, then they should:</p> <ul style="list-style-type: none"> <li>• Share with the same individuals and with the minimum number of people at any one time</li> </ul>

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	<ul style="list-style-type: none"> <li>• Wherever possible maintain a distance of two meters and avoid touching their faces</li> <li>• Regularly clean the vehicle using gloves and standard cleaning products, with particular emphasis on handles and other surfaces that may be touched during the journey.</li> </ul>
Step # 9	<p><b>Site access and egress points</b> Stop all non-essential visits to the site.</p> <ul style="list-style-type: none"> <li>• Staggered start and finish times to reduce congestion may be implemented</li> <li>• Plan site access and egress points to enable social distancing – you may need to change the number of access points, either increase to reduce congestion or decrease to enable monitoring, including in the case of emergencies</li> <li>• Allow plenty of space between people waiting to enter the site</li> </ul>
Step # 10	<p><b>Site requirements to wear Respiratory Protective Equipment</b> Any overarching (e.g., the site owner) requirement to wear/not wear PPE (including RPE) or face covering should be dealt within a discussion with the site owner and/or main contractor.</p>
Step # 11	<p><b>Observe Site Signage</b></p> <ul style="list-style-type: none"> <li>• such as floor markings, to ensure 2-meter distance is maintained between people when queuing</li> <li>• workers are not to attend if they have symptoms of Coronavirus (Covid-19) and to follow guidelines</li> <li>• All workers to wash their hands for 20 seconds using soap and water when entering and leaving the site</li> </ul>
Step # 12	<p><b>Office Work</b> <b>Maintain social (physical) distancing</b>–Everyone should be practicing physical distancing to reduce their exposure to other people. They should do their best to avoid close contact with people outside of their immediate families. Close contact includes being within two (2) meters (6 feet) of another person.</p>
Step # 13	<p><b>Meetings</b> Avoid meeting in small/congested spaces. If a meeting can be held outdoors, that would be preferable. If unable to maintain a Physical Distancing of 2 meters, wearing a mask and possibly gloves would be the preferred method. If meetings are held in an office setting, thorough cleaning of all contactable surfaces and Equipment, including desk, chair, doors, light switches should be sanitized before and after the meeting) – plus preventing unnecessary sharing of items or Equipment. Avoid using common Equipment such as pens, pointers, etc.</p>
Step # 14	<p><b>Use alternative forms of communication</b></p> <ul style="list-style-type: none"> <li>• Use technology for communication (e.g., text messaging and mobile phones) rather than having in-person conversations as much as possible.</li> <li>• Where possible, use technology to send and receive paperwork (e.g., scanning equipment and electronic proof of delivery).</li> <li>• Do not share pens. Request that others use their own pen or stylus when signing. If required to share, use disinfectant wipes to clean pens and styluses.</li> </ul>
Step # 15	<p><b>Clean and disinfect regularly</b></p>

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	<ul style="list-style-type: none"> <li>• Regularly disinfect any areas that you are frequently in contact with or are used by other people (e.g., tables, desks, tablets, pens, door handles, copiers).</li> <li>• Have sanitizer or soap present and visible for all staff to use.</li> <li>• Monitor your supplies and refill them regularly.</li> <li>• Wash your hands frequently before and after transferring paperwork.</li> <li>• Use appropriate PPE when cleaning potentially contaminated surfaces.</li> <li>• Dispose of gloves and soiled materials in regular garbage.</li> <li>• Remove garbage from the facility regularly and wash hands after disposal.</li> <li>• Avoid touching your eyes, nose, and mouth.</li> </ul>
Step # 16	All activities need to be planned and organized to avoid all unnecessary close proximity (less than 2m) between workers and others, to minimize the risk of spread of infection, and no work should be carried out that requires skin to skin contact.
Step # 17	Suppose you start to feel symptoms of COVID-19. Anyone who begins to feel unwell (fever, new cough, or difficulty breathing) should return home and self-isolate immediately.

Issue Date	05/28/2020	IAMC-HSE-2-014	Originator	Brad Huber
Revision	Initial	Site Inspection Task Hazard Assessment	Approver	IAMC IMSC

Job Title:	MONITORS	THA #	014	Assessment Date	2020-03-01	Location:	Calgary, Alberta	Control # IAMC-HSE-2-014	Risk Matrix											
Task:	Site Inspection						<input checked="" type="checkbox"/> New													
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<input type="checkbox"/> Revision	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.													
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15															
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15															
P.P.E., Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face coverings (as required)						Additional Controls (Site Specific if required): Observe Physical Distancing while performing any task. Follow Good Hygiene Practices at all times. Check the Maintenance Schedule prior to performing this task.														
Material Required: Vehicle, Pre-Inspection checklist, Journey Management (if applicable), Site Inspection Forms						<b>Risk (w controls)</b>	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step			
						C	III	9	Yes											
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control			Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step						
			Health	Safety				Control		Risk										
1	Travel to location	Working Alone	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Journey Management Procedures			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>						
		Driving off-road/vehicle breakdown	<input type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-HSE-02-006/007 Driving (Highway/Off-road) w/wo passengers (COVID-19)			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>						
		Civil Disturbances	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>						
2	Walking onsite/site access/egress	Uneven ground-Slips/trips/falls	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Awareness of ground conditions, proper footwear.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	A	II	8	<input type="checkbox"/>						
3	Interacting with others (COVID-19)	Possible COVID-19 exposure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical Distancing			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input type="checkbox"/>						
4	Wildlife Interactions-Rattlesnakes	Bites/Infections/Venomous reactions	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IMAC-HSE-02-004/010/011 (for First Aid protocols)			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>						
	Wildlife Interactions-Spiders	Bites/Infections/Venomous reactions	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IMAC-HSE-02-004/010/011 (for First Aid protocols)			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>						
	Wildlife Interactions-Bees/Hornets/Wasps/Mosquitos	Bites/Infections/possible virus carrier	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Bug Spray, long Sleeves, stay clear of mash areas/wetlands, try not to disturb these areas.			<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	IV	6	<input type="checkbox"/>						

Issue Date	05/28/2020	IAMC-HSE-2-014	Originator	Brad Huber
Revision	Initial	Site Inspection Task Hazard Assessment	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
	Wildlife Interactions-Ticks	Bites/Infections	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IAMC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
	Wildlife Interactions-Bears	Attack/injury/major trauma/death	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IAMC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
	Wildlife Interactions-Moose	Attack/injury/major trauma/death	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IAMC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
4	Wildlife Interactions-Cougars	Attack/personal injury/major trauma/death	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IAMC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
	Wildlife Interactions-Wolves/Coyotes	Attack/personal injury/major trauma/death	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Refer to IAMC-HSE-02-004/010/011 (for First Aid protocols)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
5	Site Safety Meetings/Hazard Assessment	Interaction with Others (COVID-19)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical Distancing, Training, Electronic forms	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
6	Walking/Travelling Pipeline	Fires/Forest Fires/Wild Fires	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Spark arrestors, Fire extinguisher, Stay on R.O.W.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input type="checkbox"/>
		Uneven surfaces/Slip, trip, fall	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Fire Extinguisher	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		Close Proximity Work with Others	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-HSE-02-012/013 Close Proximity Work/Interactions with others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Dehydration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
7	Inspect Worksite	Worker/Equipment infractions-Environmental	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Event Reporting Protocol (when observing non-compliance)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		Missing training (mandatory training requirements)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Workers have mandatory training requirements.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	IV	6	<input type="checkbox"/>
			<input type="checkbox"/>	<input checked="" type="checkbox"/>	Orientation and COVID-19 Orientation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	IV	6	<input type="checkbox"/>
		Physical Distancing between workers cannot be maintained.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	IAMC-HSE-02-012/013 Close Proximity Work/Interactions with others	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>

Issue Date	<i>05/28/2020</i>	<i>IAMC-HSE-2-014</i>	Originator	<i>Brad Huber</i>
Revision	<i>Initial</i>	<b>Site Inspection Task Hazard Assessment</b>	Approver	<i>IAMC IMSC</i>

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-015	Originator	Brad Huber
Revision	Initial	Site Inspection Procedure	Approver	IAMC IMSC

Site Inspection						
SJP#	015	Assessment Date: 2020-08-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control # IAMC-HSE-02-015		
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	III	9	Yes
<b>Other Safety Considerations Required:</b> No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19. When onsite PPE will be required.						
<b>Tools &amp; Equipment Required:</b> First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, gloves (rugged and latex)						
<b>Potential Hazards (H=High/M=Medium/L=Low):</b> COVID-19 exposure from person to person and/or surface contact (H), Slips, Trips, and Falls (M)						
<b>PPE Requirements:</b>	 PROTECTIVE GLOVES	 DUST MASK				
This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety.						
Steps to Safely perform this work are:						
Step # 1	Access site-Conduct Pre-Job Hazard Assessment with the inspection team. Ensure to follow Physical distancing protocols.					
Step # 2	Site Orientation-Complete Site-specific orientation and any other visitor-specific training required to access the site.					
Step # 3	Review of site Hazard Assessment/Tailgate meeting-Attend required tailgate meetings. Ensure to follow Physical Distancing Protocols. If required to be in close proximity to other workers, follow IAMC-HSE-02-012/013 Close Proximity Work.					
Step # 4	Driving-Workers are to follow IAMC-HSE-02-006/007 Driving (Highway/Off-road) w/wo passengers. Ensure to properly sanitize the vehicle. When travelling with passengers, ensure to follow IAMC-HSE-01-006/007 Driving (Highway/Off-road) w/wo passengers.					
Step # 5	While onsite doing inspections, the Monitors will have to interact with others. Monitors will make every effort to sustain physical distancing. In the event that cannot be achieved, the monitors will have to wear appropriate PPE and follow the Interaction with others IAMC-HSE-02-012/013 Close Proximity Work procedure.					
Step # 6	Inspection of site and activities-Workers will try and maintain the physical distancing during the site inspection. Appropriate PPE will be worn.					
Step # 7	Develop inspection report in collaboration with inspection officers.					

Issue Date	09/09/2020	IAMC-HSE-2-016	Originator	Brad Huber
Revision	Initial	<b>Self-Isolation Procedure</b>	Approver	IAMC IMSC

Self-Isolation Protocols						
SJP#	<b>016</b>	Assessment Date: 2020-09-09	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control #	IAMC-HSE-02-016	
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	V	3	Yes

**Other Safety Considerations Required:**

**Tools & Equipment Required:** First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, appropriate gloves for the task

**Potential Hazards (H=High/M=Medium/L=Low):**

COVID-19 exposure from person to person and/or surface contact (H)

<b>PPE Requirements:</b>				
			DUST MASK	PROTECTIVE GLOVES

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety.

**Steps to Safely perform this work are:**

Step # 1	Self-isolation is when you are sick or are with symptoms of COVID-19 <b>or you have been told by a health care provider or Public Health Official to separate yourself from others</b> , including from the people you live with, to the greatest extent possible. The purpose of self-isolation is to prevent the spread of COVID-19 to others in your home and your community. You should inform your supervisor if you are required to self-isolate, but you should not report for in-person work at this time.
Step # 2	You <b>must</b> isolate yourself for at least 14 days if you have: <ul style="list-style-type: none"> <li>• returned from travel outside Canada</li> <li>• been diagnosed with COVID-19</li> <li>• symptoms of COVID-19, even if they are mild</li> <li>• been in contact with a suspected, probable or confirmed case of COVID-19</li> </ul> Workers with symptoms (in-field) <ul style="list-style-type: none"> <li>• Will return to their residence (hotel, camp) and isolate.</li> <li>• If possible, get a COVID test and isolate and wait for test results</li> <li>• If not possible, worker will have to isolate for 14 days (this is reimbursable)</li> <li>• If worker received test and it is negative and has not shown any symptoms for 24 hours they may discontinue self-isolation (see Criteria to discontinue self-isolation below)</li> </ul>
	You <b>must</b> isolate yourself for at least 10 days if you have: <ul style="list-style-type: none"> <li>• If you have taken a test and have tested positive for the Corona Virus.</li> </ul>
Step # 3	Follow general instructions for those on self-isolation: <ul style="list-style-type: none"> <li>• Limit contact with others in the place of isolation.</li> </ul>

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	<ul style="list-style-type: none"> <li>Stay in a separate room and use a separate bathroom from others in your place of isolation, if possible.</li> <li>Do not have visitors.</li> <li>Do not leave your place of isolation unless it's to get medical attention.</li> <li>Do not use public transportation (e.g., buses, taxis).</li> <li>Do not go to school, work or other public areas.</li> <li>Do not go into the community, including the grocery store and pharmacy. If you need groceries, medication or other essential items, arrange to have a family member, friend, co-worker, or anyone else who is not in self-isolation do this for you. Have items left at the door to minimize contact.</li> <li>If you have to be in contact with others, practice physical distancing and keep at least 2 metres (6 feet) between yourself and the other person, and wear a mask.</li> </ul>
Step # 4	<p><b>Scenario 1</b> You are on duty travel and are now not feeling well. The results of your self-health assessment indicate that you may have symptoms of COVID-19.</p> <p><b>Direction:</b> You may need to implement your Employee Self-isolation Plan. Contact the local public health authority (BC- <a href="https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/health-authorities">https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/partners/health-authorities</a> AB- <a href="https://www.albertahealthservices.ca/">https://www.albertahealthservices.ca/</a>) to find out more about self-isolation and testing. If the local public health authority deems you to be at risk and directs you to self-isolate, or deems you to be symptomatic and directs you to be sent for testing, follow the health practitioner's direction. Work with your Employer and Admin to implement your Employee Self-isolation Plan. You must notify your Employer of the health practitioner's direction and contact them again once results are obtained.</p> <ul style="list-style-type: none"> <li>If confirmed COVID-19: follow the protocols identified by this procedure.</li> <li>In the case of a negative result: discuss return-to-work plan and date with your Employer.</li> </ul> <p>Consideration can be given to telework arrangements if operationally feasible, otherwise you are expected to take the appropriate leave. Speak with your Employer to determine next steps for your situation.</p>
Step # 5	<p><b>Scenario 2</b> <b>Direction:</b> Depending on where you are traveling from, you could be required to self-isolate for 14 days. Telework arrangements can be made for this period. Should any potential COVID-19 symptoms arise, you should contact your local public health authority or speak to a qualified health professional (such as the Registered Nurse that is available for CER Staff support) to find out more about self-assessment, isolation and testing. Speak with your Employer to determine next steps for your situation.</p>
	<p><b>Scenario 3</b> You have been in contact with someone during your deployment who has tested positive for COVID-19. You currently have no symptoms of COVID-19.</p> <p><b>Direction:</b> You are required to self-isolate for 14 days. Should any COVID-19 symptoms arise you should contact your local public health authority to find out more about self-assessment, isolation and testing. Consideration can be given to telework arrangements if operationally feasible, otherwise you are expected to take the appropriate leave. Speak with your Employer to determine next steps for your situation.</p> <p><b>Scenario 4</b></p>

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	<p>You have been in a location where you have been knowingly exposed to COVID-19 as per direct communication from a federal, provincial, or local public health authority.</p> <p><b>Direction:</b> You are required to self-isolate for 14 days or follow health professional advice. Consideration can be given to telework arrangements if operationally feasible, otherwise you are expected to take the appropriate leave. Speak with your Employer to determine next steps for your situation.</p> <p>If a public health authority deems you to be at risk and directs you to remain in self-isolation, or deems you to be symptomatic and directs you to be sent for testing, follow the health practitioner's direction. You must notify your Employer of the health practitioner's direction and contact them again once results are obtained.</p> <ul style="list-style-type: none"> <li>• If confirmed COVID-19: follow the protocols identified by health professional and report the diagnosis through the CER OHS process.</li> <li>• In the case of a negative result: discuss return-to-work plan and date with your Employer.</li> </ul>
	<p><b>Scenario 5</b></p> <p>You have returned from duty travel and within 14 days of returning home, have developed symptoms of COVID-19.</p> <p><b>Direction:</b> You should contact your local public health authority to find out more about self-assessment, isolation and testing. A WCB report must be filed. Consideration can be given to telework arrangements if operationally feasible, otherwise you are expected to take the appropriate leave. Speak with your Employer to determine next steps for your situation.</p>
	<p><b>Scenario 6</b></p> <p>You are on duty travel and a member of your household or close personal contact develops symptoms of COVID-19 and is required to be tested. You do not currently have any symptoms of COVID-19. Do not leave, Isolate, contact your employer.</p> <p><b>Direction:</b> Inform your inspection partner, IMs (if applicable), the company and your Employer. Speak with your Employer to determine next steps for your situation.</p>
	<p><b>Scenario 7</b></p> <p>You are on duty and a member of your inspection team shows signs of COVID-19. You are to isolate in your room immediately. Make arrangements to get tested (if possible). Isolate and await test results.</p> <p><b>Direction:</b> Inform your inspection partners, IMs (if applicable), the company and your Employer. Isolate and speak with your Employer to determine next steps for your situation.</p>
Step # 6	<p><b>Ending self-isolation</b></p> <p>After your 10- or 14-day self-isolation, you may return to your regular activities if:</p> <ul style="list-style-type: none"> <li>• At least 10 days have passed since any symptoms started, and</li> <li>• Your fever is gone without the use of fever-reducing medications (e.g. Tylenol, Advil), and</li> <li>• You are feeling better (there is improvement in runny nose, sore throat, nausea, vomiting, diarrhea, fatigue). Coughing may go on for several weeks, so a cough alone does not mean you need to continue to self-monitor and self-isolate. OR</li> <li>• You were self-monitoring and never developed any symptoms.</li> </ul>
Step # 7	<p>Continue physical distancing AFTER your self-isolation has ended – these recommendations apply to all persons:</p> <ul style="list-style-type: none"> <li>• Keep at least 2 metres (6 feet) between yourself and other people.</li> </ul>

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	<ul style="list-style-type: none"> <li>• Limit group gatherings.</li> <li>• Connect via phone, video chat, or social media instead of in person.</li> <li>• Talk to your employer about working from home (if possible).</li> <li>• Avoid visiting elderly friends or relatives unless the visit is essential.</li> <li>• Keep windows down for essential community trips via taxi or rideshares.</li> <li>• You can go outside for a walk, play catch/kick a ball, throw a football, fly a kite, sit on a blanket, grass or lawn chair, or exercise/stretch on a yoga mat, but not in a class. While outside, avoid spitting in public, avoid crowds and maintain a distance of two metres (six feet) from those around you. Make an effort to step-aside or pass others quickly and courteously on sidewalks. Passing someone on the sidewalk is not considered <b>close contact</b> or a significant risk for exposure to COVID-19</li> </ul>
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**Criteria to discontinue self-isolation:**

- Discontinuing self-isolation depends on if you know if you have been exposed to COVID-19 and on your COVID-19 test result.

Please refer to the following table for your situation.

Who	When COVID-19 Test Positive	When COVID-19 Test Negative	General Isolation Guidelines
Known exposure to a person with COVID-19	Ten (10) days after symptoms started <b>AND</b> you have no fever <b>AND</b> your symptoms are improving	Fourteen (14) days after symptoms started <b>AND</b> you have no fever <b>AND</b> your symptoms are improving	
No known exposure to a person with COVID-19	Fourteen (14) days after symptoms started <b>AND</b> you have no fever <b>AND</b> your symptoms are improving	24 hours after symptoms resolve	
Those returning from international travel <b>WITHOUT</b> symptoms			Fourteen (14) days since your return to Canada <b>AND</b> you have not developed any symptoms of COVID-19
Those returning from any kind of travel <b>WITH</b> symptoms			Fourteen (14) days since your return to home OR 14 days after your symptoms started, whichever is longer <b>AND</b> you have no fever <b>AND</b> your symptoms are improving
<b>Individuals who have been told they have been in close contact with a case of COVID-19</b>			Fourteen (14) days since the last day you had contact with someone who has COVID-19 <b>AND</b> you have not developed any symptoms of COVID-19

**Resources**

<https://www.healthlinkbc.ca/self-isolation-and-covid-19>

Issue Date	<i>09/09/2020</i>	<i>IAMC-HSE-2-016</i>	Originator	<i>Brad Huber</i>
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<https://www.ottawapublichealth.ca/en/public-health-topics/self-isolation-instructions-for-novel-coronavirus-covid-19.aspx#closecontact>

<https://www.alberta.ca/assets/documents/covid-19-fact-sheet.pdf>

<https://www.alberta.ca/isolation.aspx#:~:text=for%20COVID%2D19-.You%20are%20legally%20required%20to%20isolate%20for%20a%20minimum%20of,symptoms%20resolve%2C%20whichever%20takes%20longer.>

Issue Date	05/28/2020	IAMC-HSE-2-016	Originator	Brad Huber
Revision	Initial	<b>Emergency Response Plan Task Hazard Assessment</b>	Approver	IAMC IMSC

Job Title:	MONITORS	THA #	016	Assessment Date	2020-01-01	Location:	Calgary, Alberta	Control #	IAMC-HSE-2-016	Risk Matrix							
Task:	<b>Emergency Response Plan</b>							<input checked="" type="checkbox"/>	New								
								<input type="checkbox"/>	Revision								
Analysis by:	Bradley Huber	Title:	Safety Consultant	Date:	2020-03-01	<b>COVID-19 Special Considerations:</b> Have hand sanitizer, masks and cleaning wipes available. Remember to physical distance when possible.											
Approved by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15												
Reviewed by:	IAMC IMSC	Title:	Committee	Date:	2020-04-15												
P.P.E., Tools & Equipment Required: Hard Hat, Safety Glasses, Hi-Visibility Vest, Steel Toed Boots, Gloves, Hearing protection (as required), Face coverings (as required)						Additional Controls (Site Specific if required): Observe Physical Distancing while performing any task. Follow Good Hygiene Practices at all times. Check the Maintenance Schedule prior to performing this task.											
Material Required: IAMC-HSE-02-501 First Aid Procedure/IAMC-HSE-02-503 Emergency Response Plan						Risk (w controls)	Likelihood	Consequence	Risk Ranking	ALARP	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
						C	III	4	Yes								
Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control				Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step		
			Health	Safety					Control			Risk					
1	Site Evacuation	Can't hear the alarm	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Drills and evaluation of the ERP, test communication				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>		
		Evacuation route blocked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Have a secondary route planned/daily pre-job HA				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	III	3	<input type="checkbox"/>		
		Cannot maintain Physical Distancing	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Follow SWP IAMC-HSE-2-002/008/009 General Hygiene Practices (8.0 Personal Protective Equipment)/ IAMC-HSE-02-012/013 Close Proximity Work				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>		
2	Suspicious package/bomb threat	Explosive device	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>		
		Chemical Exposure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>		
3	Workplace Harassment/Violence	Physical Violence	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>		
		Harassment from Public/co-worker	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Violence and Harassment Policy and Procedure				<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	III	6	<input checked="" type="checkbox"/>		

Issue Date	05/28/2020	IAMC-HSE-2-016	Originator	Brad Huber
Revision	Initial	<b>Emergency Response Plan Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Control			Risk			
			Health	Safety		Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
4	Fire/Wildfire	Escape route blocked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
4	Fire/Wildfire	Burns	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
5	Fire/Wildfire	Loss of equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Loss of life	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
6	Medical Emergency	COVID-19 exposure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Medical Supplies not available	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pre-use inspection	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	I	5	<input type="checkbox"/>
		Unconscious Worker	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Casualty is bleeding	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Loss of communication to summon help	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
7	Civil Disturbance	Demonstrators blocking access	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017, Leave/report as per Incident Reporting Protocol	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Physical Violence	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								
8	Flood or Water Hazard	Evacuation route blocked	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
		Drowning	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
		Equipment damage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Pre-use inspection	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>

Issue Date	05/28/2020	IAMC-HSE-2-016	Originator	Brad Huber
Revision	Initial	<b>Emergency Response Plan Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
9	Power outage	Loss of illumination/Slip/Trip/Fall Hazard	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Loss of heat	<input type="checkbox"/>	<input checked="" type="checkbox"/>								
9	Gas Leak/Spills	Propane leak-Explosion	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		H2S Exposure-Knock Down	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		H2S Exposure-Fire Explosion	<input type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Exposure blocking evacuation route	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Housekeeping, Inspections	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
10	Severe Weather	Thunder/Lighting Strikes-Fire	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Thunder/Lighting Strikes-Personal injury	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Thunder/Lighting Strikes-Equip. Damage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Heat/Cold exposure	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Appropriate clothing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	IV	2	<input type="checkbox"/>
		U.V. Exposure (Sun)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Sunscreen (as appropriate)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	IV	2	<input type="checkbox"/>
		Overexertion/Hypothermia/Sunstroke	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Regular Breaks (based on Heat/Cold best practices)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	IV	2	<input type="checkbox"/>
		Dehydration	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Water, Fluids for Hydration	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	IV	2	<input type="checkbox"/>
11	Human-Wildlife Contact	Bees, Hornets, Wasps	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011, Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Spiders	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								
		Rattlesnakes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								
		Mosquitos	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								

Issue Date	05/28/2020	IAMC-HSE-2-016	Originator	Brad Huber
Revision	Initial	<b>Emergency Response Plan Task Hazard Assessment</b>	Approver	IAMC IMSC

Task #	Basic Tasks	Potential Hazard	Hazard		Description of Current Control	Engineering	Administrative	P.P.E.	Likelihood	Consequence	Risk (w controls)	Critical Step
			Health	Safety								
		Bears	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								
		Moose	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>								
11	Human-Wildlife Contact	Cougars/ Wolves/Coyotes	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	First Aid Protocols (COVID-19) IAMC-HSE-02-004/010/011, Follow Emergency response Plan IAMC-HSE-02-003/016/017	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
		Ticks	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input checked="" type="checkbox"/>
12	Pandemic Response (COVID-19)	Exposure to COVID-19 virus	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Physical distancing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input type="checkbox"/>
					Daily Screening/Employee monitoring/Self-assessment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input type="checkbox"/>
					COVID-19 awareness training	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	V	3	<input type="checkbox"/>
					Company S.W.P.' s/THAA's/Policies (updated to include COVID-19 as a hazard)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	B	IV	4	<input type="checkbox"/>
13	Vehicle rollover	Personal Injury (Cuts, abrasions, crush, breaks, etc.)	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	Awareness/Experience/Care & Control	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	A	II	4	<input type="checkbox"/>
14	Stuck Vehicle (needs tow)	Vehicle Damage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Follow towing Procedure	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	C	III	3	<input type="checkbox"/>

This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any legal obligations relating to health and safety.

Issue Date	05/28/2020	IAMC-HSE-2-017	Originator	Brad Huber
Revision	Initial	<b>Emergency Preparedness and Response Procedure</b>	Approver	IAMC IMSC

Emergency Preparedness & Response Plan						
SJP#	017	Assessment Date: 2020-03-02	<input checked="" type="checkbox"/> New <input type="checkbox"/> Revision	Control # IAMC-HSE-2-017 IAMC-HSE-02-017		
Developed by:	Bradley Huber	<b>Risk (w controls)</b>	<b>Likelihood</b>	<b>Consequence</b>	<b>Risk Ranking</b>	<b>ALARP</b>
Approved by:	IAMC IMSC		C	III	9	Yes
<b>Other Safety Considerations Required:</b> No PPE required while driving unless the hazard assessment identifies a need for the driver and or passengers are required to wear face masks to prevent the spread of COVID-19. When onsite PPE will be required.						
<b>Tools &amp; Equipment Required:</b> First aid kit, fire extinguisher, Waterless handwash or cleaning wipes, face mask, gloves (rugged and latex)						
<b>Potential Hazards (H=High/M=Medium/L=Low):</b> COVID-19 exposure from person to person and/or surface contact (H), Other Drivers on highway/right of way/Collision (L), Vehicle breakdown (L), Refueling/Fire and/or Explosion Hazard (M)						
<b>PPE Requirements:</b>	 PROTECTIVE GLOVES	 DUST MASK				
This document sets out guidance on how to work safely. It gives practical considerations of how this can be applied in the workplace, and It does not supersede any Provincial or Federal Legislation relating to health and safety. <b>Refer to IAMC-HSE-02-003 Emergency Response Standard</b>						
Steps to Safely perform this work are:						
Step # 1	An emergency is discovered (follow site notification protocols).					
Step # 2	The Monitor is to report the Emergency to the appropriate personnel on the emergency contact list in the Emergency Response Standard (IAMC-HSE-02-003) and appropriate TMC personnel.					
Step # 3	Follow Steps in the Emergency Response Standard appropriate to the Emergency situation.					
Step # 4	If there are injured, the Monitor is to assess the situation to ensure it is safe to proceed with assisting the injured person (IP). The Monitor is to follow the Emergency Response Standard and the PPE requirements for the Emergency situation.					
Step # 5	Once the situation is under control, the worker may have to write a witness statement or provide additional information to an investigator.					
Step # 6	Worker to ensure that PPE is cleaned and sanitized. Personal hygiene should also be considered.					
Step # 7	Follow Cleaning and Sanitizing Protocols.					

Issue Date	05/28/2020	<b>Forms</b>	Originator	Brad Huber
Revision	Initial		Approver	IAMC IMSC

## Appendix A

### Actions Checklist (Suggested)

Title	Phase 3	Phase 4	Phase 5	Phase 6
<b>Employer (or designate)</b>	-Appoint Pandemic Coordinator (PC)	-E-mail/communication to all staff -Authorize evacuations if required	-Approve all travel -Authorize evacuations if required	-Approve all travel -Approve all shutdowns
<b>Pandemic Coordinator (PC)</b>	-Establish Response Team -Prepare office-level plan -Review and Refresh evacuation plans - Initiate Subcontractor, client and vendor awareness -Monitor local regulations and government policies	-Distribute awareness materials -Brief project personnel -Develop self-assessment (where applicable) -Ensure all site medical personal are trained and facilities equipped. -Upon approval by the President or designate, evacuate all non-essential personnel from affected office locations. -Ensure adequate PPE is being held in stock.	-Manage evacuations where required -Activate self-assessments -Keep subcontractors, clients and vendors informed -Manage impacts on business operations -Upon approval from President or designate evacuate ex-pat personnel from AFFECTED locations to a safe haven or country of origin	-Keep subcontractors, clients and vendors informed -Activate self-assessment
<b>Health, Safety, Environment</b>	-Review evacuation policy -Ensure appropriate contractual arrangements are in place for adequate medical response and evacuation services, i.e. International SOS	-Develop self-assessment in Phase 4 locations -Assure timely provision of special equipment and materials, i.e., PPE, as determined by PC	-Develop the use of self-assessments in all project locations	
<b>IT Support</b>	-Identify technical solutions to work from home (WFH) -Test WFH solutions and train business-critical staff -Support website creation -Establish Hot Line (used for pre-recorded messages)	-Implement WFH as needed -Support website -Set up Help Line -Verify whether the external web site is available	-Expand WFH -Support website -Support Help Line activation	-Support WFH -Support help Line
<b>Human Resources</b>	-Prepare FAQs -Maintain contact list for all employees -Obtain access to contact details for business travelers -Work with Finance on payroll disruption solutions	-Respond to employee inquiries -Staff Helpline -Provide policy advice, in coordination with Corp HR	-Staff Helpline -Provide policy advice -Provide status reports on absenteeism	-Staff Helpline -Provide policy advice -Provide status reports on absenteeism

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<b>Legal &amp; Risk Management</b>	-Evaluate insurance/risk coverage -Evaluate force majeure provisions in contracts -Work with Procurement and Contracts departments on new and existing orders and subcontracts	-Provide policy guidance as required		
<b>Finance</b>	-Plan for solutions to payroll disruptions -Plan for disruptions to payment of supplier invoices			-Initiate payroll disruption plan
<b>Contracts Department</b>	-Contractors/ subcontractors must agree to abide by the Pandemic Preparedness Plan or submit a plan of their own for review			

Communications Plan (Phase 4-Day 1-Day 7)

Materials	Channel	Action	Timing
<b>Initial announcement</b> This first announcement is important for building trust in communications from the outset. The announcement should inform employees how they will receive updates on the situation (i.e., Employer web site/e-mails/helpline).	All-staff e-mail from Senior Manager and / or their designates	Senior Manager and / or their designates	<b>Day 1:</b> To be distributed post announcement of Pandemic Level 4 by WHO
<b>Pandemic Intranet site</b> This site should contain all relevant materials, including: -FAQs -Office/project plan -Employer policies including travel, HR, etc -Voluntary self-assessment checklist -Regular updates -Pandemic Coordinators contact details -Hotline details -Links to provincial and local health authorities -Link to and corporate sites	PC/ HR	IT	<b>Day 1:</b> Review all material on the project web site to ensure up to date. Following the distribution of the initial announcement by the Senior Manager, launch the Pandemic site.
<b>Project Pandemic Flu external website</b> To include all materials listed above, which are deemed appropriate for an external site. An external website will be necessary if and when the Intranet site is no longer accessible by employees during a pandemic.	<b>Web Site Addresses</b>	IT (or designate)	<b>Day 1-Day 7</b> While materials should be reviewed for external use, the external website should mirror the intranet site as closely as possible to avoid possible confusion.

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<p><b>Information packs</b> These packs should contain approved education materials for distribution to employees: -Public information leaflets: provincial/local health authorities -Public information posters -Voluntary self-assessment checklist -Possible laminated cards for all employees -Details on remote working The packs should be sent (by e-mail/flash drive) to the nominated Pandemic Coordinators in advance of a Level 4 alert. The information contained should be such that it will not require much updating before distribution.</p>	<p>E-mail / Flash drive Web site</p>	<p>Pandemic Coordinators</p>	<p><b>Day 1-Day 7:</b> Pandemic Coordinators take responsibility for the communication of education materials to employees.</p>
<p><b>Regular Updates</b> Due to potential access difficulties, the helpline and external website are likely to become the primary forms of communication with employees during a pandemic. Weekly Health Alert E-mails</p>	<p>Helpline number</p>	<p>Response Team  PC/ HR/IT</p>	<p><b>Weekly (+ ad-hoc as required):</b> Weekly Health Alert E-mails to be published for distribution to employees. All Health Alert E-mails to be reviewed by the Response Team. These may need to be placed on the internal/external website if e-mail access is lost during a pandemic. The helpline number will be publicized at Pandemic Level 4. It will only be activated, however, following the announcement of Pandemic Level 5 by the WHO.</p>

		<b>SAFETY MANAGEMENT SYSTEM</b>			
Issue Date	05/28/2020	<b>Forms</b>		Originator	Brad Huber
Revision	Initial			Approver	IAMC IMSC

## Self-Assessment Questionnaire

		<b>SAFETY MANAGEMENT SYSTEM</b>			
Issue Date	01/10/2019	IAMC-HSE-3-019		Originator	Brad Huber
Revision	Initial	COVID-19 Daily Health Screening Tool		Approver	IAMC
Employer Name:		Date:			
Workers Name:		Work Site Address:			
Task Description:		Property Occupants:			
<p><b>Pre-Screening Questions</b> To ensure the safety of staff, subcontractors and clients (Employer Name) are asking a few simple questions for the occupants, of the above-listed address, before any work proceeds:</p> <p>1. Are you or anyone else on the property experiencing any of the following symptoms?  <input type="checkbox"/> No <input type="checkbox"/> Yes—Fever  <input type="checkbox"/> No <input type="checkbox"/> Yes—Cough  <input type="checkbox"/> No <input type="checkbox"/> Yes—Sore throat  <input type="checkbox"/> No <input type="checkbox"/> Yes—Shortness of breath or difficulty breathing</p> <p>2. Have you traveled outside Canada (including the United States) within the last 14 days? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>3. Did you or anyone on the property provide care or have close contact with a person with COVID-19 (probable or confirmed) within the last 14 days? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>4. Have you or anyone in your home had close contact with a person who has traveled outside of Canada in the last 14 days, and who has become ill? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>5. Have you or anybody in your home had contact with someone who is being tested for COVID-19 or who has been diagnosed with COVID-19? <input type="checkbox"/> No <input type="checkbox"/> Yes</p> <p>6. Other symptoms: _____</p>					
<p>If the answer is YES to ANY of the above questions, STOP work! Report to your supervisor.</p> <p>Verified by employee: _____</p> <p>Supervisor: _____ Date: _____ Time: _____</p>					

COVID-19 Self Assessment Tool-IAMC-HSE-03-019. This form is available in Appendix A of this manual.

<https://ca.thrive.health/covid19/en>

## Additional Resources

- Many of our workers travel for work or during their time away from work. What is the guidance for travelers?
  - <https://travel.gc.ca/travelling/health-safety/travel-health-notice>
- Additional Resources
  - <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>
  - <https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

### For more information:

- Government of Canada novel coronavirus information line: 1-833-784-4397
- Call 811 for information
- Government of Canada website: [travel.gc.ca](http://travel.gc.ca)
- World Health Organization website: [who.int](http://who.int)

<https://www.cdc.gov/coronavirus/2019-ncov/hcp/respirator-use-faq.html>

Issue Date	05/28/2020	<b>Forms</b>	Originator	Brad Huber
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## Appendix B

### Daily COVID-19 Self Assessment

<b>Employer Name:</b>	<b>Date:</b>
<b>Monitor Name:</b>	<b>Work Site Address:</b>
<b>Task Description:</b>	<b>Address (departure) and Occupant(s):</b>
<p><b>Pre-Screening Questions for Service Calls</b> To ensure the safety of IAMC-TMX Monitors, their Employers and communities, it is important for any Monitor participating in an in-person inspection to complete the following questions before any work proceeds:</p> <ol style="list-style-type: none"> <li>1. Are you or anyone else on the property experiencing any of the following symptoms? <ul style="list-style-type: none"> <li><input type="checkbox"/> No <input type="checkbox"/> Yes---<b>Fever</b></li> <li><input type="checkbox"/> No <input type="checkbox"/> Yes---<b>Cough</b></li> <li><input type="checkbox"/> No <input type="checkbox"/> Yes---<b>Sore throat</b></li> <li><input type="checkbox"/> No <input type="checkbox"/> Yes---<b>Shortness of breath or difficulty breathing</b></li> </ul> </li> <li>2. Have you traveled outside Canada (including the United States) within the last 14 days? <input type="checkbox"/> No <input type="checkbox"/> Yes</li> <li>3. Did you or anyone at your home address provide care or have close contact with a person with COVID-19 (probable or confirmed) within the last 14 days? <input type="checkbox"/> No <input type="checkbox"/> Yes</li> <li>4. Have you or anyone in your home had close contact with a person who has traveled outside of Canada in the last 14 days, and who has become ill? <input type="checkbox"/> No <input type="checkbox"/> Yes</li> <li>5. Have you or anybody in your home had contact with someone who is being tested for COVID-19 or who has been diagnosed with COVID-19? <input type="checkbox"/> No <input type="checkbox"/> Yes</li> <li>6. Other symptoms: _____</li> </ol>	
<p>If the answer is YES to ANY of the above questions, STOP work! Report to your supervisor.</p> <p>Signature of Worker: _____</p> <p>Supervisor: _____ Date: _____ Time: _____</p>	

Issue Date	05/28/2020	<b>Forms</b>	Originator	Brad Huber
Revision	Initial		Approver	IAMC IMSC

**COVID Sanitization Checklist**

Employer Name:				
<input type="checkbox"/> Pre-Shift <input type="checkbox"/> Hourly <input type="checkbox"/> Post-Shift <input type="checkbox"/>				
Other _____				
Unit #	Licence Plate #	Immediate Supervisor	Date	Time <input type="checkbox"/> AM <input type="checkbox"/> PM
#	Disinfect the following surfaces	Pre-Use	Post-Use	Comments
1	Key FOBs and Access Cards			
2	Starter Button on Vehicle			
3	All Door Handles and Handle Areas			
4	Arm Rests			
5	Front and Back Areas of Steering Wheel			
6	Shift Lever and Console			
7	Rear-view Mirror (front and back)			
8	Dashboard			
9	Any Buttons on the Dash			
10	Power Window/Door Locks			
11	Radio and Climate Control Buttons			
12	Turning Signal Indicators			
13	Wiper Switch			
14	Seat Adjustors			
15	Touch Screen on Console			
16	Glove Compartments			
17	Drink Holders			
18	Seat Belts including Buckles			
19	Emergency Break Handle (if applicable)			
20	Cell Phones			
21	2-Way Radio (if applicable)			
22	Other:			
Completed By:		Comments:		

Issue Date	05/28/2020	<b>Forms</b>	Originator	Brad Huber
Revision	Initial		Approver	IAMC IMSC

**Vehicle Pre-Post Checklist**

Employer Name:					
<input type="checkbox"/> Pre-Inspection Completed <input type="checkbox"/> Post-Inspection Completed <input type="checkbox"/> Other _____					
Unit #	License Plate #	Immediate Supervisor:		Date:	Time: <input type="checkbox"/> AM <input type="checkbox"/> PM
Inspect the following	Verified OK	Disinfect the following surfaces	Verified OK	COVID-19 Protocols	Verified OK
1.1 Mirrors/Windshield		2.1 Key FOBs and Access Cards		3.1 Only Driver and Passenger	
1.2 Tire Condition PSI, Tread Depth		2.2 Starter Button on Vehicle		3.2 Face Coverings worn	
1.3 Doors		2.3 All Door Handles and Handle Areas		3.3 IANM-HSE-3-019 Daily Health Screening Tool Completed for all passengers and driver	
1.4 Body Panels		2.4 Arm Rests			
1.5 Battery Condition		2.5 Front and Back Areas of Steering Wheel		2.10 Cell Phones	
1.6 Engine Oil Level		2.6 Shift Lever and Console			
1.7 Fluid Leaks, Oil, Coolant, Transmission		2.7 Rear-view Mirror (front and back)			
1.8 Washer Fluid Level		2.8 Dashboard			
1.9 Engine Hoses		2.9 Any Buttons on the Dash			
1.10 Engine Belts (Condition and Tension)		2.10 Power Window/Door Locks			
1.11 Headlights, Brakes, Turn Signals		2.11 Radio and Climate Control Buttons			
1.12 Heater/Aid Conditioning working		2.12 Turning Signal Indicators			
1.13 Horn		2.13 Wiper Switch			
1.14 Seat Belt		2.14 Seat Adjustors			
1.15 Insurance and registration current		2.15 Touch Screen on Console			
1.16 First Aid Kit		2.16 Glove Compartments			
1.17 Fire Extinguisher		2.17 Drink Holders			
1.18 General Cleanliness (Garbage, etc.)		2.18 Seat Belts including Buckles			
Completed By:	Items needing attention and follow-up:				

Issue Date	05/28/2020	<b>Forms</b>	Originator	Brad Huber
Revision	Initial		Approver	IAMC IMSC

### Self-Isolation Plan Form

IAMC-TMX Indigenous Monitors participating in field activities during the Covid-19 pandemic must consider the possibility that they will need to self-isolate upon their return. Isolation will **only be required** if you have symptoms, if you have had a probable exposure to the virus, or upon order from a Public Health Official. Considerations for self-isolation (no symptoms) or isolation (symptoms or probable exposure) must be discussed with your Logistics Coordinator and/or Supervisor prior to deployment.

Name: \_\_\_\_\_ CVA: \_\_\_\_\_

Are you able to self-isolate or isolate at home? Read [How to isolate at home when you may have COVID-19](#) to guide your decision.

Yes  No

Do you need assistance to arrange food, medication, childcare, etc.?

Yes  No

Do you need accommodation assistance such as hotel?

Yes  No

Self-isolation or Isolation Address, if different than home address:

Estimated all additional costs (if any), including hotel stay, meals, and incidentals

Has this plan been discussed and approved by your IAMC-TMX IM Program Logistics Coordinator and/or supervisor?  Yes  No

\_\_\_\_\_  
IAMC-TMX IM Program Logistics Coordinator

\_\_\_\_\_  
IAMC-TMX Monitor

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date