Employers' Guide for Communicable Disease March 8, 2022

Introduction

The COVID-19 pandemic has had an enormous impact on the workplace, changing the way many workplaces operate in the effort to mitigate the risk of the disease. Although with increased vaccination the overall risk of COVID-19 transmission and serious consequences has been significantly diminished, it will continue to circulate and continue to present a hazard in the workplace for years to come. And while the recent emphasis has rightfully been on COVID-19, there are other communicable diseases which can have significant impacts in the workplace and can be effectively controlled by measures like those which have proved effective against COVID-19.

This guide is written to assist employers in addressing the ongoing hazard presented by communicable disease in the workplace. This includes baseline measures to address the background risk of communicable disease, as well as additional measures that can be implemented in times of elevated communicable disease risk in the community as a whole or in a specific workplace. It is focused primarily on respiratory illnesses, but many of the principles can be equally applied to other communicable diseases.

Note that this guide is not intended for workplaces such as health care and long-term care that, though they have a higher risk of communicable disease transmission, already have existing infection prevention and control programs in place to mitigate the risk.

What is communicable disease?

A communicable disease is any illness caused by an infectious agent or its toxic product that occurs through the transmission of an infectious agent from one person to another. The mode of transmission varies from one infectious agent to another, and there can sometimes be multiple routes for a given agent. **Direct transmission** occurs via physical contact or by droplets. **Indirect transmission** can be through longer range airborne spread,

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via another substance or 'vehicle' such as water or blood and body fluids, or through an insect 'vector' such as mosquitoes, fleas, and ticks. This guide is intended to address those communicable diseases, such as COVID-19, seasonal influenza and norovirus, that are spread through direct contact, droplet or airborne spread. Depending on the nature of the work environment, some workplaces may also need to consider vehicle or vector borne communicable disease such as Hepatitis B (via blood and body fluids) or Lyme Disease (via tick bites).

Legislation

Under Section 13 (1)(a) of the Nova Scotia Occupational Health and Safety Act., the employer is obligated to take every reasonable precaution to ensure the health and safety of persons at or near the workplace. This includes prevention efforts to eliminate or minimize the hazard presented by communicable disease in your workplace. Fundamentally, communicable disease in the workplace can be addressed by the same process as for other hazards in the workplace; identify the hazard, assess the risk, and implement controls. If you already have a Workplace COVID-19 Prevention Plan, it can serve as the basis for this process.

Similarly, under Section 17 (1)(a) of the Occupational Health and Safety Act, every employee, is obligated to take every reasonable precaution in the circumstances to protect the employee's own health and safety and that of other persons at or near the workplace.

In accordance with the Occupational Health and Safety Act, identification of hazards to health and safety, and effective systems to respond to them, must be performed in cooperation with the Joint Occupational Health and Safety Committee (Section 31(a)) or the Health and Safety Representative (Section 33(6)(a)).

In addition, many of the control measures discussed below have specific requirements in the Occupational Health and Safety Act and the various Regulations. These are noted where applicable.



Communicable disease prevention

1. Baseline prevention measures

For all communicable disease, there are a range of baseline measures that should be implemented in all workplaces. Outside of periods of increased communicable disease activity, these measures may be the only ones required in everyday operations.

- Provide **hand-hygiene facilities** with appropriate supplies. This may includeproviding hand-sanitizing supplies to supplement regular hand washing facilities. (See Section 20 of the Occupational Safety General Regulations) Use signage and policies to remind people to wash their hands regularly and use cough/sneeze etiquette (cough/sneeze into sleeve or elbow).
- Establish a reasonable **cleaning and disinfection** schedule, particularly with high traffic areas, high contact surfaces and washrooms. Provide accessible cleaning and disinfecting products to allow employees and others at the workplace to clean commonly used surfaces themselves. Ensure workers know how to use cleaning and disinfection products safely (See the Workplace Hazardous Materials Information System [WHMIS] Regulations)
- Ensure **ventilation systems** are adequate and operating as designed. (See Section 15 of the Occupational Safety General Regulations) As much as possible, increase the amount of fresh outside air supplied to the workplace.
- Implement **policies to address barriers/provide support to staff** so that they can avoid being in the workplace when they have symptoms that could mean they are infectious to others (e.g. fever and cough, vomiting and/or diarrhea).
- Monitor **Public Health** notices for any additional measures required during periods of increased communicable disease activity in the community at large or in specific locations.



2. Assess the hazard

Hazard assessment involves taking a careful look at the workplace to determine what potential harms exist for workers. The key points to be addressed in the hazard assessment for communicable disease are:

- The risk of exposure, and potential for infection, to communicable disease; and
- Potential **increased absenteeism** because of communicable disease, and any resulting risks introduced by staff shortages.

The **risk of exposure** will vary based on the specific communicable disease in question, and due to the unique aspects of each individual workplace. Some points to consider in your assessment include:

- How do workers interact with each other, as well as suppliers, clients, customers, anyone else at the workplace.
- Workplace layout. Is there unnecessary crowding or unintentional gathering of people?
- Business type and the services provided.
- Workplace location and environment.
- How much travel is required for work, especially internationally or to locations with known communicable disease risk.
- How workers perform their job duties.
- Are there workers (or others at the workplace) who may be more vulnerable to the effects of a communicable disease.
- Is there a vaccine available for the communicable disease in question? Are workers vaccinated?

This list is not exhaustive, so consider any unique aspects of your workplace and how they may affect the risk of communicable disease. Note that some of these measures may raise privacy and confidentiality issues. Seek expert advice on these issues as necessary.

Increased absenteeism is best evaluated by considering the jobs and processors that may be more hazardous if there are fewer workers to perform those tasks, or when any specially trained or competent workers who normally perform these tasks are not available due to increased workplace absence related to communicable disease.

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3. Implement controls

Once the hazard assessment is complete, the next step is to implement controls to address the risks of exposure identified in the hazard assessment. In many circumstances, the controls noted in **BASELINE PREVENTION MEASURES** above will be sufficient.

However, there may be aspects of the work that you do or the types of communicable diseases that could be encountered which require additional control measures. In addition, at times of elevated communicable disease activity in the community in general or specifically in the workplace, additional levels of control may be required. Whenever practicable, the most effective

or highest level of control should be used to reduce the risk of exposure to communicable disease. Most likely, you



will use a combination of control strategies to address the hazards identified. There may also be situations where other authorities, either regulatory or industry specific standards, recommend a different combination or hierarchy of controls in particular circumstances.

A range of potential controls to consider under the circumstances described above are given in the tables below. The list of controls is not prescriptive but is provided as a range of possibilities from which to choose the best options for controlling communicable diseases in your workplace. The list is also not exhaustive; you may find other control measures that work better in your unique circumstances.

Elimination		
Working remotely	• If possible, allow employees to work from home during times of increased communicable disease activity or if they are feeling unwell themselves.	
Employee self-assessment	Support employees so they are able to not attend work if they are sick.	
Limit unnecessary gatherings	Make increased use of virtual meeting options when possible.Limit non-essential workplace visits by all parties.	

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Substitution

Hazard substitution is a control strategy in which a material or process is replaced with another that is less hazardous. This is typically not applicable for communicable disease hazards.

Engineering controls		
Physical barriers	 Use protective barriers in situations where there is frequent interaction with multiple people, or where employees are working side by side for extended periods of time. 	
	 Barriers should be constructed with a hard material that does not allow liquid to penetrate or air to pass through (i.e. non-porous) and that is easily cleanable. 	
	• Partitions need to be large and high enough to extend well beyond the breathing zone of users (bubble with a radius of 30 cm (12 inches) around the nose and mouth).	
Ventilation	See BASELINE PREVENTION MEASURES	

Administrative controls		
Sick policy	See BASELINE PREVENTION MEASURES	
Distancing	• Consider restructuring physical layouts to allow greater distancing between people.	
Masks	 Even when non-medical masks are no longer mandated these may still be used in some circumstances: Some people may continue to wear a nonmedical mask. This choice should be respected. During times of seasonal communicable illness, namely November-March, or other times of elevated risk, masking may be required in the workplace to minimize risk of transmission. Masks may also be worn by an individual when they are unwell; this will help minimize the risk of transmission. 	



Crowding	 Minimize crowded areas for staff, including break and lunchrooms. Minimize crowding for public in waiting areas.
Signage	 Post appropriate signage to remind everyone to: Not to enter a workplace if sick. Wear a mask if exhibiting any respiratory symptoms. Practice good hand and respiratory hygiene. Any other specific control measures established in the workplace.
Control movement	 Direct traffic flow with the use of signage, floor decals, or other means. Where layout and space allow, establish separate entrances, and exits, particularly in busy areas.
Cleaning	 See BASELINE PREVENTION MEASURES Increase cleaning/disinfection schedules if necessary.
Hand hygiene	See BASELINE PREVENTION MEASURES
Vaccination	 Where an effective vaccine exists for a communicable disease, employers should encourage their employees to get vaccinated. In some situations, depending on the workplace and the communicable disease in question, vaccination policies may be appropriate.



Personal protective equipment (PPE)

Personal protective equipment such as face shields, gloves and respirators may be required depending on the work environment and the communicable disease under consideration. Note that a non-medical mask is not considered PPE, as it is intended primarily to protect others, not yourself.

Face shields and goggles	 Face shields or goggles maybe used in situations where a splash could result in communicable disease transmission.
Gloves	Gloves can provide an important barrier to contact transmission for some communicable disease
Respirators	 Some communicable diseases may require use of appropriately selected respiratory protection. See Section 13 of the Occupational Safety General Regulations and CSA standard CSA Z94.4, "Selection, Use, and Care of Respirators" for information on selection, maintenance, testing and training requirements.
Medical masks	 Some workplaces may require use of medical masks due to presence of individuals at high risk of communicable disease.

4. Communicate

Ensure everyone at the workplace is aware of the control measures in place for managing communicable disease. They must be informed of the steps being taken to mitigate the risk of communicable disease in the workplace, as well as any specific measures they must take as a result.

If employees are concerned about hazards in their workplace then they should report to their supervisor. If the matter is not remedied to their satisfaction, they must report it to their Joint Occupational Health and Safety Committee (JOHSC) / representative.



5. Evaluate and update

The measures being taken should be re-evaluated regularly to ensure it is adequately addressing the risk of communicable disease in the workplace. This can involve:

- Issues and concerns noted as part of workplace inspections or through the Joint Occupational Health and Safety Committee / Health and Safety Representative.
- New information or guidance from Public Health or the OH&S Division of Nova Scotia Labour, Skills and Immigration.
- Changes in the workplace that impact measures already in place or introduce additional risk of communicable disease exposure.

Questions

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