



Exposure Control Plan: COVID-19

2021

University of Saskatchewan

Updated: August 25, 2021



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1 Introduction: Purpose

The University of Saskatchewan Exposure Control Plan (ECP) for COVID-19 describes how to minimize exposure of all workers to infectious SARS-CoV-2 and the resulting COVID-19 disease. This plan is in compliance with the Occupational Health and Safety regulations, 1996, Section 85. Each working group must complete an ECP based on the nature of their work and potential exposure to COVID-19. Once completed, the plan must be posted in a central location within the work location.

2 Workers

Many workers encounter the risk of contracting COVID-19 from the SARS-CoV-2 virus. The short online course **COVID-19 Health and Safety** is **encouraged** for all workers to inform them on basic information about COVID-19.

For more information or assistance, contact Safety Resources at safetyresources@usask.ca or visit our website, <http://safetyresources.usask.ca>.

3 Tasks and Procedures

While all groups are at risk, those who wear masks as directed and receive a World Health Organization (WHO)-approved COVID-19 vaccine can greatly decrease their risk of exposure. Each group should assess the likelihood of exposure based on the tasks they must complete. Each group must assess the likelihood of exposure based on tasks.

Definition of Risk Levels:

1. Low risk: workers who typically have rare to no contact with infected people or materials (working remotely, working alone on campus)
2. Moderate risk: Workers who can have indirect contact with infected persons, or materials (working on campus with others, working with the public).
3. High risk: Workers who can have direct contact with infected persons or materials (health care workers).

A risk assessment must be carried out in a collaborative effort with worker(s) and supervisor(s). Please complete the assessment by filling out the table in Appendix A.

4 SARS-CoV-2

4.1 Infection Route and Risks

SARS-CoV-2 causes COVID-19 disease infecting the nose, throat, and lungs. It is most commonly spread from an infected person through:

1. Respiratory droplets generated through coughs or sneezes;
2. Close, personal contact, such as touching or shaking hands; and
3. Touching something with the virus on it, then touching the mouth, nose, or eyes before washing hands.

4.2 Symptoms

Common signs include:

Fever \geq 38 C	Chills	Sore throat
Cough	Aches and pains	Runny nose
Shortness of breath/difficulty breathing	Headache	Loss of sense of smell or taste

4.3 Infection Control Measures

Beginning Sept. 7, 2021, every member of the USask community—all students, faculty, and staff—will be required to show proof of at least one dose of a World Health Organization (WHO)-approved COVID-19 vaccine before coming onto campus. Proof of a second dose will be required by no later than Oct. 18. Individuals who are unable or who are unwilling to get vaccinated will be required to provide regular and frequent negative COVID-19 test results and to submit a daily symptom checklist in order to access our campuses.

All faculty, staff, students, visitors and contractors will be required to wear 3-ply single-use masks in all indoor spaces on USask campuses in Saskatoon, Regina and Prince Albert.

Indoor spaces include hallways, lobbies, libraries, classrooms, laboratories, meeting spaces, study spaces, elevators, recreation facilities, shared offices, washrooms, prescribed outdoors activities (ex. Kids Camps) and all other indoor USask spaces. **Masks may be removed in private work offices when the individual is the lone occupant of the space but if someone enters the office, you must don your mask.**

4.4 Limitations to Controls

Due to the properties of SARS-CoV-2, control measures cannot fully eliminate all risks. Vaccination and masks greatly help to reduce the risk of COVID-19 disease but some residual risk levels may remain.

5 Exposures

Anyone who tests positive for COVID-19 has a duty to self-isolate immediately at home or in another suitable environment for at least 10 days. Anyone identified by public health as a close contact of someone with COVID-19 may be required to self-isolate for 14 days from the date of having been exposed.

5.1 Fully Vaccinated Exemption from Self-Isolation

Unless ordered otherwise, anyone who is 14 days past their second dose of the COVID-19 vaccine at time of exposure and is asymptomatic does not need to self-isolate when named as a close contact of a COVID-19 positive person.

Persons who continue to experience symptoms during self-isolation should continue to isolate under the advice of public health. Anyone who is unvaccinated or has received only one dose of the COVID-19 vaccine still has the duty to self-isolate as directed by public health if they are named as close contacts.

Public Health may advise fully vaccinated close contacts to isolate if they are considered at higher risk of serious illness or for increased transmission, or they live in settings at risk of outbreaks. Self-isolation of fully vaccinated close contacts may also be advised in any health care setting, including long-term and personal care homes, and congregate living settings like group homes and corrections facilities.

There may still be a requirement for health care workers and employees/residents at facilities including long-term and personal care homes, corrections facilities and other congregate living settings to be tested, if they are deemed close contacts of someone who is COVID-19 positive.

6 Cleaning and Disinfection

The SARS-CoV-2 virus can be mainly spread through respiratory droplets in the air. Cleaning and disinfection are important to prevent the spread of the disease.

Common disinfectants include bleach solutions, quaternary ammonium (QUAT), alcohol (70%) and peroxide solutions. Vinegar, tea tree oil solutions, etc. are not proven to be effective disinfectants. Only products with an NPN or DIN have been approved by Health Canada.

If suitable cleaning solutions are not available please contact Safety Resources at safetyresources@usask.ca.

