



Exposure Control Plan:

SARS-CoV-2/COVID-19

2022

University of Saskatchewan

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1 Introduction: Purpose

The University of Saskatchewan Exposure Control Plan (EPC) 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.

2 Workers

Many workers encounter the risk of contracting COVID-19 from the SARS-CoV-2 virus. Resources and details on preventative measures for workers in prevention of infection with COVID-19 are available at covid19.usask.ca and from the [provincial government](#).

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 site-specific risk assessment can be utilized in a collaborative effort with worker(s) and supervisor(s) using 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 and aerosols generated when an infected person breathes, coughs, sneezes, sings, shouts, or talks;
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	Tiredness, aches and pains	Runny nose
Shortness of breath/difficulty breathing	Headache	Loss of sense of smell or taste

4.3 Infection Control Measures

As of August 22nd, masking is strongly preferred in all indoor spaces.

All faculty, staff, students, visitors and contractors are strongly encouraged to wear a 3-ply single-use masks in all indoor spaces on USask campuses and workspaces.

All persons must stay home if symptomatic or have been diagnosed with COVID-19. All persons must be symptom-free for 24 hours before returning to a USask campus and/or workspace. Isolation guidelines are available at covid19.usask.ca.

To monitor the impact of COVID-19 on our campus, all positive cases involving USask students, staff, and faculty, regardless of whether the person has been at a campus location or not, must be reported by following the steps outlined for [self-reporting confirmed cases](#). Direction for faculty and people leaders (supervisors) who have been notified of a positive case must follow the [Reporting Guidelines](#).

COVID-19 rapid antigen test kits are available to all faculty, staff, students, and visitors and can be picked up at provincial locations as well as on campus at:

- Murray Library
- Bookstore in Marquis Hall
- Fit Centre
- USSU Office

While vaccines are not mandatory for everyone at this time, USask strongly encourages faculty, staff and students on any USask campus or work site to obtain their COVID-19 vaccine booster(s) as soon as they are eligible.

On behalf of management, the Pandemic Response and Recovery Team continues to monitor USask case numbers and service disruptions, variant emergence, wastewater viral load, and public health data and public health expertise to determine the level of health and safety measures necessary to keep the campus and broader community safe

Health and safety information for faculty, staff, students, visitors, and contractors is available at covid19.usask.ca.

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

USask faculty, staff, and students who test positive for COVID-19 must self-isolate immediately at home or in another suitable environment for at five days from the date of test or 24 hours since any fever has resolved, without the aid of fever-reducing medications and all other symptoms are improving for at least 48 hours, whichever is later.

All personnel must be symptom free for 24 hours before returning to a USask campus or workspace.

5.1 Self-Isolation after Exposure

Unless ordered otherwise, anyone who is asymptomatic does not need to self-isolate when named as a close contact of a COVID-19 positive person. Regular testing with a rapid antigen testing is strongly recommended.

Persons who continue to experience symptoms during self-isolation should continue to isolate under the advice of public health.

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 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.

