



Health Care Section 21 Committee¹

Guidance Note for Workplace Parties #2 Issue: Pandemic Guidance Note

About This Guidance Note

This Guidance Note has been prepared to assist the workplace parties in understanding their obligations under the *Occupational Health and Safety Act* (“the Act”) and the regulations. It is not intended to replace the Act or the regulations and reference should always be made to the official version of the legislation.

It is the responsibility of the workplace parties to ensure compliance with the legislation. This Guidance Note does not constitute legal advice. If you require assistance with respect to the interpretation of the legislation and its potential application in specific circumstances, please contact your legal counsel.

While this Guidance Note will also be available to Ministry of Labour, Training and Skills Development (MLTSD) inspectors, they will apply and enforce the Act and its regulations based on the facts as they may find them in the workplace. This Guidance Note does not affect their enforcement discretion in any way

Process

This document has been reviewed by the management and labour representatives of the Ontario Health Care Health and Safety Committee under Section 21 of the Occupational Health and Safety Act (“the Act”) to ensure that appropriate, consistent information is made available to healthcare workplaces, and to support them in their review of legislative requirements and assessing and implementing best practices.

¹ The Ontario Health Care Health and Safety Committee under Section 21 of the *Occupational Health and Safety Act* (“Health Care Section 21 Committee”) was announced by the Minister of Labour (now the Minister of Labour, Training and Skills Development) on September 18, 2006. The July 11, 2006 Terms of Reference set out its mandate. The objective of the Health Care Section 21 Committee is to advise and make recommendations to the Minister of Labour, Training and Skills Development on matters relating to occupational health and safety of all health care workers in Ontario. The scope of the Health Care Section 21 Committee is to review occupational health and safety issues related to health care workers that have provincial impact.

Guidance Notes are presented to the Ministry of Labour, Training and Skills Development prior to publication. The recommendations made in Guidance Notes are not endorsed by the Ministry of Labour, Training and Skills Development but are intended to clarify legislation and cite best practices.

Purpose of this Guidance Note:

Health Care Guidance Notes are intended for all healthcare organizations, to provide advice to workplace parties related to legislative requirements and best practices applicable to the prevention of illness and injury to health care workers. Health Care Guidance Notes may be of assistance to all organizations that provide healthcare, treatment, diagnostic services, personal care and/or supportive services in all healthcare organizations, home and community service agencies and emergency medical services.

The intent of Guidance Notes is to assist the workplace parties in sharing best practices. Guidance Notes are also intended to assist other parties who have decision-making roles that ultimately impact occupational health and safety (OHS) in the health care sector.

See Appendix B for the Section 21 membership.

Introduction

Employers should review and evaluate their pandemic plans, update training and education programs, and ensure workers requiring masks and/or respirators are instructed and trained on proper use and maintenance and fit-tested, as needed. It is recommended that stockpiles of personal protective equipment (PPE) be reviewed every 3 months to ensure that all items are current and that there is adequate supply.

Workplaces covered under the Health Care and Residential Facilities Regulation (O. Reg. 67/93) shall comply with section 10 and ensure that where a worker who is required by his or her employer or by the Regulation to wear or use any protective clothing, equipment or device, the worker shall be instructed and trained in its care, use and limitations before wearing or using it for the first time and at regular intervals (i.e. annually) thereafter. The worker shall participate in such instruction and training. Subsection 10(2) requires that tight fitting respirators (such as N95 or better filtering face piece respirators) be fit tested, and provides other requirements related to personal protective equipment that is required to be worn by workers.

The Ministry of Health (MOH) is the provincial lead for pandemic response and works collaboratively with the Ministry of Labour, Training and Skills Development (MLTSD) and the Ontario Agency for Health Protection and Promotion/Public Health Ontario (PHO) to develop important information and clinical guidance, which includes occupational health and safety information and topics. The role of the MLTSD is to set, communicate and enforce Occupational Health and Safety laws that are designed to reduce or eliminate workplace injury or illness.

Relevant Legislative and Regulatory Provisions

Employers have multiple duties to protect workers under the OHSA, including the duty to take every precaution reasonable in the circumstances for the protection of a worker under clause 25(2)(h) of the Occupational Health and Safety Act. Employers also have a duty under clause 25(2)(a) to provide information, instruction, and supervision to a worker to protect the health or safety of the worker.

Sections 8 and 9 of the Health Care and Residential Facilities Regulation under the Occupational Health and Safety Act requires written measures and procedures for the health and safety of workers to be developed, established and put into effect in consultation with the Joint Health and Safety Committee (JHSC) or Health and Safety Representative (HSR). Such measures and procedures may include, but are not limited to the following:

- Safe work practices
- Safe working conditions
- Proper hygiene practices and the use of hygiene facilities
- The control of infections
- Immunization and inoculation against infectious diseases
- The use of appropriate antiseptics, disinfectants, and decontaminants
- The hazards of biological, chemical, and physical agents present in the workplace including the hazards of dispensing or administering such agents
- Measures to protect workers from exposure to a biological, chemical, or physical agent that is or may be a hazard to the reproductive capacity of a worker, the pregnancy of a worker or the nursing child of a worker
- The proper use, maintenance, and operation of equipment
- The reporting of unsafe or defective devices, equipment, or work surfaces
- The purchasing of equipment that is properly designed and constructed
- The use, wearing and care of personal protective equipment and its limitations
- The handling, cleaning and disposal of soiled linen, sharp objects, and waste

Subsection 116(2) of the regulation requires measures and procedures regarding the manner in which waste materials contaminated by hazardous infectious agents that are likely to endanger the health or safety of a worker are collected, identified, transported, handled, stored, and treated.

Employers should consider ongoing communication with workers, volunteers, students, residents, patients, families, and visitors about infectious diseases and how to prevent the spread of infection.

Section 10 of the Health Care and Residential Facilities Regulation stipulates where a worker who is required by his or her employer or by this Regulation to wear or use any protective clothing, equipment or device, they shall be instructed and trained in its care, use and limitations before wearing or using it for the first time and at regular intervals thereafter. The worker shall participate in such instruction and training. Training records should be maintained. The record should include information such as the name of the individual who completed the program, the date of completion and the name or a brief description of the training course or program. For more information see the MLTSD website: https://www.labour.gov.on.ca/english/hs/pubs/training_guide/records.php

For a link to occupational health and safety legislation and other resources, see Appendix A. It is important to note that there may be additional legislation, standards, or requirements that are applicable to the respective sector.

Guidance for Health Care Workplaces - Pandemic Planning Review

All organizations in the health care sector should have pandemic plans. For those workplaces covered under the Health Care and Residential Facilities Regulation (HCRFR), measures and procedures related to pandemic plans should be developed in consultation with their Joint Health and Safety Committees (JHSC) or Health and Safety Representatives (HSR). For other workplaces not covered by the HCRFR, the Occupational Health and Safety Act requires employers to take every precaution reasonable in the circumstances for the protection of a worker. This should include the preparation of pandemic plans where indicated by a hazard assessment. The fundamental method for protecting workers is through application of the hierarchy of controls. For more information on the hierarchy of controls, see Guidance Note #5 "[Application of Hazard Control Principles, including the Precautionary Principle to Infectious Agents](#)".

To protect worker health and safety, evaluation of pandemic plan components should be done at least annually and, as a best practice, should include, but is not limited to:

- reviewing the pandemic plan for consideration and adoption of the precautionary principle as appropriate.
- completing audits on every component of the plan to ensure clear responsibility, transparency, and accountability.
- reviewing the circumstances where people are in contact, either directly or indirectly. This review should consider location, time, expected duration of contact and the evaluation of hazards arising from that contact.
- reviewing workflow and work practices during a pandemic to identify gaps and challenges which may have emerged.
- a process for timely communication of all applicable directives and practice directions, including, without limitation, federal, provincial, or municipal requirements, the timelines for such requirements, and the scope of any affected parties (e.g. patients, residents, workers, students, volunteers, JHSC/HSR, contractors or visitors).
- reviewing communication tools, testing, exposure investigations and processes during a pandemic to identify what worked or did not work, why, and what could be done differently (e.g. address any identified deficiencies).
- reviewing controls of facility access/entrances during a pandemic.
- reviewing patient, resident, student, volunteer, visitor, contractor, and worker screening procedures during and throughout the pandemic.
- reviewing plans for vaccination campaigns to ensure that workers are aware of dates, times and locations of workplace or community vaccination clinics.
- understanding, reviewing, and complying with public health directives, legislation, and best practices.
- reviewing occupational health and safety and infection control training including a thorough review of the need for equipment such as source control masks and personal protective equipment (PPE), including appropriate masks, gloves, eye protection (face shield/goggles), isolation gowns, and respirators.

- reviewing, in consultation with the JHSC/HSR, PPE stockpiles, including respirators, at least annually to ensure that all items are current and that there is adequate supply. As a best practice, it is recommended that this is done every three months.
- consideration for appropriate employee mental health and wellness supports to be included in the pandemic plan
- reminding workers about safe working procedures, PPE use and care, where to find supplies, and how to keep themselves safe.
- sourcing of alternate PPE items which are to be made available to workers who have verified health concerns.
- reminding patients, residents, volunteers, students, workers, contractors and visitors of infection control and prevention (IPAC) practices, and the steps they should take to minimize the spread of infection and keep themselves safe.

In addition to the requirements to ensure that:

- workers who are issued tight-fitting respirators are fit-tested and have received regular respiratory protection program training (at least every two years).
- training on the measures and procedures of the pandemic plan was developed in consultation with the JHSC/HSR and all workers have received initial training and refresher training.

As a best practice, if a pandemic plan is not already developed, develop a plan in consultation with the JHSC or the Health and Safety Representative. Be safe! Be prepared!

It is important to continue to focus on pandemic preparedness and to adapt organizational responses as the pandemic evolves, with well-developed and integrated plans for all levels of alert. To ensure operational diligence, it is recommended that the employer designate one individual to monitor the situation, update organizational directives, and provide updated information to management and the JHSC/HSR.

For additional information, contact the MLTSD office nearest you. Please visit the MLTSD web site at: www.labour.gov.on.ca



Appendix A

Legislation, Codes, Standards and Guidelines

Workplace parties, when following this guidance note, should consider existing legislation, codes, standards, and best practices such as the following:

Statutes and Regulations

1. Occupational Health and Safety Act, R.S.O., 1990 c. O.1
2. Health Care and Residential Facilities, O. Reg. 67/93
3. Needle Safety, O. Reg. 474/07
4. Occupational Health and Safety Awareness and Training, O. Reg 297/13
5. Control of Exposure to Biological or Chemical Agents, R.R.O. 1990, Reg. 833
6. Notices and Reports under Sections 51 and 53.1 of the Act, O. Reg 420/21
7. Any other applicable legislation

Current versions of the Act and its regulations are available for free download from the Government of Ontario e-Laws site: <https://www.ontario.ca/laws>

Other Resources

Emergency Planning and Preparedness site:

<http://www.health.gov.on.ca/en/pro/programs/emb/resilience.aspx>

COVID-19 (coronavirus) in Ontario:

<https://covid-19.ontario.ca>

Building a Ready and Resilient Health System; Ebola Step-down and Provincial Baseline Requirements for Infectious Disease Threat:

http://www.health.gov.on.ca/en/pro/programs/emb/docs/Resilient_plan_2016_en.pdf

[CSA Z1003 Psychological Health And Safety In The Workplace](#)

[CSA Z45001, Occupational Health And Safety Management Systems](#)

CSA Z94.4 Selection, Use and Care of Respirators, available at [csagroup.org](https://www.csagroup.org)

Reference to this CSA is a best practice for the proper selection, use and care of respirators and outlines the components for an effective respiratory protection program. It is recommended that the respiratory protection program be reviewed at least annually.

Health care workplaces may also find it useful to refer to the Ministry of Health and/or Ministry of Long-Term Care documents/websites on emergency pandemic planning and preparedness, including Chief Medical Officer of Health Directives.

Other Information

Web sites of the various healthcare unions, employers, associations and Health and Safety Associations also have additional information, including documents that outline a step-by-step process to help Joint Health and Safety Committees and Health and Safety Representatives ensure workplace compliance and sample written recommendations that can be tailored to the needs of individual workplaces.



Appendix B

Health Care Guidance Notes have been prepared and approved by representatives of the Members of the Health Care Section 21 Committee.

Committee membership:

Members for Organized Labour:

- Canadian Union of Public Employees (CUPE) <http://www.cupe.on.ca>
- Ontario Federation of Labour (OFL) <http://www.ofl.ca>
- Ontario Nurses' Association (ONA) <http://www.ona.org>
- Ontario Public Service Employees Union (OPSEU) <http://www.opseu.org>
- SEIU Healthcare <http://www.seiuhealthcare.ca/>
- Unifor <http://www.unifor.org/en>

Members for Employers:

- AdvantAge Ontario <https://www.advantageontario.ca/>
- Ontario Community Support Association (OCSA) <http://www.ocsa.on.ca>
- Ontario Home Care Association (OHCA) <http://www.homecareontario.ca>
- Ontario Hospital Association (OHA) <https://www.oha.com>
- Home and Community Care Support Services (HCCSS) <http://www.lhins.on.ca/>
- Ontario Long Term Care Association (OLTCA) <http://www.oltca.com>

Observers:

- Ministry of Community and Social Services (MCSS)
- Ministry of Health (MOH)/Ministry of Long-Term Care (MLTC)
- Public Services Health and Safety Association (PSHSA)

Facilitator:

- Ministry of Labour, Training and Skills Development (MLTSD)