WHO TO CONTACT:

For work-related questions not addressed in the FAQs, contact the Workplace Health & Safety Division (BC Public Service Agency) using MyHR.

For non-medical-related questions about COVID-19 including community protection and reporting options, call 1-888-COVID19 (1-888-268-4319). Service is available from 7:30 a.m. to 8:00 p.m. seven days a week.

Call 811 or your primary care provider for personal medical advice following exposure or if you are experiencing symptoms of COVID-19.

For general health-related questions from Canadians, call 1-833-784-4397. Service is available from 7:00 a.m. to midnight ET.

For general information on COVID-19, see the BC Centre for Disease Control online resources.

If you think you may have symptoms, the BC Centre for Disease Control’s self-assessment tool can help you determine if you need further assessment or testing for COVID-19.

The most current information related to the BC Public Service’s response to COVID-19 (including this document) is available on the MyHR website.
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Part 1: Vaccinations

The Provincial Health Officer recommends British Columbians receive both doses of the COVID-19 vaccination and booster as soon as can be scheduled to control COVID-19 and the evolving variants in circulation.

Effective November 22, 2021, the BC Public Service requires employees to provide proof of vaccination. More information on the proof of vaccination requirements is available on MyHR.

1. Where do I find out about the COVID-19 immunization programs?

The COVID-19 vaccine rollout, including available vaccines, their application and the sequencing of administration is part of the provincial pandemic response and is planned and managed by Public Health. Updates to provincial planning are expected with changes to vaccine supply. Information is on the BCCDC and Immunization Plan for British Columbia page.

Widespread participation in COVID-19 vaccination is the key Public Health recommendation to British Columbians for controlling COVID-19 in our communities and workplaces. The higher the vaccination rate, the stronger the community protection from existing variants and lowering the risk of new variants. High levels of community protection also reduce the risk for children under five years of age, as they are not yet eligible for vaccination.

COVID-19 vaccines have been developed and authorized for use in preventing severe illness and death from COVID-19 infection. Increasing participation levels in vaccination are an important part of the Public Health plan to end the pandemic.

A guideline on how to identify trusted vaccine information is available on the BCCDC website.

2. When will I get a booster vaccine?

A booster dose is an additional shot of vaccine that helps you maintain and lengthen your protection against COVID-19. When you get a booster dose, you're helping to protect you and the people around you from COVID-19. The timing of your booster dose is based on your risk level of getting COVID-19, your age and the timing of your second dose.

More information on booster vaccines can be on the B.C. Provincial Vaccination and Immunization page.

Updated answers to common questions on COVID vaccines are on the ImmunizeBC website. Safety data now exists for millions of doses of COVID vaccines, providing valuable clinical information for health care providers. Anyone with concerns should discuss vaccination guidance with their health care provider.
Individuals with allergies to components of the vaccine are encouraged to speak with an allergist for medical advice. The PHO has provided guidance to practitioners in B.C. outlining the rare situations when vaccination is contraindicated.

3. Will I be able to take leave to get my booster vaccination?

Yes. All employees may take reasonable time off as paid leave to get the COVID-19 vaccine booster or to take their dependent children to get the COVID-19 vaccine booster. The leave does not need to be entered into Time and Leave.

All employees may take reasonable time off as unpaid leave to take someone considered a close relative, whether by blood or not, who needs the employee’s assistance to get the COVID-19 vaccine.

Please discuss scheduling your leave with your supervisor. Provide as much notice as possible to your supervisor so they can consider and address any operational impacts before approving your leave. Supervisors are encouraged to support employees who require leave to get the COVID-19 vaccine or assist dependents in getting the COVID-19 vaccine and should be flexible in approving the leave.

Please contact AskMyHR with any questions.

4. Are vaccinations mandatory for the BC Public Service or for certain positions in the BC Public Service?

On October 5, the BC Public Service announced all employees are required to provide proof of full vaccination, effective November 22, 2021. The policy, the process for disclosing proof of vaccination, and supporting resources were released November 1. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

5. Do I have to tell my supervisor or my ministry I have been vaccinated?

Effective November 22, 2021, all employees need to provide proof of full vaccination using the B.C. Vaccine Card. For more information, please refer to COVID-19 vaccination policy for BC Public Service employees.

6. Are clients or public coming to our workplace or accessing government services required to provide proof of vaccination?

No. Due to the essential nature of services provided by the BC Public Service, proof of vaccination is not required for clients or the public. The BC Public Service continues to have layers of protection in place at our offices and all our workplaces are required to have a Communicable Disease Prevention Plan and safety measures to protect against COVID-19 transmission.
7. Once I get vaccinated or receive a booster will I still have to follow Public Health guidance and orders? [UPDATED]

Yes. All employees must follow orders issued by the Provincial Health Officer (PHO) and regional Medical Health Officers (MHO) to reduce the transmission of COVID-19. BC Public Service workplaces require a Communicable Disease Prevention Plan that complies with PHO orders and any MHO orders for regions or smaller geographic areas. Workplaces should review all orders and check MyHR for information on any new COVID-19 prevention protocols.

Employees must also continue following Public Health guidance on self-isolation and health monitoring even after being vaccinated. Exposure and self-isolation information, including length of time before resuming work and other daily activities after experiencing COVID-19 or other illness symptoms, is addressed in Part 3 of these FAQs.
Part 2: Workplace Safety and Working from Home

8. My child’s school or daycare is closed or has moved to online learning for a period of time. How do I manage this? [NEW]

Where it is operationally feasible, ministries are expected to support employees who want to work from home and should be flexible in considering alternative work arrangements, including requests to work from home and look after children. Where an employee working from home is also the primary childcare provider, supervisors will work to explore options to accommodate an employee’s needs while maintaining operational requirements to the extent possible.

Where an employee is sick or taking any form of leave, they are expected to access their leave banks as per usual. No employee is required to work from home except those required to self-isolate.

9. How do regional Medical Health Officer Orders impact our workplaces?

Provincial control of the COVID-19 pandemic depends on ongoing regional health monitoring and guidelines. Medical Health Officers are delegated to implement orders as necessary to control and limit the spread of COVID-19 in their health regions. Increasing transmission in a region may mean specific regional guidance that may result in additional workplace communicable disease controls.

Workplaces must implement any orders from their region’s Medical Health Officer and document them in their Communicable Disease Prevention Plans.

10. Do I need to do a workplace Daily Health Check? [UPDATED]

Mandatory daily health checks have been reinstated as of January 17, 2022. In the December 24, 2021 briefing, Public Health recommended that anyone who has even one symptom of COVID-19 should stay at home and follow testing guidance. All citizens of B.C. should be reviewing their health prior to leaving their residence and stay home if they feel unwell.

Workplace Health and Safety recommends workplace Daily Health Checks (DHC) as a regular part of the policies and practices in your Communicable Disease Prevention Plans. DHCs are a simple and effective means of checking and reminding employees of their obligation to stay home if sick, and of fulfilling the employer’s obligation to minimize communicable disease transmission in the workplace. In regions of the province with regional MHO Orders, Daily Health Checks are mandatory to attend and work from a BC Public Service office.

11. Is it safe to return to the workplace? [UPDATED]

Safe work practices and making safety management a priority keep the COVID-19 risk in BC Public Service workplaces low. BC Public Service workplaces have promptly implemented or adapted to public health and WorkSafeBC guidelines to keep workplaces safe throughout the pandemic. The
Public Service Agency actively reviews Public Health COVID-19 and safety updates and provides ministry leaders and supervisors updated guidance.

The requirement for all employees to provide proof of full vaccination effective November 22, 2021 provides an added layer of protection.

Consistent with current guidelines, BC Public Service workplaces have Communicable Disease Prevention Plans in place, or exposure control plans where required to control infectious disease risk. These plans are designed to reduce the risk of transmission of respiratory illnesses and other infectious diseases in the workplace.

On October 29, 2021, the PHO issued an update to the face covering/mask order, clarifying required mask use in indoor public settings. This applies to BC Public Service workplaces where services are provided to the public/clients.

Layers of protection in the workplace include:

- Symptomatic employees are not to attend the workplace and leave immediately if they begin to feel unwell. Employees have benefit plans to support them
- Mandatory Daily Health Checks at the start of the workday reinforce the direction to stay home if experiencing illness symptoms
- Heating and ventilation systems are maintained and comply with ASHRAE standards for circulating and exchanging air. Safety specialist advice is readily available to resolve HVAC issues
- Employees are supported with leave benefits to attend and participate in vaccination clinics
- Hand sanitizer is supplied, and cleaning protocols and supplies are in place for commonly shared surfaces
- In many workplaces, physical barriers between employees and clients remain in place
- Protocols are in place to manage symptomatic clients who need to attend a service delivery office
- Employees must wear a mask in all indoor areas of their workplace, except when seated at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation.
- Regular reporting and guidance updates from Public Health continues to shape the BC Public Service Communicable Disease Prevention Plans
- All public service staff require full vaccination by November 22, 2021 (See HR Policy 25)
- Contractors and others who enter employee-only areas of public service indoor workplaces are required to be fully vaccinated by December 13, 2021 (See HR Policy 4)

12. What is the current direction on returning to the workplace and remote work? [UPDATED]

As announced Lori Wanamaker’s January update, the BC Public Service has deferred the implementation of telework agreements and a new date has not been set at this time.
Our workplaces remain safe and open for those who need to or choose to be there, and those who wish to continue working from home may continue to do so for the time being.

BC Public Service workplaces are maintaining physical barriers during Step 3, as recommended by Dr. Henry. Workplace Communicable Disease Prevention Plans are being updated to reflect the Provincial Health Officer order requiring occupancy limits and masks to be worn in indoor public spaces and in those parts of workplaces where services are provided to the public/clients.

Other safety protocols continue to be in effect. These include checking for symptoms before attending work and staying home when symptomatic, handwashing, and workplace cleaning.

More information on the approach to flexible work arrangements is on MyHR.

13. I am hearing about COVID-19 Omicron cases here in B.C. Is there anything my workplace should do differently? [UPDATED]

COVID-19 variants, including Omicron, spread the same way as the original COVID-19 virus. Because of the increased transmissibility of the Omicron variant, Public Health issued new orders in late December 2021 and early January 2022.

Workplace Communicable Disease Prevention Plans include infection control and hygiene practices to decrease the risk of infection. The COVID-19 protocols used in BC Public Service workplaces since March 2020 continue to help protect employees. These include appropriate mask use, symptom checks, staying home when not feeling well, washing your hands, clean workspaces, physical distancing, barriers and more.

Public Health continues to monitor and provide weekly updates to report on evolving COVID-19 trends in B.C. health regions. Workplaces must update their Communicable Disease Prevention Plans to include any orders and guidance from regional Medical Health Officers across B.C. or Provincial Health Officer orders. Information on updating Communicable Disease Prevention Plans is on the COVID-19 information for BC Public Service employees page.

Stay informed, review your Communicable Disease Prevention Plan, monitor the health bulletins for new information and check for information when your booster dose is available.

14. Can we hold in-person staff meetings in our workplace? [UPDATED]

While in-person meetings are discouraged, workplaces may hold staff meetings with the staff who are physically attending the workplace daily. All other participants, for example staff who are teleworking, guest speakers or staff from other worksites or ministries must attend virtually. The workplace must follow their communicable disease prevention plan for the meeting, including mask wearing for all participants, even with reduced meeting room capacity and distancing between participants.
15. Our workplace wants to hold a meeting or learning event for 60 attendees at a rental venue, such as a hotel meeting room. Do attendees have to provide proof of vaccination?

Due to the emergence of the Omicron variant, at this time BC Public Service workplaces should use virtual tools for meeting wherever possible and avoid gatherings. This will be reviewed and updated when new public health information is available.
16. Are masks required in BC Public Service workplaces for clients or the public? [UPDATED]

Employees must wear a mask in all indoor areas of their workplace, except when at their workstation. Employees may choose to wear a mask anytime and anywhere in their workplace, including at their workstation. Public service staff are also required to use masks when two metres of physical distancing cannot be maintained from another person and there is not a physical barrier to prevent the transmission of COVID-19. This includes elevators, lobbies, hallways, stairwells, corridors, bathrooms, break rooms, kitchens, meeting rooms, file rooms, photocopier areas, Leading Workplace Strategy space and so on.

Staff do not have to wear a mask while seated at their workstation if they are two metres from others or they are separated by a barrier such as plexiglass or a cubicle divider.

Workplace Health and Safety has published an updated guide for mask use in BC Public Service workplaces, found on the COVID-19 information for BC Public Service employees page.

Since many ministries provide essential services to the public that is not available anywhere else, clients are not denied service based on mask wearing or vaccination status.

The most effective protection from COVID-19 transmission in the workplace is physical distancing or physical barriers between individuals. Barriers and physical distancing also allow protection for workers to serve clients who are unable to wear masks or where masks may interrupt communication.

Employees should speak with their supervisor about their ministry’s procedures to support client mask-wearing and the ministry procedures to manage unmasked clients seeking services.

17. Do we have to review our communicable disease prevention plan because of the Provincial Health Officer’s Orders or the omicron variant?

Yes. Workplaces must use the communicable disease prevention plan update on MyHR to review and update their communicable disease prevention plan to increase protection measures during this time of high community transmission. Ensure staff are notified and trained in the new COVID-19 safety protocols for the workplace and post your updated communicable disease prevention plan.

The PSA continues to monitor changes and work with public health authorities on any changes affecting the workplace. Information on regional health orders is posted on the COVID-19 information for BC Public Service employees page.
18. Is it likely that building ventilation systems are a route of transmission for COVID-19?

The Public Health Agency of Canada states the coronavirus (SARS-CoV-2), the virus that causes COVID-19, is not known to spread through ventilation systems or through water.

Full knowledge of how the virus spreads is continually developing as new research and information becomes available. The BC Centre for Disease Control currently states:

“COVID-19 is spread by the respiratory droplets an infected person produces when they breathe, cough, sneeze, talk, or sing. If you are in contact with an infected person, the virus can enter your body if droplets get into your throat, nose, or eyes.

Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.

Smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission.”

The American Society of Heating Refrigerating and Air Conditioning Engineers (ASHRAE) recommended that building HVAC systems be checked and maintained to industry standards to ensure healthy indoor air quality. The Ministry of Citizens’ Services Real Property Division oversees and manages HVAC systems for most provincial public service workplaces and is following and adhering to the guidance of ASHRAE and WorkSafe BC.

Since the beginning of the COVID-19 pandemic, HVAC systems in all government buildings have been maintained and operated to industry standards. For example, maintenance work (e.g., filter changes) operating schedules for building systems (when systems turn on and off) and fresh air intake levels have not been reduced, even with major decreases in building capacity and occupancy.

19. Is COVID-19 transmitted in the air?

Evidence to date suggests that most transmission of the coronavirus that causes COVID-19 disease occurs because of close contact interactions between people (exposure to droplets and aerosols at close range).

According to the BC Centre for Disease Control, “Droplets come in a wide range of sizes and they behave differently depending on their size. Larger droplets are heavier, and they usually fall to the ground within two meters. Smaller droplets, also known as aerosols, are lighter and they can float in the air for longer.”

The virus does not appear to be typically transmitted via aerosols, but may transmit opportunistically in close range, or over a longer distance where there is a high source load of virus in the air, and in poorly ventilated environments where there is insufficient air exchange to properly dissipate accumulating viral particles.
Our workplaces use professionally designed and maintained mechanical ventilation to provide heat, air conditioning and air exchange to all occupied areas of our workplaces, helping mitigate any possible risk of aerosol transmission.

**BCCDC** says “smaller droplets can collect in enclosed spaces when there is not enough fresh air. Indoor accumulation is greater when more people share a space, spend more time together, or exercise, sing, shout, or speak loudly. These conditions can lead to COVID-19 transmission.”

For indoor spaces, measures for reducing transmission risk focus on reducing the “three Cs” (close spaces, crowding, close contact) and reducing the duration, intensity, and frequency of contacts with others. These things together reduce the opportunity for viral exposure and the intensity of exposure, should it occur.

**20. I supervise an employee who has indicated they cannot or don’t want to return to the workplace. How do I address this? [UPDATED]**

Employees are encouraged to work from home, if operationally feasible, until further notice. More information on flexible work options is available on [MyHR](#).

Supervisors are encouraged to remain in communication with employees working remotely and provide updates on the status of the workplace and the number of employees returning.

If there is an operational requirement for the employee to be in the workplace, the supervisor, with the support of the Public Service Agency, will determine if there is a duty to accommodate. They must assess the employee’s situation, including medical information and if they are able to provide information as to why they cannot return to the workplace.

Supervisors in this situation should have a discussion with the employee about their circumstances, including their limitations and restrictions and should discuss safety procedures at the workplace. If this discussion does not resolve the employee’s concerns, the supervisor should contact MyHR for assistance. For further information see the [Managers’ Guide to Reasonable Accommodation](#).

In cases where the employer is not required to make an accommodation, ministries may consider alternative work arrangements depending on operational requirements and the employee’s individual circumstances.

**21. Managing employees’ workplace needs can involve collecting medical information. How is this protected?**

In responding to an employee’s request for an accommodation, the supervisor, with assistance from MyHR, may require information or clarification from the employee’s healthcare providers. Employees are required to provide relevant and appropriate information to support their request for accommodation. In providing this information, the employee is consenting to the employers use of this information for the purposes of responding to their accommodation request.
Supervisors, with assistance from MyHR, should ensure that information requests are constructive and respectful of employee privacy and maintain confidentiality.

The long-term practice is for employees to provide this information to supervisors with doctors’ notes or the supervisor’s (non-confidential) portion of the Medical Certificate (former ST02 form). Supervisors should maintain this information in a secured location in the employee’s workplace supervisory file (as per section 30 of the Freedom of Information & Protection of Privacy Act (FOIPPA), s. 19(1) of Information Management Act and Government Core Policy, Information Security Policy). Information provided by employees in support of communicating the employee’s pandemic related medical limitations and restrictions should be handled in the same secure manner. The sharing of any information about an employee should only occur on a need-to-know basis and only with those authorized to receive it under FOIPPA.

22. Are there any restrictions when using BC Public Service gyms or other indoor exercise spaces? [UPDATED]

Gyms and exercise areas may reopen on January 20, 2022 with increased protocols in place including occupancy limits and a detailed hygiene plan. Gym use must be monitored by the worksite for adherence to the hygiene plan and occupancy limits. If this cannot be done the gym cannot be reopened. See the COVID-19 Tools and Resource page for current COVID-19 gym protocols.
Part 3: Employee Exposure and Self-Isolation

[UPDATED]
Due to the emergence of the Omicron variant, Public Health may be unable to contact trace all COVID-19 positive cases. Public Health has directed that if you have any COVID-19-like symptoms you should presume it could be COVID-19 and:

- Stay at home! As with any illness symptoms, stay at home and do not attend an indoor public service workplace.
- Every day that you are experiencing symptoms, use the BC Thrive app (COVID-19 self-assessment tool) to gauge if your symptoms suggest a COVID-19 test is warranted.
  - If the result from the BC Thrive app is that you don’t need to get tested for COVID-19, stay at home until your symptoms resolve and return to work and other daily activities when you feel better
  - If the result from the BC Thrive app is a recommendation to get a COVID-19 test and self-isolate, assume you have COVID-19 and do the following:
    - Self-isolate for at least five days from the day your symptoms started if you are fully vaccinated, or at least 10 days if not fully vaccinated
    - Notify workplace close contacts (as defined below) that you had in the 48 hours prior to your symptoms appearing; or if you are asymptomatic 48 hours prior to your test
      - Close contact means: indoor contact, less than two metres apart while not wearing a mask, and without a barrier, for more than 15 minutes cumulatively in a day
      - Continue to monitor your symptoms and if they worsen engage with the health system and seek care
    - After the self-isolation period (five days from symptom onset for fully vaccinated, 10 days if not), Public Health advises you to wear a mask in all situations, even in settings where a mask may not be required, for a further five days after ending isolation.

If a member of your household has COVID-19-like symptoms, or you are contacted by someone informing you that you are a close contact:

- If you are fully vaccinated continue to monitor your health daily for symptoms
  - If you are symptom-free, you may attend the workplace and go about your daily activities
  - If you have even one illness symptom, you must not attend the workplace
  - If you begin to experience symptoms while at work, inform your supervisor and leave the workplace immediately
  - Use the BC Thrive app (COVID-19 self-assessment tool), call 811 or contact your primary care provider for advice
- Those who are not yet fully vaccinated, must self-isolate for 10 days
23. I have an employee who has tested positive for COVID-19. What does this mean for co-workers? Do we need to close that workplace? [UPDATED]

To reduce the risk of exposure to others, employees who are newly diagnosed with COVID-19 or have any COVID-19 symptoms should not attend the workplace.

Public Health contact tracers will not be able to complete all contact tracing due to the rise of the Omicron variant. The ill or symptomatic worker must contact anyone at the workplace that they had close contact with in the 48 hours prior to their symptoms appearing. A close contact is a person that the ill/symptomatic worker was within two metres of for more than 15 minutes unmasked, cumulatively in a day.

Fully vaccinated staff who are close contacts will need to monitor their health daily for symptoms. For 14 days after they have close contact with a COVID-positive or symptomatic individual. If symptom-free, staff may attend the workplace. If staff have even one illness symptom, they must not attend the workplace.

Cleaning requirements are determined using the COVID-19 Exposure Control and Cleaning Protocols on MyHR.

24. What does “close contact” mean? [UPDATED]

Public Health determines whether an individual has had a high-risk exposure or close contact. New Public Health guidelines have reduced the self isolation requirements for vaccinated close contacts.

In the Public Health exposure assessment, a high-risk exposure or close contact is defined as:

- Anyone who has been within two metres of a COVID-19 case for more than 15 minutes, unmasked, cumulatively in a day
- Anyone who is exposed to the infectious body fluids of a COVID-19 case
- Anyone who is a household-like contact, such as:
  - Anyone who lived with someone with COVID-19 before they started isolation
  - Anyone who lives with the COVID-19 case during their isolation period if they are unable to isolate adequately in the household
  - Anyone who has direct physical contact with a COVID-19 case, including the case's caregiver, an intimate partner or a child receiving care from the case, even if not residing in the same household
  - Others, as determined by the Medical Health Officer. Factors to consider in determining if someone is a household-like contact include the number of hours or days spent with the COVID-19 case, sleeping arrangements, etc.
- A healthcare worker who provided direct physical care to a case, or a laboratory worker handling COVID-19 specimens without appropriate use of recommended PPE and infection prevention and control practices
- Anyone who has been identified by the local Medical Health Officer as a possible high-risk contact
With the policies and protocols in your Communicable Disease Prevention Plans, close contacts should not occur in your workplace. If workplace close contacts are identified, supervisors should investigate to ensure all COVID-19 safety measures are being followed appropriately or add/modify protocol if required.

25. When do I need to ask an employee for an STO2 form or doctor’s note?

In the circumstance of COVID-19 related absences, an STO2 form or certificate is not required for sick pay. Discussion between employee and supervisor can often resolve questions about prognosis.

On a temporary basis for other conditions, an STO2 may be required only for safety sensitive occupations or other essential services employees to enable the employer to meet their legislated obligations to plan and manage a safe return to work. The STO2 form permits management of clearance to safety sensitive occupations and assists managing the workforce with advice regarding prognosis. The STO2 form also provides consent for the clinical team at Occupational Health Programs to work with employees on safe and sustainable return to work programs.

If the Physician’s Confidential Portion of the medical certificate is provided to the supervisor, this should be forwarded to Occupational Health and Rehabilitation, BCPSA, 707 – 808 Nelson Street, Box 12183, Vancouver, BC V6Z 2H2

26. I supervise an employee who tells me they have been exposed to a close contact. Do they have to self-isolate? [UPDATED]

Unless otherwise instructed by Public Health, the BC Centre for Disease Control advises that fully vaccinated individuals do not have to self-isolate because of a close contact.

Fully vaccinated means you received both doses of a two-dose series (e.g. AstraZeneca, PfizerBioNTech, or Moderna vaccine) more than seven days ago, or have received a single dose of a one-dose series (e.g. Janssen/Johnson and Johnson) more than 14 days ago.

Fully vaccinated individuals are not required to self-isolate, and can continue to participate in routine activities, including work, as long as they do not have any symptoms.

People must monitor their health daily for symptoms and use the Daily Health Check if they are attending the workplace. If they experience symptoms or feel unwell they should stay home, use the [BC Thrive app](https://www.bcthrive.ca)(self assessment tool), call 811 or contact their primary care provider for advice.

27. I supervise an employee who tells me they have been medically advised to self-isolate or stay home as they are sick with a communicable disease. Are they eligible for sick leave?
Yes. If an employee has been advised by a medical professional to self-isolate or they remain home because they are sick or in hospital for treatment, they are eligible for sick leave.

28. I can't work from home, but I am nervous about coming to work and being exposed to COVID-19. What can I do? [UPDATED]

Workplaces have been following COVID-19 Safety Plans and have implemented Communicable Disease Prevention Plans following WorkSafeBC guidance. There are high levels of vaccination in British Columbia and personal vaccination for COVID-19 remains the most effective strategy to prevent severe illness.

Effective November 22, 2021, all employees were required to provide proof of full vaccination, providing a high level of safety in our workplaces. With other measures including symptomatic employees staying home when sick, mask wearing in common areas, occupancy limits in meeting rooms and common areas, hand washing, routine cleaning of surfaces and public vaccination rates continuing to increase, BC Public Service workplaces remain safe. Employees have the option to wear a mask at all times if they choose to.

If there are increased levels of risk locally, regionally, or within a workplace, the local and regional Medical Health Officers or the Provincial Health Officer will advise employers on measures needed to manage the risk.

Talk with your supervisor if you have concerns about the risk of workplace exposure.

29. I have an employee coming back to work after recovering from a diagnosed COVID-19 infection or COVID-19 like symptoms. That employee feels well and is not having any further symptoms. What should I do? [UPDATED]

An ST02 or doctors note is not required. If the employee is a confirmed case of COVID-19, Public Health may provide the employee with guidance on when it is safe to end isolation and resume their usual activities.

Unless otherwise instructed by Public Health, fully vaccinated employees who have mild respiratory symptoms that can be managed at home can generally return to their routine activities, including work, once all of the following criteria are met:

- At least five days have passed since onset of symptoms (or test date if they were asymptomatic)
- Fever has resolved for 24 hours without use of fever-reducing medication
- Symptoms (respiratory, gastrointestinal, and systemic) have improved
- The person is able to wear a mask in the workplace as set out in the Communicable Disease Prevention Plan

Coughing may persist for several weeks and does not mean the individual is infectious or must continue to self-isolate.
In some instances, Public Health may recommend additional days of isolation based on disease severity, among other factors. Talk to the employee about their individualized return to work plan.

Health care workers (nurses, doctors, care aides) and employees working in group living settings who recovered from COVID-19 infection may require specialized direction for return to work.

30. I supervise an auxiliary employee who was required to self-isolate. Are they eligible for weekly indemnity benefits?

Yes, all auxiliary employees are eligible for weekly indemnity benefits up to a maximum of 15 weeks under the same circumstances as an employee eligible for COVID-19 related STIIP. This is the case for COVID-19 related absences even if the auxiliary employee has not accumulated 400 hours of auxiliary seniority or has lost their auxiliary seniority.

In addition, auxiliary employees will not have the one-week benefit waiting period for COVID-19 related absences. This means that employees are eligible for weekly indemnity benefits immediately and will receive the benefit as quickly as possible.
Part 4: Employee Exposure Related to Travel

31. With current federal and BCCDC recommendations, can employees undertake work-related travel within Canada?

Yes. As of July 1, 2021, under BC’s Restart Plan, Canada-wide travel is allowed for work and recreational purposes. When travelling, follow the same Public Health guidance you use at home to prevent COVID-19. Plan ahead by checking that the places you are going are ready to welcome you.

32. An employee is questioning international travel restrictions and compliance expectations. How do I advise them?

As of December 15, 2021, the Federal Government recommends avoiding non-essential travel outside Canada, regardless of vaccination status, and has posted an Omicron update. As of October 30, 2021, all air and rail travelers in Canada must show proof of full vaccination. Fully vaccinated travelers entering Canada should review the travel requirements and exemptions posted by the Government of Canada.

Employees are expected to comply with all federal and provincial requirements and will not be permitted to return to work until all requirements as a returning traveler have been met. Currently travelers entering Canada must have a 14-day quarantine plan for their return in case they do not meet fully vaccinated status or become ill while returning to Canada. Staff and supervisors should take this into account when scheduling leave to travel outside of Canada.

Employees who choose to travel internationally unrelated to work after December 15, 2021 will not be eligible for STIIP or Weekly Indemnity Benefits for any assigned quarantine or self-isolation period.

If the employee becomes ill during isolation, they should be tested and contact 811 or their health care provider to manage their symptoms and describe their travel history. Employees will only be eligible for STIIP or Weekly Indemnity Benefits while unable to attend work due to COVID-19 after any assigned quarantine or self-isolation period has ended.

Employees can also contact Public Health in their local health authority about quarantine and their health. The employee should inform the supervisor of any estimated period of absence and in advance of return to work.

With expected upcoming changes for travelers, employees should check the Government of Canada and Provincial Government websites and the Travel Section of the BCCDC website for the latest travel requirements.
33. I have an employee entering self-isolation following return from travel, or who was medically recommended to self-isolate for 14 days due to possible COVID-19 exposure. What options can the employer offer?

For employees returning from international travel, if you are satisfied your employee can effectively work from home, you should authorize this arrangement. This does not include the initial three-day quarantine (if required) in a federally approved facility since the employee will not have a work computer and secure internet access.

If the employee is returning from international travel that commenced before August 5, 2020 and cannot work from home, the employee is eligible for STIIP or Weekly Indemnity Benefits.

If the employee is returning from international travel commenced after August 5, 2020, and they can’t work from home, they are not eligible for STIIP or Weekly Indemnity Benefits and must take an applicable leave.