

# COVID-19 Pandemic Guidelines

## for Silviculture, Wildfire, and Consultant Forestry Contracting

### Camps and Crews

### Working Draft

*This REMAINS a DRAFT document that will be updated as conditions change, and as employers and the industry map out their plans. There are several issues and considerations that are currently being negotiated, including steps taken to ensure proper support for all workers. This is indicated at several places in this document. Updated March 19<sup>th</sup>, 2020*

Employers in silviculture and consultant forestry are working with associated Ministries and Public Health to ensure any plans we develop remain consistent with their current expectations. This evolving draft plan is continuing to move forward on the assumption that our activities would be subject to any additional conditions or restraints to ensure we do not increase risk to the health of workers or any other group.

**The key to the success of our industry at this time will be ensuring that we maintain and strengthen our greatest virtue as an industry – isolation.** The fact that silviculture crews often operate as isolated units is a central feature that can be used to adapt to the current conditions. Our primary goal must be to establish and maintain this isolation and prevent the transmission of illness. We must focus our efforts to establish isolation at the outset of the season to prevent transmission of illness within our crew or to other groups - and maintain isolation throughout the season to prevent ingress of illness to our crews from other groups or communities. Crews that complete prescribed terms of isolation without exposure to, or evidence of, illness will be valuable assets in preserving silviculture and forestry programs. Resources should focus on supporting crews to achieve and maintain this status.

A viable management plan is needed to be established and shared by all contractors as soon as possible in order to ensure that health imperatives are protected, and the season can proceed. **While healthy young workers may be among those least likely to experience serious impacts from COVID-19, there are still distinct health risks associated with the illness. Our industry has an obligation to reduce risks to our workers and to other groups around us. We have a duty to minimize our burden on the health care system so that the most needy can receive proper help.**

#### GOALS OF THIS PLAN:

- Be responsible partners in preventing the spread of illness in society and protect human safety.
- Support all members of our industry and protect the health of our workers.
- Minimize the introduction of illness to our camps and increase their capacity to operate in isolation. with minimal interaction with outside parties.
- Prevent transmission of illness between our workers and other groups and communities.
- Reduce our burden on local health care systems.
- Sustain the resilience of our industry this year, and for the future.

This bulletin addresses considerations related to prevention and mitigation of COVID-19 according to various levels of management, with special attention to work camps where workers gather during the primary reforestation season that runs from late April to early August. Additional considerations are identified for crews working from motel-based operations.

It is noted that the industry is familiar with the challenge of reducing the transmission of communicable disease, and many of the safeguards suggested in this guide comprise measures that will also help reduce the risk of viral gastroenteritis (stomach bugs) and colds and flus that can affect the workforce in any given season. These recommendations thus provide an opportunity to re-evaluate the industry's overall approach to preventing illness and stimulate enduring changes in practice that will benefit all parties.

It is also noted because of the nature of silviculture and forestry operations, it is impossible to effectively prevent close contact between people in camps and some work settings, and an outbreak of illness could rapidly affect many people, compromise the camp, and burden local medical systems. Therefore, the industry strategy is based on a higher standard of care than for the general public, and the goal of helping crews establish themselves as effectively isolated.

This set of strategies includes many requests of workers, and their cooperation will be mandatory to ensuring that the work season can proceed. These requests are not made lightly, and employers must ask workers to share and be honest with their information. Through a cooperative effort, all parties stand to gain. Any individual or company that chooses to ignore recommendations risks compromising their own season, and the health and success of all persons and groups around them. Truly, nobody wants that.

## Level 1 Pre-season communication and planning

### Compliance with Public Health measures

- **All workers are asked to engage in social distancing and self-monitoring during the month prior to coming to work. Self-isolation is strongly encouraged and may become mandatory. The industry is currently discussing how mandatory self-isolation prior to work may be verified, and worker input is being gathered on this topic, as it does present a significant demand and burden, and requires trust and cooperation from all parties. The final decision on self-isolation as a condition of entry to the workplace will be discussed further in the coming days. Definitions of social distancing and other steps are included at the end of this document. There are two approaches to social isolation that must be considered.**
  - Social isolation prior to departing from work. All workers are instructed to comply with and support Public Health directions for immediate social isolation. This helps them reduce the probability of arriving at a worksite as a carrier of illness.
  - Social isolation upon arrival at a site. Workers may be asked to engage in isolation and distancing measures upon arrival, which may include confining their activities to single or limited occupancy situations (i.e. motels) until they have cleared an approved period for joining a larger crew. Reasonable steps may include workers isolating within pairings in which they travelled together for extended periods. However, larger groupings are

not acceptable due to the potential for transmission within groups that would potentially allow contagion to extend beyond the isolation period. This approach (which requires review from Public Health) may be the most reliable method of increasing the probability for camp to establish as an illness-free operation that can function through the season. Any workers showing symptoms during this period will be referred to Public Health, and a symptom free period of no less than 14 days shall occur before they proceed to work, pending medical approval.

- **Any worker that has been travelling, has visited an area affected by an outbreak, or has had close contact with a person presumed or confirmed to have COVID-19 must complete self-isolation for a minimum 2 weeks prior to showing up for work, and a least two weeks from the first sign of any symptoms of illness.** This is already requested of all people arriving from outside of Canada. Self-isolation is one of the most important steps that can be taken to prevent bringing the infection into a crew. While such steps may go beyond normal public measures, the industry must consider the “border” between their workplace and the public spaces where workers reside as a barrier that MUST be protected.
- All workers that are not in Canada, or travelling within Canada, must return home as soon as possible to begin self-isolation as soon as possible.
- Any person that has been to areas, particularly where we know there has been transmission of COVID-19, must call a health care provider; call 8-1-1, call public health.
- Any worker that has a confirmed case of COVID-19, must secure permission from a Public Health Official or doctor prior to coming to work.

## Self-Isolation

- During self-isolation prior to work – workers shall be directed to conduct health checks every morning and every night during their self-isolation and monitoring periods:
  - Take your temperature twice per day. 38 degrees or higher is a sign of fever. Regular body temperature is 36.5 to 37.5 Celsius
  - Use only a proper thermometer designed for medical purposes, with a digital readout preferred for accuracy. Do not use thermometers calibrated for industrial purposes. Thermometers are currently difficult to buy, but may be ordered online, and received in time for use prior to the season.
  - Follow instructions properly, and if in doubt, refer to the internet for proper method of taking temperature.
  - Wait 30 minutes after eating, drinking, or exercising before taking your temperature.
  - Take temperature inside in a room temperature without any breeze.
  - Wait at least 6 hours after taking medicines that can lower your temperature, like: Acetaminophen, also called paracetamol, Ibuprofen, Aspirin
  - In addition to fever, be alert for any other symptoms of COVID-19, including cough or difficulty breathing.

- Write your temperature and any symptoms in your logbook. A template is provided here: <http://www.bccdc.ca/resource-gallery/Documents/Guidelines%20and%20Forms/Guidelines%20and%20Manuals/Epid/CD%20Manual/Chapter%201%20-%20CDC/COVID19-Contact-monitoring-form.pdf>
- It may also be appropriate to monitor family members' temperatures and symptoms in their own booklets to ensure that no person in the household compromises the health of another.
- While these monitoring methods may be difficult for some, all workers should be directed to do their best in this regard.

**Any worker that has a confirmed case of COVID-19, must secure permission from a Public Health Official or doctor prior to coming to work.**

- Kitchen staff must be particularly diligent in self-reporting, as they have the potential to impact large numbers of fellow staff.
- Crew boss and field supervisor staff should be asked to assist in keeping track of workers and their progress in maintaining self-isolation.

### **Transportation to Work**

- Instruct staff to exercise proper precautions when traveling to work, including frequent hand washing, minimizing contact with crowds and public places, and avoiding touching one's own face when in public places. Common surfaces such as ATM buttons, gas pump handles, doorknobs, counters, and railings shall be considered contaminated items and shall be treated appropriately. Public areas such as restaurants and public bathrooms should be avoided. Hotel or motel rooms should be cleaned thoroughly prior to use. Workers may be advised to bring their own cleaning products to support these efforts during transportation.
- With access to air transportation limited, arrangements may be needed for bus charters or other measures. These arrangements must remain consistent with aforementioned goals of social isolation.
- Take steps to assist staff in securing safe transportation to their jobs. This may include ride-sharing with others that have completed a period of self-isolation.

### **Seasonal Preparations**

- Companies should complete training additional staff for replacements in key positions who can step into place in the case of a supervisor, crew boss, or other key staff becoming unavailable due to illness or other reasons such as family needs.
- Training should include appropriate social distancing measures, as training is generally completed at the start of the year. Where possible, web-based modules should be considered. In-person training may best be completed within established isolated units (such as groups which share the same truck). Mass training of all supervisory staff should be avoided to prevent potential compromise of key personnel.

- Training initiatives that involve close personal contact, such as emergency drills, should evaluate options with reduced contact such as drills based on dealing with wildlife, dealing with extreme weather, and verification of remote communication systems.
- Educate key staff, including first aid attendants and supervisors, about COVID-19, including appropriate support for mild to severe cases.
- Inform staff of the steps your company is taking to protect them from COVID-19. Encourage staff to be part of the solution in ensuring a safe and healthy workplace for the coming season. Be open and honest with your plan for the season, including the steps you will take to support them in the event that they or another worker is affected by COVID-19.
- Provide staff with a Coronavirus Fact Sheet, obtained from a government agency or Center for Disease Control. Take steps to vet information and not to share information from unverified sources. Public Health and government sources are recommended.  
Example: <https://www.cdc.gov/coronavirus/2019-ncov/downloads/2019-ncov-factsheet.pdf>
- Direct staff with questions toward recognized information sources, such as government websites.  
Example: [http://www.bccdc.ca/health-info/diseases-conditions/coronavirus-\(novel\)](http://www.bccdc.ca/health-info/diseases-conditions/coronavirus-(novel))

### Resource Procurement

- Contact suppliers in advance to ensure timely delivery of sufficient hygiene and cleaning supplies, including hand soap and hand sanitizer.
- Encourage workers to bring their own sanitizer and hygiene supplies for personal use both on and off the jobsite.
- Identify potential rental accommodations or other resources in case of a need to provide additional warm and dry facilities for workers affected by COVID-19 or subject to quarantine.

### Identify Services

- Identify Medical Health Officers in charge of your areas of operation and ensure that supervisors have contact information for these parties and local medical services.
- Review company policies regarding sick-days, and ensure adequate measures are in place to support and accommodate workers requiring sick leave. Given the nature of COVID-19 as a concern to the entire public, employers should be encouraged to do as much as possible to support workers in recovering while still limiting their potential exposure to other persons. Begin work now to ensure that plans are in place to support paid sick days during potential isolation or quarantine.
- **Identify auxiliary needs for your operations, including boat and helicopter service. Already, contractors have encountered reluctance from operators to engage with crews of workers. It will be necessary to communicate with operators to explain your management plan to them, and to ensure that they do not comprise a threat to the isolation of your workers.**

## Level 2 – Upon Arrival

### Self-isolation on arrival

The primary focus of illness-prevention protocols is preventing the introduction of disease to the camp. Camps that maintain proper screening measures have the opportunity to operate in a sheltered environment and may provide safe refuge from the spread of illness elsewhere in public. However, healthy conditions in camp will only occur if two conditions are met: 1) Employers exercise proper pre-screening and education measures. 2) Workers cooperate with the steps designed to protect them through the season.

Efforts to screen staff MUST begin immediately in order to ensure that staff are given adequate notice to adjust their schedules for the coming season. All staff must understand that their individual choices can impact a wider group, and they are personally responsible for doing their part in not spreading illness to the workplace.

It is STRONGLY recommended that ALL EMPLOYERS conduct pre-screening of staff prior to them arriving at or proceeding to camp. This will help protect both the health and viability of your operations, and the overall integrity and stability of the industry. With the frequent movement of workers between companies, it is critical that ALL employers adopt common practices in this regard. Pre-screening includes asking questions, setting self-isolation thresholds, and potentially conducting tests upon arrival. All measures are considered important due to the potential for asymptomatic carriers to be transmitters of COVID-19.

- **Screening processes, timelines, and lists of travel restrictions will need to be updated DAILY as the progression of the COVID-19 event unfolds. Please monitor Public Health agencies for updates.**

### Temperature screening

In Canada, medical examinations or health-related tests are acceptable for potential employees only if the testing or examination is reasonably necessary to confirm the potential employees' ability to perform a bona fide occupational requirement of the role. It is generally impermissible for Canadian employers to mandatorily require employees to undergo a health-related test such as taking temperatures at Canadian worksites. Such testing may be permissible, however, if COVID-19 becomes widespread in Canada or if Canada's public health agencies announce that the coronavirus outbreak has reached pandemic proportions – Note: these conditions may already be met.

If mandatory employee temperature testing becomes justified in Canada, the dignity of employees should be ensured throughout the process. Results of employees' tests should be kept in the strictest of confidence; they should not be shared with other employees, except on a "need to know" basis. Employees with whom the information has been shared because they "need to know" should be reminded that they are prohibited from disclosing it for unauthorized purposes.

Temperature screening must be done by a trained person with a properly calibrated device, with temperature thresholds based on Health Canada guidelines or input from a Medical Health Officer.

Common thresholds for COVID-19 screening at this time specify 37.5 degrees as an indicator of potential infection, and 38 degree or higher is a sign of fever.

### Screening vs testing

Screening via questionnaires or testing is not a substitute for testing. Any person exposed to COVID-19 or with symptoms, should be referred to a medical health professional for testing. Self-testing kits are neither readily available nor reliable at this time. Testing through the medical system involves a burden on our system, that we are not able to make. However, if and when testing becomes available, it should be implemented as a standard protocol for all workers. Recent research indicates that a test and re-test method over several years may be effective for total screening and elimination of disease in limited populations.

In the case that a worker presents with symptoms, a high temperature, or is unable to verify proper completion of a 14-day period of self-isolation and self-monitoring., that person may be denied permission to proceed to the active worksite. Companies are currently working on plans for supporting workers in such situations, including arranging safe accommodations, and potential steps for compensating them for time lost from work.

Employers are currently working with licensees to determine how workers may be accommodated and compensate if required to maintain self-quarantine as a condition to their work.

Employers shall exercise appropriate precautions in taking on any mid-season hires. Breaking self-isolation or isolation with another company shall be considered a reason to not hire a worker. Self-isolation periods and self-monitor log-books may be requested along with a reference from the previous employer. It will be essential for all employers to share a common approach, so all employees share in a common standard of protection. Cooperation with the prevention strategy will be the best way for workers to secure additional work through the season. This will not prevent workers from leaving companies for non-illness related reasons or dissatisfaction with other aspects of their job. However, it will prevent an uncontrolled movement of people acting as a vector of disease.

**More details will emerge once clear plans are in place regarding accommodation and compensation for isolated or quarantined workers, or workers required to isolate in the field or at remote accommodations. This WILL include plans to ensure that all workers have access to proper medical assistance and consultation throughout the season, and through any period of isolation or illness.**

**The importance of preventing potential transmission within camps will be particularly important during the first two weeks of work. After this period, it is possible that the risk of transmission-within camp will be greatly reduced, assuming effective barriers against outside transmission to camp.**

### **Personal and Camp Hygiene**

- Increase and improve hand-washing facilities. Effective hand-washing requires heated running water, soap, and appropriate hand-drying supplies. Hand-washing facilities should be provided in sufficient number and size to accommodate workers without line-ups or delay. Basins of stagnant or re-used water should NOT be used for handwashing purposes. Practical hand-washing systems may include:
  - Sinks with running and heated water.
  - Trough or gutter-style systems with running heated water.
  - Refillable water containers with spigots, filled with warm water, with catch basins or buckets underneath. Such containers can be placed on tables or blocks in multiple locations and required refiling at period of peak camp activity.
- Hand sanitizer is a helpful addition to the workplace but is not as effective as soap and water.
- Hand-washing facilities should be located immediately adjacent to washrooms and shared dining and gathering areas.
- Hand-drying facilities must also be provided. These may include containers of paper towels or dispensing devices. Rain-shelters may be necessary to ensure that supplies remain dry.
- Assign adequate staff to maintain hand-washing and drying facilities in camps. Supplies must be checked and replenished daily.
- Assign staff to clean showers and toilets on a regular basis.
- Provide cleaning supplies for proper sanitization of crew vehicles. Cleaning should occur on a regular basis, and ideally at least once per shift.
- Ensure adequate staff resources are assigned to cleaning duties. Workers on alternate duties may provide assistance in this regard.
- Ensure adequate staff and resources are provided for maintaining additional heated water systems for hygiene purposes in camps.
- Provide N-95 masks for use by staff with coughing or sneezing symptoms so that they may reduce their risk of transmitting illness to other people.



## Food and Kitchen Management

- Dish-washing shall be done by designated staff, with no self-washing by individuals. Dish washing systems should be upgraded to ensure adequate hot water and wash-rinse-soak systems to ensure effectiveness and to protect dish-washers.
- Provide cleaning supplies for proper sanitization of common dining areas and kitchens. Cleaning should occur after every meal.
- Install sneeze shields over buffet serving areas, if such serving systems are used.
- Consider instructing kitchen staff to serve food to workers in place of buffet-style systems
- Provide thin disposable gloves for any self-serve food areas to prevent staff from touching common utensils or food serving systems.
- Implement staggered meal times wherever possible, with 10-15 people eating at a time, in a specified time slot, so as to eliminate crowds.
- Eliminate communal food handling - no one serves themselves anything.
- Pre-make sandwiches and wraps. Pre-wrap snacks.
- Implement "hand washing police" or enforce a " token food program" - wash your hands, get a token, get food. return the token. Use the company enforcement policy to ensure compliance.

### Social Distancing Camps and Crews

- Strictly limit camp visitors to only those persons necessary for the operation of your workplace. Ensure all camp visitors are thoroughly oriented with your hygiene and illness-prevention program
- Discuss illness-prevention steps with your staff.
- Require crews to remain in camp or at their motel base of operation on days off. Arrange for laundry delivery service, shopping orders, and food services for the day off.
- Notify stores and local businesses if one person is shopping for many and seek to ensure that a group purchase is acceptable, and not perceived or treated as hoarding.
- Implement social distancing in camps, with crews going through facilities in waves when possible.
- Discouraging group gatherings in camps and ask workers to confine interactions to direct crew members with whom they already closely interact.
- Workers will be asked to remain at the worksite/workplace and avoid any trips back to their home bases during the season. Depending on circumstances, return trips home may result in the need for a subsequent self-isolation period in order to ensure a safe return to work.
- **All workers and company representatives shall seek to eliminate any unnecessary contact with isolated communities, including all First Nations communities. It is acknowledged, that many First Nations communities have limited medical resources, have vulnerable populations of Elders, and may have a higher level of vulnerability to COVID-19. Respect for small communities is mandatory.**

### Worker Care and Treatment

- Ensure that adequate entertainment, communication, and wireless services are provided in camp. It will be critical that workers are able to maintain communication with their families at this time.
- Workers need to take extra care of themselves and their physical condition in order to A) avoid infection with COVID-19, and B) avoid infection by any other illness that may not be readily distinguished from COVID-19 (i.e. flus and colds). All hygiene measures taken in this strategy are intended to contribute also to an overall positive state of health. Encourage staff to maintain healthy routines that support positive immune responses to all potential illness. This includes reducing sugar consumption, avoiding excess alcohol consumption, ensuring adequate sleep on a nightly basis, and maintaining good hygiene.
- Instruct staff to treat toilets and other shared facilities with respect, and to take steps to avoid contaminating common surfaces. Substandard conditions should be reported promptly.

- Instruct staff to wash hands prior to entering any dining or common area, and immediately after using bathrooms. Proper enforcement may be necessary.
- Instruct staff in proper hand-washing techniques, of lathered scrubbing for at least 20 seconds, rinsing and drying.
- Instruct staff to wash hands prior to entering trucks at the beginning and end of each day. Workers in the field should be instructed to carry additional water and hand soap for this purpose, or crew trucks should be equipped with materials for this purpose

**Any presumptive case will be reported to Public Health (811) All medical and treatment or management decisions related to treatment and of workers with symptoms shall be based on guidance from medical professionals. This includes seeking immediate medical advice for any presumptive case, and medical attention as directed by a doctor.**

- In the case of a suspected case of COVID-19, employers must inquire with Medical Health Officers about any challenges or risks associated with affected workers living in an outside environment such as a tent-based camp.
- Any presumptive symptoms will result in immediate self-isolation. This may occur in a camp if appropriate services are provided along with appropriate medical consultation, or in a motel or remote accommodation with appropriate support services. If self-isolation begins, only stop self-isolation when all of these apply to you:
  - you have had no fever for 5 days
  - it has been 14 days since you first developed symptoms
  - Public Health Official or doctor clear you for return
- The rest of the camp will maintain isolation from all outside parties and intensive monitoring

Given that conditions are changing and access to medical services may vary by area, it is critical that a proper authority is consulted in order to weigh the needs of the affected person(s) with any risk of transmission to other people or populations. A list of Medical Health Officers is provided at the following link: <https://www2.gov.bc.ca/assets/gov/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/bc-medical-health-officers.pdf>

The Public Health Authority in British Columbia can be reached by dialling 811.

- Employers must maintain family and emergency contact information for all staff.
- Workers must be required to take sick days and to self-quarantine if potential symptoms emerge.
- No workers shall be pressured to stay at work or asked to work when feeling ill or before the end of any isolation of quarantine period.
- Any workers required to participate in self-isolation or quarantined separate from other workers and with a break from regular work, will be paid for their sick-time.
- Companies need to continue to monitor and support isolated workers, including arranging for potential food deliveries and regular checkups.
- Be prepared to communicate with all staff and with clients with respect to any potential camp or crew quarantine situation.
- In the case of a Government order or general shutdown of work, the employer must have a plan in place to ensure the safe return of all workers to their homes.

Work is currently underway to ensure that sufficient resources and capacity is available to fully support workers in the case of a COVID-19 outbreak in their workplace. This includes funding to support workers and prompt access to medical support. Updates on this will be provided as companies and the industry further develop these plans.

## Definitions

### Social distancing

Social distancing measures are approaches taken to minimize close contact with others in the community and include: quarantine and self-isolation at the individual level as well as other community based approaches (e.g. avoiding crowding, school measures and closures, workplace measures and closures, public/mass gathering cancellations) which are further described in the section titled community-based measures below.

Social distancing measures are likely to have secondary consequences for individuals, families and communities, such as loss of income, an elevated need for support services, and potentially reduced availability of certain services. Some measures require extensive preparation and engagement across sectors. During a pandemic of lesser severity, the infection control benefits of implementing some community measures (e.g., proactive school closures) may not be offset by the cost and societal disruption caused by these measures.

Whenever public health authorities impose restrictions on individual freedoms, the intervention should be proportional to the magnitude of the threat. This principle of 'least restrictive means' should always be a consideration when enacting social distancing measures. The CPIP Public Health Measures Annex outlines the ethical considerations with respect to the selection and use of PHMs in a pandemic.

It is crucial that individuals follow quarantine and self-isolation recommendations properly to prevent transmission of COVID-19 to others in the home setting or in the community. It is recommended that all individuals in the community plan ahead by maintaining a supply of essential medications, home supplies and extra non-perishable food in the event they require voluntary quarantine or self-isolation.

**Isolation** is recommended for a symptomatic individual that is suspected of having, or known to have, COVID-19. They are directed by PHA to isolate themselves in the home-setting and avoid contact with others until PHA has advised that they are no longer considered contagious. Isolation includes:

Not going out of the home setting. This includes school, work, or other public areas

Not using public transportation (e.g. buses, subways, taxis)

Identifying a "buddy" to check on and do errands for each another, especially for those who live alone or at high risk for developing complications.

Having supplies delivered home instead of running errands (supplies should be left on the front door or at least a 2 metre distance maintained between people)

If leaving the home setting cannot be avoided (e.g. to go to a medical appointment), wear a mask (if not available, cover mouth and nose with tissues) and maintain a 2 metre distance from others. The health care facility should be informed in advance that the person may be infectious.

**Voluntary home quarantine ("self-isolation")** is recommended for an asymptomatic person, when they have a high risk of exposure to the virus that causes COVID-19, (i.e., through close contact with a symptomatic person or their body fluids). They are asked to self-isolate in the home-setting to avoid contact with others in order to prevent transmission of the virus at the earliest stage of illness (i.e., should they develop COVID-19).

**Protective self-separation** is recommended for a person who is at high-risk for severe illness from COVID- (e.g., older adults, those with chronic underlying medical conditions or immunocompromised) when the virus is circulating in their community.

Voluntary avoidance of crowded places is recommended for a person who is asymptomatic and who is considered to have had a medium risk of exposure to the virus that causes COVID-19. This involves avoiding crowded public spaces and places where rapid self-isolation upon onset of symptoms may not be feasible. Examples of these settings include mass gatherings, such as concerts and sporting events; not including hospitals (for HCWs) and schools.

**Mandatory quarantine** is the imposed separation or restriction of movement of individuals, groups or communities, for a defined period of time and in a location determined by the PHA. As local circumstances will vary across Canada and within regions, quarantine may be used to contain, delay or mitigate COVID-19, although its effectiveness once there is widespread community transmission is unknown. An individual in mandatory quarantine is asymptomatic but may have been exposed to the virus causing COVID-19. A decision to implement mandatory quarantine requires careful consideration of the safety of the individual/group/community, the anticipated effectiveness, feasibility and implications.