



**District Of Mackenzie
Novel Coronavirus Disease (COVID–19)
Response Plan**

Version 1.0 - March 25, 2020

RECORD OF AMENDMENTS

VERSION NO.	RELEASE DATE	NOTES
1.0	March 11, 2020	Initial Plan Finalized – format courtesy of Tofino RD

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1. BACKGROUND

In January 2020 the World Health Organization (WHO) declared the outbreak of a new coronavirus disease in Hubei Province, China to be a Public Health Emergency of International Concern. WHO stated there is a high risk of the 2019 coronavirus disease (COVID-19) spreading to other countries around the world.

How COVID-19 spreads

When someone who has COVID-19 coughs or exhales they release droplets of infected fluid. Most of these droplets fall on nearby surfaces and objects - such as desks, tables or telephones. People can catch COVID-19 by touching contaminated surfaces or objects – and then touching their eyes, nose or mouth. If they are standing **within one meter** of a person with COVID-19 they can catch it by breathing in droplets coughed out or exhaled by them. In other words, COVID-19 spreads in a similar way to flu.

Purpose of this Plan

The District of Mackenzie Emergency Operations Centre has developed this response plan based on Tofino District's COVID-19 Plan, to strengthen preparedness at the local level for COVID-19. This response plan is also shared across the region with municipal and First Nation partners as a potential guide to response recognizing that each organization has the discretion to implement or adjust any proposed activities depending on emergent conditions and information.

The District of Mackenzie COVID-19 Response Plan supports the strategies of Northern Health and First Nations Health Authority while accommodating the circumstances of the communities within the region. Where possible, activities will align with regional, provincial, national and World Health Organization guidelines.

Prevention

The most important thing people can do to prevent coronavirus and other illnesses is to **wash their hands regularly** and avoid touching their faces.

There are currently no vaccines available to protect against human coronavirus infection.

In general, the following may reduce the risk of infection or spreading infection to others:

- stay home if you are sick
- when coughing or sneezing:
 - cover your mouth and nose with your arm to reduce the spread of germs
 - dispose of any tissues you have used as soon as possible and wash your hands afterwards
- wash your hands often with soap and water for at least 20 seconds
- avoid touching your eyes, nose, or mouth
- avoid visiting people in hospitals or long-term care centres if you are sick

2. DEFINITIONS

- **Community Transmission:** Means the occurrence of cases of an illness for which the source of infection is unknown.
- **Essential Services:** Key services that must be provided/maintained within 24 hours or less. This may include water, sewer, fire services, governance and communications.
- **Isolation:**

You have: symptoms, even if mild AND you have been diagnosed with COVID-19 or are waiting for the results of a lab test for COVID-19

To be isolated means to: stay at home until your Public Health Authority advises you that you are no longer at risk of spreading the virus to others avoid contact with other people to help prevent the spread of disease in your home and in your community, particularly people at high risk of severe illness outcomes such as older adults or medically vulnerable people

You need to isolate if: you have been diagnosed with COVID-19 OR you are waiting to hear the results of a laboratory test for COVID-19 OR you have been advised to isolate at home for any other reason by your Public Health Authority

- **Pandemic:** A communicable disease epidemic that rapidly spreads to affect susceptible populations over much of the world. A pandemic can be of variable mortality and can in some cases lead to endemicity.

- **Self-Isolation:**

You have: no symptoms AND a history of possible exposure to the novel coronavirus due to travel outside of Canada or close contact with a person diagnosed with COVID-19

Self-Isolation means to: stay at home and monitor yourself for symptoms, even if mild, for 14 days avoid contact with other people to help prevent the spread of disease in your home and in your community in the event you become symptomatic

You need to self-isolate if: you have travelled outside of Canada within the last 14 days OR your Public Health Authority has identified you as a close contact of someone diagnosed with COVID-19

- **Self-Monitor:**

You have: no symptoms AND a history of possible exposure to the novel coronavirus that causes COVID-19, in the last 14 days

Self-Monitor Means: monitor yourself for 14 days for one or more symptoms of COVID-19 go about your day but avoid crowded places and increase your personal space from others, whenever possible

You need to self-monitor if: you have reason to believe you have been exposed to a person with COVID-19 OR you are in close contact with older adults or medically vulnerable people OR you have been advised to self-monitor for any other reason by your Public Health Authority

3. GUIDELINES & PROCEDURES

The following guidelines and procedures are established for implementation before or during a COVID-19 pandemic:

- [COVID-19 Response Guidelines \(Section 4\)](#)
- [Office Sanitization Plan \(Section 5\)](#)
- [Self-Monitoring and Isolation of Staff Members \(Section 6\)](#)
- [Restricting Staff Access to Worksites \(Section 7\)](#)
- [Communications Plan \(Appendix A\)](#)
- [Essential Services List \(CONFIDENTIAL\) \(Appendix B\)](#)

4. COVID-19 RESPONSE GUIDELINES

To protect District of Mackenzie staff from exposure and to limit the spread of COVID-19 and impact to essential community services, the following stages and procedures are recommended as a guideline:

NOTE: *Procedures from higher stages may be implemented sooner at the discretion of the EOC, CAO, or designate.*

Stage One

Definition:

The Chief Provincial Medical Health Officer advises of an occurrence of COVID-19 in the Province of BC.

Recommended Procedures:

- Initiating the COVID-19 Response Plan
- Providing Internal and External Communications (per Appendix 1)
- Self-Monitoring and, where appropriate, Isolation of Staff Members
- Opening of a Level One Emergency Operations Centre

Stage Two

Definition:

The Provincial Chief Medical Health Officer advises of Community Transmission of COVID-19 in the Province of BC.

Recommended Procedures:

- Procedures outlined in Stage One AND
- Implement Office and Public Gathering Area Sanitization Plan
- Restrict Staff Access to Worksites
- Implement working from home/telecommunication options
- District of Mackenzie to continue to operate EOC Level 1 providing regular coordination calls with interested community partners (municipalities, First Nations and other key agencies as required).

Stage Three

Definition:

Stage Three activation will occur when Community Transmission of COVID-19 has escalated to a point where the delivery of essential services may be at risk if additional measures are not taken. Stage Three activation will be at the discretion of the Emergency Operations Centre and will consider:

1. Whether or not a pandemic has been declared
2. Characteristics of community transmission (such as number of cases and location)
3. Occurrences, if any, of COVID-19 in Prince George, in the Northeast region, in communities surrounding Mackenzie or in the District of Mackenzie itself.

Recommended Procedures:

Procedures during Stage Three may include:

- Those procedures outlined in Stage One and Stage Two AND
- Restricting public access to the municipal workspaces (offices, public works areas, transfer stations, fire halls, etc.)
- Closure of public facilities (the recreation centre, public washrooms)
- Restrict non-essential work related travel
- Reducing/restricting public services
- Additional measures necessary to protect key staff required to provide Essential Services
- Closure/temporary suspension of non-essential services

5. OFFICE SANITIZATION PLAN

During Stages Two and Three, all office areas must be sanitized using cleaning supplies suitable to reduce the exposure and spread of COVID-19.

Disinfecting Agents

The following is a list of disinfecting agents and their working concentrations known to be effective against coronaviruses:

Agent and Concentration	Uses
Chlorine: Household bleach – sodium hypochlorite (5.25%) 1:100 (500 ppm solution) 10 ml bleach to 990 ml water	Used for disinfecting general surfaces (e.g., hand railings, grab handles, door knobs, cupboard handles).
Chlorine: Household bleach - sodium hypochlorite (5.25%) 1:50 (1,000ppm solution) 20 ml bleach to 980 ml water	Used for disinfecting surfaces contaminated with bodily fluids and waste like vomit, diarrhea, mucus, or feces (after cleaning with soap and water first). Allow surface to air dry naturally.
Accelerated Hydrogen Peroxide 0.5%	Used for disinfecting general surfaces (e.g. counters, hand rails, door knobs).
Quaternary Ammonium Compounds (QUATs)	Used for disinfecting of general surfaces (e.g., floors, walls, furnishings).

Required levels of sanitization

Stage One

- Basic personal sanitation, hand washing, accessible hand sanitizer

Stage Two:

- Workstations and areas with public access will be provided with sanitizing materials for use by staff.
- All staff will ensure that their own workstations, including equipment, vehicles, and surfaces are sanitized using an appropriate disinfecting agent on a daily basis.
- Janitorial staff will ensure that common high-touch areas such as door handles, washrooms, and light switches are sanitized using an appropriate disinfecting agent on a daily basis.

Stage Three

- Routine practices as per Stage Two continue.
- All surfaces must be sanitized after each use using an appropriate disinfecting agent.

6. SELF-MONITORING AND ISOLATION OF STAFF MEMBERS

During the workday, staff will Self-Monitor to determine if they are experiencing any symptoms of COVID-19.

Symptoms

Those who are infected with COVID-19 may have little to no symptoms. Symptoms may take up to 14 days to appear after exposure to COVID-19. This is the longest known infectious period for this disease.

- Clinical symptoms of COVID-19 may be mild or severe, and are similar to other respiratory illnesses, including the flu and common cold.
- Mild symptoms may include some or all of the following: Low-grade fever, cough, malaise, rhinorrhea, fatigue, sore throat, gastro-intestinal symptoms such as nausea, vomiting, and/or diarrhea.
- More severe symptoms may include any of the above as well as fever, shortness of breath, difficulty breathing and/or chest pain.

Procedures:

If a staff member or community service provider becomes symptomatic (or has symptomatic members of their household):

- Staff member should isolate from others as quickly as possible.
- Staff member must immediately call your health care professional, a local public or first nation health authority, or 8-1-1.
- Describe your (or your live-in family member's) symptoms and travel history. They will provide advice on what you should do.
- Notify supervisor electronically or by phone, and avoid contact with co-workers until they are advised it is safe to return to work.
- Supervisor should ensure district Human Resources has been advised.

A health care professional may ask individuals to Self-Isolate. People asked to Self-Isolate should stay home and limit contact with others for 14 days.

During such self-isolation measures, communities and local authorities may decide to follow existing compensation parameters. For District of Mackenzie staff for example:

- Unionized staff will be required to follow the parameters in the Collective Agreement.
- Exempt staff will utilize their own available sick time.

7. RESTRICTING STAFF ACCESS TO WORKSITES

Unless otherwise directed by the Chief Administrative Officer or Management, healthy employees are expected to report for work.

If an employee or their live-in family member has a heightened risk of infection due to travel or discloses that they are suffering symptoms consistent with COVID-19, they may be asked to remain away from the workplace until medical clearance is obtained.

At the discretion of a CAO or designate, non-essential work related travel may be restricted for staff.

Where applicable, staff will be given the opportunity to work from home at the discretion of the CAO or designate. Any staff that are unable to work from home or in their workplace due to illness or self-isolation, will be paid sick time in the following manner:

1. Unionized staff will be required to follow the parameters in the Collective Agreement.
2. Exempt staff will utilize their own available sick time.

APPENDIX A – District of Mackenzie COVID-19 COMMUNICATIONS PLAN

A1. COMMUNICATIONS OBJECTIVES

Communication about prevention of COVID-19 is the responsibility of Northern Health and First Nation Health Authority supported by community leaders (Local Authorities and First Nations).

Open communication is essential to the support and cooperation of the community and in building confidence and eliminating and avoiding misinformation. The release of public information relating to local impacts of the disease should be centralized to lessen confusion for the public.

The District's communications objectives are to:

- Advise what the region is doing about COVID-19 planning, including how it coordinates with partner local authorities and first nations.
- Share information with stakeholders involved in the preparation for and response to a COVID-19 pandemic.
- Increase public awareness of the importance of planning, hygiene and awareness so that residents are able to make the necessary decisions to protect themselves.
- Advise any changes to service delivery from the region.
- Develop and communicate consistent, appropriate and accurate messages regarding COVID-19 for external and internal audiences **in coordination with** partnering local authorities and First Nations. Ensure that the public and media receive these messages in a timely manner.
- Establish the District as an accurate, reliable and trusted source of information.
- Address misunderstandings, correct misinformation, and deal with rumors and stigma.

A2. KEY MESSAGES

- The District (through the EOC) will follow the advice and guidance of Northern Health which has the expertise to assess the level of risk posed by COVID-19.
- The District is preparing for a COVID-19 pandemic. **Our plan is open to the community and staff for their information and feedback.**
- The region's priority during a COVID-19 pandemic is to maintain Essential Services. There may be changes to the delivery of some services to protect the health and safety of workers, and to focus on providing the most necessary services to the community.

A3. RESPONSIBILITIES

The District of Mackenzie will be responsible for communications regarding services and functions specific to the District.

Examples of District of Mackenzie functions include, but are not limited to: the Fire Services, municipal planning functions, public works services (water, sewer, storm, etc.), building inspection, bylaw enforcement activities, recreation services, licensing and other statutory functions and staffing levels (shortages and/or absenteeism).

All communications will be shared with local authority and First Nation partners in the region.

A4. TARGET AUDIENCES

Communications planning for COVID-19 response comprises two audience areas – internal and external. For the District:

- Internal – District of Mackenzie Council, staff, EOC
- External – Regional District of Fraser-Fort George, EMBC, McLeod Lake Indian Band, the Public (residents, tourists), responding agencies, businesses, media, social media.

A5. COMMUNICATION STRATEGIES - GENERAL

Communications by the District of Mackenzie will be directed to the general public and to staff. A spokesperson and a back-up spokesperson for each stage will be identified. All COVID-19 health related information being sent to internal and external audiences will be approved by the CAO or Emergency Operations Centre Director, or designate. Ideally, one person will act as the main spokesperson for all media inquiries. However, given the nature of COVID-19, more people may be required to act as spokespeople in the event of time off or illness.

The District of Mackenzie will communicate clearly with the public, provide consistent messaging and explain what is being done and what the public can do. At the request of Northern Health, the District of Mackenzie may assume additional responsibilities.

Media attention may be intense and information demands may continue for some time. Sustaining public confidence during this time may be a challenge. Public reaction may be divided between those who will think the District is not doing enough to protect the safety of residents and District staff and some who will think the District is over-reacting. Despite public opinion, the goal of the region is to make sure that the community is informed about the District's plan and actions.

Content of the messages from the District will focus on changes in service delivery within the region. Questions beyond the scope of District's responsibility will be referred to Northern Health. Information about COVID-19 will be coordinated with Northern Health and may be communicated by the District of Mackenzie on their behalf. The District of Mackenzie will request regular updates from Northern Health during a COVID-19 pandemic.

Communications with Employees

The District of Mackenzie will take the lead role in communicating details with District employees. The employer has the responsibility to educate employees concerning preventive measures. Confronted with a COVID-19 pandemic, the employer must inform its employees of preventive measures and implement plans to help protect employees against the spread of this disease. When activated, the EOC Information Officer or designate will coordinate all internal messaging as required with other key staff (HR, payroll, OHS).

The District will work with the Occupational Health and Safety committee to communicate the health and safety precautions to be followed to reduce the spread of COVID-19 and to educate employees about their responsibility to help protect themselves, their families, and those who become ill.

Employee communications should be by different methods, must reach all employees, and may need to acknowledge that an employee cannot meet face to face (self-isolated) e.g. email, bulletin boards, telephone etc.).

A6. COMMUNICATION BY STAGES

Over the course of a COVID-19 outbreak, the demand and need for information will vary with the significance of the threat. The content of messages will also change as phases move from one to the next.

The role of communications will evolve throughout all phases from actively trying to raise awareness to responding to requests for information from residents.

Messages will correspond to the phases of the outbreak (which are separate from the Stages identified in the COVID-19 RESPONSE GUIDELINES (Section 4). Phases for communications purposes have been identified as:

Awareness Period (Stage 1)
Community Transmission Period (Stage 2 and 3)
Recovery Period

Awareness Period

This phase may be initiated before a pandemic has been officially declared, and includes the period of time immediately after.

The communications objectives in the awareness phase will be to deliver COVID-19 information to the public and employees intended to raise awareness of the risks of COVID-19 and the steps residents and communities can take to minimize the spread of COVID-19. Such information may include:

- Hand hygiene – frequent hand washing
- Avoid touching eyes, nose or mouth
- Respiratory hygiene - cover your cough/sneeze
- When to stay home
- How businesses can prepare
- How the community/municipality is preparing for COVID-19
- Cleaning and disinfection of work surfaces
- Information related to reducing stigma and where to find official sources of information

Communication channels to be considered will include newspaper and radio advertising, website updates, social media, presentations to the public (residents, business sector) and internal audiences, news conferences/media briefings, news releases and the handling of media inquiries.

The District *COVID-19 Response Guidelines* outlines Stage One as an occurrence of COVID-19 within the Province of BC. At this time, the District will implement the information strategy that will communicate the following procedures:

- Self- Monitoring and Isolation of Staff Members
- EOC engaged in advanced planning

Community Transmission Period

Once a pandemic has been declared, the communication objectives will be to support Northern Health/First Nation Health Authority by:

- Continue to communicate the symptoms of COVID-19 to the media and the public.
- Communicate what residents can expect during this phase.
- Communicate the importance of continuing with personal hygiene.

The District of Mackenzie's *COVID-19 Response Guidelines* outlines Stage Two as being when the Provincial Chief Medical Health Officer advises of Community Transmission of COVID-19 in the Province of BC. At this time, the District of Mackenzie may implement and communicate the following plans (in addition to plans identified in Stage One):

- Office Sanitation
- Restricting Staff Access to Worksites
- Working from home where applicable
- Operating a Level One Emergency Operations Centre

The District of Mackenzie's *Pandemic COVID-19 Response Guidelines* outlines Stage Three to be implemented at the discretion of Mayor and Council and will take into consideration:

1. Whether or not a pandemic has been declared
2. Characteristics of community transmission (such as number of cases and location)
3. Occurrences, if any, of COVID-19 in Northern BC or in the region

During Stage Three, the District of Mackenzie will communicate implemented procedures (in addition to procedures identified in Stage One and Stage Two). This **may** include:

- Restricting public access to the Municipal workspaces, public facilities and public services.
- Closure/temporary suspension of non-essential services
- Restrict non-essential work related travel for District of Mackenzie employees/volunteers
- Reducing/restricting public services
- Additional measures necessary to protect key staff required to provide Essential Services

Recovery Period

During this period, the District of Mackenzie will communicate with Northern Health to confirm the end of the Community Transmission period, acknowledge the contribution of both internal and external involvement in the process, provide any necessary information to the public on return to normal service levels and when available, information about a possible relapse of the COVID-19. It may also be appropriate to hold a public information meeting for the purposes of providing a situation report to the community and receiving feedback from the public. Psychosocial issues should be addressed to ease the strain on community members who have been adversely impacted by COVID-19.

As well, the recovery period will allow, when appropriate, for a formal evaluation of the communications strategy. Evaluation may include the monitoring of requests for information, website stats, requests from stakeholder groups, and media relations.

A7. MEDIA COMMUNICATIONS

The EOC Information Officer or designate will coordinate media relations activities. In the event of a COVID-19 pandemic, the media will be updated on a regular basis through such avenues as in-person news briefings, email, website updates and/or social media feeds. Where possible, this will be coordinated with any other activated Information Officers from partner Local Authorities and First Nations to ensure a coordinated message.

The Emergency Program Coordinator will monitor the local news media and social media to determine and ensure the District of Mackenzie's messaging is being heard, that the information is accurate and timely, ensure there is no missing information, and evaluate communications to assist in the planning for further communications.

More Information about coronavirus and prevention:

- [Public Health Coronavirus \(COVID-19\): Outbreak update](#)
- [Public Health Coronavirus infection: Prevention and risks](#)
- [The World Health Organization \(WHO\) information and preventative measures](#)
- [Centers for Disease Control and Prevention](#)

APPENDIX C – District of Mackenzie EOC CONTACTS

EOC Liaison / Emergency Program Coordinator	250-997-4221
Fire Chief/ Emergency Program Coordinator Cell	250-997-7402
Deputy Fire Chief Cell	250-997-7401
District of Mackenzie Finance & Corporate Services	250-997-3221