General Health and Safety System Checklist for COVID-19
July 10, 2020

The best way to address health and safety concerns is to put the COVID-19 response plan in place before workers are re-introduced into the workplace. Where work has never stopped, existing hazard (or risk) assessments should be reviewed in light of COVID-19. This must be done with a (Joint) Health and Safety Committee or the Health and Safety Representative (HSC/HSR) consultation, as appropriate.

Below is a sample checklist to evaluate the current health and safety system in your workplace as it related to COVID-19. For more information on specific health and safety practices for COVID-19, HSC/HSR resources, and how a hazard/risk assessment can be performed, please visit the CUPE National Health and Safety Section of the website (see links below).

Worker Participation	Yes	No
Are the worker representatives on the HSC selected by the trade union?		
Has the HSC/HSR been consulted about the reopening of the workplace or how COVID-19 may potentially affect workers' health and safety?		
Do(es) the HSC/HSR have a copy of the employer's risk assessment?		
Does the COVID-19 plan include floor plans/layout/tables indicating the locations of COVID-19 control measures in the workplace*?		
Are there clear lines of communication between the CUPE Local Executive and the HSC/HSR?		
Are HSC/HSR members receiving occupational illness notices and information related to COVID-19 exposures?		
Are HSC meetings being held often enough to be useful and relevant to the changing circumstances?		
Are HSC meetings being held in a manner suitable for COVID-19? (For example, are they being held in-person or through an online platform?)		
Was an inspection with worker representative(s) for re-opening performed before workers re-entered a space that was vacated?		
Will the committee or representative be performing increased inspections to ensure COVID-19 precautions are in place?		
Has a workplace COVID-19 policy and plan to implement the policy been prepared with the full participation of the joint health and safety committee (JHSC) or worker health and safety representative?		
Has the employer posted the full workplace COVID-19 policy and plan in the workplace and communicated both to all workers, supervisors, vendors, contractors and clients/customers as appropriate, in writing and/or electronic format?		

*Note – when these are included, it provides specificity to any reader about what will be happening where. Floor plans provide an opportunity to evaluate the space under consideration.

Additional notes or comments or follow-up

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COVID-19 Hazard Assessment	Yes	No
Has a hazard assessment been performed for the workplace?		
Does the hazard assessment assess/apply to each activity/task that workers will be doing?		
Does the hazard assessment assess each point of contact with the public (client/patient/student/patron)?		
Does the hazard assessment assess what to do in the absence of appropriate PPE?		
Does the hazard assessment assess work done outside of the physical workplace (mobile work, working at different sites)?		
Does the hazard assessment assess each point of contact with higher risk activities (for example, contact which can only be done with less than 2 metres (six feet) physical distance)?		
Does the hazard assessment assess heightened risks of workplace violence and harassment arising from the COVID-19 pandemic (Many are stressed and scared.)?		
Does the hazard assessment consider staffing levels (increased because of increased cleaning and disinfection, decreased because of staggered working hours, isolation or illness)?		
Does the hazard assessment assess the risks of staff shortages and working alone?		
Does the hazard assessment assess what to do in the presence of a confirmed or suspected case of COVID-19 or other illnesses that may be similar (employees/ client/patient/student/patron)?		
Does the hazard assessment identify the appropriate locations for screening for entry (suggest single entry screening sites)?		
Does the hazard assessment give clear direction about what to do if people disregard the screening protocol? (Workplace harassment and violence are of particular concern here.)		
How is physical distancing going to be/not be possible within the workplace?		
Does the hazard assessment assess the risks in common areas considered (lunchrooms, bathrooms, elevators, hallways, staircases, etc.)?		
Does the hazard assessment assess new staff orientation (for example, new hires, contract or redeployed workers)?		

Additional notes or comments or follow-up

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Control measures	Yes	No
Do the controls follow the hierarchy of controls (elimination, engineering, administrative and finally PPE)?		
Are there control measures for all the hazards identified?		
Is there clear information about who will be implementing each control?		
Is there a clearly defined (with steps) way to evaluate how controls are performing?		
Are control measures creating additional hazards?*		
Are control measures in the workplace at each time and place that workers require them for their work?		
Are screening methods active and clear?		
Is there a clear plan to address how physical distancing will be achieved?		
Is there a clear plan to identify which activities will require appropriate PPE?		
Are there measures to specify how and when workers are to self-monitor and self-isolate and what to do in the event of suspected or diagnosed cases of COVID-19 or other illnesses?		
Is there a plan to address staffing shortages?		
Is there a plan to increase staffing for those areas which require it (for example, cleaning tasks)?		
Is there a clear and appropriate waste management plan?		
Are there control measures negatively affecting workers*?		

*Note – If control measures are negatively affecting workers, it reduces the likelihood of the control's successful implementation. That would leave preventable gaps in the infection prevention and control plan. In addition, it might also contribute to staffing shortages.

Additional notes or comments or follow-up

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Information, Instruction and Training	Yes	No
Is there a plan to communicate COVID-19 measures and procedures clearly with workers?		
Is there appropriate signage displayed outside at all entry points to indicate what the health and safety expectations are for entering and being in the space (This could be PPE or physical distancing requirements, for example.)?		
Are there measures to communicate physical distancing protocols?		
Are there measures to communicate when to self-isolate and self-monitor?		
Do workers understand what procedures they should be using and when*?		
Do workers understand how to report a possible exposure to COVID-19?		
Do workers understand how to signal a health and safety concern to their supervisor?		
Has the employer ensured the delivery of updated training programs for all workers that cover: • Hazardous characteristics of COVID-19, routes of transmission and health effects? • Applicable health and safety law and public health directives? • Principles of hazard control and COVID-19 specific workplace controls (covering physical distancing measures, personal hygiene, cleaning and disinfecting, illness containment and reporting)? • PPE use, limitations, care and disposal?		

*Note – It is crucial that whatever the plans are, they must be clearly implemented in the workplace in a manner that works for the workers. Without this clear communication at the time and place it is needed, adherence will not be as successful, leaving gaps in the infection prevention and control plan.

Additional notes or comments or follow-up

Personal Protective Equipment (PPE)	Yes	No
Is there a process to fit the PPE to the worker*?		
Is PPE available at the points where they are needed?		
If PPE is not in its original packaging, can workers easily know/confirm that they are wearing the appropriate level of protection, if the PPE is new, reused or expired?		
Are workers trained in the proper use and limitations of the fitted PPE they are using, including how and when to take it off properly*?		

*Note – if workers are not using PPE properly fitted to them, or not using it properly, it could make the PPE much less effective. For example, a N95 respirator that doesn't seal to a specific worker's face does not afford the filtration efficiency of at least 95% because air will rush in from the leaks along the path of least resistance.

Additional notes or comments or follow-up

Additional Resources

H&S COVID-19 Sector Sheets

https://cupe.ca/preventing-exposure-covid-19-sector-specific-resources

HSC/HSR Resource Kit

https://cupe.ca/health-and-safety-committee-resource-kit

General Occupational Guidelines for COVID-19

https://cupe.ca/general-occupational-guidelines-covid-19

Health and Safety Practices While Working During Pandemic

https://cupe.ca/health-and-safety-practices-while-working-during-pandemic-all-sectors

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