SAMPLE COMMUNICABLE DISEASE POLICY TEMPLATE

**PURPOSE**

The purpose of this policy is to outline the processes and procedures workers are expected to employ surrounding the prevention and management of communicable diseases, such as COVID-19 and SARS, in the workplace, and to outline the steps management will take to protect their safety.

**APPLICATION**

This policy applies to all workers (part time, full time, permanent, temporary, seasonal, employees, and sub-contractors) performing duties in and around [COMPANY] facilities and associated locations, at all times.

**POLICIES & PROCEDURES**

**Prevention**

[COMPANY]’s number one priority is the health and safety of our employees and customers. We commit to taking every reasonable precaution to protect our employees and customers, and prevent the contraction and spread of communicable diseases, by:

* Managing a regular facility cleaning and disinfecting schedule of [# TIMES PER DAY/WEEK]
* Maintaining a physical distance policy between fellow workers and customers of at least 2 meters at all times (where possible)
* Erecting barriers between staff and customers where possible
* Providing masks and hand sanitizer to staff and customers and promoting its use
* Posting signage reminding customers and staff of safety standards and procedures
* Promoting hygienic workplace practices, including but not limited to: handwashing, uniform/attire cleaning, etc.
* Ensuring workers use the Provincial Public Health Authority’s self-screening tool to perform a “self-check” before coming to work, and if they are not well, to communicate this with their manager/supervisor, and to stay home from work and take necessary steps to test and/or recover

**Management**

Should a worker experience symptoms associated with a communicable disease, [COMPANY] commits to take the follow steps in support of our employees. Employees shall adhere to these procedures:

* Immediately report these symptoms to their manager/supervisor
* Leave the workplace and go directly home to self-isolate
* The worker shall remain at home in a quarantine scenario until they receive a test result, are symptom free for at least 24 consecutive hours, and provide a Doctor’s note clearing them to return;
	+ Failure to provide a clearance letter from your physician within 1 week of end of your quarantine may result in disciplinary action, up to and including termination
* The company shall perform a thorough clean of the worker’s area, plus any spaces that the worker came into direct contact with
* The company will report possible exposure to all colleagues that the affected worker may have come into direct contact with, and will closely monitor those employees’ health

**Financial & Occupational Supports**

* While the worker is in self-isolation and/or quarantine;
	+ they will utilize [COMPANY]’s paid sick day plan;
	+ can request to utilize their vacation time/pay over this time;
	+ they can take an unpaid leave of absence and access the Canada Sickness Recovery Benefit (CSRB) to a maximum of 2 weeks of benefits
	+ if the virus was contracted at work, the employee may have access to WCB benefits
* While the worker is experiencing symptoms, getting tested, or recovering from illness, their position is protected to return to. Barring unforeseen circumstances, [COMPANY] will make every attempt possible to return the worker to the original position and duties they left, or as close of a position as possible that is available
* Emotional support may be obtained through open and honest discussion with your manager/supervisor at any time, the Provincial Public Health Authority Helpline, and through [COMPANY]’s Employee Assistance Program (EAP) with [EAP PROVIDER NAME, PHONE NUMBER]

**ADHERENCE**

The employee understands that prevention and management of communicable diseases is the responsibility of all parties. [COMPANY] pledges to do its part in preventing communicable diseases from entering and spreading in the workplace, but the employee must also take all reasonable precautions outside of work, in order to avoid being the source of a workplace illness. This includes avoiding situations where potential communication of the disease might occur (such as house parties, disease hot spots, etc.), as well as performing regular self-checks before coming to work, and if symptoms are being experienced, properly communicating this in a timely manner to the employee’s manager/supervisor. Failure to adhere to any of the terms, policies, and procedures identified in this document may result in disciplinary action, up to and including dismissal for cause.

Workplace health and safety is everyone’s responsibility. By signing below, the employee agrees to the terms and conditions of this policy, and agrees to do their part in preventing the spread of communicable diseases in the workplace.

Thank you for your commitment to keep yourself, your co-workers, and our valued customers safe.

Employee’s Name (written) Employee’s Signature Date