FARM OPERATIONS AND FARM WORKERS COVID-19 CHECKLIST

Name of the Farm, Unit and Address:

Date of Inspection:

General Information

- □ Seasonal Temporary Foreign Workers are on-site Choose an item.
- □ Year-round Temporary Foreign Workers are on-site Choose an item.
- □ Indicate number of Temporary Foreign Workers at the farm in total and arrival dates Click here to enter text.
- □ Additional Temporary Foreign Workers are expected Choose an item.

Click here to enter text.

□ If yes, indicate number of workers arriving and arrival dates Click here to enter text.

□ York Region Public Health is notified of any new Temporary Foreign Workers upon arrival Choose an item.

□ Temporary agency workers are or will be provided Choose an item.

Click here to enter text.

□ Indicate agency name and contact information Click here to enter text.

□ Indicate number of agency workers, their contact information, work arrangements and where they live Click here to enter text.

□ Do Agency workers work at this farm only? If not, indicate other farms (Note: Agency workers can only work at 1 farm at a time). Choose an item.

Click here to enter text.

□ Other workers work at the farm (e.g. family members, office workers, management, local workers, etc)? Provide details below and indicate number of workers Choose an item.

Click here to enter text.

 $\hfill\square$ Do they live at the farm? Choose an item.

□ A list of all workers employed by farm and contact information is up-to-date and available to York Region Public Health Choose an item.

Self-isolation of Temporary Farm Workers arrived to Canada

□ Temporary Farm Workers self-isolated after they arrived to Canada Choose an item.

□ Number of workers currently in self-isolation Click here to enter text.

□ Temporary Farm Workers under self-isolation are not permitted to work Choose an item.

□ Workers on self-isolation are monitored and assessed for symptoms daily Choose an item.

□ Daily Health Log sheets to track health status of workers during self-isolation have been maintained Choose an item.

□ Self-isolation housing accommodation is provided and satisfactory. Describe below Choose an item.

Click here to enter text.

□ Food and supplies are delivered to workers during self-isolation Choose an item.

COVID-19 Plan

□ Written COVID-19 Plan has been developed Choose an item.

Click here to enter text.

□ COVID-19 plan includes the following policies at a minimum: accommodation of workers, back-up accommodation, self-isolation, food and supplies delivery, cleaning and disinfection, hand hygiene, PPE, monitoring and screening for symptoms, cohorting, illness policy, reporting a symptomatic worker, etc Choose an item.

Click here to enter text.

□ COVID-19 plan and processes reviewed with the owner at time of inspection to ensure compliance with COVID-19 requirements Choose an item.

□ COVID-19 training has been provided to all employees Choose an item.

□ COVID-19 precautions and measures have been implemented Choose an item.

Click here to enter text.

□ Appropriate PPE and hand sanitizers are provided to workers Choose an item.

□ Cohorting requirements discussed with operator (For example, workers are organized into small groups that work together consistently and work separately from other cohorts; cohorts should be housed together, etc) Choose an item.

Click here to enter text.

□ Signs are posted throughout living and work area (Includes signs on different languages, hand washing, respiratory etiquette, cleaning and disinfection, COVID-19 symptoms and self-assessment, PPE, physical distancing, etc) Choose an item.

Click here to enter text.

Screening and Monitoring

□ All workers and employers are screened daily prior to commencing work Choose an item.

□ Screening process for visitors and delivery is provided and monitored Choose an item.

□ Workers are educated about COVID-19 symptoms and to notify the employer if they have any of the symptoms (COVID-19 self-assessment tool can be used) Choose an item.

□ Operator is aware to inform York Region Public Health of any symptomatic worker or COVID-19 confirmed case at 1-800-361-5653 Choose an item.

□ COVID-19 testing of workers has been conducted. Provide details below Choose an item.

Click here to enter text.

Symptomatic Worker/Outbreak Investigation (COVID-19 positive case)

□ Illness policy and contingency plan including isolation of a symptomatic worker, health assessment and testing have been developed Choose an item.

□ A symptomatic or confirmed COVID-19 workers are isolated from other workers immediately (Consult with York Region Public Health regarding isolation requirements) Choose an item.

Click here to enter text.

□ Additional housing for isolation is provided and satisfactory. Describe below Choose an item.

Click here to enter text.

Accommodations

□ How many housing units are at this location? Click here to enter text.

Describe this unit (house, permanent trailer, mobile trailer, etc) Click here to enter text.

 \Box How many rooms are in this unit? Click here to enter text.

□ How many workers currently live in each room and in the unit in total? Click here to enter text.

□ What is the maximum capacity for each room and the unit in total during normal operation? Click here to enter text.

□ What is the maximum capacity for each room and the unit in total during COVID-19 pandemic operation? Click here to enter text.

□ Bunk bed is used by 1 person only Choose an item.

Click here to enter text.

□ Beds are 2 metres apart Choose an item.

Click here to enter text.

□ If beds are less than 2 metres apart, different strategies to keep residents apart have been implemented (e.g., beds are placed head to foot or foot to foot; temporary barriers between beds are provided, etc.). Describe below Choose an item.

Click here to enter text.

□Barriers are durable, provide adequate air flow and can be easily cleaned and disinfected Choose an item.

Click here to enter text.

□ Fire and Emergency Services has been consulted to ensure barriers are in compliance with fire safety requirements Choose an item.

Click here to enter text.

□ Adequate supplies for cleaning, disinfection and hand hygiene are provided for workers. Provide a name of disinfectant used Choose an item.

Click here to enter text.

□Cleaning schedules and cleaning logs to track frequency of cleaning and disinfection have been developed and maintained Choose an item.

□ Washrooms, showers, kitchen, sleeping and common living areas are cleaned and disinfected regularly and are kept in a sanitary manner Choose an item.

□ Living room provides adequate space for workers to maintain physical distancing Choose an item.

□ Kitchen provides adequate space for workers to maintain physical distancing or other measures such as meal scheduling are implemented Choose an item.

Workplace areas

□ Farm gate sales or a farm store are provided Choose an item.

□ If yes, are food premises COVID-19 precautions are followed Choose an item.

□ The farm has a processing facility or a plant Choose an item.

□ If yes, processing facility/plant is inspected by Click here to enter text.

□ Interactions between customers, delivery people, etc are minimized Choose an item.

□ Staff are encouraged to practice good hand hygiene and respiratory etiquette Choose an item.

□ Hand washing sinks with adequate supplies of liquid soap and paper towels are available Choose an item.

 \Box Alcohol-based hand sanitizers (60 – 90% alcohol) are available Choose an item.

□ 2 m physical distancing requirement between workers is implemented and followed Choose an item.

□ Where physical distancing cannot be maintained, workers wear appropriate PPE Choose an item.

□ COVID-19 precautions during worker's travelling to and from work sites have been implemented (for example, physical distancing maintained, masks are worn by all in the vehicle, cohorting, etc) Choose an item.

□ Lunches and breaks are organized to facilitate distancing (i.e., staggered) Choose an item.

□ Frequency of cleaning and disinfection of workplaces, lunch and break areas has been increased Choose an item.

Additional information noted:

Click here to enter text.