



Coronavirus Disease (COVID-19) Advisory Bulletin

Risk Services Division

16 April 2020

Legal Notice

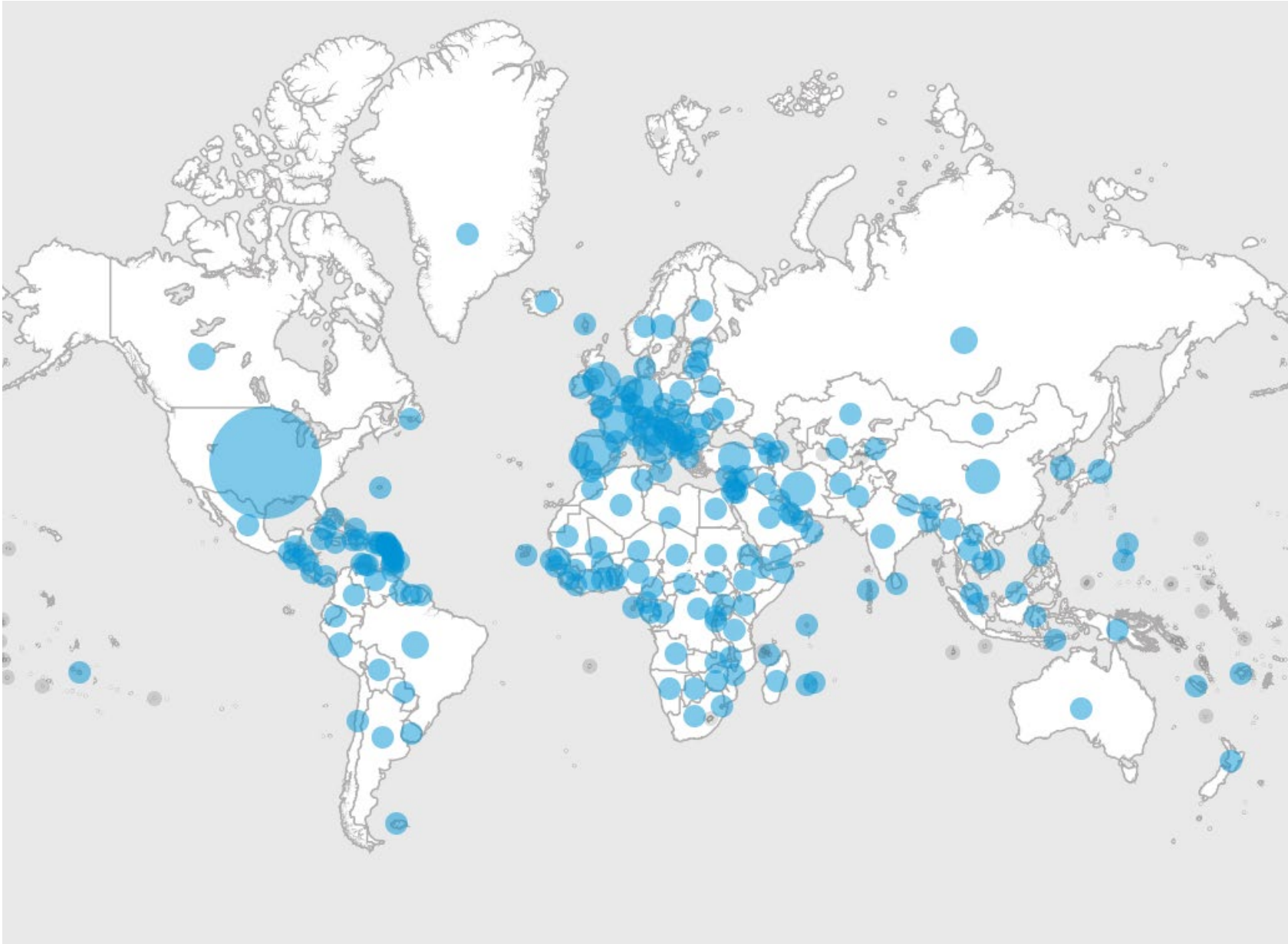
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Coronavirus Disease (COVID-19)

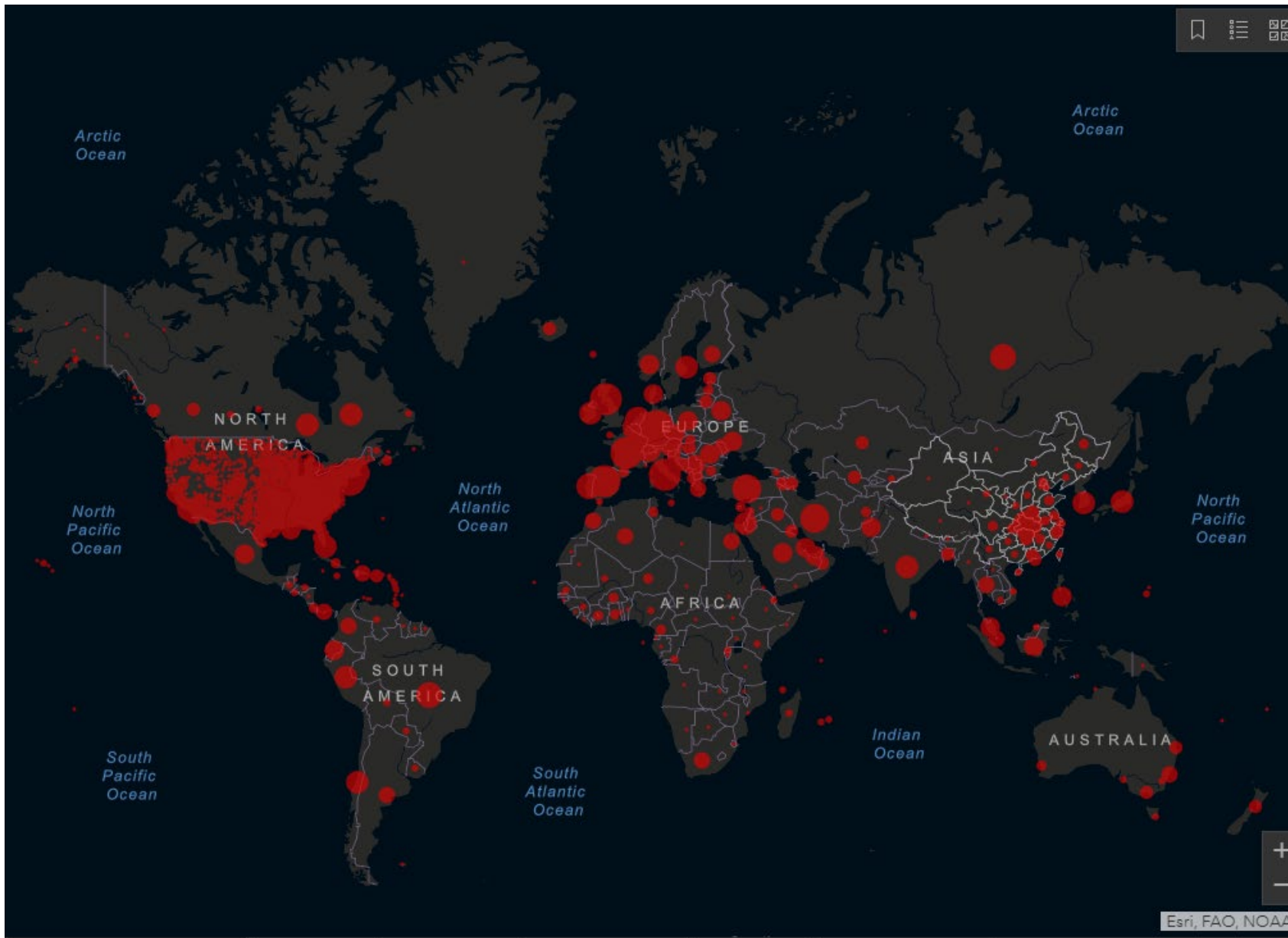
Advisory Bulletin 16 April 2020 (11:00AM ET)

- The World Health Organization characterized the outbreak of COVID-19 as a pandemic on 11 March.
- As of 16 April 2020, there are 2,088,425 total confirmed cases globally in 185 countries with 139,419 deaths reported worldwide.
- Over 525,000 people worldwide have recovered.
- The United States is reporting a total of 636,917 cases across every state as well as the District of Columbia, Puerto Rico, Guam, the Northern Mariana Islands, and US Virgin Islands; at least 28,586 deaths are confirmed.
- A National State of Emergency was declared in the United States on 13 March.
- States of Emergency have been declared in 48 states; shelter-in-place orders have been declared by all but five states (AR, IA, NE, ND, SD).
- Canada reports a total of 24,804 confirmed and presumptive cases in 10 provinces and 2 territories; 734 deaths are confirmed.
- States of Emergency have been declared in Alberta, British Columbia, Manitoba, Nova Scotia, New Brunswick, Ontario, and Saskatchewan; shelter-in-place orders have been issued by Alberta, British Columbia, Manitoba, Nova Scotia, Ontario, Prince Edward Island, Quebec, and Saskatchewan.
- Canada and the United States have closed their border to non-essential travel and continue to increase domestic travel restrictions.
- The World Health Organization (WHO) stresses that *public health and social measures to slow or stop the spread of COVID-19 must be implemented with the full engagement of all members of society*. WHO has described four levels of COVID-19 transmission with varying public health and social measures depending on the local evolution of the COVID-19 pandemic. These are countries or local areas with: 1) No cases reported. 2) Sporadic cases. 3) Clusters of cases (grouped in place and time), or 4) Community transmission.
- In the United States, the Centers for Disease Control and Prevention (CDC) indicates that *all persons in the United States are at some risk of COVID-19 given the increases in community spread throughout the United States*.
- The Public Health Agency of Canada (PHAC), states that COVID-19 is a serious health threat, and the situation is evolving daily. The risk will vary between and within communities, but given the increasing number of cases in Canada, *the risk to Canadians is considered high*.
- At this time, there is no vaccine for COVID-19 or any natural health products that are authorized to protect against it. All agencies strongly advocate for non-pharmaceutical interventions stressing *social distancing* and *enhanced hygiene*.

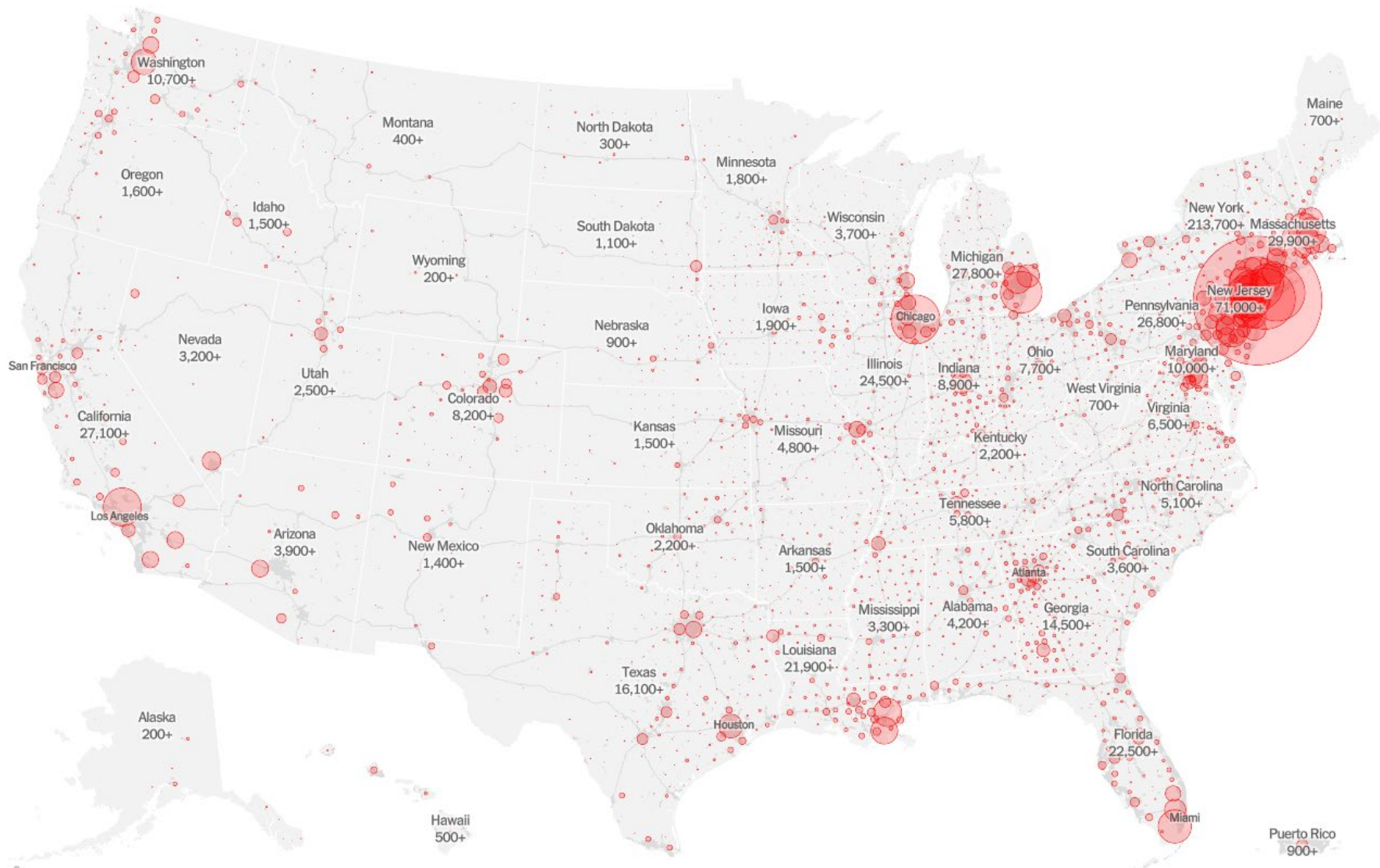
Countries, territories, or areas with reported confirmed cases of COVID-19, 16 April 2020 (WHO)



Global distribution of cases [Center for Systems Science and Engineering (CSSE) at Johns Hopkins University]

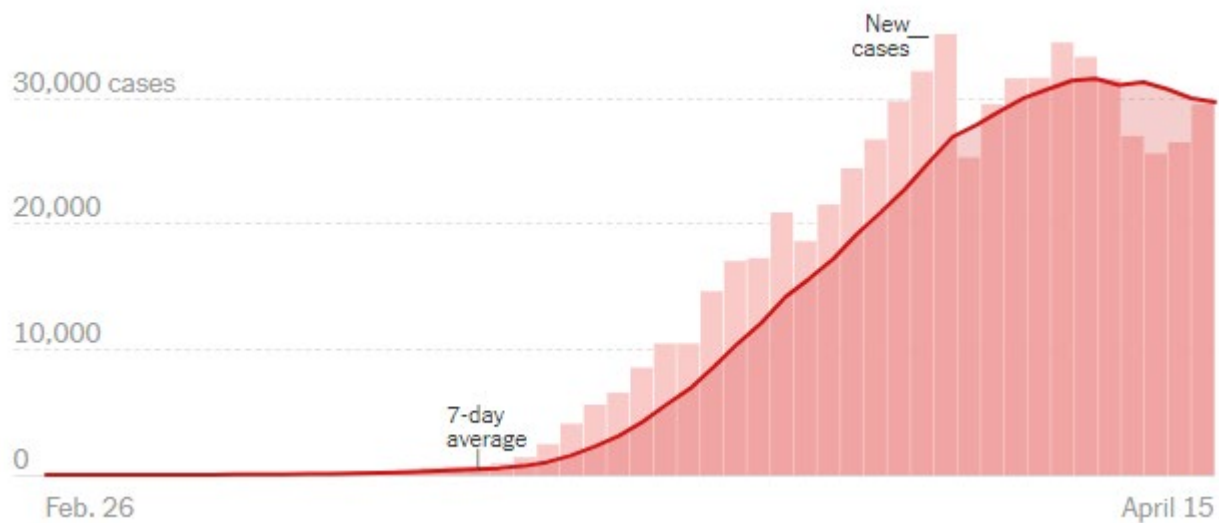


States reporting cases of COVID-19 to CDC



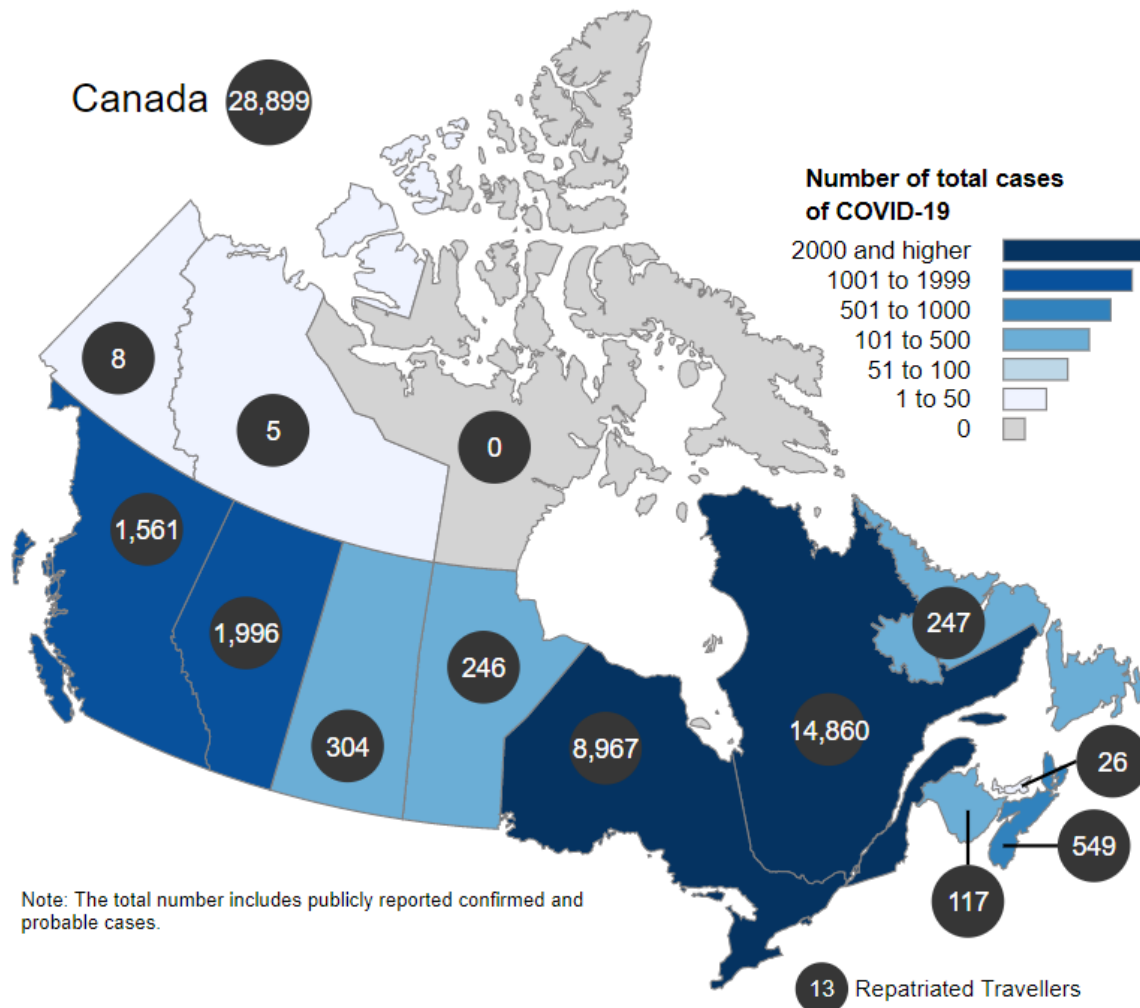
Source: NT Times

US cases announced per day



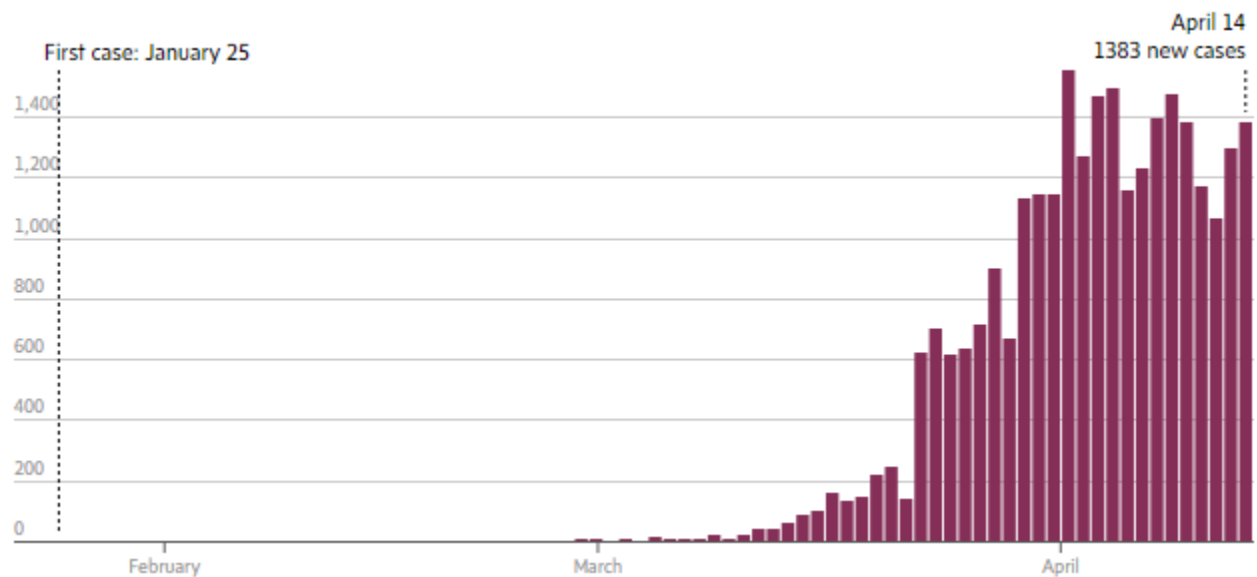
Source: CDC, state and local health agencies, hospitals: NT Times

Provinces reporting cases of COVID-19 to PHAC



Source: Government of Canada

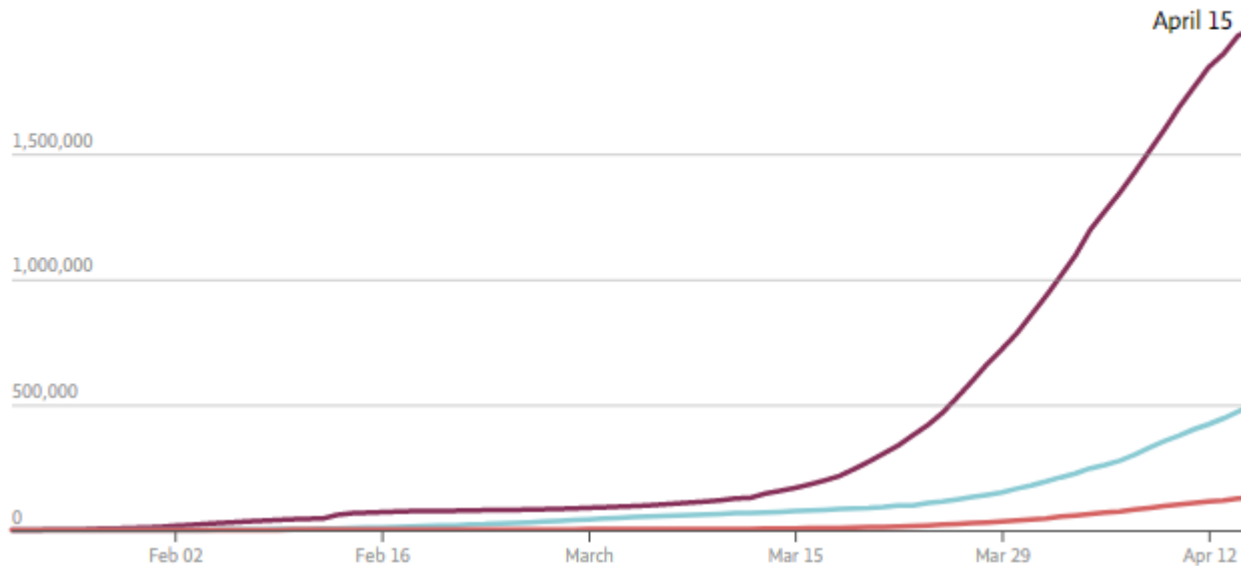
New Coronavirus cases announced each day in Canada



Source: Government websites and COVID-19 Open Data Working Group; Globe & Mail

Cumulative global cases, deaths, and recoveries

April 15: ● Confirmed: 1,996,681 ● Recovered: 500,717 ● Deaths: 127,590



Country	Confirmed	Deaths	Recovered
▶ United States	609,685	26,059	49,966
Spain	177,633	18,579	70,853
Italy	162,488	21,067	37,130
Germany	132,210	3,495	72,600
▶ France	131,362	15,750	29,121
▶ Canada	27,063	903	8,235

Source: Globe & Mail: Government websites, COVID-19 Canada Open Data Working Group and Johns Hopkins University

Summary

An outbreak of respiratory disease caused by a novel (new) coronavirus was first detected in China and has now been categorized as a pandemic. The virus has been named “SARS-CoV-2” and the disease it causes has been named “coronavirus disease 2019” (abbreviated “COVID-19”).

On January 30, 2020, the International Health Regulations Emergency Committee of the World Health Organization declared the outbreak a “public health emergency of international concern” (PHEIC). On January 31, 2020, Health and Human Services Secretary Alex M. Azar II declared a public health emergency (PHE) for the United States to aid the nation’s healthcare community in responding to COVID-19. On March 11, 2020 WHO publicly characterized COVID-19 as a pandemic. This is the first pandemic caused by a coronavirus.

This is the first pandemic known to be caused by the emergence of a new coronavirus. In the past century, there have been four pandemics caused by the emergence of novel influenza viruses. As a result, most research and guidance around pandemics is specific to influenza, but the same premises can be applied to the current COVID-19 pandemic. Pandemics of respiratory disease follow a certain progression outlined in a “Pandemic Intervals Framework”: Pandemics begin with an investigation phase, followed by recognition, initiation, and acceleration phases. The peak of illnesses occurs at the end of the acceleration phase, which is followed by a deceleration phase, during which there is a decrease in illnesses. Different countries can be in different phases of the pandemic at any point in time and different parts of the same country can also be in different phases of a pandemic.

Government health agencies in both Canada and the United States continue to closely monitor the situation and issue daily updates, alerts, and guidance. More information can be found on the US Centers for Disease Control and Prevention (CDC) website at: <https://www.cdc.gov/coronavirus/2019-ncov/index.html>) or at the Public Health Agency of Canada website at: <https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection.html>.

In addition to CDC, many public health laboratories in the US are now testing for the virus that causes COVID-19. The increase in testing has resulted an increase in the number of reported cases. US COVID-19 cases include imported cases in travelers, cases among close contacts of a known case, and community-acquired cases where the source of the infection is unknown.

Canada's Chief Public Health Officer of Canada is in close contact with provincial and territorial Chief Medical Officers of Health to ensure that any cases of COVID-19 occurring in Canada continue to be rapidly identified and managed in order to protect the health of Canadians. Canada's National Microbiology Laboratory has implemented testing to diagnose COVID-19 from clinical specimens. The laboratory is working collaboratively with Canadian provincial public health laboratories to ensure there is additional testing capacity in multiple jurisdictions.

The situation is dynamic as more information about the virus, the illness, and transmission patterns becomes known.

Coronavirus and COVID-19

The complete clinical picture with regard to COVID-19 is not fully known. Reported illnesses have ranged from very mild (including some with no reported symptoms) to severe, including illness resulting in death. While this outbreak is a serious public health concern, information so far suggests that most COVID-19 illness is mild. Older people and people of all ages with severe underlying health conditions — like heart disease, lung disease and diabetes, for example — are at higher risk of developing serious COVID-19 illness.

Symptoms may appear 2 – 14 days after exposure and include fever, cough, and shortness of breath.

Seek medical advice if you develop symptoms, and have been in close contact with a person known to have COVID-19 or if you live in or have recently been in an area with ongoing spread of COVID-19.

How COVID-19 Spreads

Human coronaviruses cause infections of the nose, throat and lungs. They are most commonly spread from an infected person through:

- respiratory droplets generated when you cough or sneeze
- close, prolonged personal contact, such as touching or shaking hands
- touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands

Current evidence suggests person-to-person spread is efficient when there is close contact.

At this time, there is no vaccine for COVID-19 or any natural health products that are authorized to protect against it.

Health leaders recommend that all travellers returning from international travel self-isolate for 14 days. These efforts will contribute to slowing the spread of COVID-19.

If you are sick, reduce contact with others by:

- staying at home and self-isolating (unless directed to seek medical care)
- if you must leave your home, wear a mask or cover your mouth and nose with tissues, and maintain a 6 foot or 2-metre distance from others
- avoiding individuals in hospitals and long-term care centers, especially older adults and those with chronic conditions or compromised immune systems
- avoiding having visitors to your home
- covering your mouth and nose with your arm when coughing and sneezing
- having supplies delivered to your home instead of running errands
- supplies should be dropped off outside to ensure a minimum 6 foot or 2-metre distance

All health agencies recommend [nonpharmaceutical interventions](#) (NPI) be practiced. These include:

Social distancing

Together, we can slow the spread of COVID-19 by making a conscious effort to keep a physical distance between each other. Social distancing is proven to be one of the most effective ways to reduce the spread of illness during an outbreak. With patience and cooperation, we can all do our part.

This means making changes in your everyday routines to minimize close contact with others, including:

- avoiding non-essential gatherings
- avoiding common greetings, such as handshakes
- avoiding crowded places such as concerts, arenas, conferences and festivals
- limiting contact with people at higher risk like older adults and those in poor health
- keeping a distance of at least 2 arms lengths (approximately 2 meters or 6 feet) from others, as much as possible
- keeping a distance of at least 2 arms-length (approximately 2 meters or 6 feet) from others

Hygiene

Proper hygiene can help reduce the risk of infection or spreading infection to others:

- wash your hands often with soap and water for at least 20 seconds, especially after using the washroom and when preparing food
 - use alcohol-based hand sanitizer if soap and water are not available
- when coughing or sneezing:
 - cough or sneeze into a tissue or the bend of your arm, not your hand
 - dispose of any tissues you have used as soon as possible in a lined waste basket and wash your hands afterwards
- avoid touching your eyes, nose, or mouth with unwashed hands
- clean the following high-touch surfaces frequently with regular household cleaners or diluted bleach (1 part bleach to 9 parts water):
 - toys
 - toilets
 - phones
 - electronics
 - door handles
 - bedside tables
 - television remotes

Wearing masks

In light of new data about how COVID-19 spreads, along with evidence of widespread COVID-19 illness in communities across the country, CDC recommends that people wear a [cloth face covering](#) to cover their nose and mouth in the community setting. This is an additional public health measure people should take to reduce the spread of COVID-19 in addition to (not instead of) social distancing, frequent hand cleaning and other everyday preventive actions. A cloth face covering is not intended to protect the wearer, but may prevent the spread of virus from the wearer to others. This would be especially important in the event that someone is infected but does not have symptoms. A cloth face covering should be worn whenever people must go into public settings (grocery stores, for example). Medical masks and N-95 respirators are reserved for healthcare workers and other first responders, as recommended by current CDC guidance..

How easily a virus spreads from person-to-person can vary. Some viruses are highly contagious (like measles), while other viruses are less so.

The virus that causes COVID-19 seems to be spreading easily and sustainably in the community (“community spread”) in some affected geographic areas.

Recently released research from the Chinese Centre for Disease Control and Prevention, based on more than 72,000 patient records of COVID-19 reported nationwide through February 11th indicates that among confirmed cases nearly 87% were between the ages of 30 to 79; approximately four out of five cases (80%) were considered mild, and did not lead to pneumonia; another 14% were classified as severe causing symptoms such as pneumonia and shortness of breath. Approximately 5% of patients develop critical disease such as respiratory failure, septic shock, and multi-organ failure. Among the 1,023 deaths represented in the study, the majority were among those aged 60 and older, many of whom had other medical conditions such as hypertension, cardiovascular disease, and diabetes. The study suggests fatality rates from COVID-19 are typically about 2% but that symptoms have been mild for over 80% of cases.

Steps to prevent the spread of COVID-19

If you are sick with COVID-19 or suspect you are infected with the virus that causes COVID-19, follow these steps to help prevent the disease from spreading to people in your home and community:

- **Stay home:** People who are mildly ill with COVID-19 are able to isolate at home during their illness. You should restrict activities outside your home, except for getting medical care.
- **Avoid public areas:** Do not go to work, school, or public areas.
- **Avoid public transportation:** Avoid using public transportation, ride-sharing, or taxis.
- **Stay away from others:** As much as possible, you should stay in a specific room and away from other people in your home. Also, you should use a separate bathroom, if available.
- **Limit contact with pets & animals:** You should restrict contact with pets and other animals while you are sick with COVID-19, just like you would around other people. Although there have not been reports of pets or other animals becoming sick with COVID-19, it is still recommended that people sick with COVID-19 limit contact with animals until more information is known about the virus.
- When possible, have another member of your household care for your animals while you are sick. If you are sick with COVID-19, avoid contact with your pet, including petting, snuggling, being kissed or licked, and sharing food. If you must care for your pet or be around animals while you are sick, wash your hands before and after you interact with pets and wear a facemask.
- **Cover:** Cover your mouth and nose with a tissue when you cough or sneeze.
- **Dispose:** Throw used tissues in a lined trash can.
- **Wash hands:** Immediately wash your hands with soap and water for at least 20 seconds or, if soap and water are not available, clean your hands with an alcohol-based hand sanitizer that contains at least 60% alcohol.
- **Wash hands:** Wash your hands often with soap and water for at least 20 seconds, especially after blowing your nose, coughing, or sneezing; going to the bathroom; and before eating or preparing food.
- **Hand sanitizer:** If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol, covering all surfaces of your hands and rubbing them together until they feel dry.
- **Soap and water:** Soap and water are the best option if hands are visibly dirty.
- **Avoid touching:** Avoid touching your eyes, nose, and mouth with unwashed hands.
- **Clean and disinfect:** Practice routine cleaning of high touch surfaces.

CDC and PHAC Risk Assessment

Outbreaks of novel virus infections among people are always of public health concern. The risk from these outbreaks depends on characteristics of the virus, including how well it spreads between people, the severity of resulting illness, and the medical or other measures available to control the impact of the virus (for example, vaccine or treatment medications). The fact that this disease has caused illness, including illness resulting in death, and sustained person-to-person spread is concerning.

The potential public health threat posed by COVID-19 is high, both globally and to the United States. But individual risk is dependent on exposure:

- CDC indicates that all persons in the United States are at some risk of COVID-19 given the increases in community spread throughout the United States
- Healthcare workers caring for patients with COVID-19 are at elevated risk of exposure.
- Close contacts of persons with COVID-19 also are at elevated risk of exposure.
- Travelers returning from affected international locations where community spread is occurring also are at elevated risk of exposure, with increase in risk dependent on the location.

Different parts of the country are seeing different levels of COVID-19 activity. The United States nationally is in the acceleration phase of the pandemic. The duration and severity of each pandemic phase can vary depending on the characteristics of the virus and the public health response.

At this time, there is no vaccine to protect against COVID-19 and no medications approved to treat it. [Nonpharmaceutical interventions](#) continue to be the most important response strategy.

Global efforts at this time are focused concurrently on containing spread of this virus and mitigating the impact of this virus. The US Federal government is working closely with state, local, tribal, and territorial partners, as well as public health partners, to respond to this public health threat. In Canada, PHAC is working with provinces, territories and international partners, including the World Health Organization, to actively monitor the situation. Canada's Chief Public Health Officer of Canada is in close contact with provincial and territorial Chief Medical Officers of Health to ensure that any cases of COVID-19 occurring in Canada continue to be rapidly identified and managed in order to protect the health of Canadians.

The public health response is multi-layered, with the goal of detecting and minimizing introductions of this virus in the United States and Canada so as to reduce the spread and the impact of this virus. CDC is operationalizing all of its pandemic preparedness and response plans, working on multiple fronts to meet these goals, including specific measures to prepare communities to respond to local transmission of the virus that causes COVID-19. There is an abundance of pandemic guidance developed in anticipation of an influenza pandemic that is being repurposed and adapted for a COVID-19 pandemic.

Strategic Objectives

WHO's strategic objectives for this response are to:

- Limit human to human transmission including, reducing secondary infections among close contacts and health care workers, preventing transmission amplification events, and preventing further international spread from China*
- Identify, isolate and care for patients early, including providing optimized care for infected patients
- Identify and reduce transmission from the animal source
- Address crucial unknowns and about clinical severity, extent of transmission and infection, treatment options, and accelerate the development of diagnostics, therapeutics and vaccines
- Communicate critical risk and event information to all communities and counter misinformation
- Minimize social and economic impact through multisectoral partnerships.

*This can be achieved through a combination of public health measures, such as rapid identification, diagnosis and management of the cases, identification and follow up of the contacts, infection prevention and control in healthcare settings, implementation of health measures for travelers, awareness raising in the population, risk communication.

OSHA Pandemic Planning Guidance

Introduction

In the event of a pandemic, employers have a key role in protecting the safety and health of their employees as well as in limiting the impact on the economy and society. A business may experience employee absences and interrupted supply and delivery schedules. Good planning will allow employers in both the public and private sectors to better address issues that will arise.

While there is a difference between seasonal flu and a pandemic respiratory virus, symptoms and response can be the same or similar. Seasonal flu is an annual occurrence. Many get sick and unfortunately, deaths do occur. Vaccines are available and many have some immunity. A “new” virus such as COVID-19 may have worldwide implications. Initially there is no immunity and no vaccines which can lead to high levels of illness, death, social disruption and economic loss.

Implications in the workplace and for your business can vary widely depending on the product or service you provide. Many “critical” industries are already mandated to have pandemic plans in place. This list includes: Government Facilities, Dams, Commercial Facilities, Nuclear Power Plants, Critical Infrastructure, Food and Agriculture, Public Health and Healthcare, Banking and Finance, Chemical and Hazardous Materials, Defense Industrial Base, Water, Energy, Emergency Services, Information Technology, Telecommunications, Postal and Shipping, Transportation, and National Monuments and Icons.

How a Pandemic Can Affect the Workplace

While your business may not be considered a “critical industry”, implications for being unprepared may have significant impacts on your business and employees as follows:

- **Absenteeism** - A pandemic could affect a large percent of the workforce. Employees could be absent because they are sick, they must care for family members, they are afraid to come to work, or unbeknown to the employer, the employee may have died.
- **Change in patterns of commerce** – Consumer demand for items related to infection control is likely to increase, while interest in other goods may decline. They may change the ways they shop. They may try to shop at off-peak hours to reduce contact with others, or show increased interest in home delivery services, or drive-through service, to reduce person-to-person contact.
- **Interrupted supply/delivery** - Shipments from geographic areas severely affected may be delayed or cancelled. We live in a global economy so this may greatly affect business.

Employee risks of occupational exposure to a virus during a pandemic may vary from very high to high, medium, or lower (caution) risk. The level of risk depends in part on whether or not jobs require close proximity to people potentially infected with the virus, or whether they are required to have either repeated or extended contact with known or suspected sources of pandemic virus such as coworkers, the general public, outpatients, school children or other such individuals or groups.

Pandemic planning resources are based on past pandemic scenarios and would apply to COVID-19 pending further information. It is unlikely that any significant changes will be made to this guidance.

Additional guidance information and documents specifically for pandemic planning and response for business as bulleted below can be found on [OSHA's Pandemic Influenza website](#), and on the [CDC website](#).

Specific checklists for business planning including those with overseas operations can be found on the [CDC website](#).

Current travel advisories:

The World Health Organization (WHO) continues to advise against the application of travel restrictions to countries experiencing outbreaks of COVID-19

- The position of the WHO is that, in general, evidence shows that restricting the movement of people and goods during public health emergencies is ineffective in most situations and may divert resources from other interventions. Furthermore, restrictions may interrupt needed aid and technical support, may disrupt businesses, and may have negative social and economic effects on the affected countries. Travel bans to affected areas or denial of entry to passengers coming from affected areas are usually not effective in preventing the importation of cases but may have a significant economic and social impact.
- WHO has advised countries to institute public health measures proportionate to the public health risks and consistent with the International Health Regulation [IHR (2005)]. WHO has also underlined the importance of travelers' awareness in preventing the transmission of COVID-19.

The **US Centers for Disease Control and Prevention (CDC)** recommends that travelers avoid all nonessential travel to all global destinations. The **CDC has warned older and at risk Americans to avoid travel to any country** and advised against all non-essential travel to:

- **China**
- **Iran**
- **Most European countries**
- **United Kingdom and Ireland**

CDC does not generally issue advisories or restrictions for travel within the United States. However, cases of COVID-19 have been reported in many states, and some areas are experiencing community spread of the disease. Crowded travel settings, like airports, may increase the risk of exposure to COVID-19.

Acting Secretary Chad F. Wolf issued instructions supplementing a decision issued on January 31, 2020 directing all flights from specified countries to be routed through designated U.S. airports where the government is focusing public health resources.

The CDC has issued a Domestic Travel Advisory for New York, New Jersey, and Connecticut: The CDC urges residents of New York, New Jersey, and Connecticut to refrain from non-essential domestic travel for 14 days effective immediately. The DTA does not apply to employees of critical infrastructure industries, including but not limited to trucking, public health professionals, financial services, food supply. The Governors of New York, New Jersey, and Connecticut will have full discretion to implement the DTA.

Non-essential travel between Canada and the USA is prohibited.

Along with the Government of Canada, The **Public Health Agency of Canada (PHAC)** has issued a global travel advisory: **Avoid non-essential travel outside Canada** until further notice.

Non-essential travel between Canada and the USA is prohibited.

Maintaining Operations During a Pandemic

As an employer, you have an important role in protecting employee health and safety and limiting the impact of an influenza pandemic. OSHA recommends a systematic approach to planning.

Develop a Disaster Plan That Includes Pandemic Preparedness

Issues to consider and plan for:

- Be aware of and review federal, regional, and local health department pandemic plans, and integrate into your plan.
- Prepare and plan for operations with a reduced workforce.
- Develop a sick leave policy that does not penalize sick employees, thereby encouraging those who are sick to stay home. Recognize that employees with ill family members may need to stay home to care for them.
- Identify possible exposure and health risks to your employees.
- Minimize exposure to fellow employees or the public.
- Identify business-essential positions and people required to sustain business-necessary functions and operations. Prepare to cross-train or develop ways to function in the absence of these positions.
- Plan for downsizing services but also anticipate any scenario which may require a surge in your services.
- Recognize that, in the course of normal daily life, all employees will have non-occupational risk factors at home and in community settings.
- Stockpile items such as soap, tissue, hand sanitizer, cleaning supplies & recommended PPE.
- Provide employees and customers with easy access to infection control supplies.
- Develop policies and practices that distance employees from each other, customers and the general public.
- Identify a team to serve as a communication source so that employees and customers can have accurate information during the crisis.
- Work with employees & their union(s) to address leave, pay, transportation, childcare, absence & other human resource issues.
- Provide training, education and informational material about business-essential job functions and employee health and safety.
- Work with your insurance companies, and state and local health agencies to provide information to employees and customers about medical care in the event of a pandemic.
- Assist employees in managing additional stressors related to the pandemic.

Protecting Your Employees

For most employers, protecting their employees will depend on stressing proper hygiene (disinfecting hands and surfaces) and practicing social distancing. Social distancing means reducing the frequency, proximity, and duration of contact between people (both employees and customers) to reduce the chances of spreading the virus and illness from person-to-person.

OSHA, and the safety profession at large, recognizes and encourages the framework called the "hierarchy of controls" to select ways of dealing with workplace hazards. An expanded discussion of these 4 levels of control can be found on the OSHA website referenced above however, in brief, there are 4 levels of control:

- Work Practice Controls
- Engineering Controls
- Administrative Controls, and lastly,
- Personal Protective Equipment.

CDC Preventive Guidance

How We Can Protect Ourselves?

There is currently no vaccine to prevent COVID-19 infection. The best way to prevent infection is to avoid being exposed to this virus. However, as a reminder, CDC always recommends everyday preventive actions to help prevent the spread of respiratory viruses, including:

- Wash your hands often with soap and water for at least 20 seconds. Use an alcohol-based hand sanitizer that contains at least 60% alcohol if soap and water are not available.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who are sick.
- Stay home when you are sick.
- Cover your cough or sneeze with a tissue, then throw the tissue in the trash.
- Clean and disinfect frequently touched objects and surfaces

These are everyday habits that can help prevent the spread of several viruses. They are the same guidelines that can help prevent the spread of seasonal flu and the common cold.

If You Think You Have Been Exposed

If you are sick, **reduce contact with others** by:

- staying at home and self-isolating (unless directed to seek medical care)
- if you must leave your home, wear a mask or cover your mouth and nose with tissues, and maintain a 6 foot or 2-metre distance from others
- avoiding individuals in hospitals and long-term care centers, especially older adults and those with chronic conditions or compromised immune systems
- avoiding having visitors to your home
- covering your mouth and nose with your arm when coughing and sneezing
- having supplies delivered to your home instead of running errands
- supplies should be dropped off outside to ensure a minimum 6 foot or 2-metre distance

Self-monitor

You should self-monitor if you:

- have no symptoms **and**
- may have been exposed to COVID-19 in the last 14 days **or**
- you are in close contact with older adults or people who are medically vulnerable **or**
- you have been asked to do so by the local public health authority

Self-monitoring means to:

- monitor yourself for symptoms of respiratory illness, such as fever, cough and difficulty breathing
- avoid crowded places and increase your personal space from others when possible

Self-isolate

You should self-isolate if you:

- have no symptoms **and**
- may have been exposed to COVID-19 as a result of:
 - travelling outside of Canada within the last 14 days **or**
 - coming in close contact with someone diagnosed with COVID-19

Self-isolation means to:

- stay at home
- monitor yourself for symptoms for 14 days
- avoid contact with others

If there are others in your home, this means to:

- stay in a separate room and use a separate bathroom if possible
- keep at least 2 meters between yourself and other people
- keep interactions brief and wear a mask
- do not share personal items, such as toothbrushes, towels, bed linen, utensils or electronic devices
- at least once daily, clean and disinfect surfaces that you touch often, like toilets, bedside tables, doorknobs, phones and television remotes
- avoid contact with individuals with chronic conditions, compromised immune systems and older adults
- avoid contact with pets if you live with other people that may also be touching them

Isolate

You need to isolate yourself if you:

- have been diagnosed with COVID-19 or
- are waiting for laboratory test results or
- have been advised to do so by the local public health authority

Isolating yourself means to:

- stay home until the local public health authority says you are no longer at risk of spreading the virus
- avoid contact with others
- follow the direction for self-isolation

If you develop symptoms:

- isolate yourself

- stay home
- avoid other people
- contact your local public health authority

Summary

Diligence, Prevention, & Mitigation are Key

Following recognized practices to avoid exposures common to any respiratory virus will help to keep this threat in check.

Proper planning can help protect your employees, customers, and your business.

HUB International continues to monitor developments of this evolving situation, in order to provide guidance/assistance to clients as potential responses are considered.

Get the latest information, guidance and resources on Coronavirus (COVID-19) to help you protect what matters most at hubinternational.com/coronavirus. For additional support, please reach out to your local HUB office.

For Additional Information:

Centers for Disease Control and Prevention

[CDC Travelers' Health: Novel Coronavirus in China](#)

[CDC Health Alert Network Advisory Update and Interim Guidance on Outbreak of 2019 Novel Coronavirus \(2019-nCoV\) in Wuhan, China](#)

[CDC Health Alert Network Advisory information for state and local health departments and health care providers](#)

[CDC Information on Coronaviruses](#)

[Nonpharmaceutical interventions](#)

[Symptoms associated with COVID-19](#)

[Guidance to help in the risk assessment and management](#)

[CDC guidance on how to reduce the risk of spreading your illness to others](#)

World Health Organization

[World Health Organization, Coronavirus](#)

Public Health Canada

[Current situation](#)

[How Canada is monitoring the 2019 Novel Coronavirus infection](#)

[Risk to Canadians](#)