



Circle of Eagles Lodge Society

Coronavirus Pandemic Response

Planning Guide

Merv Thomas merv@coels.ca

For

Board of Directors, Staff, Brothers and Sisters, Families & COELS Partners

The COELS Pandemic Continuity Plan is

developed as a guide to facilitate the continuation of

essential services and/or functions during a pandemic emergency.

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Monique Fong Margo Pearce Harlan Pruden Raye St Denys Liza McGuinness

Merv Thomas Velma Albert Clare Cameron Danette Delorme Glenda Abbott Jason Lawrence Barb Ellis

Contents

Acknowledgements	3
PART ONE - COVID-19 BASIC INFORMATION	8
Preventative Reminders	9
Cultural Perspectives on Covid-19	10
Vulnerable Populations	10
PART TWO - COELS PANDEMIC PLANNING	12
The COELS Pandemic Response Team (CPRT)	12
Staff	12
Contact Tracing	13
Mandatory Face Covering	15
Masks	15
When to wear a mask	15
Preventing COVID-19 Transmission During CPR and First Aid	16
Guidance for PPE	16
Guidance for Performing a Breathing Assessment and Rescue Breaths in	
Guidance for Compressions	17
Guidance for AED Application & Use	17
Cleaning protocols:	17
Classifying and Responding to Disruptions - Five Levels	18
Level One - Planning Stage	18
Level Two - Possible COVID-19 Virus Transmissions	18
COELS Contingency Plan to Manage Broader Disruptions	19
Disruption to Leadership	19
Signing Officers and Stamps	20
Communication Plan regarding Leadership	20
Disruption to Workforce	21
Information Technology	22
Disruption to COELS Operations	22
Shopping	22

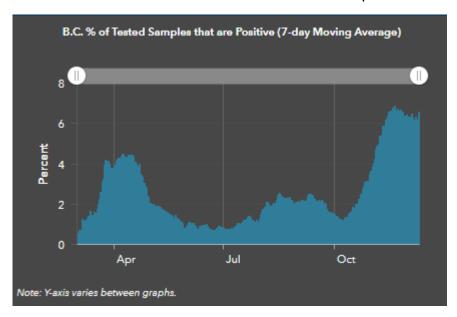
Funders	23
Insurance	23
Travel Restrictions	23
COVID-19 Financial Assistance for Staff	24
Public Health Orders	24
PART THREE - CORONAVIRUS PREVENTION EDUCATION MATERIALS	25
Adapted and Revised Resource Materials	26
Hand Washing Materials	26
Wash Your Hands Often to Stay Healthy	27
FIVE Easy Steps for Proper Hand Washing	27
Brothers and Sisters Kits	28
Other Resources	29
PART FOUR - PANDEMIC ISOLATION AND QUARANTINE PROCEDURES	31
Guidelines for Supporting and Seeking Medical Attention	31
Self-Isolation	33
Self-Isolation	33
Isolation - multi beds (Double Room)	34
Guidelines for Environmental Control - Housekeeping, Laundry, Waste	35
No Visitor Policy	35
COVID-19 Fatigue	36
Here are some of the ways you can help overcome COVID fatigue:	36
Practicing Cultural Ceremonies in a Safe Way during COVID	37
Cultural, Essential, Mental Health Time Extensions	37
Cultural	37
Essential	37
Mental Health	38
What is Safe? What is Not Safe?	39
CULTURAL CEREMONIES	40
Appendix One - References	42
Appendix Two - Coronavirus Basic Information	43
Appendix Three - Different Levels of Isolation	47

Overview

In December 2019, a novel coronavirus (COVID-19) was detected in three patients with pneumonia connected to the cluster of acute respiratory illness cases from Wuhan, China. By the end of February 2020, several countries were experiencing sustained local transmission, including in Europe.

Canada was no exception and on March 13, 2020, BC issued health and travel advisories. In British Columbia (BC) became the second province to confirm a case of COVID-19 in Canada.

As of December 11, 2020, there has been over 1.3 million COVID-19 tests in the province of British Columbia, with a total number of 40,797 positive cases.



BCCDC website December 12, 2020

This resource guide has been adapted through information found in the Public Health Agency of Canada websites, MNP Planning Guide for Pandemics, COELS Cultural COVID-19 Response Steering Committee, and through discussions with the Senior Management team of the Circle of Eagles Lodge Society in responding to the coronavirus pandemic.

The purpose of this document is to provide the continuity of high-quality services for the Brothers and Sisters, staff, volunteers, the Board of Directors of COELS, Senior Management, Key Personnel, and partners including CSC and other funders. It should be read in conjunction with other key documents such as the COELS Policies and Procedures Manual.

COELS will follow all guidelines set by the Public Health Agency and other Government departments and will work in partnership to mitigate the risk to the Brothers and Sisters Healing Lodges as well as those who work, visit and volunteer.

Those who become ill may be expected to be incapacitated for days or weeks. Other staff may choose to stay home to care for sick family members or may have difficulty with childcare due to schools and daycare closures. As a result, COELS may be unable to maintain services during the period which places priority populations at risk.

PART ONE - COVID-19 BASIC INFORMATION

Coronaviruses (CoV) are a large family of viruses that cause illness ranging from the common cold to more severe diseases. Some coronaviruses transmit between animals, some between animals and people, and others from people to people.

At the writing of this update in December 2020, COVID-19 has been in Canada almost one full year. There are lessons learned that can reduce the spread of COVID-19 from this period. Evidence continues to show that men and those above the age of 70 have an increased chances or likelihood of getting COVID-19 vs. 'risk', as well as those with compromised immune systems, such as with diabetes, asthma, HIV, or pneumonia, among others.

Recently, in BC and some other Provinces, there has been increased daily numbers reported. When a daily count is released, it means the person was infected 7 to 10 days prior.

October 20, 2020, Dr. Bonnie Henry announced that the second wave of COVID-19 was in BC and the province has been looking at what were the best measures that worked best to prevent transmission. If we start to see increases in COVID, those are the things we can put in place rather than the blanket shut everything down as we did before.

As we have seen an increase in cases there has been an update to the provincial health orders that are in effect from November 19, 2020 - January 8, 2021. By order and direction of the Provincial Health Officer, all events and social gatherings are suspended to significantly reduce COVID-19 transmission related to social interactions and travel.

Key measures being used are helping despite the rising daily numbers.

- Contact tracing for when you visit a business allows them to contact you if there
 was an exposure to COVID-19.
- We continue to see that using alcohol-based hand rub (sanitizer) and handwashing is a simple yet effective way to prevent the spread of pathogens and infections.
 Sanitizers should have at least 60% alcohol content for protection.
- As of November 24, 2020, it is mandatory to wear masks in all public places. For COELS this means wearing a mask in all common areas.
- Physical distancing, protect your T-Zone (Eyes, Nose and Moth), always wearing a
 mask in public when physical distancing is challenging, using a face shield or
 protective eyewear such a s wrap around goggles, staying home, hand washing and
 not touching your face, are still considered the best practices at this time.

The BCCDC website has announced that the COVID-19 vaccine that has been approved by Health Canada is safe, effective and will save lives. The first vaccines arriving in B.C. are

from Pfizer and has been approved by Health Canada, Moderna approval at the time of this writing is pending. The PHO are guidelines and will remain in place for everyone, regardless if they have received the vaccine.

There seems to be a mental fatigue however, with numbers increasing we still need to follow protocols. This may suggest that we need to take more of a coaching approach, reinforcing good practices, encouraging each other, and respectfully holding one another accountable.

Preventative Reminders

The basics still stand true as follows:

The critical one is: <u>IF you are feeling sick with a cough, fever, or sore throat</u>, stay home and contact 811. You can also do the self-assessment tool online at https://bc.thrive.health/covid19/en. If it persists or gets worse, do NOT go to the hospital unless advised by medical professionals. If you have difficulty breathing, call 911.

Other steps are:

- ✓ Handwash frequently with soap for as long as it takes to sing your ABC's. twice, or to equal 20 seconds
- ✓ Use sanitizer often.
- ✓ Practice social distancing, at least 6 feet/2 meters from others.
- ✓ If you must be indoors with others, avoid small spaces, wear masks, keep a safe distance.
- ✓ Wear a mask.
- ✓ Wash your masks and have several masks to be able to alternate.
- ✓ Avoid touching MEN (M-outh, E-yes, N-ose).
- ✓ Minimize the number of times you go out.
- ✓ Keep your circle of physical contacts (bubble) as small as possible.
- ✓ Ventilation is important when it comes the spread of infection. Being outside you are far less likely to touch an infected surface. Viral particles will get quickly diluted by fresh air and droplets will fall to the ground rapidly where they can no longer be breathed in.
- ✓ Keep a diary of people you meet or places you go; there is also apps on your smart
 phone that will help you follow where you have been.
- ✓ Protect your eyes with a shield or goggles. Others can spray droplets.

Cultural Perspectives on Covid-19

From a cultural perspective many Indigenous nations follow natural law protocols that protect the priority populations of the community.

We refer to this body of knowledge as Circle Teachings which encompass how we maintained kinships laws and community roles. Put simply, we place the most vulnerable people of the community in the centre and make the best decisions with their well-being in mind.

This could require us to physically put our bodies around to protect them or put our hearts and minds together to make the best decisions to protect the children and our grandparents and great-grand-parents.

In this model, our actions as Indigenous peoples consider what is best for the community, instead of focusing on the need of self over others.

Vulnerable Populations

Health Canada defines **Vulnerable Populations** as individuals who are at risk of more severe disease or outcomes, including:

- older adults (increasing risk with each decade, especially over 60 years)
- people of any age with chronic medical conditions (for example, lung disease, heart disease, high blood pressure, diabetes, kidney disease, liver disease, stroke, or dementia)
- people of any age who are immunocompromised, including those with an underlying medical condition (for example, cancer) or taking medications which lower the immune system (for example, chemotherapy)
- people living with obesity (BMI of 40 or higher)

Individuals who may be more likely to be exposed to the COVID-19 virus because:

- Their jobs or occupations require them to be in contact with large numbers of people, which increases their chances of being exposed to someone who has COVID-19
- They live in group settings where the COVID-19 virus may transmit more easily (for example, long-term care facilities, correctional facilities, halfway houses and Healing Lodges, shelters, or group residences)
- They face barriers that limit their ability to access or implement effective public health measures (for example, individuals with disabilities who encounter non-accessible information, services and/or facilities)

Some of the examples include individuals who have:

- difficulty reading, speaking, understanding, or communicating
- difficulty accessing medical care or health advice
- difficulty doing preventive activities, like frequent hand washing and covering coughs and sneezes
- ongoing specialized medical care or needs specific medical supplies
- ongoing supervision needs or support for maintaining independence
- difficulty accessing transportation
- economic barriers
- unstable employment or inflexible working conditions
- social or geographic isolation, like in remote and isolated communities
- insecure, inadequate, or nonexistent housing conditions

-Taken from Government of Canada Website: Vulnerable populations and COVID-19 Date accessed December 12: 2020

In general, Canada's Indigenous populations experience higher co-morbidity rates for complications from Covid-19 such as type 2 diabetes as well as other metabolic and cardiovascular diseases. We want to keep our kinship circles safe as well as honour our natural law protocols to protect those vulnerable in our community.

For these reasons, Circles of Eagles Lodge Society has implemented numerous protocols and procedures of wise practices; everyone in our facilities must be wearing a mask in all common areas and following all other COVID safety protocols to protect our neighbors and most vulnerable.

PART TWO - COELS PANDEMIC PLANNING

The COELS Pandemic Response Team (CPRT)

The CPRT has developed and now updated this Pandemic Planning document which will guide COELS in its response to COVID-19, Mgmt. will oversee its implementation, and monitor daily COVID-19 updates. CPRT will meet regularly and adapt response strategies as new information emerges.

Brothers and Sisters staying at the Healing Lodges are invited to join the CPRT. Currently there are no Brothers or Sisters sitting on this committee, however, there has been frequent Brothers and Sisters meeting to hear their feedback, comments and concerns.

The CPRT consists of the following people within the organization:

- 1. The Board President Shelley Joseph, Rick Lavallee, Vice President
- 2. The CEO Merv Thomas
- 3. Director of Operations Barb Ellis
- 4. Executive Assistant Jason Lawrence
- 5. Naa-na-himyis House Manager- Danette Delorme
- 6. Anderson Lodge House Manager- Velma Albert
- 7. House Support Worker Ellen Stewart
- 8. Cultural Coordinator Clare Cameron
- 9. Cultural Wellness Worker Glenda Abbott

Staff

COELS staff play a major role in the prevention and spread of the virus. By following this Pandemic Planning Guide, frequent updates and memos, practicing Universal Precautions, hand washing, ensuring cleanliness of common spaces, staff will assist in mitigating the risk of and spread of the virus. Staff are strongly encouraged to keep themselves knowledgeable of COVID-19. They must be aware of all the contents in this document as well as continue to educate themselves on the pandemic.

When staff is off duty, they should follow public health advice. This includes following recommended numbers at gatherings as defined by BCCDC. Social gatherings" like birthday parties, or gatherings should not exceed more than 6 peoples indoors.

We need to remember that some people are asymptomatic, meaning they do not show symptoms yet can still test positive for covid-19 and transmit the virus to others. For this reason, we have adopted the mindset to follow policy and procedure "as if" there could be someone in the Healing Lodges that are asymptomatic, or just does not show physical signs that they have COVID-19 yet.

To keep balanced during this pandemic we want to stay safe by making sure we follow cleaning and personal safety, while at the same time providing positive affirmations, smudging, using medicinal teas like cedar or mullein can be positive reinforcement to show we are doing all we can to stay healthy.

It is also important to note that we all must keep ourselves safe and reach out and ask for help from each other. COELS has Elders, Counselors, spiritual workers that are willing and able to assist.

Contact Tracing

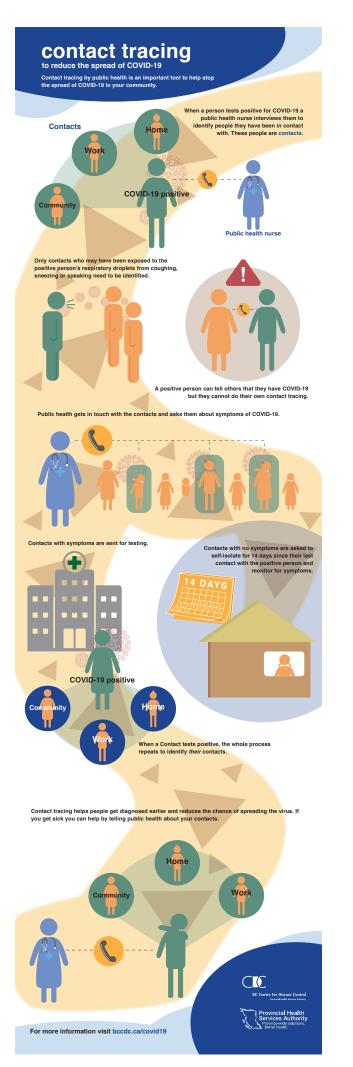
Contact tracing is an important tool to help diagnose people who may have COVID-19 sooner and prevent the virus from spreading in your community.

If you are a contact of a confirmed case, a member of the public health team will contact you to let you know you may have been exposed. If you have symptoms, you will be sent for testing. If you do not have symptoms, you will be asked to self-isolate so that if you develop COVID-19 you will not spread it to others in the community.

If you get sick, you can help by telling public health about the people you have spent time with, meaning your contacts. The sooner we can get the information to others we have been in contact with the safer we can make it for others. With the numbers of cases rising contact tracing can take time to go over, if possible, reach out to other as soon as possible.

Anyone entering the lodge needs to sign in at the admin office, have their temperature recorded, and a contact number listed in the case of a positive COVID-19 at the Lodge.

Please note that with this procedure, COELS was able to identify the normal body temperature of a resident who ultimately tested positive. This is one preventative measure that may inform us when and if someone has been exposed to the virus.



Mandatory Face Covering

As of October 26, 2020, <u>mandatory face covering</u> for all staff, residents, volunteers, essential service personnel in all our facilities which includes Anderson Healing Lodge for Sisters, Naa-na-himyis Healing Lodge for Brothers, COELS Resource Centre and head office on Musqueam.

This includes all areas except for residents' bedrooms, bathrooms, or fully enclosed office spaces where only one person is working.

Masks

Facemasks can be worn to help protect those around you and should be worn by people who are sick.

The ideal is the N95 which is marked as such, these are the ones that are used in hospitals. Due to the shortage of N95 masks, unless you are in direct contact with someone that has tested positive for COVID-19 using other masks are a viable option. For other masks on the market, the protection varies depending on the type of mask you use. For example, if they are made with high quality cotton fabric with a place for an insert is a better choice than a single layer cloth mask.

Masks can have a role to play in preventing the spread of COVID-19. This is because masks act as a barrier and help stop the spread of droplets from a person's mouth and nose when talking, laughing, yelling, singing, coughing, or sneezing.

Wearing a mask should be combined with other important preventative measures such as frequent hand washing and physical distancing. Using only a mask is not enough to prevent the spread of COVID-19.

COELS has purchased masks for use by everyone accessing all of our programs and services.

When to wear a mask

COVID-19 is spread through infected droplets from a sick person's mouth or nose. Wearing a mask when you are sick, helps protect people around you from the droplets that carry the virus. However, wearing a mask while sick does not change the need to stay home. If you cannot physically distance yourself from others at home, a mask can help prevent the spread of germs within the household.

Wear a mask if you are caring for someone with COVID-19.

It is recommended to wear a medical/surgical mask if you are caring for a person with symptoms of COVID-19, especially if you will be in direct contact with a sick person's droplets, saliva, or body fluid.

If you do not have a medical/surgical mask, non-medical masks or facial coverings (e.g., homemade cloth masks, dust mask, bandanas) should be used by the person who is sick, as long as it does not make it more difficult to breathe, to reduce the spread of droplets containing the virus to others in the home. These non-medical masks may also be worn by any household member providing care to a person who is sick.

Any mask, no matter how good it is at catching droplets or how well it seals, will have minimal effect if it is not used together with other preventive measures, such as frequent hand washing and physical distancing.

It is important to treat people wearing masks with respect.

Preventing COVID-19 Transmission During CPR and First Aid

While there is currently no specific data on COVID-19 transmission while performing CPR or giving first aid, it is reasonable to conclude that chest compressions have the potential to generate respiratory droplets or aerosols and close contact needed for some aspects of first aid may have risk of transmission.

Guidance for PPE

We recommend placing a face mask or face covering over the mouth and nose of the victim. If only 1 mask is available and it is simple face mask or face covering, we recommend placing it on the victim.

Guidance for Performing a Breathing Assessment and Rescue Breaths in Children or Adults

While CPR with breaths has been shown to be beneficial when compared to compression-only CPR, during the COVID-19 outbreak, it is currently recommended that no rescue breaths be performed for adult cardiac arrest patients with confirmed or suspected COVID-19, due to the risk of disease transmission. The following measures are recommended and may be associated with a decreased risk of transmitting the virus:

- When assessing for normal breathing, it is recommended by BCCDC that the CPR/first aid care provider looks for breathing but does not listen or feel for the victim's breathing, as this will minimize potential exposure.
- Adult victims of sudden cardiac arrest should receive continuous compressiononly CPR from their CPR/first aid care provider until emergency personnel arrive. Note: Compression-only CPR saves lives compared to no CPR.
- Cardiac arrests that occur after a breathing problem (which is often the case in infants and young children), drowning and drug overdoses may benefit from standard CPR that includes compressions and rescue breaths. Note: It is recognized that in some of the cases, the victim may also have COVID-19.

However, if a lay responder is unable or unwilling to provide rescue breathing with CPR, compression-only CPR should be initiated.

Guidance for Compressions

Chest compressions and use if an AED is available is recommended for every cardiac arrest victim. Whether or not a cardiac arrest victim is suspected of having COVID-19, 9-1-1 should be called and, if available, an AED should be used.

Guidance for AED Application & Use

No studies to date have shown that defibrillation generates respiratory droplets or aerosols, and it is known that prompt use of AEDs save the lives of cardiac arrest victims. In addition, the current methods of automatic external defibrillation use hands-free methods via adhesive pads that allow performance without direct contact with the victim.

- If an AED is available, it should be applied and used consistently with the manufacturer's guidelines while waiting for emergency personnel to arrive.
- If gloves are available, they should be worn.
- The AED device should be cleaned with disinfectant after use.

https://www.redcross.org/take-a-class/coronavirus-information/first-aid-cpr-aed-care-during-covid-19

Cleaning protocols:

We do regular major cleaning at all COELS locations. We have hired a cleaning company to clean and disinfect the common areas of all the high traffic areas including the kitchens, bathrooms, doorknobs, fridges, stoves, common rooms, and other high traffic areas.

A cleaning Schedule that includes a calendar and timeline of expected sanitizing and cleaning activities for each shift. This schedule is posted in the staff office and each staff person on duty is expected to follow. Please ensure all the cleaning is being completed on a regular basis. Management will conduct spot checks daily and will sign off once the cleaning/sanitizing activity has been completed.

Staff, Brothers / Sisters all have access to cleaning supplies so that everyone can disinfect everything including their rooms. We need to continue to remind each other verbally, with notices and posters, and to use the sanitizer that has been distributed all the time.

Brothers / Sisters should be encouraged to keep their rooms clean to be easier to sanitize on a regular basis. Bedding, linens, towels, and bed covers have been provided for all rooms.

Classifying and Responding to Disruptions - Five Levels

There are five levels of classification for the pandemic.

Level One - Planning Stage

This level also is a time to ensure that all Universal Precautions are followed. See more information in the sections below. The CPRT will continue to advise, revise if necessary, adapt resources and continue to respond to new information.

All staff including Brothers and Sisters are encouraged to continue physical distancing guidelines.

All meetings including Board Meetings, Staff Meetings, Brothers and Sisters meetings will continue to be held online and via teleconference until further notice.

There will only be essential visits at all COELS locations. Essential visitors include Parole Officers, Elders. Any other essential visitors that need to be at the Lodges should be confirmed with the House Manager prior to arrival.

Level Two - Possible COVID-19 Virus Transmissions

This level will continue the activities mentioned in Level One and will also begin to implement other strategies and activities. Senior management must be informed immediately in all instances.

Staff and/or anyone in the organization who may have come into direct contact* with someone who has the virus will result in:

- Self-monitoring, and if any they display any symptoms, they should self-isolate and be tested. Management should be let know as soon as possible so contact tracing can begin.
- If the COVID-19 test comes back positive, staff may not return to work until
 they have been cleared by Vancouver Coastal Health. If the COVID-19 test
 comes back negative, staff should not come back to work until there is no
 symptoms.
- Direct contact as defined by BCCDC which included being in the same room with an individual that has tested positive for COVID-19 with no mask on, within 6 feet of each other, and for longer than 15 minutes, will require self-isolation for 14 days.

Brothers and Sisters in the organization who may have come in direct contact* with someone who has the virus will result in:

- Self-monitor and if any they display any symptoms, they should self-isolation and be tested. Management should be let know as soon as possible so contact tracing can begin. Correctional Services Canada will be notified if a Brother or Sister is showing signs of COVID-19.
- If the COVID-19 test comes back positive, the Brother/Sister will be moved to another location. The decision of where they will be moved to will be made with consultation with CSC.
- They may not return back to the Lodge until they have been cleared by Vancouver Coastal Health.
- If the COVID-19 test comes back negative the Brother/Sister should selfmonitor at the Lodges, or offsite depending on what Vancouver Coastal Health contact tracing chooses for 10 days after the first contact exposure.

*Direct contact as defined by BCCDC which included being in the same room with an individual that has tested positive for COVID-19 with no mask on, within 6 feet of each other, and for longer than 15 minutes, will require self-isolation for 14 days.

There will be restrictions on movement. Only the Brothers and Sisters that reside in the Lodges and Staff scheduled on shift will be allowed into the facilities. Daily temperature checks for staff and Brothers /Sisters will be implemented to. Medical advice can be accessed by calling 811.

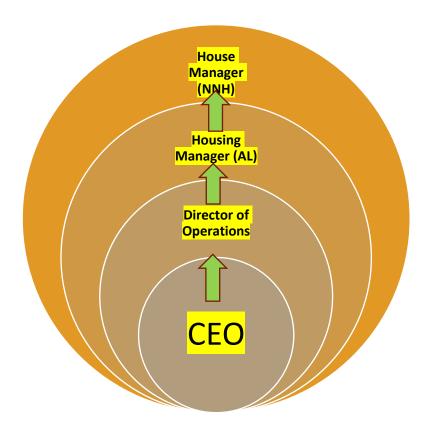
COELS Contingency Plan to Manage Broader Disruptions

Disruption to Leadership

The Board President will become actively involved in the organization's day to day activities to ensure supports are there on an ongoing basis if the CEO becomes incapacitated.

The following plan will be followed:

- ✓ Should the CEO become incapacitated the Director of Operations will assume the role of Acting CEO.
- ✓ Should both the CEO and the Director of Operations become incapacitated the House Managers will take over the role of Acting CEO.



Signing Officers and Stamps

As COELS currently has five signing officers, a CEO stamp will be used by the Acting CEO. Should the CEO be unable to authorize such expenditures then one of the Acting CEOs mentioned above along with the Board President and/or COELS signing officer will authorize the use of the CEO's stamp.

Cheques will be signed by a second signing officer away from the office and be delivered in envelopes that have been sanitized.

A mask must be worn by the person delivering cheques for signature and must drop the envelope with cheques. After the cheques are signed, they will be returned to the Finance Manager for distribution.

Communication Plan regarding Leadership

Establishing a clear communication plan will ensure that COELS plan for sharing critical messages to key stakeholders and the organization's response to those issues is described in the various levels above.

The CEO or the Acting CEO will be responsible for directing and ensuring that at each level the organizations strategies are communicated.

It is important to ensure that all stakeholders are aware of key messages, activities, and responses. Stakeholders include: Board, Management, Staff, Brothers and Sisters and others, as well as our other key stakeholders including Corrections Services Canada, Lu'ma Native Housing, Vancity, and other partners.

The CPRT will work with the CEO and/or the Acting CEO in communicating the messages.

Disruption to Workforce

When there is a disruption to the workforce this section will describe the key activities to ensure COELS is continuing to provide services to the Brothers and Sisters.

- 1. All Staff must ensure that they have updated all their contact information and that this key information is in their employee files. Managers and supervisors of all the programs will ensure that this information is gathered.
- 2. All Staff must have their emergency contact information up to date.
- 3. Should an employee become ill, they must report their illness and infections to the Senior Management Team who will begin to decide on next steps. Staff will call in or email the admin email. The Manager will follow up with a phone call to check on the status of the employee. 811 or the self-assessment online tool should be completed to see if testing is required, after self-monitoring to see if symptoms are getting worse.
- 4. Management and support staff may be called upon to cover shifts should there be a shortage of staff to cover all shifts. This may take them from their regular duties and this information will be conveyed to key stakeholders, i.e., funders who rely upon reports etc.
- 5. All meetings including: Board Meetings, staff meetings, Brothers and Sisters meetings will be held online either through teleconferences, ZOOM, Microsoft Teams, or other online service.
- 6. All staff must follow the Government of Canada and the BC Government travel advisories and no staff should be traveling against those travel advisories. All international travel is to be postponed. Staff will not be allowed to return to work until they have been self-isolated for 14 days upon their return.
- 7. All staff will ensure a safe workspace and follow WorkSafe BC Guidelines, as well as following the regular cleaning schedule, sanitization, wearing protective gear accordingly, practicing physical distancing, daily health monitor checks, regular temperature checks, ensuring that all minimum persons in offices common areas, monitoring and ensuring that everyone is complying with these protocols and procedures..
- 8. COELS will ensure that all staff continue to get paid, payroll is currently offsite, so all staff should not experience payroll disruption.
- 9. In the case an employee must take more days off, they must apply for emergency medical EI. COELS will assist staff by issuing a Record of Employment as soon as possible.
- 10. Contractors will be paid as per their contract for a period of two weeks.
- 11. All staff must be aware of the different levels of isolation that is found to this document in the appendices.

12. This is a living document and the CPRT and Management may make recommendations to the COELS Board and Staff to add additional measures and responses.

SEE COELS Policies and Procedures Manuals for more information if required.

Information Technology

COELS will ensure that the IT infrastructure can support work at home arrangements, while ensuring overall system security following protocols established through the Statement of Work and IT Policies and Procedures.

All system back-ups in the event of an IT system outage will be followed.

Office 365 documents can be stored in the cloud, so they are available if work needs to be done offsite. Protected B information cannot be stored on the cloud.

There will be training for staff and Brothers and Sisters to be able to navigate through the online programs being introduced.

Some funding for updating and repairing computers has been secured up until March 31, 2021

If internet connection is lost, we will communicate by telephone and keep physical records.

All of COELS programs and services are being moved online so that the Brothers, Sisters and community served continue to receive the level of support to ensure a successful reintegration into the community.

Disruption to COELS Operations

This section will consider alternate ways of avoiding certain key activities to ensure that the houses are operating efficiently and effectively.

Shopping

Currently the House Manager of Anderson Lodge and a House Support Worker of Naa-na-himyis do the shopping. Alternate arrangements including home delivery will be implemented. The system for shopping will be moved online as much as possible, limiting the exposure of staff to do shopping at the stores.

We will be hiring a cook for both Naa-na-himyis and Anderson Lodge to be able to assist with shopping, creating a menu, and keeping the kitchen sanitized, and following COVID-19 procedures as outlined by the Vancouver Coastal Health. Staff will assist the cooks when needed.

Funders

COELS Management will approach funders to ensure that the key programs and services continue. They will ask that consideration be given to providing funding for at least two months ahead. This will ensure that there is no disruption of services and will not negatively impact cash flow. Should managers be unable to provide reports on a timely basis, i.e. they must cover shifts at the lodges, funders will be asked to release funds so that COELS operations may continue.

Insurance

COELS Insurance covers business interruption up to \$100,000.00 per month. However, the business interruption must be issued by Public Health Order, or other government agency.

Travel Restrictions

The conditions around travel has changed since the beginning of COVID-19, at the time of this writing the Public Health Order has the following travel advisory:

At this time, all non-essential travel should be avoided. This includes travel into and out of B.C. and between regions of the province. For example:

- Do not travel for a vacation
- Do not travel to visit friends or family outside of your household or core bubble

COELS will continue to adapt its programs and services according to Public Health Orders, CSC directives and other government agencies.

What is essential travel?

Individual circumstances may affect whether a trip is considered essential or non-essential. Essential travel within B.C. includes:

- Regular travel for work within your region
- Travel for things like medical appointments and hospital visits

For example, if you live in Vancouver and work in Surrey you can continue to commute. Gov't of BC Public Health Order.

If you need to travel for essential reasons, take the same health and safety precautions you do at home.

- Wash your hands often
- Practice safe distancing, 2 m
- Travel only with yourself, household or pandemic bubble
- Stick to the outdoors whenever possible
- Clean spaces often

Wear a mask in indoor spaces

First Nations communities

Many First Nations have declared a state of emergency for their communities and enacted COVID-19 community protection by-laws including travel bans for non-residents and non-essential visitors. It is important to respect these restrictions in addition to the province-wide travel advisory.

As mentioned above, all staff must follow the Government of Canada and the BC Government travel advisories and no staff should be traveling against travel advisories.

All international travel is to be postponed effective immediately. Staff will not be allowed to return to work until they have followed the guidelines set by the regulating bodies, should they need to travel for essential purposes or against the advisories.

They will not be allowed to return to work until they have been self-isolated for 14 days upon their return.

COVID-19 Financial Assistance for Staff

Should staff have to take mandatory health leave, COELS will ensure that they receive any documentation that is required to access the assistance available. If you are unable to continue to make their obligations to their bills i.e. rent, mortgage, vehicles etc. please contact your manager for further information.

All staff should check the Government of Canada Website to discuss their eligibility to receive benefits. https://www.canada.ca/en/services/benefits/covid19-emergency-benefits.html

Public Health Orders

COELS, other halfway houses, CSC along with everyone else in BC must follow all Public Health Orders. At the time of writing this manual, December 14, 2020 the following Public Health Order was in place.

Once a Public Health Order has been issued, CSC, BC Yukon Halfway House Association will meet to discuss what the Public Health Order means.

- 1. CSC will issue new directions and may suspend some activities, i.e. weekend passes, travel, and other.
- 2. COELS will also issue a memo to staff, Brothers and Sisters.

The Public Health Orders must be followed and please note that fines may be issued if they are not followed.

PART THREE - CORONAVIRUS PREVENTION EDUCATION MATERIALS

After COELS initial COVID response, materials were developed including a series of Manual/Workbooks on COVID-19 for COELS Administration, Brothers and Sisters and our staff, as well as new arrivals.

The first two workbooks will be updated with current information as of December 2020, combined and distributed to the Brothers, Sisters, and staff to complete

Everyone will be asked to do the following:

- 1. Read through the manual/workbook.
- 2. A Case Worker is available to work through the questions found in the book which will demonstrate knowledge of COVID-19.
- 3. The answers provided are then reviewed by House Manager(s), each person must be willing to keep themselves and others healthy by following the guidelines found in the resource.
- 4. After completing one of the books, participants receive an incentive with additional time away from the lodge, and a \$50 gift certificate.
- 5. Any new Brother, Sister, or staff member will be required to complete the booklets at time of intake / or hiring.

There will be one more booklet in the new year that will cover resources that will contain information regarding COELS programs and services, as well as community resources.

Adapted and Revised Resource Materials

The following resource materials will be adapted and developed. They will also be made available by online at our website, coels.ca as well as in common areas in the Lodges.

- 1. COELS Pandemic Response Planning Guide
- 2. COVID Prevention Education Materials

Hand Washing Materials



Each person can help Naa-Na-Himyis and Anderson Lodge to stay healthy.

Simple frequent handwashing with soap and water protects you and others.

- · Before, during, and after preparing food
- Before and after eating food
- Before and after caring for someone at home who is sick with vomiting or diarrhea
- · Before and after treating a cut or wound
- Before and after cleaning and disinfecting
- After using the toilet
- After blowing your nose, coughing, or sneezing
- · After touching an animal, animal feed, or animal waste
- After handling pet food or pet treats
- · After touching garbage

Handwashing is one of the best ways to protect yourself, your colleagues, the Brothers and Sisters and your families from getting sick. Learn when and how you should wash your hands to stay healthy.

Wash Your Hands Often to Stay Healthy

You can help everyone within the Circle of Eagles Lodge Society to stay healthy by washing your hands often for *20 seconds*, to stop the spread of germs:

FIVE Easy Steps for Proper Hand Washing

Washing your hands is easy, and it is one of the most effective ways to prevent the spread of germs. Clean hands can stop germs from spreading from one person to another and throughout the Brothers and Sisters Lodges, and to the entire community—from your home and workplace, here at Naa-na-himyis and Anderson Lodge to other Community Residential Facilities, and elsewhere. Follow these five steps every time.

- 1. **Wet** your hands with clean, running water (warm or cold), turn off the tap, and apply soap.
- 2. Lather your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
- 3. **Scrub** your hands for at least 20 seconds. Need a timer? Hum the "Happy Birthday" song from beginning to end twice.
- 4. Rinse your hands well under clean, running water.
- 5. Dry your hands using a clean towel or air dry them.

MANDATORY STAFF HANDWASHING NOTICE



BE LIKE THE BEAVER.

ALL STAFF MUST WASH THEIR HANDS BEFORE RETURNING TO WORK.

WE GIVE A DAM.

Brothers and Sisters Kits

COELS will be handing out individual kits for the Brothers and Sisters and the following will be included:

- 1. Individualized soap
- 2. Hand Sanitizer
- 3. Toothbrush & toothpaste
- 4. Nail Clippers
- 5. 3 cloth masks, ideally with inserts, that should be washed after each day's use and rotated
- 6. One-page info sheet
 - a. Small info sheet on COVID-19 and how to protect oneself
 - b. What to do in case they get sick whether it is flu or the coronavirus
 - c. Self-isolation
 - d. Mandatory Isolation What happens if the Brother or Sisters must be placed under mandatory isolation.
 - e. Quarantine What happens if the Lodges must be quarantined?
 - f. Brothers and Sisters Responsibilities
 - g. Management and Staff Responsibilities

It is everyone's responsibility to ensure that they are preventing the spread of the virus.

Other Resources

Other resources will be shared, developed, or adapted for key stakeholders.

STEPS TO TAKE BASED ON SYMPTOMS OR NO SYMPTOMS					
		SYMPTOMS			
	NOT at high risk of complications; without covid-19 or any exposure risk	NO SYM At HIGH RISK of complications without any exposure risk, e.g. elderly, or with other chronic	HIGH RISK of exposure, e.g. close, unprotected contact	MEDIUM RISK of exposure, e.g. protected contact such as wearing a mask or traveller	SUSPECTED of having or known to have covid-
		health issues		from affected area like the United States	
HAND HYGIENE	✓	✓	✓	✓	✓
RESPIRATORY ETIQUETTE	✓	√	✓	√	✓
USE OF FACE MASKS	√ When in public	√ When in public	√ When in public	√ When in public	√ Including any caregivers
CLEANING	✓	✓	✓	✓	✓
SELF-MONITORING			✓	✓	√ Watch for worsening

SOCIAL DISTANCING						
		SYMPTOMS				
	NOT at high risk of complications; without covid-19 or any exposure risk	At HIGH RISK of complications without any exposure risk, e.g. elderly, or with other chronic health issues	HIGH RISK of exposure, e.g. close, unprotected contact	MEDIUM RISK of exposure, e.g. protected contact such as wearing a mask or traveller from affected area like the United States	<u>SUSPECTED</u> of having or known to have covid-19	
ISOLATION					✓	
VOLUNTARY HOME QUARANTINE (SELF- ISOLATION)			√		?	
PROTECTIVE SELF-SEPARATION		√				
VOLUNTARY AVOIDANCE OF CROWDED PLACES				√	?	
MANDATORY QUARANTINE			√ Depending on circumstance		?	

PART FOUR - PANDEMIC ISOLATION AND QUARANTINE PROCEDURES

Guidelines for Supporting and Seeking Medical Attention

During an illness, Brothers and Sisters may need assistance and guidance from staff to manage their illness. This includes contacting agencies on their behalf, seeking medical attention, implementing self-isolation protocol(s), mandatory isolations and/or quarantine and which may also include hospitalization. Staff are required to wear masks and keep a safe distance while asking brothers and sisters questions about their health. Please bear in mind the flu season will start in the fall season, so it may be difficult to determine if someone is showing flu symptoms or covid-19 symptoms. It is important to use caution and assume it could be covid-19. All staff, brothers and sisters are strongly encouraged to get the flu shot.

1. The following are a list of steps and questions to ask Brothers and Sister(s) when they approach staff for guidance and assistance on how to care for themselves. Remember, the symptoms of COVID-19 are similar to other respiratory illnesses including the flu and common cold. The most common symptoms of COVID-19 include:

Ask if they have any of these symptoms:

- Fever
- Cough or worsening of chronic cough
- Sore throat
- Loss of sense of smell or taste
- Fatigue
- Loss of Appetite

- Chills
- Shortness of Breath
- Runny nose
- Headache
- Diarrhea
- Nausea and Vomiting
- Muscle aches

While less common, symptoms can also include:

- Stuffy nose
- Conjunctivitis (pink eye)
- Dizziness, confusion
- Abdominal pain
- Skin rashes or discoloration of fingers or toes.

Source: BCCDC

If they do have any of the above symptoms, take these steps depending how severe their symptoms are:

- Call 8-1-1 for medical advice
- Complete the BC COVID-19 (online) self-assessment tool with the Brother/Sister
- You can arrange testing through calling 8-1-1 or online.
- If the person does not have symptoms, no test is needed.
- 2. If the Brother or Sister responds with a "Yes" to these following symptoms, call 9-1-1:
 - Severe difficulty breathing,
 - Severe chest pain,
 - Hard time waking up,
 - Feeling confused or losing consciousness.

If the paramedics say that they can remain at the facility, the following steps need to be implemented during a pandemic outbreak.

Self-Isolation

Self-Isolation -

- The Brother or Sister will immediately self-isolate. A bathroom will be closed to all and they only will access to a designated bathroom, they will be required to remain in their bedrooms until their symptoms have been resolved and have permission from a primary care provider to fully participate in daily activities. The closest bathroom will be designated with a sign for isolation use only.
- > Staff will immediately phone the CEO, the Director of Operations, and the House Manager's who will begin the process of ensuring that the Brother or Sisters is moved off-site. At this time, due to limited space COELS is unable to safely host an individual who has COVID-19 or has been asked by Public Health to self-isolate.
- Mgmt. Team will work with CSC and Public Health to ensure that the individual is safely moved offsite, and once the person is no longer positive for COVID-19 or they have completed their self-isolation, they may return back to the Healing Lodges.
- Until the above occurs the following will be implemented. Staff will place a sign outside the Brother's or Sister's door, that reads "SELF ISOLATION" Below the sign, post the following instruction for staff to take precaution:
 - Staff must wear a gown, gloves, mask, eye protection
 - The gowns, gloves, masks, and eye protection must be disposed into the garbage bin placed outside the sister's room each time after bringing a meal or providing direct care for the Brother or Sister.
 - If there are multiple Brothers and Sisters that are ill, staff must not go from room to room with the same gown, gloves, masks, and eye protection. They must be changed each time for each room.
 - Staff must wash their hands after leaving each of the Brother's or Sister's rooms please see above for proper hand washing.
- A cart will be placed outside the room with personal protective equipment (PPEs): gowns, gloves, masks, and N95 respirators.
- > A garbage bin will be placed outside the Brother's or Sister's room to dispose of their gowns, gloves, masks, and eye protection.
- Staff must ensure that the garbage bin is emptied out on a regular basis: after each shift.
- > Staff will deliver meals and supplies to the self-isolated individual.
- Brother or Sister will be allowed to go out for health breaks, smoke, get some fresh air, but must always avoid other people, wear a mask. We promote a safe and healthy environment for everyone. Please be kind and respectful to each other.

Isolation - multi beds (Double Room)

For Brothers and Sisters sharing a room, both individuals will be asked to self-isolate.

- There should be a two-meter separation between beds and a temporary physical barrier such as a plastic curtain or sheet placed in between the two beds.
- > The beds must be rearranged for the Brothers and Sisters to lay head to toe in relation to each other.
- Besides having access to a designated bathroom, they will be required to remain in this room until their symptoms have been resolved, or they have been moved out of the Healing Lodges and/or have permission from Public Health to end their selfisoaltion. The closest bathroom will be designated with a sign for isolation use only.
- Until the above occurs the following will be implemented. Staff will place a sign outside the Brother's or Sister's door, that reads "SELF ISOLATION" Below the sign, post the following instruction for staff to take precaution:
 - Staff must wear a gown, gloves, mask, eye protection
 - The gowns, gloves, masks, and eye protection must be disposed into the garbage bin placed outside the sister's room each time after bringing a meal or providing direct care for the Brother or Sister.
 - If there are multiple Brothers and Sisters that are ill, staff must not go from room to room with the same gown, gloves, masks, and eye protection. They must be changed each time for each room.
 - Staff must wash their hands after leaving each of the Brother's or Sister's rooms please see above for proper hand washing.
- > A cart will be placed outside the room with personal protective equipment (PPEs): gowns, gloves, masks, and N95 respirators.
- > A garbage bin will be placed outside the Brother's or Sister's room to dispose of their gowns, gloves, masks, and eye protection.
- > Staff must ensure that the garbage bin is emptied out on a regular basis: after each shift.
- > Staff will deliver meals and supplies to the self-isolated individual.
- > Brother or Sister will be allowed to go out for health breaks, smoke, get some fresh air, but must always avoid other people, wear a mask. We promote a safe and healthy environment for everyone. Please be kind and respectful to each other.

Guidelines for Environmental Control - Housekeeping, Laundry, Waste

The following are some guidelines for environmental control.

- During a pandemic outbreak, the Brother's or Sister's bathrooms and showers will have to be cleaned and disinfected daily by staff. The recommended solution is 1000 parts per million of available chlorine, usually achieved by a 1 in 5 dilutions of 100% disinfectant bleach (e.g. Clorox or Javex Bleach).
- > Staff will be expected to clean and disinfect common touch surfaces such as telephones, keyboards, handrails, doorknobs, kitchen counters, dishes/cutleries, and refrigerator handles on a daily basis. Please see Cleaning Schedule and procedures in the Cleaning Schedule Section of this report.
- Please wear protective personal equipment such as gowns, gloves, masks, and eye protection when assisting a Brother or Sister with personal laundry and washing linens.

No Visitor Policy

COELS has adopted and implemented a No Visitor Policy. Only essential personnel, those Brothers and Sisters that work there, staff on shift are allowed in the Healing Lodges. Staff should not be 'dropping by' or visiting other locations to limit the potential of spreading the virus from one location to the other.

- Avoid close contact by practicing Physical Distancing with other Brother's and Sisters and staff by standing 2 meters apart. There are floor decals that will show where Brothers and Sisters should be standing when entering or interacting with the staff in the offices and throughout the Healing Lodges.
- Please schedule appointments by phone or online, instead of with visitors coming onpremises.
- > Avoid shaking hands or hugging other Brothers or Sisters, staff, and visitors.
- > Talking circles and all group cultural activities, including Sweat Lodge ceremonies, will be postponed until further notice.
- 3. Upon receiving confirmation from a primary caregiver/medical professional, or Public Health a Brother or Sister may participate and resume daily activities, the isolation protocol/steps may be lifted.

COVID-19 Fatigue

The term COVID fatigue is becoming a common term that we are hearing. COVID fatigue puts us in danger of more than our mental health, it puts us in physical risk as well. The constant barrage of information of looming illness, safety protocols, overdoses, and deaths has led a lot of people to emotional exhaustion that we are now calling COVID fatigue.

When our bodies go into stress mode, they enter the fight or flight mode; fight, flight, freeze or faun. Most stresses are not long term as the way COVID-19 has been. It just has not given us a rest and some of us are just not as prepared to handle the stress that goes on for this long. As a result, we are increasing the freezing (becoming paralyzed in the face of the threat) or fauning (giving into the threat) which often turns into COVID fatigue.

Here are some of the ways you can help overcome COVID fatigue:

Exercise

Exercise is one of the ways you can release the energy that builds up from stress and worry. Releasing that energy helps to not make mistakes or have emotional outbursts. It also releases endorphins that make us feel better.

With limitations on going to gyms, there are still other ways you can get exercise. Going for a walk in the fresh air is a great form of exercise. There are YouTube videos and exercise videos you can buy or access for free that can walk you through a program that fits your level of fitness. If you are driving or taking a bus, take the longer route to get to your destination and then walk back to get in a few more steps.

Stay Physically Distant, not Socially Distant

Use technology to stay in touch with other people, call friends and family regularly. Attend online support groups and virtual meetings, join groups online. There are more and more online options to join from AA to learning to learning how to make crafts. It is not a substitute for meeting in person, but it is a way to stay socially connected.

Watch What you are Watching

With media so readily available it is difficult not to stay connected 24/7 with updates and reminders that COVID-19 is all around us. Be mindful of what you watch, it is good to be informed but consuming information all the time can be an overload. Be careful as well with social media, which can easily spread disinformation. Many of the larger sites, like YouTube will not allow creators to profit from videos about coronavirus, or COVID-19 to prevent misinformation.

Culture

During the pandemic there has been many limitations people gather, the "new normal" is very difficult makes it difficult to gather and keep everyone safe. Smudging, going to the water for a spirit bath, or reaching out to Elders on the phone are just a few ways to keep stay safe during COVID-19.

COELS has made some changes to the way we deliver our cultural programs and services.

Practicing Cultural Ceremonies in a Safe Way during COVID

During these times, it is extremely important to continue to practice our culture and to do it safely.

The following are some guidelines to think about how to keep yourself and those around you safe as you take part in cultural activities. Keep these questions in mind when you are planning your ceremony.

What is the activity, will I be sharing anything, i.e. pipe, food, medicine tea?
How many people will be there?
Can I practice physical distancing, at least 2-metres from the person next to
me?
Will it be indoors or outdoors, or inside a Sweat Lodge?
Do I <mark>or should I</mark> wear a mask?

Cultural, Essential, Mental Health Time Extensions

Cultural

What are examples of cultural outings?

- Spirit baths
- Medicine collection
- Letting go ceremonies
- Food Harvesting
- Cultural- see safe cultural ceremony practices (drum, sweat, smudge)

Essential

What are some examples of essential visits?

- Doctors, and medical health professionals
- Banking
- Meeting your Parole Conditions, i.e. meeting Parole Officers, CSC programs, UA (urinalysis) testing.

• Work

Mental Health

- Counselors and mental health support
- Physical activity following safe distancing protocols
- Part of your wellness plan as per by your COELS CMT

ALL extensions of time must be confirmed by the House Managers prior to 4 pm the day before the outing. Time is to be determined on a case by case basis.

What is Safe? What is Not Safe?

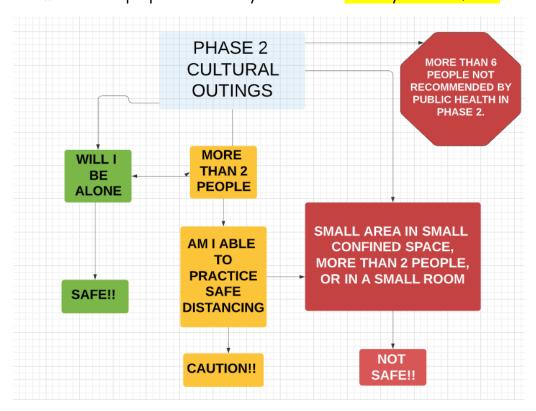
How do we ensure safe Cultural, Essential and Mental Health Outings?

1-2 people SAFE

2-6 CAUTION

6 or more NOT SAFE and not recommended by public health at this time during phase 2.

*no more than 6 people that are in your "bubble" and only those safe six.



CULTURAL CEREMONIES

COVID-19 has brought a lot of challenges and this has really impacted our ability to be part of our ceremonies. We can still do a lot and we can be safe while engaging in many of them. We all have a right to the way we do our Ceremonies and the following is recommended as a guide only.

Prayer is always safe when you are praying alone.

Cultural	Green	Yellow (CAUTION)	Red
Activity	(SAFE)	Tellow (CAUTION)	(NOT SAFE)
•		VA/lean aiddine in a	
Pipe Ceremonies	For some of us, the Pipe Ceremony is very	When sitting in a circle, sit at least 2	Sharing your pipe during these times is
ceremonies	important and	meters apart. Wear a	not recommended
	connects us to the	mask when necessary.	outside of your
	Creator, Grandfathers	<i>,</i>	families.
	and Grandmothers.		
	You are able to engage		
	in Pipe Ceremonies and		
	are encouraged to		
	raise your Pipe and		
	pray for all of us		
Singing and	At this time hand	Exercise caution when	There are no safe
Big Drum	drumming and singing	you are in a group	protocols to sing
	at a safe distance of 4	setting. You should	around the big drum.
	metres apart is	try to have 4 metres	
	recommended.	when you are sitting	
		next to someone.	
Singing and	This is safe to do	However, when you	If you are going to be
Drumming on	whenever you are	come and share songs	with more than 6
hand drums	alone.	with more than one	people for phase 2 or
		person, it is	3 then it is not safe.
		recommended you	
		wear a mask if you	
		cannot practice	
		physical distancing.	
		Safer to do outside	
		while social	
		distancing.	

	1	T	
Singing	Safe to do alone	When you are singing with other people, try not to sing close to each other, you must have at least 4 metres when you are singing next to someone.	Singing inside is not safe.
Smudging	Elders teach us that smudging cleans our spaces and cleans our spirit. Try to continue to smudge safely. Please follow the protocols for smudging in your rooms.	When two or more people are smudging you should be at least two meters away from each other,	If in a group try not to hold hands or if you do, then please wash your hands and avoid touching your face
Sacred Fire	COELS will be lighting the Sacred Fire at Anderson Lodge. will be available to the Brothers of Naa-na-himyis on Sundays and Anderson Lodge Sisters on Wednesdays. Please follow the protocols set for this sacred ceremony. Initially, there will only be one-on-ones with the Elders	There will be more than 2 but under 6 people as long as social distancing and safe protocols are followed.	No more than 6 people as it is currently not recommended.
Working with Elders	One on one and via Zoom online.	More than two people it is somewhat safe as long as you are two meters apart and not in a closed setting,	
Spirit Baths	Safe when you are being driven to the water by COELS to go for a Spirit Bath.		

Sharing	As long as there is a	More than 2 people at	
Circles and	big open space, outside	least two meters	
Talking	and you are at least 2	apart practice caution	
Circles	meters from the	if in a closed setting	
	person next to you,		
	then you are safe		

Appendix One - References

The following references were used in the development of this planning guide.

Websites

https://www.canada.ca/en/public-health/services/diseases/coronavirus.html

 $\frac{https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/prevention-risks.html}{}$

 $\underline{https://www.canada.ca/en/public-health/services/diseases/2019-novel-coronavirus-infection/awareness-resources.html}$

https://www.canada.ca/en/public-health.html

http://covid-19.bccdc.ca/

Circle of Eagles Lodge Society Policies and Procedures Manuals

Appendix Two - Coronavirus Basic Information

Symptoms of coronavirus infections

Coronavirus infections are common and typically lead to the common cold. Gastrointestinal disease is possible for young infants. Symptoms are usually mild to moderate and can include:

- runny nose
- headache
- cough
- sore throat
- fever
- a general feeling of being unwell

If you get a coronavirus infection

If you have cold-like symptoms, you can help protect others by doing the following:

- stay home while sick
- avoid close contact with others
- cover your mouth and nose with a tissue when you cough or sneeze or into your elbow, then throw the tissue in the trash and wash your hands
- clean and disinfect objects and surfaces

How coronavirus infections are diagnosed

Coronavirus infections are diagnosed by a health care provider based on symptoms and laboratory tests.

In some cases, travel history may be important.

Coronavirus infection treatment

For now, there is no specific treatments for most people with coronavirus infection. Most people with common coronavirus illness will recover on their own. Your health care provider may recommend steps you can take to relieve symptoms.

Consult your health care provider as soon as possible if you are concerned about your symptoms or have a travel history to a region where severe coronaviruses are known to occur. The sooner you get treatment, the better your chances are for recovery.

How coronavirus 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.

Preventing coronavirus

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

If you have travelled to an at-risk area

If you have travelled to Hubei province, China, or Iran in the last 14 days, limit your contact with others for 14 days, starting the day you began your journey to Canada. This means self-isolate and **stay at home**. Contact the public health authority in your province or territory 24 hours of arriving in Canada for advice.

If you have COVID-19, reduce contact with others

If you are sick, the following steps will help to reduce contact with others:

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

Being prepared

It is important to know how you can prepare in case you or a family member become ill.

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
 - o use alcohol-based hand sanitizer if soap and water are not available
- when coughing or sneezing:

- o 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):
 - o toys
 - o toilets
 - phones
 - o electronics
 - o door handles
 - o bedside tables
 - o television remotes

Wearing masks

If you are a healthy individual, the use of a mask is not recommended for preventing the spread of COVID-19.

Wearing a mask when you are not ill may give a false sense of security. There is a potential risk of infection with improper mask use and disposal. They also need to be changed frequently.

However, your health care provider may recommend you wear a mask if you are experiencing symptoms of COVID-19 while you are seeking or waiting for care. In this instance, masks are an appropriate part of infection prevention and control measures. The mask acts as a barrier and helps stop the tiny droplets from spreading you when you cough or sneeze.

Risks of getting coronavirus

The public health risk associated with COVID-19 for Canada is low and generally low for Canadian travellers but will vary depending on the destination.

The Government of Canada recommends that Canadians avoid non-essential travel to China and Northern Italy

Canada also recommends that Canadians avoid all travel to the province of Hubei due to very strict travel and movement restrictions imposed by Chinese authorities to limit the spread of COVID-19.

The Government of Canada recommends that Canadians avoid all travel to Iran due to travel restrictions imposed following the spread of COVID-19.

In addition, all travellers should refer to the latest travel health advice and travel advisories for the most up-to-date information on the risk of coronavirus in your travel destination.

Public health risk is continually reassessed as new information becomes available.

Products shipped from other countries

Coronaviruses generally do not survive on surfaces after being contaminated. The risk of spread from products shipped over a period of days or weeks at room temperature is **very low**.

There is no known risk of coronaviruses entering Canada on parcels or packages coming from affected regions in China.

Appendix Three - Different Levels of Isolation

This was taken from the Government of Canada's website.

Physical distancing

Physical distancing measures are approaches taken to minimize close contact with others in the community and include quarantine and self-isolation at the individual level as well as other community-based approaches (e.g., avoiding crowding, school measures and closures, workplace measures and closures, public/mass gathering cancellations) which are further described in the section titled community-based measures below.

Physical distancing measures are likely to have secondary consequences for individuals, families, and communities, such as loss of income, an elevated need for support services, and potentially reduced availability of certain services. Some measures require extensive preparation and engagement across sectors. During a pandemic of lesser severity, the infection control benefits of implementing some community measures (e.g., proactive school closures) may not be offset by the cost and societal disruption caused by these measures.

Whenever public health authorities impose restrictions on individual freedoms, the intervention should be proportional to the magnitude of the threat. This principle of 'least restrictive means' should always be a consideration when enacting social distancing measures. The CPIP Public Health Measures Annex outlines the ethical considerations with respect to the selection and use of PHMs in a pandemic. It is crucial that individuals follow quarantine and self-isolation recommendations properly to prevent transmission of COVID-19 to others in the home setting or in the community. It is recommended that all individuals in the community plan ahead by maintaining a supply of essential medications, home supplies and extra non-perishable food in the event they require voluntary quarantine or self-isolation.

Isolation

- Isolation is recommended for a symptomatic individual that is suspected of having, or known to have, COVID-19. They are directed by PHA to isolate themselves in the home-setting and avoid contact with others until PHA has advised that they are no longer considered contagious. Isolation includes:
 - Not going out of the home setting. This includes school, work, or other public areas
 - Not using public transportation (e.g., buses, subways, taxis)
 - Identifying a "buddy" to check on and do errands for each another, especially for those who live alone or at high risk for developing complications.

- Having supplies delivered home instead of running errands (supplies should be left on the front door or at least a 2-metre distance maintained between people)
- o If leaving the home setting cannot be avoided (e.g., to go to a medical appointment), wear a mask (if not available, cover mouth and nose with tissues) and maintain a 2-metre distance from others. The health care facility should be informed in advance that the person may be infectious.

Voluntary Home Quarantine (self-isolation)

- Voluntary home quarantine ("self-isolation") is recommended for an asymptomatic person, when they have a high risk of exposure to the virus that causes COVID-19, (i.e., through close contact with a symptomatic person or their body fluids). They are asked to self- isolate in the home-setting to avoid contact with others to prevent transmission of the virus at the earliest stage of illness (i.e., should they develop COVID-19).
- Protective self-separation is recommended for a person who is at high-risk for severe illness from COVID-19 (e.g., older adults, those with chronic underlying medical conditions or immunocompromised) when the virus is circulating in their community.
- Voluntary avoidance of crowded places is recommended for a person who is
 asymptomatic and who is considered to have had a medium risk of exposure to the
 virus that causes COVID-19. This involves avoiding crowded public spaces and places
 where rapid self-isolation upon onset of symptoms may not be feasible. Examples of
 these settings include mass gatherings, such as concerts and sporting events; not
 including hospitals (for HCWs) and schools.

Mandatory Quarantine

• Mandatory quarantine is the imposed separation or restriction of movement of individuals, groups, or communities, for a defined period of time and in a location determined by the PHA. As local circumstances will vary across Canada and within regions, quarantine may be used to contain, delay, or mitigate COVID-19, although its effectiveness once there is widespread community transmission is unknown. An individual in mandatory quarantine is asymptomatic but may have been exposed to the virus causing COVID-19. A decision to implement mandatory quarantine requires careful consideration of the safety of the individual/group/community, the anticipated effectiveness, feasibility, and implications.

Self-monitoring

Self-monitoring is implemented when individuals are potentially exposed to the virus and includes monitoring for the occurrence of symptoms compatible with COVID-19. If symptoms develop, the individual should follow the recommended public health actions regarding convalescing at home versus seeking medical care, depending on severity of symptoms and the presence of underlying medical conditions.

Use of masks

Masks should be used by a symptomatic individual, if available, to provide a physical barrier that may help to prevent the transmission of the virus by blocking the dispersion of large particle respiratory droplets propelled by coughing, sneezing, and talking. A face mask should always be combined with other measures such as respiratory etiquette and hand hygiene. They can be worn by people suspected or confirmed of having COVID-19 when in close contact with other people in the home-setting or if they must leave the home-setting for medical attention.

The use of a mask by a healthy person who is providing direct care for a person with COVID-19 should always be combined with eye protection and gloves and other droplet/contact prevention measures including hand hygiene and environmental cleaning.

Community-based measures

Community-based measures are actions taken by planners, administrators, and employers to protect groups, staff, and the population. The measures outlined below are relevant to all non-health care settings and aim to reduce transmission within the community settings such as workplaces, schools, public transportation, communal living settings, spiritual and cultural settings, community centres and other places where people gather such as shopping centres, camps, and entertainment facilities. These measures will always be layered with personal protective measures described above.

Guidance developed for acute health settings is available and can be applied to any setting where healthcare is being provided.

Many of these community-based actions require extensive preparation and engagement across sectors, and secondary consequences (e.g., financial implications, interruptions in social supports, reduction in services, societal disruptions) may be anticipated and should be considered in planning. The implementation of some public health measures may be more disruptive (e.g., school closures) and their use should be based on a risk assessment in collaboration with local authorities, which may result in jurisdictional variations across Canada. These measures are usually associated with pandemics of moderate to high impact given their societal and economic costs. As much as possible, a harmonized pan-Canadian approach should be taken. It is recognized that some individuals, groups, or communities may adopt or decline to adopt measures that are inconsistent with public health advice or

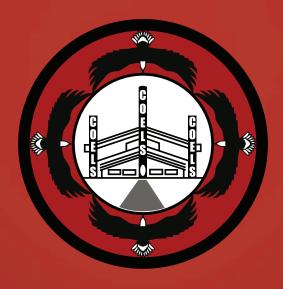
are based on cultural norms (e.g., healthy individuals wearing masks). PHAs should reinforce the rationale for the recommendations, avoid stigmatization of these groups or communities, and plan communications and stakeholder outreach accordingly.

Avoiding crowding

Measures taken to reduce the amount of time individuals spend in large crowds or in crowded spaces can be effective to reduce the transmission of COVID-19 in a community. It is recognized that while this intervention may reduce the viral transmission, some measures (e.g., closing public transit) could also have significant impact on societal function and compliance may be challenging. Restrictions on non-essential gatherings could pose a barrier to accessing group support and personal freedoms (e.g., cancelling church services, closing community centres). It may also have cultural or religious implications (e.g., funerals, religious services, weddings). The feasibility of avoiding crowds is uncertain as crowding occurs in large cities daily (e.g., public transportation, subways, airports, shopping centres, movie theatres). Discretionary gatherings, like churches and theatres, might be left to individual groups, rather than PHAs. Refer to mass gathering, which provides advice related to mass gathering events in the context of COVID-19.

Factors to consider when making decisions:

- The likelihood that people will comply with crowd avoidance.
- People who are suspected or confirmed of having COVID-19 who are self-isolating, should isolate in the home setting and not go out in public.
- People who are self-monitoring for symptoms (see section above) should always avoid crowded settings (e.g., sporting events, concerts, airplanes, subway) and places where rapid self-isolation may not be feasible should symptoms develop.
- When in crowded settings, people should practice personal protective measures (e.g., frequent hand hygiene, avoid touching eyes/nose/mouth).
- Employers/businesses could consider implementing staggered work hours to reduce crowding on public transit during peak commuting hours and in large workplaces during normal workday hours.
- Voluntary quarantine of a community can be considered based on the local epidemiologic and social assessment of the situation.
- If public transportation is shut down, transportation alternatives may need to be considered for emergency medical services or medical treatments (dialysis, chemotherapy), as well as for critical infrastructure workers



Circle of Eagles Lodge Society

Head Office Administration

6520 Salish Drive Tel: 604-428-7963 Vancouver B.C. V6N 2C7 Fax: 604-874-3858

Anderson Lodge Healing Centre for Women

2716 Clark Drive Tel: 604-874-1246 Vancouver B.C. V5N 3H6 Fax: 604-874-9464

Naa-na-himyis Brothers Healing Lodge

1470 East Broadway Tel: 604-874-9610 Vancouver B.C. V5N 1V6 Fax: 604-874-3858

COELS Resource Center

2008 Wall Street Tel: 778-658-5760 Vancouver B.C. V5L 1J5 Fax: 604-874-3858

www.coels.ca