

## COVID-19 SAFETY PLAN HEALTH DECLARATION FORM

Our workplace policies ensure that workers showing symptoms of COVID-19 are prohibited from the workplace.

You will be encouraged to work at home or work alone in place as much as possible and we will be limiting workers on site to groups of 6 total. In order to make the work environment safe for all, please confirm that none of the following apply to you:

(Y/N) \_\_\_\_\_ Have you had symptoms of COVID-19 in the last 10 days? Symptoms include fever, chills, new or worsening cough, shortness of breath, sore throat, and new muscle aches or headache.

(Y/N) \_\_\_\_\_ Have you been directed by Public Health to self isolate?

(Y/N) \_\_\_\_\_ Have you arrived from outside of Canada or had contact with a confirmed COVID-19 case and are currently in a period of self-isolation for 14 days while you monitor symptoms?

(Y/N) \_\_\_\_\_ Are you aware that visitors are prohibited or limited in the workplace?

Our number one priority is the health and safety of our workers so if at any point leading up to your day on site do any of the above situations change, or you start to feel unwell – please call production 24/7 to update them on your situation.

We have included below a number of Worksafe BC brochures on Reducing Risk, Safety/Cleaning/Disinfecting, Cover Coughs & Sneezes, Hand-washing protocols, How to Use a Mask and Occupancy Limits. Please ensure you read over all of these before coming to site. These will also be posted at site for your review at any time.

While on site, if you start to feel unwell please immediately report to first aid – even if you only have mild symptoms. You will be asked to wash or sanitize your hands, you will be provided with a mask and asked to isolate until you can safely leave site to go home. First Aid will assess if they need to call 811 for further guidance related to testing and self-isolation. If you are severely ill (eg. difficulty breathing, chest pain) call 911. Production will clean and disinfect any surfaces that you have come into contact with.

All workers will be asked to confirm that they have read and understood these Worker Policies as well as the overall Safety Plan and attached brochures and will adhere to all rules whilst on site with Alterna Films.

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(Signature)

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(Name)

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(Date)

Contact Info (Cell): \_\_\_\_\_ (Email) \_\_\_\_\_