

Contingency plan for COVID-19

**University
of Porto**

05/03/2020

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1. INTRODUCTION

COVID-19 is an emerging infectious disease, originated in the Chinese city of Wuhan and whose earliest cases date back to December 2019. While the source of infection remains unknown, the majority of these earlier cases have been linked to a food and live animal market in Wuhan. Ever since, the outbreak has become an epidemic, with cases confirmed in over 90 countries, Portugal included. The Emergency Committee convened by the World Health Organization (WHO) has declared the novel virus a Public Health Emergency of International Concern, under the scope of the International Health Regulations (IHR). According to the European Centre for Disease Prevention and Control (ECDC), the potential impact of COVID-19 is high, with the virus' continuous and global propagation deemed probable. Infection takes place by human-to-human transmission, by direct or indirect contact via respiratory droplets. Upon contact with the virus, most people will develop light symptoms; the probability of more severe complications is bigger in elder segments of the population or in people with a history of chronic illnesses.

Bearing this mind, it is quintessential for institutions, organisations, services and for society in general to be prepared to provide an effective and assertive answer. The development of activities shall be proportional to the risk level defined by reference institutions. The strategy to follow shall keep into account an alignment with the World Health Organization (WHO), as well as with the Portuguese General Directorate of Health. Contingency plans are crucial guidelines regarding what measures to take, and should be in accordance with intervention areas, risk level or the specificity of the organisations in which they are activated.

The University of Porto (U.Porto), in light of the current risk and of its responsibility towards the entire academic community, has elaborated the following contingency plan, in compliance with orientations from the DGS. Its application is to be dynamic and changeable in accord with new information or with any new facts that come to light. These may lead to new measures and result in the plan's update.

2. TARGET POPULATION

U.Porto's community (students, teaching and non-teaching staff and researchers from all institutions pertaining to the University).

3. GOALS

1. To determine the needs and resources for an effective response proportional to the risk level;
2. To communicate and make known any reliable and updated information to U.Porto's community;
3. To implement primary prevention measures, suitable to any current risk level;
4. To precociously detect any illness cases and their respective contacts, making way for a responsive connection to the appropriate health services;
5. To ensure a coordinate response with other institutions and organisations;
6. To ensure the continuity of U.Porto's teaching and learning process, according to the risk level;
7. To minimise the effect of the epidemic within U.Porto's community.

4. GOVERNANCE MODEL

4.1. U.Porto Task-force

José Castro Lopes (Coordinator)
Pro-Rector at U.Porto

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Porto Oriental Health Centre

Henrique Barros
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João Paulo Magalhães
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Raúl Santos

U.Porto's Communication and Image Service

Teresa Leão

Institute of Public Health, University of Porto

4.2. Executive group

Each element of the Executive Board of any constituent institution, henceforth designated as responsible person, has the following duties:

1. To ensure the creation of an isolation room and corresponding route;
2. To ensure the disclosure of information to every professional staff or student regarding the existence of an isolation room and corresponding route, as well as the measures foreseen by the present document;
3. To guarantee the resources and the conditions for the implementation of this contingency plan;
4. To be responsible for activating any measures in face of a suspected case, as well as for providing information regarding student class lists and timetables;
5. To communicate any difficulties in the implementation of this contingency plan to the task force, through the e-mail address: covid-19@reit.up.pt;
6. In case of refusing to comply with this contingency plan, a responsible person shall contact the task force, whose remaining members will then deliberate on measures to take pursuant to any ethical and legal considerations in force;
7. To provide the task force with all the information deemed relevant for the understanding of the dynamics of this infection within the institution they represent.

The task force and the executive group may work together with the following institutions:

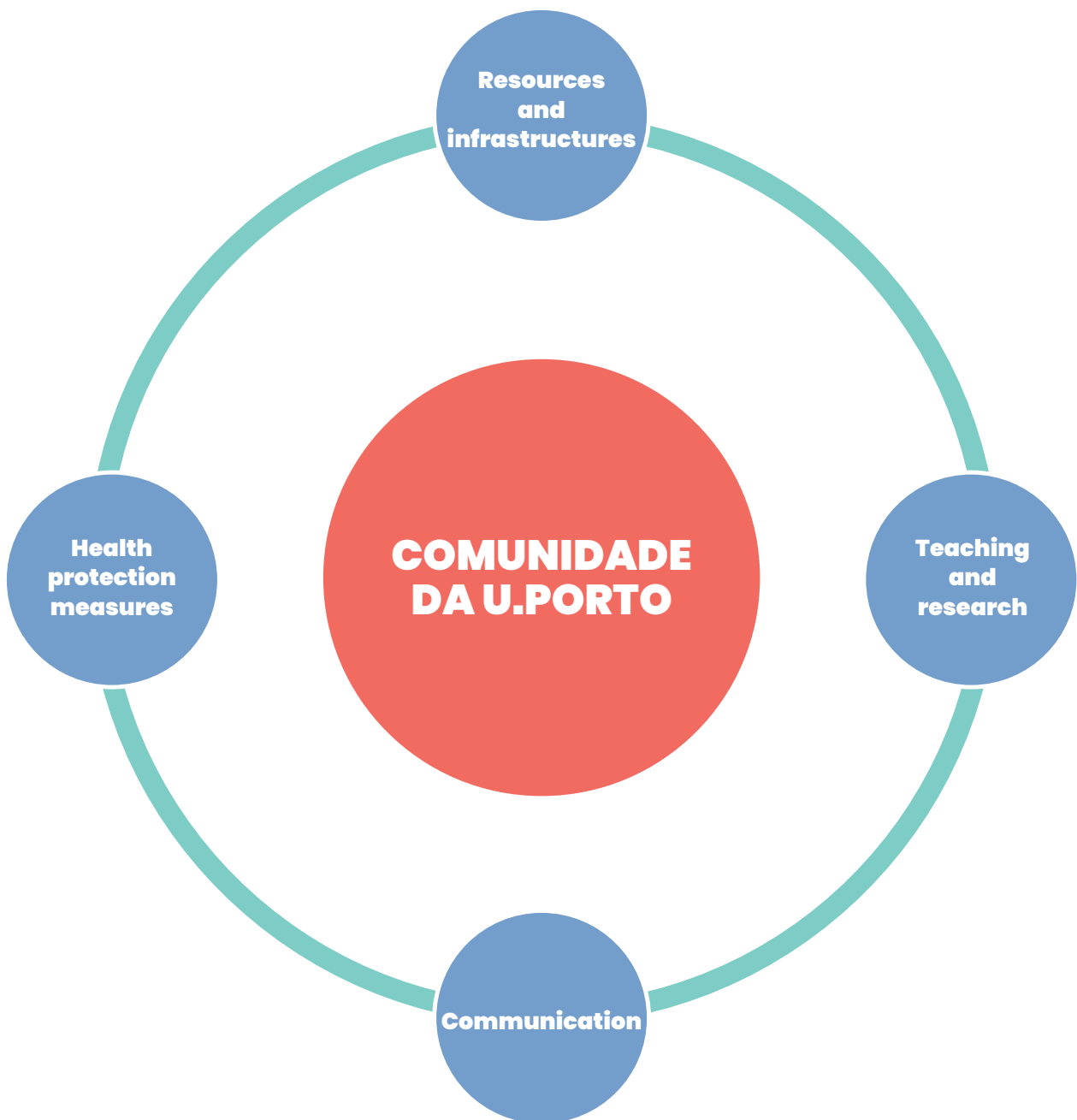
- Ministry of Science, Technology and Higher Education (MCTES)
- Directorate General for Higher Education (DGES)
- Health Ministry (MS)
- General Directorate of Health (DGS)
- Council of Rectors of Portuguese Universities (CRUP)
- Hospital of St. John (CHUSJ)
- *Centro Hospitalar Universitário do Porto* (CHUP)
- Regional Health Administration of the North (ARSN)
- *ACES Porto Oriental*
- *ACES Porto Ocidental*
- Academic Federation of Porto (FAP)

- *Polícia de Segurança Pública* (Public Security Police - PSP)
- Porto City Hall (CMP)
- U.Porto student residences
- Private student residences

5. CONTINGENCY PLAN FRAMEWORK

5.1. Operating areas:

This contingency plan has been designed around four operating areas focused on U.Porto's community, as represented on Picture 1.



Picture 1: Operating areas of U.Porto's contingency plan.

5.2. Stages and response phases

Board 1 refers to measures to adopt, proportional to the local and national risk level and to the respective response strategies, as defined by the ECDC.

Table 1: Response strategies considering the risk level defined by the ECDC.

Risk level	Description	Response
Stage 0	Situation with no reported cases in the country, but with cases reported and/or community transmission in other European countries	Surveillance
Stage 1	Situation of multiple cases of introductions and limited local transmission, with no more than two generations of cases or clusters. No apparent sustained transmission.	Prevention
Stage 2	Situation with an increasing number of introductions and of more widespread reports of localised transmission, with more than two generations of cases with known epidemiological links.	Containment
Stage 3	Situation with localised outbreaks, with the possibility of evolving into a general outbreak. Sustained transmission within the community.	Mitigation
Stage 4	Recovery in a post-epidemic, widespread situation.	Recovery

6. MEASURES BY OPERATING AREA

6.1. Health protection measures

6.1.1. General measures (stages 1 to 4)

Basic hygiene

U. Porto's community shall:

- Frequently wash hands with water and liquid soap, scrubbing them rigorously for at least 20 seconds;
- Reinforce hand washing before and after contact with food, after using the toilet and upon contact with any surfaces at public locations (door handles, elevator buttons, public transports, etc.);

- For an alternative hand hygiene, use an antiseptic alcohol-based solution (ABS);
- Use paper tissues (of single use) to blow the nose;
- Throw used tissues away into a trash bin and immediately wash hands;
- Cough or sneeze into a single use paper tissue or into a bent elbow - never into the hands;
- Avoid touching the eyes, nose and mouth;
- Promote social distancing, namely by not staying in mass gatherings in contained spaces, if not by absolute need (except for teaching and professional activities);
- Avoid greetings that involve physical contact;
- Frequently clean contact surfaces and equipment (keyboard, desk, mobile phone, etc.);
- In case any symptoms occur, such as cough, fever or difficulty breathing (on the person or on the people with them), reduce social contacts and do not go to hospital or to any health centre; call the national SNS24 hot line instead (808 24 24 24).

Environmental cleaning measures

Given that the virus, under ideal conditions, may remain active on surfaces for a few days, it is crucial for them to be frequently and properly cleaned and disinfected:

- The recommended frequency to wash and disinfect surfaces, such as table tops, keyboards, handrails, door handles, elevator buttons is, at least, three times a day and whenever necessary;
- Sanitisation and cleaning shall be suited to the type of surface. The use of degreaser is advised, followed by a disinfectant such as sodium hypochlorite with 1000 ppm active chlorine or 70% alcohol. The use of detergents and disinfectants must be in accordance with manufacturer recommendations as for the amount, dilution and usage period;
- To guarantee the availability of water supply, as well as liquid soap and paper towels for hand drying in all sanitary facilities or in other hand washing facilities;
- To guarantee the availability of ABS antiseptic solutions at the entrance/exit of buildings, in areas with greater people gatherings, in every floor near stairways or elevators, at the entrance and inside isolation rooms, as well as in any other locales deemed justified, due to the number of people or to the distance to sanitisation points;
- Residue from sanitisation can be discarded as usual.

Isolation room

The isolation room (a room or a closed office) is meant to avoid or to contain direct contact with suspected cases. The responsible person for each institution is to identify one or more isolation rooms per building and to inform the community regarding its existence, its location and who is the person responsible for it. Isolation rooms must be duly identified in order not to be used for any other purpose; they shall be available to be activated in the event of a suspected case (for instance, they must not be locked). Whenever possible, the route from and to the locale of the isolation room shall bear the least possible contact with other individuals. Within or near the isolation room, there must be a dedicated bathroom, duly equipped for the exclusive use of the suspected case.

The responsible person for each institution shall ensure that every isolation room has:

- natural or mechanical ventilation;
- flat, easy-to-wash surfaces (e.g., no carpets or wall-to-wall carpets, nor curtains);
- phone or mobile phone (in the event that the suspected case does not have theirs with them);
- chair or stretcher;
- water and non-perishable foods;
- residue bin (with a non-manual opening and with a plastic bag inside);
- ABS (available inside the room and at the entrance);
- paper towels;
- surgical masks;
- disposable gloves;
- thermometer.

6.1.2. Specific measures (stages 1 to 4)

Specific measures in the event of a suspected case

Any person with signs of the disease or symptoms (fever, cough or difficulty breathing) and with an epidemiological link (possible contact with confirmed case or a recent trip to locations with confirmed community transmission) shall head towards the isolation room and inform (before or after) the responsible person (preferably by phone). The responsible person shall follow up the suspected case from the moment of contact until their exit from the locale.

¹The number of areas per building is to be determined by the responsible person in accord with the institution's dimension.

If necessary (e.g., reduced mobility of the staff member, student or visitor), the responsible person can be requested to provide assistance to the “isolation” room. Whenever possible, a safe distance shall be kept from the patient (more than 1 metre [3 feet]). That who provides assistance or enters the isolation room shall, moments before doing so, put on a surgical mask and disposable gloves, besides from fully complying with basic measures regarding hand hygiene upon contact.

The suspected case, once in the isolation room, shall contact the SNS24 hot line and follow instructions. As soon as possible, the patient shall put on a surgical mask, provided that their physical condition enable them to do so. The mask shall be placed by the patient. The mask shall be well fitted (that is: fitted to the face, enabling the full occlusion of the nose, mouth and the sides of the face). Whenever the mask is moist, it shall be replaced by a new one.

In the event of having more than one suspected case, the responsible person for each institution may consider determining a second temporary isolation area, or placing both suspected cases within the same area, but separated by a distance higher than 2 metres (6 feet).

Check flow chart on annex 1.

If the case is validated by the SNS24 hot line as a suspected case, the patient shall be taken to hospital, where the local Health Authority will commence an epidemiological enquiry, as well as the patient’s identification and the surveillance of their close contacts, according to national guidelines.

Upon validation of the case by the SNS24 hot line and once the patient is evacuated, the responsible person shall ensure that the isolation room must be cleaned and disinfected by a staff member wearing disposable gloves and surgical mask. Cleaning and disinfecting operations shall be reinforced, mainly in areas frequently accessed by the suspected case. Likewise, the cleaning and disinfecting of the workplace of a confirmed case must be thorough (and include materials and equipment used by the confirmed case). Any residue from a confirmed case shall be stored in a plastic bag (of 50 or 70-micron thickness). Once closed (for example, with a clamp), the bag should be segregated and sent to an operator licensed for the management of bio-medical hazardous waste. To that end, the responsible person for each institution shall be working with peers from other institutions who have already defined this waste management scheme.

If the case is not validated by the SNS24 hot line, standard cleaning and disinfecting procedures shall take place within the isolation room.

Specific measures for an asymptomatic person who has returned from an active community transmission site in the past 14 days

Besides from basic hygiene, the person shall:

- Self-monitor for symptoms, namely:
 - Measure and record body temperature twice a day, in the morning before leaving, and at night after arriving (check annex 2: Self-monitoring model for body temperature and symptoms);
- Keep any teaching or professional activities as long as no symptoms are experienced;
- Socially, avoid remaining in mass gatherings or in contained spaces unless there is absolute need to do so.

Check flow chart on annex 3.

Specific measures for an asymptomatic person who has been in contact with a confirmed case

Besides from basic hygiene, the person shall:

- Self-monitor for symptoms, namely:
 - Measure and record body temperature twice a day, in the morning before leaving, and at night after arriving (check annex 2: Self-monitoring model for body temperature and symptoms);
- Remain in preventive isolation for 14 days, certified by the Health Authority, and inform the responsible person for each institution;
- Call the SNS24 hot line and inform about contact with the confirmed case; in case the person experiences any symptoms, going to hospital or to a health centre should only occur upon advisement from the SNS24 hot line.

Check flow chart on annex 4.

The remaining people (asymptomatic or not) who are yet to return from an area with active community transmission, or who did not have contact with a confirmed case, shall comply with basic hygiene measures.

6.1.3. Exceptional measures (stages 2 and 3)

According to risk assessment and to governmental guidelines, the following options may be considered:

- Reinforcement of surface cleaning and disinfecting measures;
- Disclosure of travelling recommendations according to the following stages: stage 1, travel with usual precaution; stage 2, travel with extraordinary precaution; stage 3, reconsider travelling; stage 4, cancel the travel;
- Suspension of events, teaching or research activities, as well as services requiring face-to-face service;
- Facility closure.

6.2. Resources and infrastructures

Measures regarding facilities and equipment

The capacities of facilities, equipment and materials should be reassessed, namely:

- Check facility hygiene and safety conditions;
- Check ventilation conditions. In case of an anomaly, notify the responsible person for each institution;
- Foster the aeration of every site, keeping windows open whenever possible;
- To enforce the aforementioned environmental cleaning measures.

Deciding whether or not to close facilities and subsequent orientations is up to the Rector, after consulting the task force, the responsible persons and health authorities.

The cancellation of scientific, sporting or other public events of U.Porto shall be considered upon decision from the responsible persons of the institutions organising such events. A decision shall only be taken once the task force has been consulted.

Safety measures

Measures must be planned ahead so as to guarantee the preparedness to keep people and U.Porto facilities safe, namely through:

- Reinforcing people and goods safety in case of a full or partial facility closure;
- Creating possible options for preparedness regarding safety and access control, thought out according to the occupation levels planned for each facility.

As medidas a tomar devem ser articuladas com as autoridades de segurança locais.

Logistical resources:

Facilities shall never lack the following items:

- water and liquid soap;
- alcohol-based solution;
- paper towels;
- waste bins placed in strategic locations;
- appropriate detergents and disinfectants;
- several materials that allow for the disclosure of basic hygiene measures;
- surgical masks, disposable gloves and a thermometer.

6.3. Teaching and research

Measures regarding the continuity of U.Porto teaching activities and services

Alternative teaching procedures should be developed, tested and disclosed in order to ensure the continuity of the teaching-learning process in case the facilities are closed, namely:

- Every institution shall foster the use of distance education in all teaching activities, regardless of the risk level;
- In case of facility closure, teaching activities shall, whenever possible, be continued by means of distance education;
- Educational technology services shall provide any platforms necessary to implement these measures; they shall also be responsible for their maintenance.

Whenever possible, access to the purchase of computer equipment and Internet access shall be facilitated, by establishing agreements with companies, or by promoting student autonomy in using U.Porto's computer network.

A plan to recover teaching activities shall be developed, namely:

- In each institution, response measures must be prepared in advance in case the normal functioning of the school year is affected. These mainly concern any alterations in syllabuses of curricular units or in changes to exam seasons. These measures shall contemplate different possible scenarios and considering different closure periods.

Alternative measures regarding evaluation shall be under advisement, such as electronic surveillance of exams, among others.

Measures regarding research activities

Every institution shall assess critical services and/or equipment of research centres in order to guarantee their biosafety. They shall also develop several options for preparedness to guarantee the continuous functioning of research centres, particularly in case of partial or full facility closure. Animal facilities should be given particular importance.

Measures regarding the continuity of U.Porto services

Customer services shall:

- During stages 2 and 3, prefer a service other than face-to-face service, namely by phone, e-mail or others;
- To ensure the compliance with basic hygiene. Heads of service shall ensure that every worker is aware of these measures and is given the appropriate means to perform them.

A plan must be put into motion to guarantee the maintenance of key business operations within every institution, including computers, staff's wages, the normal functioning of communications with staff members, students and families. Maintenance services within the different U.Porto institutions must also remain operational. To achieve so, it is critical that:

- Minimal services are defined in each institution, while considering the need to ensure the safety of people and goods.
- Regulations are defined and responsible persons appointed to be accountable for specific operations in the event of facility closure.

It may be determined that students and workers at U.Porto who decide, in light of the national recommendations, to remain in preventive self-isolation, or those who have people at their care who have been told to stay in isolation (whether by preventive self-isolation or due to closure of supporting facilities, such as schools, care centres, among others), are not to receive any academic or professional penalties for their absence.

Responsible persons for each institution shall create the conditions to enable teleworking to all workers as much as possible.

Measures regarding social service

The Social Services of the University of Porto (SASUP) shall develop guidelines to ensure the continuity of accommodation and food services to students who exclusively depend on such services. SASUP shall designate the responsible persons to implement these guidelines.

The needs for the supply and storage of essential goods that are essential for the proper functioning of every institution (non-perishable foods, water, electricity, consumable goods and necessary equipment) must be defined in case of facility closure, namely through:

- Estimating the number of students in need of this support;
- Estimating and providing enough provisions of food and other livelihood goods;
- Ensuring the continuity of scholarship payments or other subsidies to students.

In the event that U.Porto student residences have to be used for quarantined students, a student residence shall be designated specifically to support the isolation cases who, for some reason, are not able to return to their homes.

6.4. Communication

Bearing in mind the stage of disease evolution in Portugal at the moment this document was written, this plan shall privilege any measures that are quick to apply and which have the highest possible coverage within the entire academic community.

Definition of the Crisis Unit

- The task force is instituted as a unique, unified U.Porto body in case of a response to crisis. It thus has the power of decision to emit recommendations, guidelines or any relevant related information.
- To establish procedures within the task force in order to approve all of its communications.
- To appoint U.Porto official spokesperson(s) for any public communications deemed necessary. Suggestion (by this order): Rector, task force coordinator (Professor Castro Lopes), task force's Head of Communication (Raul Santos). These names were a choice of the press relations team (check subsection *Measures regarding External Communication*).
- To guarantee a connection and coordination with U.Porto institutions and partners, via responsible persons for local contact in accord with the present Contingency Plan, but also through services and local offices as defined by the Coordinating Council for Communication of the University of Porto (CCCom).

Creation of a point of contact with the task force

- To create the e-mail address covid-19@reit.up.pt for any person pertaining to the target audience of this Contingency Plan to clarify any doubts or make suggestions, etc.. This includes the responsible persons for each U.Porto institution. Any questions shall be answered by this Contingency Plan's task force.

Defining means of information distribution to the target audience

- To consecrate the dynamic e-mail system as a privileged means of internal communication, complemented by the webpage www.up.pt/covid-19. To use the e-mail address covid-19@reit.up.pt to send any relevant information concerning the disease.
- To use the university's social media as an alternative information distributor (namely Facebook, Twitter, Instagram and LinkedIn). Due to their nature, social media will also serve as external communication means (check subsection *Measures regarding External Communication*).
- To ensure that critical information is also available in English.

Creation of public information website

- To create webpage www.up.pt/covid-19 to compile information relevant to U.Porto and to disclose any infection containment operations to the target audience.
- The webpage will also serve to gather and store all information produced by the task force (e.g., communications, recommendations, awareness-raising materials), as well as to facilitate access to useful information from health authorities or partners of this Contingency Plan, particularly to the site www.dgs.pt/corona-virus.
- To link this web address to several official U.Porto websites (homepages of U.Porto institutions), by producing electronic banners that shall be distributed throughout those institutions.
- To ensure that critical information is also available in English.

Development of information and awareness-raising campaigns

- To reinforce public information campaigns regarding transmission methods and precautions to take to avoid contamination amongst the target audience of this Contingency Plan.
- To privilege digital communication means, namely U.Porto and U.Porto institutions' websites and social media, to ensure a more rapid enforcement of these campaigns.

- To develop materials based on official information published by the DGS. Distributing exact copies of any DGS communication is also possible.
- To consider distributing printed materials (posters or brochures) in all buildings pertaining to U.Porto's ecosystem. To consider both internal printing within university institutions or external printing in alternative, bearing in mind the time and response capacity from suppliers and that from U.Porto's internal distribution circuits.
- To make all critical information also available in English.

To guarantee a means of external communication

- To institute the Public Relations office as a single point of contact with national and international press members, both in the quality of receivers of information and as senders of information to the outside community.
- In order to make contacts with the press, use existing and acknowledged means of communications with reporters, namely the e-mail address imprensa@reit.up.pt; use the phone numbers of Rectory's public relations officers.
- To ensure the production and sending of press releases to the media whenever new guidelines or containment efforts are developed, always in accord with decisions made by the task force.
- To analyse the needs and the suitability of using a spokesperson on behalf of the University of Porto (*check subsection Definition of the Crisis Unit*).
- To ensure that all critical information is also available in English.

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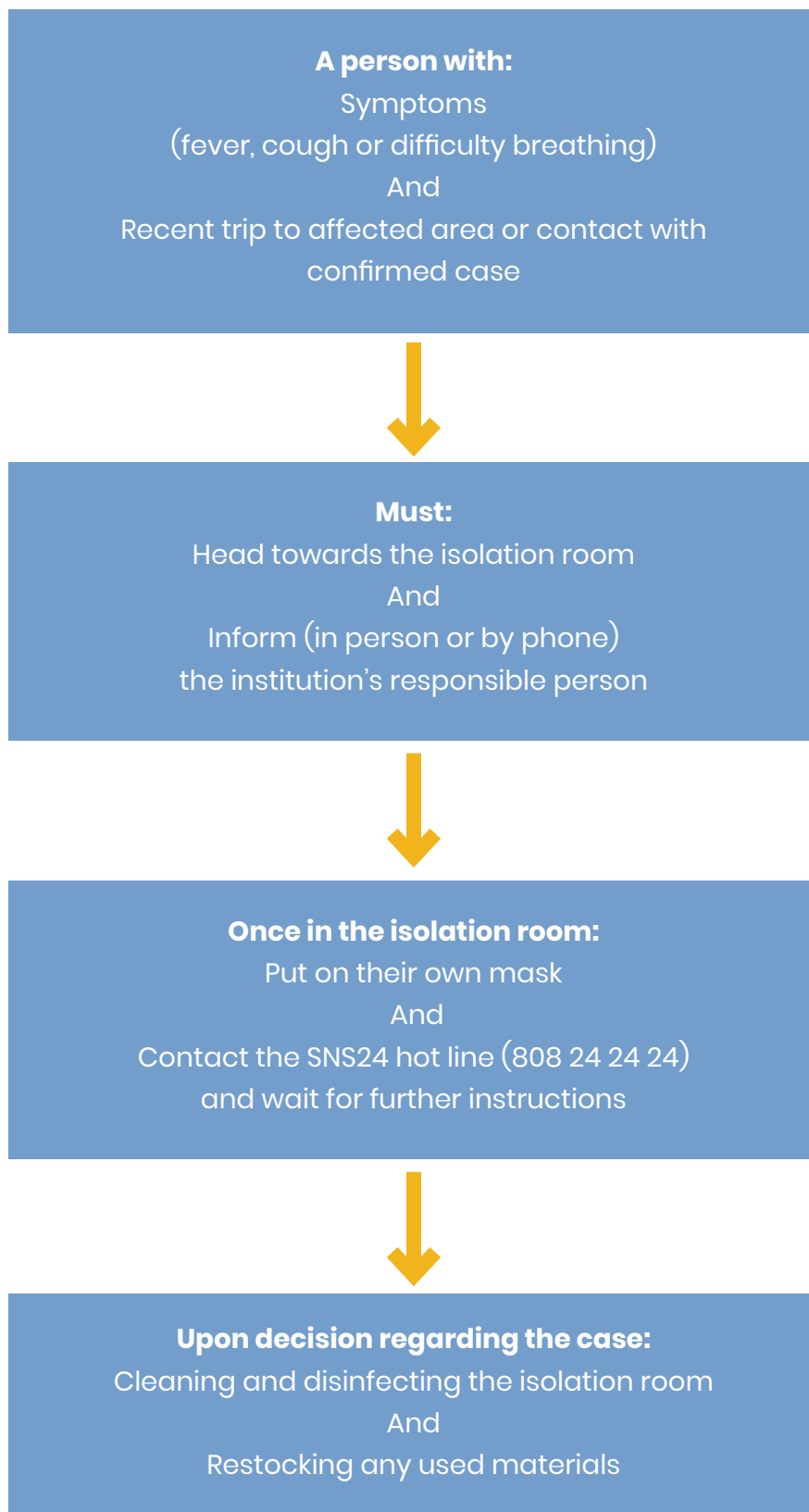
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Order no. 2836-A/2020 of 2020-03-02.

ANNEXES

ANNEX 1

FLOW CHART REGARDING OPTIONS FOR RESPONSE IN THE EVENT OF A SUSPECTED CASE WITHIN AN INSTITUTION



ANNEX 2

SELF-MONITORING MODEL FOR BODY TEMPERATURE AND SYMPTOMS

Information and monitoring of asymptomatic citizens who have returned from areas affected by COVID-19 infection or contact with confirmed cases

If you have been in an area affected by COVID-19 infection:

- **Monitor your health closely** for 14 days upon arrival;
- **Monitor and record your body temperature in the morning and at night** for the same 14 days. Record the occurrence of any other symptoms as well, such as: cough, fever, difficulty breathing, headache, tiredness, among others.

Date of arrival in Portugal: ____ / ____ / _____

Body temperature record:

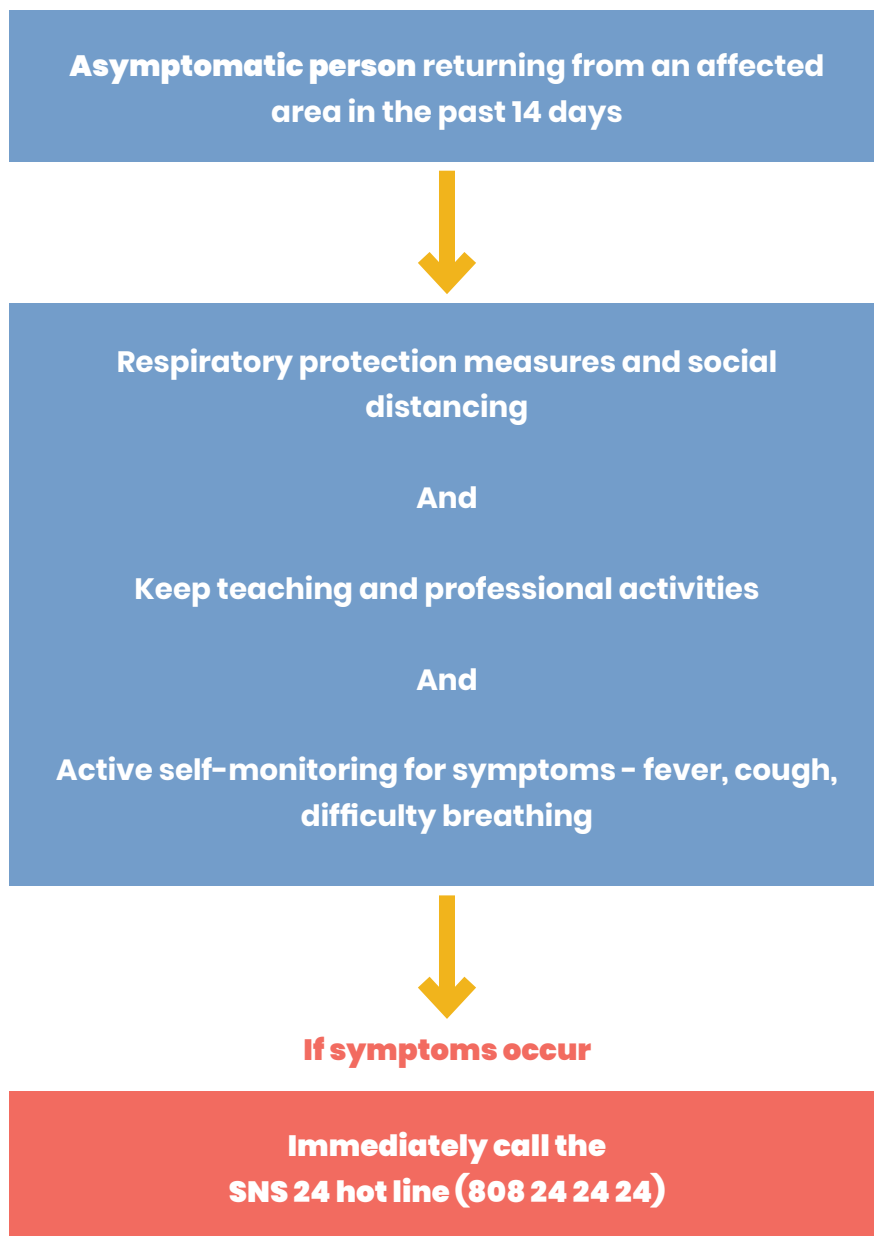
Monitoring date	Morning	Night	Other symptoms/observations
____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	
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____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	
____ / ____ / _____	°C	°C	

If you have a **fever (38°C or higher)** or any other aforementioned symptoms, call:

- **SNS 24 hot line (808 24 24 24)**

Thank you for your collaboration.

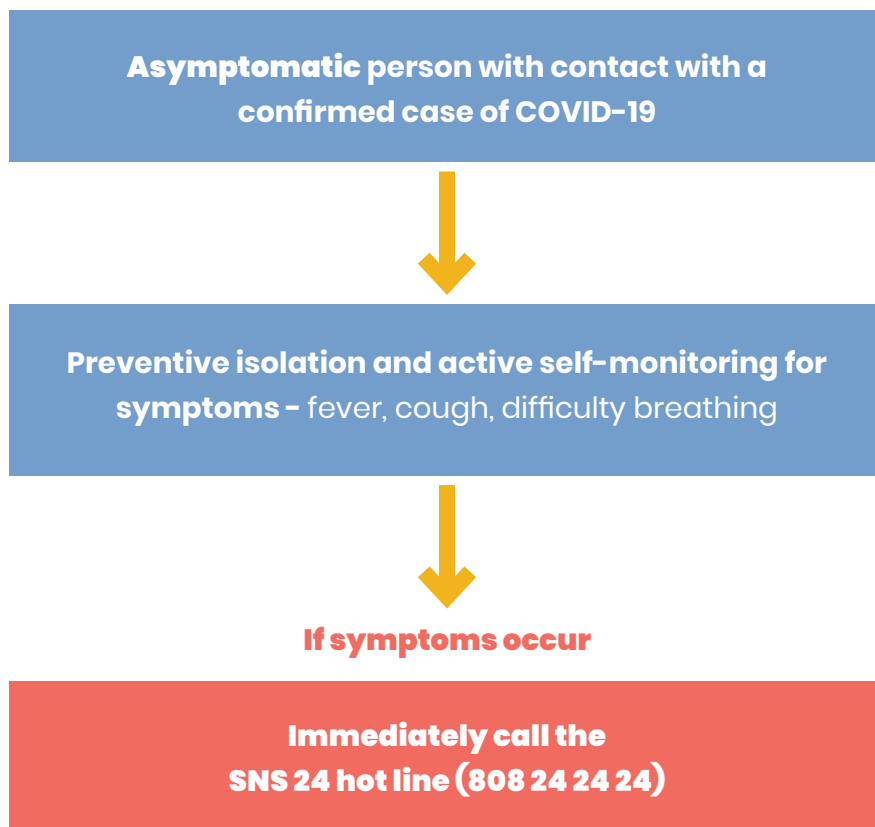
**ANNEX 3
FLOW CHART OF OPTIONS FOR RESPONSE REGARDING AN
ASYMPTOMATIC PERSON WHO HAS RETURNED FROM AN ACTIVE
COMMUNITY TRANSMISSION AREA***



*Areas with active community transmission by the time this document was produced:

Asia:	China, South Korea, Japan, Singapore
Middle East:	Iran
Europe:	Italian regions: Emilia-Romagna, Lombardy, Piedmont, Veneto

ANNEX 4
FLOW CHART OF OPTIONS FOR RESPONSE REGARDING ASYMPTOMATIC PERSON WITH CONTACT WITH CONFIRMED CASE



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of Porto**

U. PORTO