

Contingency Plan

COVID-19

**University
of Porto**

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1. INTRODUCTORY NOTE

COVID-19 is an emerging infectious disease, first identified in the city of Wuhan, China, with the first cases dating back to December 2019. At the beginning of the 2021/2022 academic year, over a year since the World Health Organization declared the outbreak a pandemic, more than 200 million cases of SARS-CoV-2 infections and 4 million deaths worldwide, more than 1 million cases in Portugal and over ten thousand deaths, and following several months during which in-person teaching and work were suspended, there is still continued community transmission of SARS-CoV-2. Nevertheless, the rollout of vaccines (moderately effective in protecting against infection and highly effective in protecting against severe consequences of acute illness, such as hospitalisation and death) together with the extensive coverage of vaccination, have allowed us to return to in-person activities, while still maintaining the individual precautions and the environmental conditions that reduce the risk of transmission.

Institutions, organisations, services and society must implement measures proportional to the risk of community transmission, taking into account the recommendations of the Directorate-General for Health (DGS), the European Centre for Disease Prevention and Control (ECDC) and the World Health Organization (WHO). The latest recommendations specifically for Higher Education Institutions, the “Guidelines for Scientific and Higher Education Institutions to ensure the carrying out of in-person academic and non-academic activities” for the 2021/2022 academic year, issued by the Directorate-General for Higher Education and the Directorate-General for Health in September 2021 (Annex 1), defines several guidelines that aim to make academic and non-academic activities operational while taking the current health context into account. Based on these recommendations, in addition to other related guidelines and procedures, the task force has updated the Contingency Plan (created on 05/03/2020 and updated 25/03/2020), and included the updated Recommendations for In-Person Activity at U.Porto (created 27/04/2020 and updated 15/09/2020). The application of this plan is dynamic and flexible, changing according to the publication of new recommendations from the relevant organisations as well as the policies implemented by the Portuguese government.

1.1. Target population

U.Porto community (students, lecturers, non-teaching staff, researchers, employees and service providers of constituent entities).

1.2. Objectives

1. Identify needs and resources for an effective response according to the level of risk.
2. Communicate and provide the U.Porto community with information and knowledge that is up-to-date and reliable.
3. Define primary prevention measures according to the level of risk.
4. Detect early cases of disease and notify the people who were in contact with the infected person, facilitating coordination with health services.
5. Ensure a coordinated response with other institutions and organisations.
6. Ensure the continuity of the educational process at U.Porto, according to the level of risk.
7. Minimise the effect of the pandemic on the U.Porto community.

1.3. Framework of the contingency plan

Areas of action

U.Porto's Contingency Plan is based on 4 areas of action centred on U.Porto's community, as shown in Figure 1.

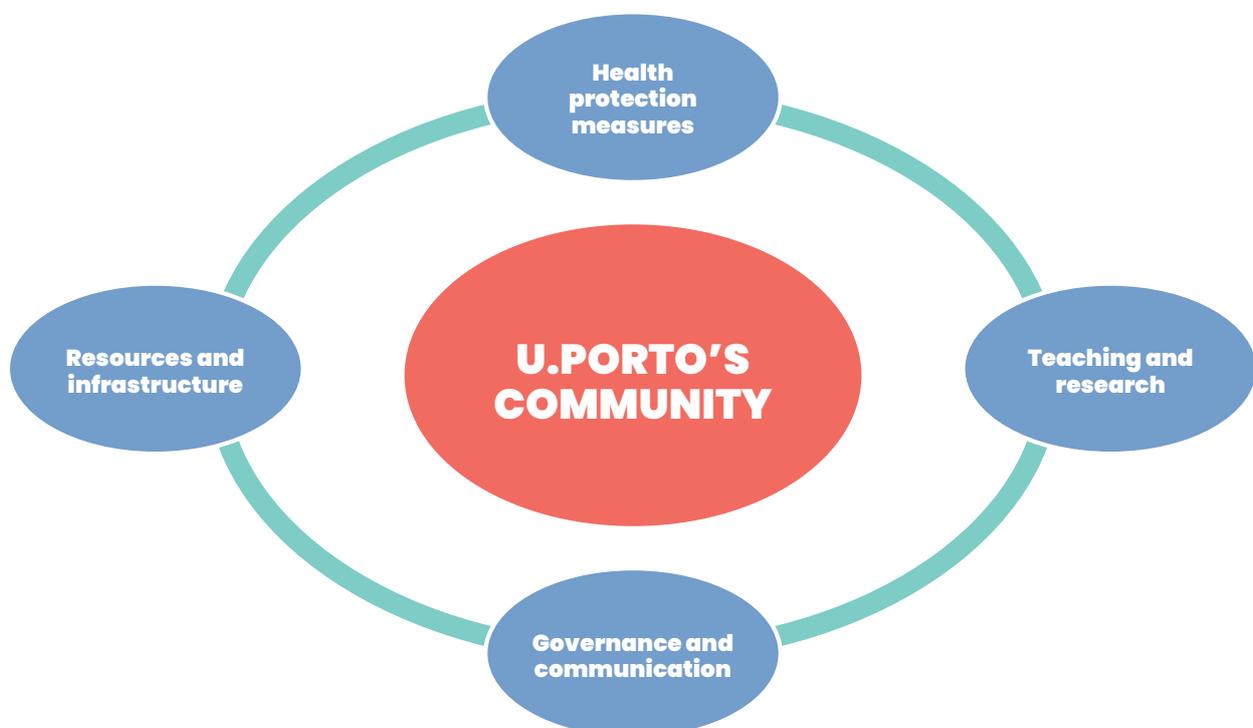


Figure 1: Areas of action of the U.Porto contingency plan.

Levels and stages of response

Table 1 outlines the measures to be adopted according to the level of risk locally and nationally and the respective response stages, defined by the National Disease Preparedness and Response Plan for the new coronavirus (COVID-19).

Table 1: Response stages according to the risk level defined by DGS.

Preparation stage		There is no epidemic or the epidemic is concentrated outside of Portugal	
Response stages	1 - Containment	1.1	Epicentre identified outside of Portugal, with international transmission
		1.2	Imported cases in Europe
	2 - Expanded containment	2.1	Secondary transmission chains in Europe
		2.2	Imported cases in Portugal, without secondary chains
	3 - Mitigation	3.1	Local transmission in closed space
		3.2	Community transmission
Recovery stage	4 - Recovery	4	Decreasing incidence of the disease in Portugal and worldwide

2. GENERAL MEASURES: MEASURES TO REDUCE THE RISK OF TRANSMISSION

Transmission of SARS-CoV-2 is controlled by preventing direct contact of the mucosae (mouth and nose) and the conjunctiva (eyes) with respiratory droplets, and indirect contact with contaminated surfaces. Methods to reduce the risk of transmission can thus be grouped into two main categories:

1. Measures to reduce the risk of transmission by direct contact with people infected with SARS-CoV-2.
2. Measures to reduce the probability of contact with contaminated environments.

These measures should be adopted at risk levels 2.2 to 4 (see Table 1). Cleaning and physical distancing methods can be implemented to varying degrees of intensity according to the community incidence rates, while a return to distance learning and remote work may be recommended should the incidence rate, the number of hospitalisations and deaths require it, and the Health Authorities and Government stipulate it.

2.1. Reducing the risk of transmission by interpersonal contact

Individual measures are effective in preventing the transmission of SARS-COV-2 and should be strictly complied with both on and off U.Porto premises.

2.1.1 Vaccination

Vaccination against COVID-19 is strongly recommended to U.Porto students and workers for their individual protection and to control the spread of infection.

2.1.2 Self-monitoring of signs and symptoms and excused absence from school, work or social settings when presenting symptoms of COVID-19

People belonging to the U.Porto community, specifically students, lecturing and non-lecturing staff, and researchers, should:

- self-monitor for signs and symptoms of a respiratory infection everyday;
- excuse themselves from the classroom or workplace (by not going to the premises or by isolating in one of the designated areas onsite) should they present symptoms of COVID-19, even if mild;
- abstain from social activities should they present symptoms of COVID-19, even if mild;
- contact the SNS24 national health care hotline should they develop symptoms of COVID-19 and follow the directions given.

2.1.3 Maintaining physical distancing

While on U.Porto premises, members of the academic community should:

- maintain the general prevention measures, such as physical distancing and avoiding physical contact where it is not required for educational activities or providing care, with people who do not belong to their household and/or social bubble;
- in social settings, crowds of people should be avoided, particularly if their immune status (vaccination and/or prior infection) is unknown;
- there are no capacity limits in spaces for learning.

The various spaces should minimise contact with respiratory droplets:

- Desks in classrooms should be arranged in order to avoid students being seated face-to-face wherever possible.
- Work and study spaces should avoid face-to-face seating wherever possible and maintain physical distancing between people. Where this is not possible, protection barriers should be used, such as plexiglass partitions.
- Individuals should have a set place in the workplace or classroom wherever possible, thereby reducing the variation and number of contacts.
- In libraries, laboratories and similar facilities, there are no capacity limits. Wherever possible, users/workers should maintain distancing with people who do not belong to their household and/or social bubble.
- In student halls of residence a lateral distance of at least 2 metres between beds should be ensured wherever possible. Bunk beds are not recommended.

- Cafeterias, snack bars, restaurants and other food services may extend their meal service times or make them flexible, create take-away meal alternatives and meal scheduling. If possible, tables and chairs should preferably be placed outdoors. These spaces should be exclusively reserved for meals at the stipulated times. Outside of these times, studying may be allowed in these areas given the abovementioned distancing rules are met.
- Time spent in tea rooms and dining areas, as well as using microwaves, should be kept to a minimum, while face-to-face seating should be avoided and established routes for users should be ensured; in order to ensure physical distancing between users, schedules with previously defined capacity limits may be considered.

2.1.4. Protective equipment usage

A mask should be worn at all times on U.Porto premises, except when eating or drinking, or unless the person in question has a contraindication to mask wearing that has been certified by a doctor.

- Surgical masks or cloth masks with a certified filtering ability of greater than or equal to 90% should be worn.
- Aside from a mask, a face shield may be worn in situations where there is a risk of the conjunctiva (eyes) coming in contact with droplets or aerosols.
- This equipment should be used together with physical distancing, personal hygiene and respiratory hygiene/cough etiquette measures.

2.1.5. Personal hygiene and respiratory hygiene/cough etiquette measures

People belonging to the U.Porto community must:

- Ensure that they frequently clean their hands with soap and water, rubbing well for 20 seconds and hygienically drying them (preferably with paper towels) or with an alcohol-based hand sanitiser, rubbing well until hands are dry. Hands should be cleaned when entering and leaving U.Porto premises, after sneezing, coughing or blowing your nose, after using the toilet, before putting a face mask on, before and after preparing, heating and/or consuming food, after contact with surfaces used by several people, such as doorknobs and handles and elevator buttons.
- The sharing of personal items (mobile phones, pens, pencils, etc.) should be avoided and frequently used items should be cleaned, such as keyboards, fixed phones and mobile phones (removing the cover and cleaning the phone and the cover using cleaning wipes or wipes soaked in 70% alcohol).
- Follow cough etiquette, specifically, coughing and sneezing into a bent elbow, even when wearing a mask, and/or into a tissue which is immediately thrown away, when not wearing a mask.

2.2. Reducing environmental risk

The reduction of environmental risk will be achieved through the frequent cleaning of spaces and the disinfection of surfaces, as well as the frequent and free ventilation of closed spaces.

2.2.1. Disinfecting areas

- The Organisational Units should adapt, implement and announce a plan for the disinfection of facilities and equipment, respecting the guidelines of the Directorate-General for Health, specifically Guideline no. 14/2020 of 21/03/2020. regarding the methodology, materials, products and frequency of cleaning.
 - The cleaning and disinfection of surfaces used by several people, such as door handles, handrails, elevator buttons, ATMs, vending machines, keyboards, computer mice, tables and chairs, must be prioritised, as well as equipment used in sport lessons, in particular surfaces that come into direct contact with the user's body.

- Should cleaning services not be able to clean shared spaces and equipment in the breaks between classes, the users are responsible for cleaning and disinfecting the surfaces that they will touch (such as the table surface, computer mouse, keyboard, sporting equipment), using the cleaning and disinfection material available to them in each shared space (wipes or paper towel and disinfectant).
- For cleaning high-touch surfaces, such as table tops or keyboards between classes and exams, a 2-in-1 detergent and disinfectant cleaning product may be considered. To disinfect surfaces, alcohol- or bleach-based solutions (70% alcohol and 5% available chlorine, respectively) should be used, taking into account the type of surfaces and the manufacturer's recommendations.
- The handling of paper materials, such as books and documents, does not require the use of gloves, although the user should sanitise their hands before and after contact, and avoid touching their face while using the material.
- In student halls of residence
 - Shared spaces (toilets, dining areas, kitchens, study areas, etc.) as well as surfaces with a higher risk of contact, should be frequently cleaned and disinfected and defined in the cleaning plan, according to guideline no. 14/2020 of 21/03/2020 from the Directorate-General for Health.
 - Users must be made aware of the fact that they should not share eating utensils, towels or bed clothes and that they should clean spaces/surfaces frequently after every use, with cleaning and disinfection products made available in each shared space for this purpose (wipes or paper towel and disinfectant). The users should continue to clean their own rooms and wash their own clothes.

2.2.2. Ventilating spaces

- Spaces should be ventilated often, whether naturally or with a mechanical ventilation system, and ensured between periods of work or class, in order to ensure air renewal in rooms and other closed spaces. Breaks can be introduced that allow for the effective ventilation of spaces (for example, opening a window and door at opposite ends of a room to allow for cross ventilation).
 - Natural ventilation can be achieved by frequently opening doors and windows. Mechanical ventilation systems can be used as long as the cleanliness and maintenance of the equipment is ensured in order to avoid air being recirculated.
 - While frequent ventilation is necessary, thermal comfort should nevertheless be ensured for indoor study and/or work spaces at U.Porto.

2.2.3. Other physical, material and equipment conditions

- In order to reduce the likelihood of crowds on U.Porto premises, there should be designated routes for movement and informational material should be displayed that discourage their formation, particularly in critical areas.
- To ensure hand cleaning, it is crucial that soap, water and a hygienic drying method (preferably paper towels) are made available in all toilet facilities and/or washbasins. There should be a defined and suitable schedule for verifying and replacing these materials, and a contact email or telephone number may be made available for users to notify the relevant official when a replacement is required.
- It is also important to ensure that the alcohol-based hand sanitiser (70% alcohol) is available in strategic locations taking into account the number of people moving in a given space and the distance between washbasins. Areas such as the entrances/exits of buildings, dining areas and areas next to vending machines, spaces with a higher number of people, in-person assistance and service areas, at the entrance of and inside isolation areas, should be prioritised. There should be a defined and suitable schedule for checking and replacing these materials.
- In spaces where face-to-face support and services are provided, a physical barrier (plexiglass) should be used, and alcohol-based sanitiser should be provided for disinfecting hands, while cashless payment should be encouraged (bank transfer, *Multibanco* reference, the MBWay app, or card, preferably contactless).
- Main entrances to buildings, classrooms or other frequently used spaces should be kept open or be easy to open with an elbow or foot when entering or exiting.

2.3. Special cases

- The use of these spaces should comply with the ventilation and cleaning requirements. Spaces that do not comply with these requirements should not be used.
- Learning activities in health care facilities should be undertaken in compliance with what is agreed with the responsible entities of these establishments and the recommendations of DGES and DGS. In these situations, hand cleaning and cough etiquette as well as the wearing of a surgical mask should be ensured in accordance with DGS instructions. According to DGES and DGS, students should not provide health care or access COVID-19 designated areas and must consult the local Infection and Antimicrobial Resistance Prevention and Control Plan (PPCIRA) for training and risk analysis.

- Activities that require contact with the public, such as Psychology, Nutrition and other health service appointments, may take place remotely, via telephone or videoconferencing, or in-person maintaining a 1–2 metre physical distance (preferably marked on the floor), disinfecting door handles, chairs, and paper tissue dispensers or other equipment and material that can be shared between clients, as well as ventilating the space either naturally or mechanically (see point 1.2.2.). Appointments should be made in advance to avoid crowds of people waiting for an appointment.
- Events such as conferences, congresses and cultural events can take place as long as the conditions regarding the cleaning of surfaces, ventilation of spaces and mask wearing are fulfilled.
- The following should be ensured regarding sporting activities:
 - Conditions for the cleaning of spaces and equipment, frequently disinfected by cleaning staff and complemented by cleaning done by the users of the equipment before and after each use. Cleaning materials should be made available, such as wipes or paper towel and a disinfectant cleaning solution. Equipment with porous surfaces should be avoided – should they be essential for the sporting activity in question, these surfaces should be covered with cling film that is replaced daily and whenever visibly damaged and should be cleaned between uses. Equipment that requires close contact, such as mats, should be for individual use and not shared.
 - A distance of at least 1.5 metres should be maintained between participants. Mask wearing is recommended at all times, although it is not mandatory during the physical activity or in the immediate post-exercise recovery phase. Physical contact should be strictly limited to what is necessary to practice the sport in question, as well as the sharing of equipment.
 - Effective ventilation of spaces achieved naturally (frequently and constantly opening doors and windows) or, alternatively, via mechanical means. Natural ventilation between group sport sessions should consist of airing the space for at least 15 minutes.
 - Practitioners and other people who work at or use the sporting facilities should always wear a mask when not practising a sport and should clean their hands when entering and exiting. While it is not mandatory to wear a mask while practising a sport, mask wearing is recommended during light- or moderate-intensity exercise.
 - Good practices for pool disinfection, using suitable chemical disinfectants, in particular maintaining the upper recommended limit of free chlorine (0.5 to 2 mg/l of free chlorine). Users are advised to wear swimming goggles in the pool and around it and should wash their hands and shower before getting into the pool.

- The (duly authorised) record of everyone who uses the physical exercise spaces (name and telephone number), with the date and time (entrance and exit), for the purposes of epidemiological surveillance should the necessity arise.
- A distance of 2 metres between users in the changing rooms as well as frequent cleaning of these spaces.
- Museums and other exhibition spaces should anticipate and prevent crowding, with the possibility of creating one-way routes for visitors to follow. Dispensers with alcohol-based antiseptic solution should be placed at key points in the space, as indicated in point 1.2.3., and materials for proper hand cleaning should be available in the toilet facilities.
- There should be one or more isolation areas per Organisational Unit or, if necessary, per building. The isolation area should be located in a place that can be reached with as little contact as possible with others. Given the possibility that there may be more than one suspected case at the same time, the responsible official (as designated by the respective entity) may consider defining a second, temporary isolation area, or ensure that there is a distance greater than 2 metres between those suspected of being infected. There should be toilets close to or in these isolation areas suitably equipped for the exclusive use of the suspected case. The isolation areas should be naturally ventilated or have a mechanical ventilation system that does not recirculate air, smooth and washable coverings, a telephone or mobile phone (should the suspected case not have one), a chair or hospital bed, water and some non-perishable foods, a waste container (with a non-manual opening and a plastic bag), alcohol-based antiseptic solution inside and at the entrance to the area, paper wipes, surgical masks, disposable gloves and a thermometer. Organisational Units can provide SARS-CoV-2 self-tests (rapid SARS-CoV-2 antigen self-tests).

2.4. Recommendations for people belonging to risk groups

According to DGS, you are at a higher risk of developing complications as a result of a SARS-CoV-2 infection if:

- you are 65+ years old;
- you have a chronic disease – heart or lung disease, neoplasia or high blood pressure, diabetes, etc.;
- your immune system is compromised (from chemotherapy; treatments for autoimmune diseases such as rheumatoid arthritis, lupus, multiple sclerosis or some inflammatory bowel diseases; HIV/AIDS; or transplant patients).

People belonging to this group have a particular duty to protect themselves against becoming infected with SARS-CoV-2, following the abovementioned recommendations, in particular receiving the COVID-19 and seasonal flu vaccinations, whenever possible and appropriate.

Immunosuppressed workers who require the booster shot of the COVID-19 vaccine can excuse their absence from work with a medical certificate should they not be able to work remotely or through other means. The medical certificate should verify the worker's medical condition that justifies their special protection, and should be issued with a legible date and signature by a medical doctor specialised in the field applicable to the worker's condition. Workers may request that their medical assessment be performed by U.Porto's Occupational Physician, who will issue the respective medical certificate regarding ability to work.

Directors of Services/Departments and, ultimately, Directors of Organisational Units, should determine whether the job functions of an immunosuppressed U.Porto worker can be done remotely (work from home). Should this not be possible, the worker can request a reassessment by the Occupational Physician, which will determine the conditions under which the functions can be carried out or, in the event that these functions are totally incompatible with the work conditions, issue a medical certificate to excuse absence from work.

Immunosuppressed students should present a supporting medical certificate. In these cases, absences are excused and course directors should arrange for lecturers to adapt methods of learning and assessment to the individual students, wherever possible, for the Course Units in which they are enrolled.

3. SPECIFIC MEASURES: HANDLING OF SUSPECTED AND CONFIRMED CASES AT U.PORTO

An official in charge of managing suspected and confirmed cases must be appointed in each constituent entity of U.Porto. These measures should be taken at risk levels 1 to 4 (see Table 1).

3.1. Management of suspected cases on U.Porto premises

- 1) A member of the U.Porto community (student, worker, lecturer or non-lecturing staff) is considered a suspected case if that person develops:
 - a. an acute respiratory condition with at least one of the following symptoms: cough (onset or worsening of a chronic cough), and/or fever (temperature of 38.0 °C or higher in the absence of any other identified cause), and/or difficulty breathing (in the absence of any other identified cause); or
 - b. sudden onset loss of smell or taste.
- 2) Suspected cases must go to the closest isolation area and, should they be using a cloth mask, replace their mask with a surgical one. In cases where the suspected cases have difficulty moving, the necessary assistance for removing the suspected cases to the isolation area should be requested of the official. Wherever possible, the safety distance (over 2 metres) must be ensured from the person suspected of being infected with COVID-19. People providing assistance or entering the isolation area must clean their hands first and, should they be using a cloth mask, replace their mask with a surgical one and put on disposable gloves. After contact, they should remove the gloves and clean their hands again.
- 3) People with these symptoms must contact the entity's designated official, preferably by telephone (the contact number must be available in the isolation area).
- 4) People with these symptoms should also contact the SNS24 national health service hotline (808 24 24 24) or, if they are not able to get through, the U.Porto Occupational Health Service (between 9 a.m. and 5 p.m.) via telephone at 220426643. The respective services will triage the patient into the following categories:
 - Validated
 - Not validated

If the **SNS24 hotline validates the suspected case**, the entity's designated official must:

- 5) Send the suspected case to take a laboratory diagnostic test for SARS-CoV-2 in accordance with the directions given by the SNS24 hotline.
- 6) Then inform the West Porto or East Porto Health Authority, depending on the entity's geographic location (Annex 2).
- 7) Inform the U.Porto COVID-19 Task Force.

All students and workers considered validated suspected cases should keep the surgical masks on and go home after taking the diagnostic test (if possible avoiding public transport) and begin isolation. The excused absence from the workplace or classroom will be subsequently justified by a family doctor, with a certificate of temporary incapacity to work (sick leave).

If the **suspected case is not validated**, the person must:

- 8) go home;
- 9) contact their family doctor/attending physician.



3.1.1. Cleaning of the isolation area

After evacuating the suspected case from the isolation area, the designated official should ensure that the area is cleaned and disinfected, including high-touch surfaces and the work space of the suspected case, in conjunction with the assessment made by the Health Authority. Other restrictions to movement in the facilities due to the existence of diagnosed COVID-19 cases at U.Porto will be defined by the Health Authorities in charge.

The disinfection of surfaces in isolation areas should follow these steps:

- Wait at least 20 minutes after the suspected case has left the area before proceeding with the cleaning.
- Use a bleach solution (sodium hypochlorite) with a concentration of 0.1%. The original solution of 5% or more of free chlorine should be diluted at the time to a concentration of 0.1%, with 1 part bleach to 49 parts water;
- First, wash the surfaces with water and detergent.
- Evenly spread the bleach solution on the surfaces and leave it for at least 10 minutes;
- Rinse the surfaces with hot water only;
- Leave to air-dry.

Regarding the waste produced by the suspected case, the bin where the bag will be placed should have a lid and open using a pedal. The rubbish bags should be resistant and disposable, be filled up to two thirds of their capacity, and be properly closed. These bags should be placed inside a second bag, also duly closed, and which will be deposited in the unsorted waste container.

3.2 Management of confirmed cases off U.Porto premises

A confirmed case off U.Porto premises but who belongs to the academic community and has been in contact with it within the 48 hours prior to the onset of symptoms, or in an asymptomatic case, the 48 hours prior to the date of the test, should:

- 1) Contact and inform the entity's designated official of the occurrence.

The entity's designated official, upon becoming aware of the occurrence, should:

- 2) Contact the Health Authority of West Porto or East Porto, according to the geographical location of the entity (Annex 2);
- 3) Inform the U.Porto COVID-19 Task force about the existence of a new suspected/confirmed case in the U.Porto community.

CONFIRMED CASE

1

Contact the entity's designated official

ENTITY'S DESIGNATED OFFICIAL

2

Contact the relevant Health Authority from the annexed list

3

Inform the U.Porto Task Force and the U.Porto Occupational Health Service

3.3 Contacts Management

The identification of students and teaching and non-teaching staff, researchers or employees who were in contact with a confirmed case should be undertaken by the Health Authority in collaboration with the head of the Organisational Unit (or someone designated by him/her) connected with the case.

Currently, the criteria for a high risk contact are the following:

- 1) Face-to-face contact with a confirmed case of SARS-CoV-2 infection at a distance of less than 1 metre, irrespective of duration;
- 2) Face-to-face contact with a confirmed case of SARS-CoV-2 infection at a distance between 1 and 2 metres and for 15 minutes or more (sequential or cumulative over 24 hours)
- 3) Contact in a closed environment with a confirmed case of SARS-CoV-2 infection (for example, cohabitation, a meeting room, waiting room, classroom) for 15 minutes or longer, including a trip in a closed vehicle with a confirmed case of SARS-CoV-2 infection;

4) Direct and unprotected contact while providing healthcare to confirmed cases of SARS-CoV-2 infection (i.e. without the use of appropriate Personal Protective Equipment, according to Norm no. 007/2020 and/or the DGS Guideline no. 019/2020, or whenever there is evidence of incorrect use/removal);

5) Direct and unprotected contact, in a laboratory environment or in sampling points, with biological products infected with SARS-CoV-2.

AND

Partially vaccinated (or fully vaccinated, but being a cohabitant in close proximity, such as sharing a bedroom, or if identified in the context of outbreak research in Residential Structures for Elderly People, Integrated Long-Term Care Units, residential institutions for children and young people at risk, reception centres for migrants and refugees, or prison establishments).

The Health Authority will conduct the risk assessment and will refer the case to a laboratory test for the detection of SARS-CoV-2. The first test should be done as soon as possible, ideally until the 5th day after the date of the last exposure to the confirmed case; the second test should be done until the 10th day after the date of the last exposure to the confirmed case. The excused absence due to quarantine of high risk contacts will be declared and defined by the Health Authority.

Exposure that is not covered by the abovementioned definition of contact is not subject to excused absence, or quarantine, unless stated otherwise by the Health Authority. Nevertheless, low risk contacts will be referred to the Health Authority for a laboratory test as soon as possible, ideally until the 5th day after the date of the last exposure to the confirmed case. They should carry out a self-assessment of symptoms (with temperature checks twice a day) and call the SNS24 hotline (808 24 24 24) in the event that they develop COVID-19 symptoms.

Asymptomatic people who have been in contact with confirmed cases, are not subject to excused absence per se, and should therefore continue with normal activities, unless stated otherwise by the Health Authority.

3.4. Clinical follow-up and return to activity

The Health Authority of the area of residence of the case is responsible for the management of the case (and his/her family and social contacts). The Occupational Health physician and the Health Authorities of West or East Porto, depending on the one attended by the case (Annex 2), are responsible for Professional contacts (from U.Porto). Clinical follow-up of people with COVID-19 should be done by the attending physician.

The return to face-to-face academic or labour activity of high risk contacts should only occur after validation from the Health Authority managing the case.

U.Porto students and employees that have tested positive for SARS-CoV-2 can only resume their academic/labour activity after being discharged by the attending physician, which will happen when, cumulatively:

- There is clinical improvement (absence of fever, without the use of medication); and
- After the following periods:
 - 10 days since the onset of symptoms (in symptomatic people) or since the moment the test was taken (in asymptomatic people) in people who developed light or moderate illness or who continued to be asymptomatic;
 - 20 days since the onset of symptoms (in symptomatic people) in people who developed serious illness;
 - 20 days since the beginning of symptoms (in symptomatic people) or since the moment the test was taken (in asymptomatic people) in immunosuppressed people, irrespective of the severity of the illness.

Should the worker suffer from symptoms in the long term that result in incapacity for work (long COVID), the worker can request a reassessment from the Occupational Physician, which will determine the conditions under which work functions can be carried out or the necessity to readapt the tasks (even if temporarily) of the worker. In addition, the appointment with the occupational physician is legally mandatory following absence due to sickness (COVID-19 or other) that exceeds 30 days.

3.5. Management of outbreaks of infections at U.Porto

The occurrence of 2 or more confirmed cases with an epidemiological connection among them in an Organisational Unit will be considered an outbreak of infection. In outbreak situations, all contacts (high and low risk) will be referred for a SARS-CoV-2 test, ideally a rapid antigen test (TRAg) for the quick implementation of public health measures.

3.5.1. Small-scale outbreaks with well-defined chains of transmission:

Occurrence of cases in a single group/class or simultaneously in various independent groups/classes. In this situation, the Health Authority will decide which measures will be implemented according to the risk assessment, including isolation of cases, screening and quarantine of high risk contacts as well as laboratory testing.

3.5.2. Medium/large-scale outbreaks or chains of transmission which were not identified or with secondary and/or tertiary transmission:

Occurrence of cases in various groups or classes, or transmission among different groups or classes, irrespective of the way in which the virus first entered the Organisational Unit. In this situation, the Health Authority, after assessing the risk, will be able to adopt additional measures, including an increase in the number of people who will be placed under quarantine or the possible closure of one or more classes, as well as closing one or more areas of the Organisational Unit.

3.5.3. Uncontrolled transmission in the university environment

Occurrence of a high number of cases in different groups (students, teaching staff and non-teaching staff) in the Organisational Unit with uncontrolled transmission. In this situation, the Health Authority may consider the need to escalate measures, including the temporary closure of the Organisational Unit.

3.6. Monitoring of the epidemic at U.Porto

The anonymised data about the emergence of cases in the Organisational Units will be sent to U.Porto's COVID-19 Task force, which will compile the information and define the person in charge of data analysis. The characterisation of cases by the onset of symptoms, spatial distribution (by Organisational Units and by area or floor of the Organisational Units) and the number of secondary cases will enable the monitoring of the epidemic at U.Porto, understand the distribution pattern and, possibly, provide information about the need to review or implement more restrictive measures to control the epidemic in each Organisational Unit.

4. RESOURCES AND INFRASTRUCTURE

4.1. Measures relating to facilities and equipment

The capacity of the facilities, equipment and materials must be evaluated and this evaluation must be kept up to date, specifically:

- Check the safety conditions of the facilities and ensure the previously defined environmental hygiene measures;
- Check the ventilation conditions. In the case of an anomaly, notify the entity's designated official;
- Promote ventilation in all spaces, leaving windows open as much as possible.

The decision to close the facilities and respective guidelines should be a rectoral one, with the Task Force and the facilities' officials consulted, or as decreed by the Health Authorities.

4.2. Safety measures

The necessary measures to ensure the safety of the people and facilities of U.Porto must be planned, specifically by:

- Strengthening the safety measures of people and goods in the event that the facilities are totally or partially closed.
- Preparing scenarios regarding safety and access control, created according to the facilities' foreseen occupancy.

The measures to be taken should be coordinated with the local safety authorities.

4.3. Logistic resources:

Facilities should have the following resources:

- water and liquid soap;
- alcohol-based solution;
- paper towels;
- waste containers;
- dividers, specifically plexiglass ones;
- detergents, disinfectant detergent (a product containing both detergent and disinfectant), and alcohol- or bleach-based solutions (70% alcohol and 5% available chlorine, respectively) for disinfection;
- promotional materials regarding basic hygiene measures and awareness-raising materials on physical distancing;
- surgical masks;
- a thermometer.

5. TEACHING, RESEARCH AND SERVICES

5.1. Measures related to the continuity of U.Porto's services and educational activities

Alternative educational procedures that ensure continuity of the teaching and learning process must be created, monitored and adapted in the event of another facility shutdown, specifically:

- academic activities should continue via distance learning wherever possible should the units need to close;

- educational technology services will provide and be responsible for the maintenance of platforms necessary for implementing these measures.

Wherever possible, continued efforts are needed to facilitate access to the internet and acquiring IT equipment, by signing agreements with companies, promoting students' autonomy in the use of the U.Porto IT network.

A recovery plan for educational activities should be developed whenever in-person teaching is suspended, specifically:

- Response measures should be planned in the event that the normal functioning of the academic year is affected, in particular related to changes to course programmes and assessment periods. These measures should take different possible scenarios into account, considering different periods in which a shutdown may occur.
- Alternative measures for assessing knowledge must be considered, such as monitoring exams electronically, among other possible solutions.

5.2. Measures related to research activities

Each entity must conduct a survey (and keep this survey up to date) of the key services and/or equipment in research centres to ensure the centres' biosecurity. Entities must also prepare a plan in order to ensure continuity of the functioning of the research centres, particularly should there be a partial or total shutdown of facilities. Particular attention should be paid to animal research facilities.

5.3. Measures related to the continuity of U.Porto's services

Customer services must:

- During risk levels 3.1 and 3.2, provide services via telephone, email, or other means instead of in-person attendance.
- Ensure compliance with the abovementioned basic hygiene measures and physical distancing.

Planning regarding the maintenance of entities' essential operations must be secured, including IT resources, workers' salaries, continued communication with workers, students and families, and maintenance services of U.Porto's different institutions. To this end, the following is necessary:

- Defining minimum services in each of the entities, taking into account the need to ensure the security of persons and goods.
- Defining standards and officials overseeing specific activities in the event of facility closure.

The senior management of each entity must create and maintain the necessary conditions for remote work for all workers, as much as possible.

5.4. Measures related to social service

The Social Support Services of the University of Porto (SASUP) will develop guidelines to ensure the continuity of residence and food services for students who depend exclusively on these services and will appoint officials to implement these guidelines.

The needs in terms of the provision of essential goods to keep entities operational (non-perishable food, water, electricity, consumables and necessary equipment) should be defined in the event of the facilities' closure, by:

- estimating the number of students that will require this support;
- estimating and guaranteeing food stocks and a supply of other essential goods;
- ensure that students continue to receive scholarship payments and other grants.

In the event that a student needs to go into quarantine at a U.Porto hall of residence and is not able to return home for whatever reason, a designated hall of residence will be used for this period of quarantine.

5.5. Other support measures for the academic community

In the event of the suspension of activities or closures, U.Porto should, wherever possible, provide the academic community with remote services in the cultural sphere, for the promotion of physical activity, in psychological support, as well as other areas that are suitable to the exceptional circumstances.

6. GOVERNANCE AND COMMUNICATION

6.1. The U.Porto Task Force

U.Porto's single and unified COVID-19 response body, with decision-making powers regarding recommendations, guidelines and other related information. The members of the Task Force are:

José Castro Lopes (Coordinator), *Vice-Rector of U.Porto*

Diogo Pinto, *Academic Federation of Porto*

Eduarda Ferreira, *East Porto Public Health Unit*

Henrique Barros, *Institute of Public Health of the University of Porto*

João Paulo Magalhães, *West Porto Public Health Unit*

José Miguel Neves, *Academic Federation of Porto*

Margarida Tavares, *Infectious Diseases Department at the São João University Hospital Centre*

Miguel Magalhães, *U.Porto Employees' Council*

Paula Meireles, *Institute of Public Health of the University of Porto*

Pedro Norton, *Occupational Health Department at the São João University Hospital Centre*

Raul Santos, *U.Porto Communication, Image and Public Relations Department*

Teresa Leão, *Faculty of Medicine of U.Porto*

6.2. Executive Group

An element of the executive board of each constituent entity, hereinafter referred to as "official", with the following functions:

- ensuring the creation of an isolation area and defining the respective routes;
- ensuring the dissemination of information to all professionals and students regarding the isolation area, routes, and preventative measures covered in this document;
- ensuring the resources and conditions for the implementation of the contingency plan, including the preventative measures;
- coordinate the implementation of measures involving suspected and confirmed cases;
- notify the task force of any obstacles to the implementation of the contingency plan, including preventative measures, by email: covid-19@reit.up.pt;
- in the event of refusal to comply with what is outlined in this contingency plan, the official must contact the task force, who will discuss the measures that can be taken in accordance with the applicable ethical and legal considerations;
- provide the task force with all information that is considered relevant to understand the infection dynamics of the represented entity.

The task force and the executive group can operate together with the following entities:

- Ministry of Science, Technology and Higher Education (MCTES)
- Directorate-General for Higher Education (DGES)
- Ministry of Health (MS)
- Directorate-General for Health (DGS)
- Council of Rectors of Portuguese Universities (CRUP)
- São João University Hospital Centre (CHUSJ)
- Porto University Hospital Centre (CHUP)
- Regional Health Administration of the North of Portugal (ARSN)
- ACES Porto Oriental (East Porto Health Authority)

- ACES Porto Ocidental (West Porto Health Authority)
- Academic Federation of Porto (FAP)
- The national police force (Polícia de Segurança Pública – PSP)
- Porto City Council (CMP)
- U.Porto’s student halls of residence
- Private student halls of residence

6.3. Communication

Providing information and educating the U.Porto community is essential to reducing the risk of the spread of the infection and to managing potential outbreaks in the community.

The task force:

- is responsible for the issuing of recommendations, guidelines and other related information, and for supporting the U.Porto Rector in public communication, along with the Communication, Image and Public Relations Department at the Rectory;
- should guarantee the connection and coordination with the constituent and partner entities, through the elements of local contact defined in the Contingency Plan, as well as the local services and offices established by the Coordinating Board for Communication at the University of Porto.

How to contact the task force

- The email address covid-19@reit.up.pt is the primary means of contact for Contingency Plan’s target audience to send their questions, suggestions, etc., including the designated officials of each constituent entity. These questions will be answered by the task force.

Definition of the means of information distribution to the target audience

- The dynamic email system is the primary means of internal communication, complemented by the page www.up.pt/covid-19. All information related to COVID-19 should be sent from the email address covid-19@reit.up.pt.
- These means are supported by the university’s social media (namely Facebook, Twitter, Instagram and LinkedIn), which will naturally also serve as means of external communication (see subsection “Establish a unit responsible for external communication”).
- Critical information will also be made available in English.

Public information site

- The web page www.up.pt/covid-19 contains all the information relative to COVID-19 for U.Porto’s community, namely all information produced by the task force (for example, announcements, recommendations, awareness-raising materials), as well as links to useful information produced by the health authorities and partners of the Contingency Plan, in particular the website <https://covid19.min-saude.pt/>

- This page promotes the connection of several official U.Porto websites (homepages of constituent entities) to this address, by producing electronic banners for that purpose, to be distributed among those entities.
- All critical information is also made available in English.

Development of internal campaigns to inform and educate

- Public information campaigns about transmission methods and precautions to avoid infections among the target group of the Contingency Plan will be maintained and, if necessary, reinforced.
- Digital communication will be prioritised, namely websites and social media of U.Porto and its constituent entities, to ensure swifter execution.
- Materials will be developed based on official information issued by DGS and other official bodies.
- The distribution and display of printed material (posters, leaflets) may be recommended among all buildings of the U.Porto ecosystem, with special attention to places where hand hygiene should be reinforced or where crowding is very likely to happen.
- All critical information is also made available in English.

Establish a unit responsible for external communication

- The Communication, Image and Public Relations Department at the Rectory is the only point of contact with the members of national international media, whether as a receiver of information requests or as an issuer of information to the external community.
- The means used for communication are the ones that already exist and which are known to journalists, such as the email imprensa@reit.up.pt and the telephone numbers of the Rectory's press officers.
- The production and submission of announcements to the media occurs when new guidelines and containment measures are established, according to the decisions coming from the task force.
- The external communication unit will guarantee that critical information will also be made available in English.

7. CONCLUDING REMARKS

The recommendations included in this document should be adapted to the conditions of each Organisational Unit, Course and/or Course Unit. It is therefore recommended that each Organisational Unit's appointed COVID-19 response official coordinates work groups that allow for an implementation of the COVID-19 response measures that is effective and adapted to these conditions.

It should be noted that, as the current pandemic situation is subject to change, Organisational Units are recommended to develop or update their contingency plans to respond to suspected cases or the possible necessity of reconsidering in-person activities.

The recommendations included in this document can be updated at any time as determined by the pandemic situation and/or determinations of governmental or health entities.

Questions regarding the interpretation of these recommendations should be directed to the U.Porto COVID-19 Task Force by email at covid-19@reit.up.pt.

ANNEXES

ANNEX 1

Annex 1 – “Guidelines for Scientific and Higher Education Institutions to ensure the carrying out of in-person learning and non-learning activities” issued by the Directorate-General for Higher Education and the Directorate-General for Health in September 2021

DGES/DGS

Orientações às Instituições Científicas e de Ensino Superior para garantir a realização de atividades letivas e não letivas presenciais

Ano Letivo 2021-2022

Esta nota de orientações tem como objetivo garantir o arranque do novo ano letivo de 2021-2022 com base em atividades presenciais em condições adequadas de segurança e saúde pública.

O contexto em que se iniciarão as atividades das instituições científicas e de ensino superior no presente ano letivo é relativamente diferente do ano letivo transato. Com efeito, o risco de contágio por COVID-19 encontra-se mitigado face ao ano anterior, com uma elevada fração da população já vacinada, incluindo os jovens adultos.

Adicionalmente, as análises da evolução dos efeitos diretos e indiretos da pandemia têm conduzido a conclusões claras quanto ao carácter imprescindível do sistema de ensino continuar em funcionamento e a desenvolver a sua atividade regular em modelo presencial. Em particular, vários estudos realizados em Portugal e no estrangeiro durante os períodos da pandemia confirmaram o impacto negativo do isolamento determinado pela realização de atividades letivas à distância, especialmente na saúde mental dos estudantes e sintomas de ansiedade.

Neste contexto, perante os dados relativos à pandemia em Portugal, nomeadamente a evolução do processo de vacinação em geral e na faixa etária mais presente nas instituições de ensino superior, bem como o contexto global de restrições aplicáveis às diversas atividades educativas, sociais e económicas, formulam-se as seguintes orientações para aplicação no ano letivo 2021-2022 tendo em vista garantir condições seguras para a realização de todas as atividades letivas e não letivas em contexto presencial.

1- Medidas de prevenção e controlo, para minimizar o risco de infeção por SARS-CoV-2, a adotar pela comunidade educativa

1.1 É obrigatória a utilização de máscaras nas instituições científicas e de ensino superior por estudantes, docentes, não docentes, investigadores e outros colaboradores, de acordo com a legislação vigente, sendo aconselhável a sua utilização e, se aplicável, reutilização adequadas, de acordo com as instruções do fabricante, em termos sanitários e ambientais.

- 1.2 Deve ser acautelada a higienização das mãos à entrada e à saída dos estabelecimentos, salas e espaços comuns, com solução desinfetante.
- 1.3 Todos os espaços devem ser higienizados de acordo com as normas e orientações da DGS, devendo ser garantida a existência de material e produtos de limpeza para os procedimentos adequados de desinfeção e limpeza dos edifícios.
- 1.4 Deve continuar a ser disponibilizada informação acessível, nomeadamente através da afixação de cartazes, sobre a correta lavagem e higienização das mãos, etiqueta respiratória, distanciamento físico recomendado, uso de máscara certificada por todas as pessoas em espaços fechados (colocada adequadamente e em permanência), entre outros.
- 1.5 Devem ser definidos e/ou mantidos os circuitos de entrada e saída nas instalações, de forma a minimizar a concentração e o ajuntamento de pessoas.
- 1.6 Deve continuar a ser privilegiada a renovação frequente do ar em todos os recintos fechados, em articulação com as normas e orientações da DGS aplicáveis.
- 1.7 Devem continuar a ser acauteladas instalações sanitárias com água, sabão líquido com dispositivo doseador e toalhetes de papel de uso único, para a promoção das boas práticas de higiene, nomeadamente a limpeza e higienização das mãos, bem como higienização frequente das instalações, de acordo com as normas e orientações da DGS.
- 1.8 Se possível, os portões e portas devem permanecer abertos de forma a evitar o toque frequente em superfícies e a permitir uma melhor circulação do ar dentro dos espaços.
- 1.9 A realização de congressos, reuniões, conferências e eventos deve observar as normas e orientações da DGS em vigor, bem como da legislação vigente.
- 1.10 A vacinação contra a COVID-19 é **fortemente recomendada** para a proteção da Saúde Pública e para o controlo da pandemia COVID-19. De acordo com a Norma n.º 002/2021 da DGS, todas as pessoas residentes em Portugal com idade

igual ou superior a 12 anos foram incluídas no plano de vacinação contra a COVID-19, permitindo uma cobertura vacinal elevada, mesmo em ambiente universitário.

2. Organização e disposição das salas de aula, anfiteatros e outras áreas onde decorrem atividades com estudantes, docentes, investigadores e colaboradores

2.1 Nas salas, deve, quando possível, deve garantir-se um distanciamento físico adequado entre as pessoas, sem comprometer o normal funcionamento das atividades letivas presenciais.

2.2 Deve continuar a ser promovida a higienização frequente dos materiais partilhados e sempre antes da troca de utilizador, a higienização das mãos antes da entrada em cada sala e à saída e a higienização do mobiliário e equipamentos de utilização comum presentes nas salas de aula antes do início de cada aula, sempre que assim seja possível.

2.3 Nas bibliotecas, nos laboratórios e instalações similares, deve ser maximizado o distanciamento físico recomendado entre as pessoas. Sempre que tal não for possível, ou nas situações em que as pessoas estejam frente a frente, como nas bibliotecas, devem manter-se as barreiras de proteção, já instaladas.

2.4 Os ginásios e outras instalações desportivas devem cumprir todas as medidas de higiene e controlo ambiental, bem como o adequado distanciamento físico e lotação, em cumprimento das normas e orientações da DGS para esse setor.

2.5 Nas cantinas e bares deve continuar a ser acautelado o respeito pelas regras de distanciamento físico entre todos os utilizadores e o uso obrigatório de máscaras (com exceção durante o período de refeição), incluindo:

- a colocação de sinaléticas que promovam um afastamento de pelo menos 2 metros nas filas para acesso às linhas e balcões de serviço;
- a organização das salas de refeições de modo a deixar um lugar de intervalo entre os utilizadores;
- o estímulo ao alargamento de horários do serviço de refeições e cruzando-os, sempre que possível, com uma maior flexibilidade de horários de atividades académicas, de forma a evitar concentrações elevadas de pessoas dentro desses espaços, bem como nas entradas e saídas dos mesmos;

- a utilização exclusiva de todos os espaços para refeições ou para serviços de cafetaria, não sendo permitida a permanência de pessoas para outros efeitos, designadamente convívios, ou qualquer outra forma de confraternização lúdica e/ou académica;
- quando necessário e conveniente poderá ser permitida a utilização das cantinas, fora dos horários de refeições, como espaço de estudo, desde que sejam mantidas as regras de distanciamento físico similares às salas de estudo das residências e assegurada a conveniente higienização e arejamento/ventilação do espaço previamente à sua utilização;
- a correta higienização das mãos por parte dos utilizadores (antes e depois das refeições), bem como uma adequada limpeza e desinfeção das superfícies, de acordo com as normas e orientações da DGS;
- a continuação da utilização adequada de protocolos de limpeza e desinfeção, incluindo a desinfeção, pelo menos, duas vezes por dia, e com recurso a detergentes adequados, de todas as zonas de contato frequente (ex.: zonas de atendimento, balcões, etc.), assim como a higienização das mesas com produtos recomendados após cada utilização e a remoção de motivos decorativos nas mesas;
- Manter a abolição de objetos e equipamentos de utilização comunitária, incluindo jarros de água, entre outros.

3. Organização e disposição das residências de estudantes

3.1 Cada residência deve adequar o Plano de Contingência, devendo respeitar as normas e orientações da Direção-Geral da Saúde (DGS), contemplando, entre outros, os procedimentos a adotar perante um caso possível, provável ou confirmado de COVID-19;

3.2 É obrigatório o uso de máscara nos espaços comuns, sendo aconselhável a sua utilização e, se aplicável, reutilização adequadas, de acordo com as instruções do fabricante.

3.3 O acesso às residências pode ser condicionado à exigência do Certificado Digital Covid da UE (vacinação completa, recuperação ou teste) ou um teste negativo do seguinte tipo:

- teste PCR (feito em laboratório), realizado nas 72 horas anteriores à sua apresentação
- teste de antigénio com relatório laboratorial, realizado nas 48 horas anteriores à sua apresentação

- teste rápido de antigénio (autoteste), realizado nas 24 horas anteriores à sua apresentação, devendo ser feito na presença de um profissional de saúde ou da área farmacêutica que certifique a sua realização e o seu resultado
- teste rápido de antigénio (autoteste), realizado no momento, à porta do estabelecimento, com a verificação dos responsáveis por estes espaços

3.4 Deve ser garantida uma distância lateral mínima de 2 metros entre camas em quartos com mais do que um estudante, sempre que assim seja possível, não sendo recomendada a utilização de beliches ou equipamento mobiliário similar, bem como o usufruto comum de roupeiros, armários, prateleiras, mesas de trabalho ou equivalentes.

3.5 A utilização partilhada de instalações sanitárias deve ser acompanhada do reforço da sua higienização com recurso e disponibilização de soluções desinfetantes adequadas, de acordo com o previsto na Orientação n.º 014/2020 da DGS.

3.6 A utilização de espaços comuns, incluindo cozinhas, copas ou áreas equivalentes, deve obedecer a um regime de escala, a fixar por cada instituição, garantindo que a ocupação simultânea permita distanciamento físico de acordo com as normas vigentes, com a consequente limpeza e desinfeção, de acordo com a Orientação 014/2020 da DGS.

3.7 Os espaços de lazer de usufruto comum, designadamente salas de convívio ou similares, devem continuar a ser redimensionados na sua lotação máxima e o mobiliário de apoio deve ser higienizado regularmente.

3.8 Nas salas de estudo ou estruturas de natureza similar deve ser maximizado o distanciamento físico entre as pessoas, de pelo menos um metro, sempre que possível. Sempre que tal não for possível, ou nas situações em que os utentes estejam frente a frente, devem manter-se instaladas as barreiras de proteção, como por exemplo, divisórias em acrílico entre espaços de trabalho/estudo.

3.9 Perante um caso provável ou possível¹ devem ser seguidos os circuitos e procedimentos do Plano de Contingência e contactado o SNS24, dando cumprimento às indicações recebidas.

¹ Os anteriores “casos suspeitos” são agora identificados como:

- Caso provável: Pessoa que preenche os critérios clínicos e epidemiológicos ou critérios clínicos e imagiológicos para definição de caso provável de COVID-19, de acordo com a Norma n.º 020/2020 da DGS;
- Caso possível: Pessoa que preenche os critérios clínicos de definição de caso possível de COVID-19, de acordo com a Norma n.º 020/2020 da DGS. São essencialmente as pessoas que desenvolvam quadro respiratório agudo com tosse (de novo ou agravamento da tosse habitual), ou febre (temperatura $\geq 38.0^{\circ}\text{C}$), ou dispneia / dificuldade respiratória (Norma n.º 020/2020 da DGS).

4. Organização das aulas e estágios em estabelecimentos prestadores de cuidados de saúde

4.1 Os estabelecimentos prestadores de cuidados de saúde e as instituições de ensino superior devem compatibilizar os respetivos planos de contingência institucionais, no que se refere à prática clínica segura, e reforçar a prática das recomendações gerais de prevenção e controlo da transmissão de COVID-19, tais como:

- Distanciamento físico (mínimo 2 metros), sem comprometer as atividades de prestação de cuidados aos doentes, quando estas forem imprescindíveis;
- Uso de máscara cirúrgica por todas as pessoas (colocada adequadamente e em permanência);
- Utilização do equipamento de proteção individual (EPI), adequado a cada situação, de acordo com as normas e orientações da Direção-Geral da Saúde;
- Cumprimento de medidas de etiqueta respiratória e evicção de contactos;
- Lavagem ou desinfeção das mãos (com água e sabão ou com solução antisséptica de base alcoólica - SABA);
- Estrita evicção dos aglomerados de pessoas (de acordo com a legislação em vigor).

4.2 Deve ser assegurada a correta formação e informação aos estudantes sobre as medidas de segurança, prevenção e controlo da infeção, a adotar no contexto de estágios em unidades de cuidados de saúde, informando os estudantes sobre os riscos associados à infeção pelo vírus SARS-CoV-2, designadamente o risco de transmissão de vírus na comunidade, o risco de transmitir o vírus aos utentes e o risco pessoal de infeção da doença.

5. Orientações gerais

5.1 Plano de Contingência: as instituições científicas e de ensino superior devem proceder à atualização do plano de contingência, de acordo com a OT 006/2020 da

Direção-Geral da Saúde (DGS), contemplando, entre outros, os procedimentos a adotar perante um caso possível, provável ou confirmado de COVID-19;

- 5.2 A todos os estudantes deve ser garantido o seguro escolar por forma a abranger as atividades desenvolvidas no decurso dos estágios em estabelecimentos prestadores de cuidados de saúde.
- 5.3 A instituição deve garantir que os estudantes têm acesso a EPI e promover a formação adequada sobre a sua correta utilização.
- 5.4 Deverá ser assegurado, que os alunos/estagiários, não prestam cuidados ou entram nas áreas dedicadas à COVID-19, devendo sempre ser consultado o PPCIRA local para formação e análise de risco.

ANNEX 2
LIST OF ORGANISATIONAL UNITS BY HEALTH AUTHORITY

ACeS Porto Ocidental	ACeS Porto Oriental
FAUP	FBAUP
FCUP	FADEUP
FCNAUP	FEP
FDUP	FEUP
FFUP	FMUP
FLUP	FMDUP
ICBAS	FPCEUP
REITORIA	
SASUP	
CDUP	

**University
of Porto**

U. PORTO