



INFORMATION ON THE **CONTINGENCY PLAN**

CORONAVIRUS DISEASE (COVID-19)



UNIVERSIDADE
NOVA
DE LISBOA

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INTRODUCTION

This document contains the main features on the **NOVA Contingency Plan for Coronavirus Disease (COVID-19)** established by NOVA University Lisbon, provides information to NOVA students and staff about: the disease, measures for infection control and prevention, and procedures and measures to adopt if suspected and/or confirmed cases are identified.

NOVA Contingency Plan COVID-19 is based on guidance by the Directorate-General of Health and the best scientific evidence currently available. NOVA students and staff will be informed on the Coronavirus Disease (COVID-19) and ways to avoid transmission through the e-mail, Internet websites of NOVA and all its organic units, NOVA's Intranet, posters in common areas, etc.

Additionally, information on recommendations and procedures established in the **NOVA Contingency Plan for COVID-19** will be widely disseminated by all NOVA academic community. NOVA University Lisbon is committed to protect the health and well-being of its students and staff, and has an important role to play in limiting the negative impact of this outbreak in the community, building on its knowledge in several areas.

1. CORONAVIRUS DISEASE (COVID-19)

Coronaviruses are a family of viruses known for causing disease in humans and are common across the world. The infection causes symptoms like cough, fever or difficulty in breathing, but can also cause more serious illness like pneumonia.

The novel coronavirus (SARS-CoV-2), which causes the coronavirus disease (COVID-19), is a new strain of coronavirus first identified in Wuhan City, China in December 2019.

Although the epicenter of the epidemics occurred in Wuhan City, Hubei Province (China), where most cases were reported, the risk of infection is not limited to Wuhan, but to any area with community and sustained transmission of the virus. Currently, the second country with the highest number of active cases is South Korea, followed by Italy.

The incubation period of COVID-19 is between 2 and 14 days. This means that if a person remains well 14 days after contact with someone with confirmed coronavirus, it is unlikely that they have been infected.

The following symptoms may develop after exposure to a confirmed COVID-19 case:

- cough
- difficulty in breathing
- fever

Generally, these infections can cause more severe symptoms in people with weakened immune system, older people, and those with long-term conditions like diabetes, cancer and chronic lung disease.

2. HOW COVID-19 IS SPREAD

From what we know about other coronaviruses, spread of COVID-19 is most likely to happen when there is close contact (within 2 metres) with an infected person. The risk increases the longer someone has close contact with an infected person.

Droplets produced when an infected person coughs or sneezes (respiratory secretions containing the virus) are the most important way of transmission.

There are 2 routes by which people could become infected:

- secretions can be directly transferred into the mouths or noses of people who are nearby (within 2 metres) or could be inhaled into the lungs;
- it is also possible that someone may become infected by touching a surface or object that has been contaminated with respiratory secretions and then touching their own mouth, nose, or eyes.

3. PREVENTING SPREAD OF COVID-19

There is currently no vaccine to prevent COVID-19. The best way to prevent infection is to avoid being exposed to the virus.

There are general principles anyone can follow to help prevent the spread of respiratory viruses, including:

- Washing your hands often – with soap and water, or use alcohol sanitiser if handwashing facilities are not available. If your hands are visibly soiled, (e.g., dirt, blood, body fluids), water and soap are preferred.

- Covering your cough or sneeze with a disposable tissue, then throwing the tissue into a bin and washing your hands right after. If a disposable tissue is not available, cough or sneeze to your forearm. Never cough or sneeze to open air or your hands.
- People who experience symptoms like cough, fever or difficulty in breathing should stay at home and should not attend work or any education, childcare or health care setting.
- Students, staff and visitors should wash their hands:
 - *Before leaving home*
 - *On arrival at Faculty/Institute/School*
 - *After using the toilet*
 - *After breaks and sporting activities*
 - *Before eating any food, including snacks*
 - *Before leaving Faculty/Institute/School*
- Use an alcohol-based hand sanitiser that contains at least 60% alcohol if soap and water are not available.
- Avoid touching your eyes, nose, and mouth with unwashed hands.
- Avoid close contact with people who experience symptoms like cough, fever or difficulty in breathing.
- Clean and disinfect frequently touched objects and surfaces.
- if you are worried about your symptoms, please call **SNS24: 808 24 24 24**. Do not go directly to any healthcare environment.
- See further information at www.dgs.pt

Face masks for the general public, students, or staff are not recommended to protect from infection, as there is no evidence of benefit from their use outside healthcare environments.

However, given the higher risk of being in contact with people with illness, the use of personal protective equipment is strongly recommended to students at NOVA Medical School during their learning activities in healthcare settings.

4. MEASURES TO BE ADOPTED AT NOVA

NOVA organic units and the Rectorate will immediately adopt the following measures:

- Availability of alcohol-based hand sanitisers in common areas such as hallways, canteens/cafeterias, zones of meals.
- Area with updated information on COVID-19 at NOVA's website, NOVA organic units' websites and NOVA's Intranet, providing the contact of the designated focal point to answer any questions.
- Sessions to inform students and staff, with invited experts (if necessary).

5. MEASURES TO ADOPT WHEN RETURNING FROM AN AREA WITH ONGOING COMMUNITY TRANSMISSION

NOVA follows the guidance on COVID-19 from the Directorate-General of Health and the World Health Organization. According to the **NOVA Contingency Plan for COVID-19**, **all students and staff who returned from an area with ongoing community transmission of COVID-19**, including:

- Germany (States of Bavaria, Baden-Württemberg and North Rhine-Westphalia)
- Spain (Autonomous Communities of: Catalonia, La Rioja, Madrid and Basque Country)
- France (Regions of Grand Est and Île-de-France)
- Italy
- China
- South Korea
- Iran
- Japan
- Singapore

must, as a public health precaution, stay at home during a period of 14 days after their return, during which they should monitor their symptoms (cough, fever, difficulty in breathing).

All people in these circumstances, should:

- **Monitor symptom onset: fever, cough, difficulty in breathing**, in you or your cohabitants;
- Measure your body temperature twice a day and take note;

- **Wash your hands often**, especially before eating and after using the toilet;
- **Call SNS24 (808 24 24 24), if you or your cohabitants experience any of the symptoms above.**

6. WHAT IS A SUSPECTED CASE?

The classification of a suspected case of Coronavirus Disease (COVID-19) follows clinical and epidemiological criteria. The following case definition is based on currently available information from the European Centre for Disease Control and Prevention (ECDC).

Clinical criteria		Epidemiological criteria
Patient with acute respiratory infection (sudden onset of fever, cough or difficulty in breathing)	E	Having stayed or lived in areas with ongoing community transmission* within 14 days before symptom onset
OU		
Patient with acute respiratory infection (sudden onset of fever, cough or difficulty in breathing)	E	Close contact with a confirmed or probable case of COVID-19 infection, within 14 days before symptom onset
OU		
Patient with serious acute respiratory infection, requiring hospitalization, without any known etiology		

* Areas with ongoing community transmission: Germany (States of Bavaria, Baden-Württemberg and North Rhine-Westphalia); Spain (Autonomous Communities of: Catalonia, La Rioja, Madrid and Basque Country); France (Regions of Grand Est and Île-de-France); Italy; China, South Korea, Iran, Japan, and Singapore.

7. ESTABLISHING AN ISOLATION AREA

Isolation areas should be established in each NOVA organic unit and in the Rectorate. Placing a student or staff member who is a suspected case of COVID-19 in an isolation area aims to prevent other students and/or staff from being exposed and infected. The main objective is to avoid the spread of a communicable disease across the University.

The isolation area (room, office, area) in every NOVA organic unit or in the Rectorate should have natural ventilation, or mechanical ventilation system, and have smooth and washable coverings (for example, it should not have carpets or curtains). This area must be equipped with:

- telephone;
- chair or couch (so the student or staff member suspected of being infected by COVID-19 can be comfortable and rest while awaits case validation and transport by the ambulance);
- *kit* with water and some non-perishable foods;
- waste container (with non-manual opening and plastic bag);
- alcohol-based antiseptic solution (available inside and at the entrance to this area);
- paper towels;
- surgical mask(s);
- disposable gloves;
- thermometers.

In this area, or close to it, there must be a properly equipped toilet, namely with soap and paper towels, for the exclusive use of the suspected case.

Students and staff in each NOVA organic unit must be informed about the location of the isolation area in their institution.

8. DESIGNATING A FOCAL POINT

NOVA Rectorate and organic units will designate a focal point in charge of managing any suspected case of COVID-19. Students and staff will be informed about who is the Focal Point in their institution. Students or staff with symptoms and epidemiological link matching the COVID-19 case definition should be reported to the focal point in their institution.

Whenever a situation of a student or staff member with symptoms is reported, the Focal Point must inform the directorate of the NOVA organic unit/ Rectorate Department and be responsible for ensuring compliance with the procedures established in the [NOVA Contingency Plan for COVID-19](#).

The Focal Point will escort the suspected case to the designated isolation area, provide the necessary support and trigger the procedures established in the [NOVA Contingency Plan for COVID-19](#).

9. PROCEDURES REGARDING A SUSPECTED CASE

All students and staff whose criteria match the case definition for a suspected case of COVID-19, or someone who identifies a student or staff member in these circumstances, should immediately report the situation to the designated focal point in their institution and to go to the isolation area.

All assistance needed should be provided to the unwell student or staff member, including if there is any difficulty in walking. The focal point must assure the student or staff member goes to the isolation area or escort him/her until there. The focal point should try to keep a safe distance (more than 1 meter) from the unwell person. The path until the isolation area should not include the use of lifts in order to prevent contamination of surfaces. The use of stairs is preferred, but touching handrails should be avoided.

Before any contact, the focal point escorting and assisting the unwell student or staff member should place a face mask and disposable gloves, and should follow all basic rules of infection control, including hand washing, after contact with the suspected case.

The suspected case must wear a face mask if his/her clinical condition allows. The mask must be placed by the person and he/she should make sure it is well adjusted to the face, mold or pinch the stiff edge to the shape of the nose, so the nose, mouth and lateral areas of the face are protected. Men with beard would also place a disposable tissue under the mask. Face masks should be removed and replaced when they become moist.

Inside the isolation area, the suspected case of COVID-19 or the focal point (if the suspected case cannot speak Portuguese) should call SNS 24 ([808 24 24 24](#)). After assessment, SNS 24 informs the suspected case or focal point:

- If it is not a real suspected case of COVID-19: SNS 24 will define the appropriate procedures regarding the clinical situation of the student or staff member;

- If it is a real suspected case of COVID-19: SNS 24 will contact the Doctor Supporting Line of the Directorate-General of Health to validate the suspicion. The result can be:
 - **Non-Validated Suspected Case:** the case is closed for COVID-19. SNS 24 defines the usual procedures according to the clinical situation of the student or staff member. The student or staff member informs the focal point about the non-validation and the latter informs the directorate of the NOVA organic unit.
 - **Validated Suspected Case:** the Directorate-General of Health activates the National Institute of Medical Emergency, the National Institute of Health and the Regional Health Authority. The epidemiological investigations and contact tracing are then triggered. The focal point informs the directorate of the NOVA organic unit that there is a validated suspected case of COVID-19 in the institution.

10. PROCEDURES REGARDING A VALIDATED SUSPECTED CASE

In the event of a **validated suspected case**:

- The student or staff member should remain in the designated isolation area (with face mask) until the arrival of the ambulance of the National Institute of Medical Emergency, which will transport the suspected case to the reference hospital, where biological samples will be collected for laboratory tests at the National Institute of Health or hospital lab;
- Access of other students or staff to the isolation area is forbidden (except for the focal point in the organic unit);
- The validated suspected case should remain in the designated isolation area in order to avoid infecting other students or staff. Additional movements by the validated suspected case inside the organic unit should be restricted.

The Directorate-General of Health informs the Regional Health Authority of laboratory results, which will inform the Local Health Authority. The Local Health Authority informs the directorate of the NOVA organic unit of lab results and:

- If it is not confirmed, the case is closed for COVID-19. The usual procedures in each NOVA organic unit are applied, including cleaning and disinfection of the isolation area.

- If the **case is confirmed for COVID-19**, access to the isolation area is forbidden until decontamination (cleaning and disinfection) takes place. The restrictions on access can only be lifted by the Local Health Authority.

11. PROCEDURES REGARDING A CONFIRMED CASE

In the event of a **confirmed case**, the directorate of the NOVA organic unit should:

- Promote cleaning and disinfection (decontamination) of the isolation area;
- Promote cleaning and disinfection of frequently used areas by the confirmed case of COVID-19, which are more likely to be contaminated. Special attention should be given to: classrooms, meal tables, desks, including objects and equipment used by the confirmed case of COVID-19;
- Store the waste of the confirmed case of COVID-19 (with used tissues, face masks, etc.) in a plastic bag, according to the rules defined internally.

12. PROCEDURES REGARDING SURVEILLANCE OF CLOSE CONTACTS

A close contact of a confirmed case of COVID-19 is defined as any person currently without symptoms but who had or may have had contact with a confirmed case of COVID-19. The exposure of the close contact will determine the kind of surveillance.

A close contact of a confirmed case of COVID-19 can have:

High risk of exposure, defined as:

- Any student from the same class or working group of the confirmed case;
- Staff member from the same office, room, section, area within 2 meters of the confirmed case;
- Student or staff member in close face-to-face or touching contact with the confirmed case or who was in the same closed space with him/her;
- Student or staff member who shared dishes (plates, glasses, cutlery), towels or other objects or equipment that may be contaminated with respiratory secretions or blood.

Low risk of exposure (casual), defined as:

- Student or staff member who had casual contact with the confirmed case (for example, in movement contact during which there was exposure to droplets/respiratory secretions through face-to-face contact higher than 15 minutes, cough or sneezing);
- Students or staff who assisted the confirmed case, as long as they have followed all prevention measures (using face mask and disposable gloves, washing hands, etc.).

Additionally, in the event of a confirmed case of COVID-19, active surveillance of close contacts should be triggered, regarding symptom onset. For this purpose, Local Health Authority, in close coordination with the NOVA organic unit, should:

- Identify, list and classify close contacts (including casual contacts);
- Follow-up all contacts (calling daily, informing, giving guidance and support, if necessary).

The incubation period of COVID-19 is between 2 and 14 days. As a precaution, active surveillance of close contacts will be carried out until 14 days after the last exposure to the confirmed case.

Surveillance of close contacts should take place as follows:

High risk of exposure	Low risk of exposure
<ul style="list-style-type: none">• Active monitoring by the Local Health Authority during the 14 days after the last exposure.• Daily self-monitoring of COVID-19 symptoms, including fever, cough or difficulty in breathing.• Restrict social contacts.• Avoid any travelling.• Be available by phone for active monitoring during the 14 days after the last exposure.	<ul style="list-style-type: none">• Daily self-monitoring of COVID-19 symptoms, including fever, cough or difficulty in breathing.• Follow-up by the occupational health office.

It is important to highlight that:

- Daily self-monitoring, by the student or staff member, aims to assess fever (measure the body temperature twice a day and take note) and monitor cough or difficulty in breathing;
- In case of COVID-19 symptoms in a student or staff member inside a NOVA organic unit/Rectorate, **PROCEDURES REGARDING A SUSPECTED CASE** should be triggered;
- If there are no symptoms during the 14 days after the last exposure, the case is closed for COVID-19.



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