

Procedure for the management of symptomatic and SARS-CoV-2 positive cases

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1 INTRODUCTION, PURPOSE OF THE DOCUMENT AND GENERAL MEASURES

This document follows and specifies what is defined by the "Behavioural Guidelines - Epidemiological Emergency Protocol for SARS-CoV-2" (hereinafter Guidelines) with reference to the management of SARS-CoV-2 symptomatic and positive cases referred to the university community (staff¹, students, suppliers², anyone who attends the University and more generally is part of the aforementioned community), in line with the regulations issued by the competent Authorities and in consideration of the autonomy of the UCSC.

The document defines the measures that are part of the so-called "secondary prevention" of COVID-19 outbreaks, through the identification of confirmed or suspected COVID-19 cases and the prompt management of related contacts with other people.

The application of sanitary and restrictive measures for persons (e.g. isolation, prescription of diagnostic tests, etc.), as well as the carrying out of epidemiological analyses, are the responsibility of the competent health authorities, i.e. in particular the Hygiene and Public Health Services of the Prevention Departments of the Local Health Authorities (DdP) and General Practitioners (GP, also called family doctor).

The procedure requires close collaboration between the University (i.e. with particular reference to the structures responsible for health and safety) and the competent Health Authorities, with particular reference to the aforementioned Prevention Departments (DdP), in order to promptly and effectively prepare the appropriate prevention measures. The University, if deemed appropriate or necessary, may also implement further precautionary and preventive measures in relation to the provisions of the aforesaid Health Authorities.

In order to make the above-mentioned collaboration possible between the University and the DdPs, which are territorially competent with reference to the different campuses of Università Cattolica del Sacro Cuore (UCSC), the University Referents for COVID-19, represented by the Employer (Campus Director - DS), assisted by the competent structures in the field of health and safety, namely the Occupational Health Doctor (MC) and the Prevention and Protection Service Manager (RSPP), are identified for each of the above-mentioned campuses.

Among the further measures applied to the university community are those of competence provided for in § 4.1, 4.2, 4.8 and 4.11 of the Guidelines, with reference to temperature detection and management of symptoms, also according to the specifications in the following chapters. The MC also provides the Campus Director (and other competent structures in the field of health and safety) with any information necessary to make the necessary decisions (in line with the provisions in § 4.9 of the Guidelines).

The members of the aforementioned university community are required to behave responsibly, in compliance with the regulations and the precautionary instructions issued by the competent Authorities. In this regard, it is first of all necessary to contact their GP in case of COVID-19 symptoms and positivity and scrupulously follow the indications provided by the competent health authorities, in order to protect their own health and that of the community.

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¹ The term "personnel", for the purposes of the discipline referred to in this document, means both teaching staff, permanent and non-permanent (including research grant holders), and technical-administrative staff, as well as other persons equated with workers.

² With regard to suppliers we refer in particular to those with tenders/contracts with "stable" services (e.g. cleaning, information systems support), other suppliers who interact in various ways with the university community and may have had first level contacts (e.g. a consultant who is present for a significant time at the University and who has contacts with UCSC staff).



The updated list of the main symptoms related to COVID-19 is available on the website of the Ministry of Health, which, at the date of publication of this document, indicates: "The most common symptoms of COVID-19 are: fever higher than 37.5°C and chills; recently developed dry cough; breathing difficulties; sudden loss of sense of smell (anosmia) or decreased sense of smell (hyposmia), loss of taste (ageusia) or altered taste (dysgeusia); colds or runny nose; sore throat; diarrhoea (especially in children). In the most serious cases, the infection can cause pneumonia, severe acute respiratory syndrome [...]".

Among the responsible behaviours strongly recommended to the university community is the use of the IMMUNI application.

The measures referred to in this document also refer to foreign staff and students or those taking part in international mobility³ activities.

2 PERSONNEL

2.1 Personnel with COVID-19 symptoms

- If the body temperature threshold is exceeded (above 37.5 degrees Celsius) and/or other symptoms of COVID-19 are detected <u>at home</u>, the staff:
 - must not go to the University;
 - o should contact their general practitioner (GP, also called family doctor)⁴as soon as possible;
 - o must contact the Human Resources Department and then the Occupational Health Doctor of the University campus (MC)⁵, also informing their manager⁶.
- If the body temperature threshold is exceeded (above 37.5 degrees Celsius) and/or other symptoms of COVID-19 are detected <u>at the University</u>, the subsequent measures are implemented:
 - o application of temperature detection and isolation procedures, with reference to access to the University (ref. §4.2 of the Guidelines) and performance of activities in presence (ref. §4.8 of the Guidelines);
 - the staff must contact the Human Resources Department and then the MC, also informing their manager⁷;
 - their staff must contact their GP.
- The Human Resources Department and the Occupational Health Doctor shall assess⁸, also in consideration of the indications of the GP, any precautionary measures to be taken, pending the completion of the procedure for which the Department of Prevention of the Local Health Authority (DdP) is responsible.

³ With reference to foreign staff and students and international mobility activities, the provisions of this document must be applied in consideration of: i) Italian regulations and the respective indications of the competent Authorities, also with regard to the stay and movements among countries of origin, transit and destination; ii) the regulations of the country in which the subject is or transits.

⁴ If the GP is not present, the person must contact the DdP or the Special Unit of Continuity of Care (USCA), belonging to the Local Health Authority. This consideration also extends to the further and similar circumstances provided for in this chapter.

⁵ With reference to the Brescia and Piacenza-Cremona campuses, staff communications are carried out directly with the Prevention and Protection Service Manager (RSPP) rather than with the Human Resources Department and the MC. The RSPP therefore informs the aforementioned structures, with which, under the coordination of the DS, the consequent measures are defined and implemented. This consideration extends to the further and similar circumstances provided for in this chapter.

 $^{^{6}}$ For teaching staff, it is recommended to contact the Degree Programme Coordinator/Faculty Dean/Institute Director.

⁷ See previous note.

⁸ In assessing the cases referred to in this chapter, the MC takes into account the fragility of staff (also with reference to the provisions of § 4.9 of the Guidelines).



- The GP carries out the clinical evaluations and provides the necessary prescriptions (e.g. with reference to the need to prescribe the diagnostic test for COVID-19, so-called swab)⁹ and communicates it to the DdP. Prescriptions for staff illness are the sole responsibility of the competent health authorities, i.e. primarily the GP.
- The staff reports to the Human Resources Department and then to the MC about the diagnosis and any prescriptions of the GP (e.g. with reference to the possible prescription of the swab).
- The DdP is responsible for carrying out the swab and communicating the result to the person concerned and the GP; if the swab confirms the negative result to COVID-19, the staff, following the instructions of the DdP, proceeds to contact their GP, also with reference to the necessary certifications, and also sends the test report to the MC, which informs the Human Resources Department as far as it is concerned.

2.2 COVID-19 positive staff and their close contacts

- Personnel who tested positive for COVID-19, remain in isolation and follow the instructions given by the DdP and their GP.
- The DdP shall notify the University of any positive results to COVID-19 (the structures receiving such notification shall promptly forward it to the DS and to the MC).
- In any case, the staff promptly sends the following information to the Human Resources Department and then to the MC:
 - o generality and structure/office of the UCSC (academic or administrative);
 - date of onset of symptoms;
 - o main premises the staff have been to and the persons (both third parties and from the UCSC) with whom there has been possible first level contact (close contact)¹⁰ in the period between the two days before the onset of symptoms or the swab and the date of beginning of isolation.
- If the notification has been received directly from the person concerned and not yet from the DdP, the MC will contact the DdP.
- The DdP carries out the in-depth studies, the epidemiological investigation and establishes the subsequent procedures, requesting the University's collaboration, communicating in particular with the DS.
- The DS, assisted by the MC, in connection with the DdP and involving the competent structures of the UCSC, activates the necessary security measures, with particular reference to: i) the carrying out of any disinfection, sanitation and closure of certain areas procedures and ii) the preparation of lists for the identification of close contacts by the DdP.
- The structures responsible for the categories of people involved (staff, students, suppliers and visitors), coordinated by the DS/MC, prepare the lists referred to in the previous point, also with the help of support information systems. The aforementioned lists:
 - are predisposed with reference to the potential contacts the positive person has had (in the university environment), usually in the period between the two days before the onset of the symptoms or the swab and the date of the beginning of the isolation; the DdP can in any case specify the instructions to fulfil the request, also with reference to the observation time period;

⁹ These regulations may also apply to asymptomatic cases that are subject to the requirements of the GP, e.g. with regard to isolation and/or swab testing. These cases are handled in accordance with further and subsequent indications in this document.

 $^{^{}m 10}$ See the chapter "Definitions".



- o are kept for a period of at least 14 days following the date of the swab.
- The DS forwards the lists to the DdP; as part of the contact tracing procedures, the DdP can carry out indepth studies and get into contact with the people involved, as well as with the University.
- The DdP, after carrying out the epidemiological investigation, defines the measures to be implemented with regard to close contacts (e.g. quarantine, isolation, active surveillance, etc.) and the premises concerned and communicates them to the DS.
- Taking into account the indications provided by the DdP, the DS, assisted by the MC and the competent structures of the UCSC, implements what is within its competence.
- The following measures are implemented with reference to the return of positive COVID-19 staff to the University:
 - the return can only take place after the confirmation of recovery, attested by the DdP. The aforesaid personnel must notify the Human Resources Department and therefore the MC of the recovery and the negative outcome of the swab, also transmitting the medical report only to the latter;
 - o for subjects hospitalised during the illness, their return is subject to the visit carried out by the MC, who also communicates the results to the Human Resources Department, to assess the conditions of return;
 - o the Human Resources Department confirms the return, also informing the respective manager/referent.
- The subjects identified as close contacts by the DdP can return to the University only at the end of the prescriptions and limitations established by the competent Health Authorities and following confirmation by the Human Resources Department, in connection with the MC.

2.3 Personnel who have had contacts with subjects with prescriptions related to COVID-19

- Personnel who are aware that they have been close to a person who is positive for COVID-19 or in any case symptomatic and subject to prescriptions by the competent Health Authority (e.g. fiduciary isolation, swab prescription, etc.) and that this situation can be considered even potentially a situation of concrete risk of contagion (also with respect to third parties, e.g. with reference to cohabitation), must responsibly and promptly inform the GP of these circumstances.
- It is the responsibility of the competent health authorities to identify the close contacts of positive cases for COVID-19 and to make the evaluations and provide the prescriptions referring to the abovementioned circumstances. In the event that the DdP contacts the University, it cooperates in carrying out the investigation procedures and in applying the consequent measures (as far as it is concerned).
- Personnel shall promptly notify the Human Resources Department, and therefore the MC, of any
 prescriptions issued by the competent health authorities.
- The MC, if necessary, contacts the DdP for the specific evaluations of the case and any consequent measures to be taken, activated if necessary as a precautionary measure also by the UCSC while waiting for the indications of the same DdP.
- Any other subjects who have had contacts with the personnel concerned by the requirements referred to in the previous points are interested only in the case of specific indications by the DdP.

3 STUDENTS



3.1 Students with COVID-19 symptoms

- If the body temperature threshold (above 37.5 degrees Celsius) and/or the appearance of other symptoms of COVID-19 are detected <u>at home</u>, the students:
 - must not go to the University;
 - must promptly contact their general practitioner (GP or family doctor)¹¹.
- If the body temperature threshold is exceeded (above 37.5 degrees Celsius) and/or other symptoms of COVID-19 are detected at the University, the subsequent measures are implemented:
 - o application of temperature detection and isolation procedures, with reference to access to the University (ref. § 4.2 of the Guidelines) and the performance of activities in presence (ref. § 4.8 of the Guidelines);
 - o students must contact the COVID-19 reference numbers given at the end of this document (as well as in the University's notices about the safety behaviours to be adopted) or contact the security staff, the teaching support staff or the staff responsible for providing academic and administrative services and follow the instructions given (in relation to the provisions in § 4.8 of the Guidelines);
 - students should contact their GP as soon as possible.
- The GP carries out the clinical evaluations and assesses the need to prescribe the diagnostic test for COVID-19 (so-called swab) and communicates it to the Department of Prevention of the Territorial Health Authority (DdP).
- Students must scrupulously comply with the regulations and instructions provided by the GP.

3.2 COVID-19 positive students and their close contacts

- Students who tested positive for COVID-19, remain in isolation and follow the instructions given by the DdP and their GP.
- The DdP communicates the COVID-19 positivity to the University. The structures receiving such communication shall promptly forward it to the DS and MC.
- Students identified by the DdP as 12 close contacts follow the instructions of the same Department.
- For the return to the community of students who tested positive for COVID-19 or in any case have been subject to the prescriptions of the competent health authorities (e.g. because they have been identified as close contacts), therefore also with reference to attendance at the University, it is necessary to wait for the clinical recovery attested according to the procedures of the DdP and in any case the conclusion of the effectiveness of the above mentioned prescriptions (e.g. end of isolation or the negative outcome of the COVID-19 swab)¹³.

3.3 Students who have had contacts with subjects with prescriptions related to COVID-19

• Students who are aware that they have had contacts with a subject who is positive for COVID-19 or in any case symptomatic and subject to prescriptions by the competent Health Authorities (e.g. fiduciary isolation,

¹¹ If the aforementioned GP is not present, the subject must contact the DdP or the Special Unit of Continuity of Care (USCA). This consideration extends to further and similar circumstances provided for in this chapter.

¹² See the chapter "Definitions".

¹³ The return to and/or attendance at the University referring to close contacts belonging to other categories of subjects in the university community is regulated in the relevant paragraphs of this document and takes place according to the provisions of the competent Health Authorities.



swab prescription, etc.) and that this situation can be considered a potential situation of concrete risk of contagion (also with respect to third parties, e.g. with reference to cohabitation), must responsibly and promptly inform their GP of these circumstances.

- It is the responsibility of the competent health authorities to identify the close contacts of positive cases of COVID-19 and to make the evaluations and provide the prescriptions referring to the above mentioned circumstances. In the event that the DdP contacts the University, it cooperates in carrying out the investigation procedures and in applying the consequent measures (as far as it is concerned).
- Any other subjects who have had contacts with the students concerned by the requirements referred to in the previous points are interested only in the case of specific indications by the DdP.

4 ADDITIONAL INVOLVED SUBJECTS

With reference to other subjects in the university community, namely suppliers and visitors, the measures provided for in § 4.1, 4.2, 4.8 and 4.11 of the Guidelines are referred to. These subjects operate responsibly in compliance with regulatory and precautionary indications, as well as with the prescriptions established by the competent Authorities.

The University provides support to the DdP, if necessary, within the framework of the investigations, the epidemiological investigation and the Subsequent procedures adopted by the same Department.

With reference to suppliers¹⁴ and third parties who carry out activities interrelated with those of the University (e.g. with reference to canteens and residences), appropriate coordination and information flows are maintained, in order to collaborate synergistically for the implementation of the necessary measures, in connection with the DdP.

5 MONITORING OF POSSIBLE OUTBREAKS

The MC, in agreement with the Coordinating Occupational Health Doctor, monitors the positive cases referred to the campus (as well as close contacts) and the individual cases (no. of ascertained cases, seriousness of cases, etc.) and, if necessary, carries out any in-depth analysis involving other competent structures and subjects as well, also for the definition and implementation of specific and possible precautionary measures.

ACRONYMS

DS: Campus Director of the UCSC

DdP: Department of Prevention (belonging to the Territorial Health Authority)

MC: Occupational Health Doctor for UCSC

GP: General Practitioner (GP or family doctor)

RSPP: Prevention and Protection Service Manager

UCSC: Università Cattolica del Sacro Cuore

USCA: Special Unit of Continuity of Care (belonging to the Territorial Health Authority)

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 $^{^{14}}$ See footnote 2.



DEFINITIONS

Definition of "first level contact" (or close contact) according to the indications reported on the institutional website of the Ministry of Health at the date of publication of this document:

The "close contact" (high risk exposure) of a probable or confirmed case is defined as:

- a person living in the same house as a COVID-19 case;
- a person who has had direct physical contact with a COVID-19 case (e.g. handshake);
- a person who has had unprotected direct contact with the secretions of a COVID19 case (e.g. touching used paper handkerchiefs with bare hands);
- a person who has had direct contact (face to face) with a COVID-19 case, at a distance of less than 2 metres and at least 15 minutes;
- a person who was in a closed environment (e.g. classroom, meeting room, hospital waiting room) with a COVID-19 case in the absence of suitable PPE;
- a health care professional or other person providing direct assistance to a COVID-19 case or laboratory
 personnel handling samples of a COVID-19 case without the use of recommended PPE or through the use
 of unsuitable PPE;
- a person who has travelled seated on a train, plane or any other means of transport within two seats in any direction with respect to a COVID-19 case; close contacts are also made with the travelling companions and staff in the section of the plane/train where the index case was seated.

Health professionals, based on individual risk assessments, may believe that some people, regardless of the duration and setting in which the contact took place, have had a high risk exposure.

CONTACTS FOR COMMUNICATIONS

The references <u>for personnel</u> to be used for the communications referred to in this procedure, i.e. with particular reference to Head Office Management (DS), the Human Resources Department, the Occupational Health Doctor(MC) and the Prevention and Protection Service Manager (RSPP) are available through the relevant institutional communication channels (intranet, mailing list, etc.).

The reference numbers for students and other involved subjects (referred to in chapter 4), to be used for the communications referred to in this procedure, are:

- Milan 02/7234.2000;
- Rome 06/3015.8770 (or 8771);
- Brescia 030/2406.499;
- Piacenza-Cremona 0523/599.111.