



Università
Ca' Foscari
Venezia

COVID-19 RISK MANAGEMENT PROTOCOL AND PLAN TO MITIGATE TRANSMISSION IN THE WORKPLACE

Version of October 2020

Summary

Purpose and scope	3
Classification of risks for workers	3
Measures to prevent transmission	4
Space Management	4
Information and Training	5
Organisation of working time	6
Hygiene precautions	7
Cleaning and sanitizing shared spaces	7
Personal protection	8
Procedures for external companies and contractors	9
Health monitoring	9
Specific Measures	10
Annex I - Information on Covid-19	11
Annex II - Telephone activation procedure	13
Annex III - Cleaning and sanitizing operations	14
Annex V - Hand hygiene	17
Annex VI - Instructions on how to wash your hands	18
Annex VII - Types of respiratory protection.	20
Annex VIII - Gloves	23
Annex VIII – Managing a symptomatic person at the university.....	26

PURPOSE AND SCOPE

Ca' Foscari shall adopt this Protocol, in line with national regulations, within its workplaces, applying it to protect the health of both University workers and those who frequent the University premises for various reasons:

- managers, technical-administrative staff (PTA) and language assistants (CEL);
- teaching staff;
- students (fellows, PhD students, grant holders, interns, training assistants);
- external staff;
- visitors
- civil service volunteers - etc.

The Protocol shall apply in any case to all workers as defined by Leg. Decree 81/2008.

As regards teaching, reference is made to the guidelines issued by the University on the subject and constituting an integral part of this protocol.

Although at the time of issuing this document, traditional classroom teaching is suspended, it is possible that students may be found at the university for other activities. In these cases, the provisions of this Protocol shall also apply.

The Protocol shall be updated in the event of new regulatory or University provisions.

The following information, safety measures and provisions in this document shall also be delivered to, and must be implemented by, suppliers, contractor, sub-contractors and self-employed workers as additional to the contents of the Single Interference Risk Assessment Documents (DUVRI) prepared by the different departments of the University.

However, we must consider that, at the date of preparation of this document, the continuous succession of regulatory provisions, indications by the Health Authority and new information may lead to continuous and sudden changes in operating guidelines in relation to what is described and to changes/modifications and/or updates to the measures adopted.

For the reasons stated above, this document must be adaptable to events, easy to read and understand and immediately applicable (within the limits imposed by the specific national state of alert, which generates problems of supply, logistics and organisation in general).

Therefore, in the event of changes in scenario involving more stringent regulations, this document shall be updated.

CLASSIFICATION OF RISKS FOR WORKERS

COVID-19 is a generic biological risk, for which equal measures must be adopted for the whole population. Therefore, this protocol includes measures that follow the logic of precaution and follow and implement the legal requirements and the indications by the Health Authority.

The risk of transmission depends on the relative work environment, the type of activity and the need for or possibility of contact with people who are potentially infected with COVID-19, according to the criteria of exposure, proximity and aggregation.

- Exposure: the probability of coming into contact with sources of infection during specific work activities;
- Proximity: the intrinsic characteristics of a job that do not allow sufficient social distancing for part of the working time or for almost all the time;
- Aggregation: the type of work that foresees contact with other persons beyond University workers.

Based on these considerations, risk levels can be classified as follows: **a) Low exposure risk:** jobs that do not require contact with people known to be (or suspected of being) infected with

SARS-CoV-2, nor frequent close contact (within 1 m) with the public and with other colleagues; **b)**

Medium-low exposure risk: jobs involving frequent and/or close contact (within 1 m) with potentially infected persons. Jobs that involve frequent contact with the public or with colleagues;

c) Medium-high exposure risk:

jobs in health care and in any case involving close contact with infected persons; **d) High exposure risk:** jobs involving exposure to high concentrations of the virus (laboratory work, collection and handling of infected samples, health care jobs that involve the formation of aerosols)

In this phase, following the measures adopted, occupational activities at the University involve a low risk of transmission.

MEASURES TO PREVENT TRANSMISSION

The actions to mitigate the risk further are divided into prevention measures - including a series of principles that regulate organisational, behavioural, logistical, system, hygiene and health measures - and protection measures.

One point of particular importance concerns the principle of responsibility of each person in terms of correct behaviour and the channelling of information flows through appropriate actions and paths that shall be adopted by the University.

Preventive measures are the priority measures to be taken as they limit the possibility of close interpersonal contact, thus lowering the probability of spreading the virus.

Therefore, where it is possible, and the impact on work organisation is minimal or irrelevant, the preferred working methods shall be teleworking and smart working. Evaluation of jobs that can continue to be performed remotely is entrusted to the Department or Centre Managers/Secretaries.

Monitoring compliance with the safety measures defined in this Protocol shall remain the responsibility of the Employer, who shall identify for this purpose the persons in charge from among the Managers or their delegates and among the Teaching and Research Managers, providing them with the necessary instructions.

The University has also established a Committee for the application and verification of the rules of the Protocol, consisting of: Risk Prevention and Protection Manager (RSPP), Manager of Human Resources, Director of Real Estate Development (ASIA), university physician, Workers’ Health and Safety Representative (RLS) and two representatives appointed by HR.

For jobs that cannot be carried out remotely or for situations, even temporary, that require workers to be on site, proceed as follows.

SPACE MANAGEMENT	
RESTRICTION OF ACCESS	<ul style="list-style-type: none"> ✓ Stay at home if you have a temperature (over 37.5 °C) or other flu symptoms (cough and/or sore throat and/or cold) and call your GP and the health authority for instructions. In case of very high temperature, coughing and breathing difficulties, call 118 in the Veneto Region; in case of doubts or suspicions, contact the Regional reference number 800 462340; for general information, call 1500. ✓ All access to University premises is forbidden for persons under quarantine measures. ✓ Access by workers who have already tested positive for COVID-19 is strictly subject to prior notification of a medical certificate confirming two negative swabs taken 24 hours apart, issued by the relevant local prevention department. The notification must be sent to the competent office (Attendance Sector for the PTA; UPDOC Career Sector for teaching and research staff). Before returning to work, workers who have had COVID-19 and had to be hospitalized,

	<p>must also undergo a medical examination by the university physician, in addition to presenting a certificate of negative test result as described above, pursuant to Legislative Decree 81/08 and subsequent amendments, Art. 41, para. 2, lett. e-ter., in order to verify fitness for the job - including to assess specific risk profiles - and in any case regardless of the duration of the absence due to illness.</p> <ul style="list-style-type: none"> ✓ Prohibition of entry and occupation of all University facilities (with timely declaration to the competent Personnel Office as specified above) where, even after entry, conditions of risk exist (flu symptoms, high temperature, contact with persons infected with the virus in the preceding 14 days, etc.) and in all cases where the Authority regulations require the GP and the Health Authority to be informed and to remain at home. ✓ Notify the personnel office (teacher and technical/administrative staff depending on their category; department managers for grant fellows, PhD students, grant holders, etc.) and immediate superior immediately in the case of any flu symptoms that occur during work, taking care to stay at a safe distance from other people, to wear the surgical mask and to cooperate including for calling your GP. Remain in isolation in the areas indicated, do not go to other offices, do not go to Accident and Emergency but wait for instructions from your GP, the health authority and the persons assisting you. ✓ Follow all of the regulations of the Authorities and your Employer when entering the University (in particular, respecting the rules of social distancing, hand washing and correct hygiene behaviour);
SPACE CROWDING STANDARDS	<ul style="list-style-type: none"> ✓ In office spaces, a distance of at least 1 metre must be guaranteed between staff. This may mean that spaces need to be reorganised, compatibly with the nature of the work being performed. Laboratory spaces must be organised in such a way as to ensure a separation of at least 1 metre is maintained between users; ✓ Laboratory spaces must be organised in such a way as to ensure a separation of at least 1 metre is maintained between users. This may mean that spaces need to be reorganised, compatibly with the nature of the work being performed. work.

INFORMATION AND TRAINING	
INFORMATION FOR PERSONNEL	<ul style="list-style-type: none"> ✓ Staff and all interested parties shall be informed on the behavioural, organisational and prescriptive aspects of the anti-transmission measures adopted according to the methods deemed most effective depending on the case and the evolution of the emergency scenario. ✓ The various actions to be taken may include notification via email, publications on the University website, (https://www.unive.it/pag/40177/), the creation of specific information material to be used online, the preparation of notices, booklets, leaflets and “COVID-19 Emergency” signs displayed in building entrances, in the most visible areas of the university, on the bulletin boards or on the TV monitors found in the buildings. Iding/campus and monitored with a thermal scanner..

ACCESS BY EXTERNAL STAFF	<ul style="list-style-type: none">✓ The various persons classified as external staff (suppliers, visitors, users, students, etc.) shall be informed of the anti-transmission measures adopted using appropriate methods.✓ Access to the university is restricted to particular entrances for each building/campus and monitored with a thermal scanner.✓ The social distance of at least 1 metre between persons must be respected when entering and exiting the buildings and any form of gathering must be avoided.
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	<ul style="list-style-type: none"> ✓ Every facility must take steps to ensure that the public reception services (where essential to activities) ensure minimum possible movement of the public inside the building. ✓ This document must be integrated as an annex to the DUVRI currently in force and to be issued in the future.
TRAINING COURSES	<ul style="list-style-type: none"> ✓ Failure to complete the updating of professional and/or qualifying training on occupational health and safety, for all company roles, within the deadline, due to the current emergency and therefore due to force majeure, shall not exclude you from continuing to perform the specific role (by way of example only: emergency officers and supervisors can continue to supervise and offer assistance in case of need)

ORGANISATION OF WORKING TIME	
ORGANISATION OF ACTIVITIES	<ul style="list-style-type: none"> ✓ Where consistent with the indications dictated by the law and by the University bodies, University workers are allowed to return to work. Workers are understood to include all persons foreseen by the University Safety Management System, so teaching staff, managers, technical and administrative staff and CEL, research fellows, PhD students and grant holders in general. ✓ The presence of staff in offices/laboratories/workspaces must be modulated, to ensure compliance with the safe distance (greater than 1 m) including by revising the layout of the rooms or by moving workstations temporarily to different spaces (meeting rooms). ✓ Where it is not possible to guarantee fulfilment of this requirement, the use of agile working methods (even in rotation) shall be encouraged. Work shall be organised by the person in charge or laboratory manager in agreement with the manager, Department Secretary - Director of reference. ✓ If the job requires working at an interpersonal distance < 1 meter, in addition to the use of masks, frequent hand sanitisation or the use of gloves shall be mandatory. Working at close distances must in any case be kept to a minimum. ✓ In order to guarantee a suitable home-work route in optimum safety conditions, and staggered entry of people, greater flexibility of arrival time shall be permitted for the technical-administrative staff who are required to work in University premises, to be compatible with the activities to be delivered, which shall be communicated by HR.
FRONT OFFICE	<ul style="list-style-type: none"> ✓ Front office work must be as limited as possible and organised by appointment. ✓ Where it impossible to perform the service remotely, the counters must be organised in such a way as to guarantee a distance of at least 1 metre between operator and user. Counters shall be fitted with plexiglass separator screens, where compatible with the times and means of supply.
MEETINGS	<ul style="list-style-type: none"> ✓ meetings shall be held remotely, unless there are justified reasons for holding them in person

HYGIENE PRECAUTIONS	
DISINFECTING HANDS BEFORE ENTRY	<ul style="list-style-type: none"> ✓ In addition to the information on the obligation for people in the workplace to adopt all hygiene precautions, in particular for the hands, recommending frequent washing with water and soap or use of an alcohol-based hand sanitiser, the University shall make available in appropriate locations suitable means of hand cleansing; ✓ Wash your hands often and thoroughly with soap and water or using an alcohol-based hand sanitiser for at least 60 seconds; ✓ Disinfect frequently used objects (telephone, keyboards, mouse, mobile phone, earphones, microphones) and the surfaces of your work station, with a cloth moistened with chlorine or ethyl alcohol-based solutions in appropriate concentrations;
CONDUCT	<ul style="list-style-type: none"> ✓ Avoid handshakes, kisses and hugs. ✓ Do not touch your mouth, nose and eyes with your hands. ✓ Cough and sneeze into a disposable tissue or into the crease of your elbow ✓ Use of the elevator is not recommended. If you really must use it, do so only 1 person at a time.

CLEANING AND SANITIZING SHARED SPACES	
ROOM SANITIZATION	<ul style="list-style-type: none"> ✓ The university guarantees daily cleaning and regular sanitization of rooms, spaces, work stations and common recreational areas. ✓ In buildings in which suspected cases of COVID-19 have been reported, upon reopening, in addition to normal cleaning operations, extraordinary sanitization of spaces, work stations and common areas is foreseen, as per the Memorandum of 22 February 2020. ✓ Cleaning and sanitization, in accordance with the needs expressed by the structures and policies in progress, shall be performed using the tools foreseen in the contracts, guaranteeing a constant level of cleaning and sanitization suitable for the evolution of the epidemic situation and related regulatory provisions in order to guarantee fulfilment of the most necessary safety requirements. ✓ Daily cleaning of the rooms/areas must also include the most frequently touched surfaces (e.g. doors, handles, windows, tables, light switches, toilets, taps, sinks, desks, chairs, keys, keyboards, remote controls, printers, etc.). Disinfection operations shall use 70-75% alcohol solutions and solutions of substances containing 0.1 - 1% active chlorine, as appropriate. Rooms must be aired both during and after the use of cleaning products by opening the windows ✓ Based on the requests of the managers, in the offices and laboratories used by multiple persons in different shifts, a disinfectant can be supplied directly to the staff, who shall sanitize the spaces used or specific equipment directly at the end of the shift. ✓ It will be the task of those responsible for managing the instruments to define the correct sanitization procedures for the equipment in order to guarantee the safety of the staff who perform the procedures and preserve the correct functioning of the equipment. It will also be their task to assess the adequacy of the products.

ROOM VENTILATION	<ul style="list-style-type: none">✓ As regards the management of the heating and cooling systems, reference will be made to the provisions of the note from the Directorate “Information on aeraulic systems”. This note can be found here.✓ Professional cleaners who perform the daily cleaning of rooms and/or spaces (dusting or sweeping with damp or dust-catching cloth, washing, disinfection, etc.) must follow correctly the agreed procedures, protocols and methods and use personal protective equipment (e.g. referring to the provisions in the operating document prepared for each area).
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PERSONAL PROTECTION

<p>PROTECTION EQUIPMENT AND SOCIAL DISTANCING</p>	<ul style="list-style-type: none"> ✓ The use of valve face masks is forbidden on the university campus. In case of need, surgical masks are available at the building receptions. ✓ University workers have been given detailed information on the use of masks and have been instructed to wear them, for personal use only, when moving within shared spaces. ✓ Should work activity require a social distance of less than one metre and there are no other solutions in terms of organisation, you can use collective protective equipment, such as physical barriers, or use other personal protective equipment (gloves, safety glasses, bodysuits, caps, gowns, face shields, etc.) compliant with the regulations of scientific and health authorities. ✓ The University shall provide workers with surgical masks and disposable gloves. ✓ Face masks must be worn both indoors and outdoors in all areas of the university. ✓ The obligation referred to in the point above also applies to all staff, visitors, guests, students, suppliers and third-party workers who, for substantiated needs that cannot be fulfilled otherwise, must access the spaces of Ca' Foscari. ✓ In compliance with the current indications of the Health Authority, which consider surgical masks adequate and sufficient, for non-medical environments, to limit the “droplet effect”, as moreover regulated by Leg. Decree no 9 (Art. 34) in combination with Leg. Decree no 18 (Art. 16, para. 1), the University has provided additional information for workers, creating a specific document that explains how to use the aforementioned protection equipment and providing an eLearning training course. ✓ Access/use of shared spaces (entrances, exits, refreshment areas) is permitted for workers wearing protection equipment, namely gloves (if touching shared surfaces) and a mask, and must be restricted to the minimum time necessary and maintaining the minimum safe social distance of at least 1 metre. ✓ This COVID-19 protection equipment can be replaced by higher level PPE for specific activities. ✓ In University premises, an interpersonal distance of at least 1 metre must always be guaranteed and observed, surgical masks must always be worn when there is more than one person in the room and all forms of assembly must be avoided. ✓ Used gloves and masks must not be discarded but must be placed in the containers provided.
<p>ACCESS TO THE UNIVERSITY</p>	<ul style="list-style-type: none"> ✓ The personal protection prescribed by law - to date, surgical masks or equivalent - must be worn to enter enclosed spaces at the university.

PROCEDURES FOR EXTERNAL COMPANIES AND CONTRACTORS

EXTERNAL COMPANIES AND CONTRACTORS

- ✓ The procedures included in this document shall be extended to contractors/sub-contractors and to any self-employed workers.
- ✓ Movement within the University must be limited to the minimum necessary.
- ✓ In the case of workers employed by third-party companies operating within the University (e.g. maintenance technicians, suppliers, cleaners, etc.) who have tested positive for COVID-19, the contractor must immediately inform the client and both parties must cooperate with the health authority by providing useful information for identifying any close contacts.
- ✓ The University shall provide the contracting company with all information regarding this Protocol and shall ensure that the workers of this company or third-party companies operating in any capacity within the scope of the company comply fully with its provisions.
- ✓ For access by external suppliers, the tender manager and firms shall establish entry, transit and exit procedures with pre-defined paths and times, in order to limit the opportunities for contact with personnel in the work areas involved.
- ✓ In relation to access by external maintenance firms whose activities involve:
 - constant and daily presence of external technicians on the university premises;
 - need for presence throughout the buildings;
 - need for constant checks on the basis of contingent needs in order to ensure the safety requirements of the buildings as quickly as possible;
 - unpredictability of the activities covered by the services;
 - lack of advance knowledge of the time required to repair faults.since it is impossible to predetermine the times and methods of execution of the activities, a simplified declaration form will be signed to reduce the disturbance of university staff.
- ✓ Drivers of transport vehicles from outside the University who are without PPE shall be told to remain in their vehicles. For necessary loading and unloading activities, the carrier must use a mask and gloves.
- ✓ In the loading/unloading areas (in the specific filter area identified near the porter's lodges) it must be ensured that the necessary preparatory and conclusive operations for loading/unloading goods and collecting/delivering documents are undertaken in ways that do not require direct contact between operators and drivers. Where this proves impossible, disposable gloves and a mask must also be used for the exchange of documents (where electronic exchange is not possible).
- ✓ Staff must not come into contact with the PDAs/smartphones of external couriers/carriers in case of deliveries to the University.
- ✓ The staff who work in the university spaces must have an identification card and must wear a surgical mask, even outdoors.
- ✓ Access by technicians and external staff must be reduced as far as possible; should visitors be required to enter the university, they must comply with all the regulations in force.

HEALTH MONITORING

MANAGEMENT OF HEALTH MONITORING

- ✓ Health monitoring has not been interrupted and is undertaken in compliance with the hygiene measures indicated by the Ministry of Health.
- ✓ During this period, priority was given to preventive check-ups, check-ups on request and check-ups for return from sick leave; periodic check-ups for employees working from home were postponed.
- ✓ In integrating and proposing all the regulatory measures related to COVID-19, the university physician shall collaborate with the employer and the RLS and territorial RLS.
- ✓ The university physician shall report to the University situations of particular vulnerability and current or previous illnesses of employees and the University shall arrange for their protection in respect of privacy.
- ✓ The university physician shall apply that indicated by the Health Authorities.
- ✓ The departments of the National Health Service are responsible for the diagnostic picture and management of symptomatic persons;
- ✓ Together with the university physician, the University is evaluating the possibility of introducing diagnostic screening tests for asymptomatic workers, useful for containing the spread of COVID-19.
- ✓ When activities are resumed, the university physician shall be available for identifying persons in particular situations of vulnerability and for the return to work of persons who have had COVID-19.
- ✓ Progressive return to work after COVID-19 infection is possible according to the following specifications:
 - Positive asymptomatic cases** - Asymptomatic people who have tested positive for SARS-CoV-2 can return to the University after an isolation period of at least 10 days from the onset of positivity, at the end of which they must take a molecular test with a negative result (10 days + test).
 - Positive symptomatic cases** - Symptomatic people who have tested positive for SARS-CoV-2 can return to the community after a period of isolation of at least 10 days from the onset of symptoms (not considering anosmia and ageusia/dysgeusia which may persist over time) accompanied by a molecular test with negative result performed after at least 3 days without symptoms (10 days, of which at least 3 days without symptoms + test).
 - Long-term positive cases** - People who, although no longer presenting symptoms, continue to test positive for the molecular test for SARS-CoV-2, in the absence of symptoms (except for ageusia/dysgeusia and anosmia which can last for some time after recovery) for at least a week, may interrupt the isolation 21 days after the onset of symptoms. This criterion may be modulated by the health authorities in agreement with clinical experts and microbiologists/virologists, taking into account the immune status of the persons concerned (in immunosuppressed patients, the period of contagiousness can be prolonged).
 - Asymptomatic close contacts** - Close contacts of people infected with SARS-CoV-2, as confirmed and identified by the health authorities, must observe:
 - a 14-day quarantine period from final contact with the infected person;
 - or a 10-day quarantine period from final contact with a negative antigen or molecular test performed on the 10th day
- ✓ For workers who have had COVID-19 for whom hospitalization was necessary must also undergo a medical examination by the university physician, in addition to presenting a certificate of negative test result as described above, pursuant to Legislative Decree 81/08 and subsequent amendments, Art. 41, para. 2, let. E-ter., in order to verify for the job – including to assess specific risk profiles – and in any case regardless of the duration of the absence due to illness.

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SPECIFIC MEASURES	
OFFICES, STUDIES AND STUDY ROOMS	<ul style="list-style-type: none"> ✓ An interpersonal distance of at least 1 metre must always be guaranteed and observed, surgical masks must always be worn when there is more than one person in the room and all forms of assembly must be avoided (crowding index of 8 m²/person). ✓ Wash hands with soap and water or use hand sanitizer before and after the use of shared equipment (printers, shared workstations, shared paper or stationery material). ✓ Access to other offices must be limited only to that which is strictly necessary; preference must be given to telephone and internet communication. ✓ Public reception services and front office work (where necessary) should be performed as far as possible via online booking, organising and restricting appointments to rooms that allow easy access from outside and introducing, where possible, separation barriers.
LABORATORIES, WORKSHOPS , GLASS-BLOWING WORKSHOP	<ul style="list-style-type: none"> ✓ An interpersonal distance of at least 1 metre must always be guaranteed and observed, surgical masks must always be worn and all forms of assembly must be avoided (crowding index of 12 m²/person). ✓ The rooms must be aired regularly. ✓ At the end of the working day, the surfaces of the work benches and desks must be thoroughly cleaned with 0.1% sodium hypochlorite solution. ✓ Surfaces subject to repeated and shared contact, such as handles (doors, windows, refrigerators, incubators), external glass of hoods, eyepieces of microscopes, instrument keypads, computer keyboards and mouse, taps, knobs and shared equipment must be disinfected with 0.1% sodium hypochlorite solution. ✓ This COVID-19 protection equipment can be replaced by higher level PPE for specific activities.
LIBRARIES	<ul style="list-style-type: none"> ✓ The university libraries are being reopened to allow research by teachers, researchers, scholarship holders, PhD students, postgraduates, fellows, contract holders and undergraduates. ✓ Access shall be strictly restricted to users with bookings, in order to prevent gatherings. ✓ Loan requests and returns can be made via online reservation to avoid having to use the library. ✓ The University shall provide the libraries with additional equipment for specific library activities, in particular: masks, disposable gloves and protective barriers for counters.

ANNEX I - INFORMATION ON COVID-19

Coronaviruses (CoV) are a large family of respiratory viruses that can cause mild to moderate illness, from the common cold to respiratory syndromes such as MERS (Middle East Respiratory Syndrome) and SARS (Severe Acute Respiratory Syndrome). They are so called because of the crown-shaped tips that are found on their surface.

Coronaviruses are common in many animal species (such as camels and bats) but in some cases, although rarely, they can evolve and infect humans and then spread to the population. A new coronavirus is a new strain of coronavirus that has never previously been identified in humans. In particular, the one provisionally named at the beginning of the 2019-nCoV epidemic, had never been identified before being reported in Wuhan, China in December 2019.

In the first half of February, the International Committee on Taxonomy of Viruses (ICTV), which is responsible for the designation and naming of viruses (i.e. species, genus, family, etc.), assigned the new coronavirus its definitive name: "Severe acute respiratory syndrome coronavirus 2" (SARS-CoV-2). The new name was decided by a group of experts specifically appointed to study the new coronavirus strain. According to this pool of scientists, the new coronavirus is the brother of the virus that caused Sars (SARS-CoVs), hence the name SARS-CoV-2.

The new virus name (SARS-Cov-2) replaces the previous name (2019-nCoV).

Again, in the first half of February (precisely February 11), WHO announced that the respiratory disease caused by the new coronavirus had been named COVID-19. The new abbreviation is a combination of the terms CO-rona VI-rus D-isease and the year of identification, 2019.

Symptoms

The most common symptoms of a coronavirus infection in humans include a high temperature, coughing and breathing difficulties. In severe cases, the infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and even death. Specifically: common human coronaviruses usually cause mild to moderate upper respiratory tract diseases, such as the common cold, that last for a short period of time. Symptoms can include:

- a runny nose
- headache
- cough
- sore throat
- high temperature
- generally feeling unwell.

Like other respiratory diseases, new coronavirus infection can cause mild symptoms such as a cold, sore throat, cough and high temperature, or more severe symptoms such as pneumonia and breathing difficulties. The people most susceptible to severe forms are the elderly and those with pre-existing conditions, such as diabetes, heart disease, cancer, etc.

Since the symptoms caused by the new coronavirus are non-specific and similar to those of the common cold and flu virus, if suspected, diagnosis can be confirmed by carrying out laboratory tests.

Transmission

COVID-19 is a respiratory virus that spreads mainly through contact with the droplets of the breath of infected people, for example through:

- saliva, coughing and sneezing;
- direct personal contact;

- hands, for example by touching the mouth, nose or eyes with contaminated hands (not yet washed). In rare cases, infection can occur through faecal contamination.

Normally, respiratory diseases are not transmitted with food, which in any case must be handled according to good hygiene practices.

According to the data currently available, the most frequent cause of the spread of the virus is through asymptomatic people.

The maximum precautionary limit (incubation) is 14 days.

The ways of transmission to worry about are inhalation and contact with contaminated surfaces and subsequent contact with the mucous membranes of the nose, eyes and throat. However, it is always useful to remember the importance of correct hygiene for surfaces and hands. The virus is also killed by alcohol-based detergents. For example, disinfectants containing 75% alcohol (ethanol) or 0.1% chlorine (sodium hypochlorite - bleach).

Treatment

There is no specific treatment for diseases caused by a new coronavirus and there are currently no vaccines available to protect against the virus. Treatment is based on the patient's symptoms and support therapy can be very effective. Specific therapies are under research.

Prevention

You can reduce the risk of infection, protecting yourself and others, by following a few precautions. Wash your hands often with soap and water or with alcohol solution (after coughing/sneezing, after caring for a sick person, before during and after preparing food, before eating, after going to the bathroom, or more generally when the hands are dirty in any way).

In the care sector (for example in hospitals), follow the advice of the healthcare professionals who provide assistance.

Stay informed on the spread of the epidemic, available on the WHO, ISS (national health institute) and Ministry of Health websites.

- In case of respiratory infection, cover your nose and mouth when coughing and/or sneezing (elbow crease/tissue);
- Throw away tissues after use;
- Wash your hands after coughing/sneezing.
- Avoid situations of gathering, both at work (coffee machine or other collective breaks) and outside of work, at least until the emergency in Italy has abated.
- If you experience symptoms such as those described and you are at work, notify your employer immediately.

ANNEX II - TELEPHONE ACTIVATION PROCEDURE

In ordine a qualsiasi necessità in merito non recarsi al pronto soccorso o presso gli ospedali e neanche dal proprio medico curante ma TELEFONARE



Contattare telefonicamente il medico curante e il pediatra di libera scelta (nel caso di bambini in casa) qualora si percepiscano sintomi. In questo caso sarà il medico a decidere la procedura da adottare



Per soggetti con sintomi influenzali in atto e con difficoltà respiratorie evidenti, chiamare il 112 nelle Regioni ove è attivo o il 118 nella Regione del Veneto e nelle altre Regioni nelle quali il numero unico non è attivo



1500
Ministero della Salute

IN CASO DI DUBBI O SOSPETTI
CHIAMA 800462340
Regione Veneto

ANNEX III - CLEANING AND SANITIZING OPERATIONS

Definitions

Cleaning: set of operations that must be carried out to remove "visible dirt" of any nature (dust, grease, liquids, organic matter...) from any type of environment, surface, machinery, etc. Cleaning is achieved by manual or mechanical removal of dirt including - where necessary - with water and/or detergents (cleansing). Cleaning is a preliminary operation and is completed and is essential for the subsequent sanitization and disinfection phases.

Sanitization: operation to eliminate at the origin any bacteria and contaminants that cannot be removed by common cleaning. Sanitization is carried out - using chemical cleaning products (cleansing) - to bring the microbial load back to acceptable and optimal hygiene standards that depend on the intended use of the environments concerned. Sanitization must in any case be preceded by cleaning.

Disinfection: the application of disinfectants, almost always of a chemical or physical (heat) nature, which reduce, through destruction or inactivation, the microbiological load present on the objects and surfaces to be treated. Disinfection must be preceded by cleaning to prevent dirt residues from compromising its effectiveness. Disinfection can destroy pathogenic microorganisms.

Operating procedures

Daily cleaning and periodic and extraordinary sanitization of the rooms, spaces, work stations and common and leisure areas are foreseen, according to appropriate methods.

I The products used and the methods adopted must be such as to guarantee effective disinfection.

The operations to clean and sanitize spaces and surfaces must not create any situations of risk for persons.

The operations to clean and sanitize the workstations and equipment must be performed by the workers who use them, either after use or at the end of the work shift, as appropriate.

II Workers are invited to collaborate, within the limits of their responsibilities, in the daily sanitization of shared spaces, equipment and workstations.

- Refreshment rooms and areas must be cleaned/sanitized regularly (by the professional cleaners) and the vending machine keypads must be cleaned/sanitized (by the vending machine operators) using special detergents according to the materials to be cleaned.
- Professional cleaners who perform the daily cleaning of rooms and/or spaces (dusting and sweeping with damp or dust-catching cloths, washing, disinfection, etc.) must follow correctly the agreed procedures, protocols and methods and use personal protective equipment.
- Daily cleaning of the rooms/areas must include the most frequently touched surfaces (e.g. doors, handles, windows, tables, light switches, toilets, taps, sinks, desks, chairs, keys, keyboards, remote controls, printers, etc.).
- Microfibre cloths moistened with soap and water and/or 75% ethyl alcohol and subsequently with a sodium hypochlorite solution with 0.5% active chlorine will be used for the toilets and with 0.1% active chlorine for all other surfaces, taking into consideration the type of material, the use and the environment or other professional detergents of equivalent action (sanitization: cleansing and disinfection), paying attention to the correct use for each surface to be cleaned.

Note: for cleaning and sanitizing in the event that a person with COVID-19 has been inside the premises, a specific procedure will be implemented as indicated by the Ministry of Health, ref. Circular no 5443 of 22 February 2020 (see specific part of this report).

Ensure adequate natural ventilation of work environments.

Disinfecting surfaces

Surface disinfection is a basic action to prevent the transmission of a biological agent (in this case, it is the hands that come into contact with the surfaces and are the vehicle that could carry infection to the mucous membranes, such as in eyes, nose and mouth).

Please note that disinfection is effective only on a clean surface, so descaling, cleaning and rinsing activity is essential before the actual disinfection.

According to the indications of the Ministry of Health and the ISS, disinfection can be performed using sodium hypochlorite-based solutions with concentrations 0.1-1% depending on the case (bleach suitably diluted in water). For surfaces that can be damaged by sodium hypochlorite, use 70% ethanol after cleaning with a neutral detergent.

Disinfection is effective when dosages, quantities and contact time are respected (a disinfectant requires a minimum of a few minutes' action time, insofar as there is no "immediate" effect). For disinfectants, instructions can be found in the technical data sheet of the product used.

Make sure the rooms and space are well aired both during and after the use of cleaning and sanitizing products.

Chemical safety rules

Every activity must be performed according to the instructions on the safety data sheet and you must never mix different products unless expressly foreseen by a procedure or a technical data sheet, as such products are often incompatible and mixing them can give rise to dangerous chemical reactions.

Always avoid mixing bleach and acid descalers, ethyl alcohol and bleach, ethyl alcohol and acid descalers and other disallowed mixtures (see safety data sheet). Mixing these chemically incompatible products leads to the development (sometimes even violently) of particularly dangerous and toxic agents in gaseous form, which constitute a particularly high risk of accident.

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ANNEX IV - HAND HYGIENE

The hands can be a vehicle of contamination, as they can touch surfaces on which droplets are present and then infect the mucous membranes in the mouth, nose and eyes. Therefore, for good hygiene practice, you must wash your hands often and thoroughly with soap and water or detergent throughout the day and after touching various surfaces.

Beyond the aspects determined by the Covid-19 emergency, frequent hand washing is in any case a procedure as simple as it is important in the prevention of infections.

Particular care must be taken when entering the workplace, after using public transport and having been in public places, perhaps crowded, even if gloves are used, after blowing your nose or sneezing even with due caution, after handling waste and other similar operations.

In addition, you must always wash your hands before accessing your work station, before and after breaks, before and after using the toilet and generally always before touching your mouth, for example to eat, unwrap sweets/chewing gum, etc.

It is important that you wash your hands thoroughly before putting in or removing contact lenses and touching or dressing wounds.

You should wash your hands preferably with hot water and soap or detergent for at least 40/60 seconds, rubbing palm against palm and palm against back of hand and interlacing the fingers and rubbing the thumb of one hand inside the closed palm of the other and vice versa.

All these instructions are given step-by-step in the information published by WHO and the Ministry of Health. When you have finished washing, rinse your hands thoroughly with water, dry with a disposable towel and use the towel to turn off the tap. Alternatively, you can also use a hand sanitizer, especially when it is not possible to wash with soap and water.

Sanitizers generally contain active ingredients of chlorine and alcohol-based products in adequate concentration. These products should be applied to dry hands according to the instructions and you must wait for the gel or solution to dry for at least 60 seconds on the hands. Hand sanitizers do not require rinsing.

The glycerine contained in the products acts as an emollient and ensures better and longer-lasting contact of the skin with the antiseptic active ingredients, thus improving their sanitizing properties.

Remember that these alcohol-based products are flammable and must be stored and used adopting due precautions. They should be kept away from open flames, sparks and heat sources in general and should be stored in a cool, well-ventilated place away from direct sunlight.

Note: *thorough and frequent hand washing, together with the use of sanitizers and gloves, can make the skin dry and fragile by reducing and altering the natural hydrolipidic layer, leading to cracked skin. Therefore, it is recommended to protect the skin's natural barrier by keeping it well hydrated using moisturising cream.*

ANNEX V - INSTRUCTIONS ON HOW TO WASH YOUR HANDS

With alcohol solution:

1. pour enough solution into the palm to cover the entire surface of the hands
2. rub your hands palm against palm
3. rub your left palm over the back of your right hand by interlacing your fingers together and vice versa 4. rub well palm against palm
5. rub the backs of your hands well with your fingers
6. rub your right thumb against your left palm, holding it tight in your left hand, and vice versa
7. rub the fingers of the right hand back and forth against your left palm, holding them in your left hand, and vice versa
8. rub your left wrist by rotating it back and forth in your right hand, with your fingers close together, and vice versa
9. once dry, your hands are clean.

With soap and water:

1. wet your hands well with water
2. apply enough soap to cover the entire surface of the hands
3. rub your hands well palm against palm
4. rub your left palm over the back of your right hand by interlacing your fingers together and vice versa
5. rub the back of your fingers against the opposite palm, keeping your fingers close together
6. rub your hands palm against palm back and forth interlacing the fingers of the right hand with those of the left
7. rub your right thumb against your left palm, holding it tight in your left hand, and vice versa
8. rub the fingers of the right hand back and forth against your left palm, holding them in your left hand, and vice versa
9. rinse your hands thoroughly with water 10. dry your hands carefully with a disposable towel
11. use the disposable towel to turn off the tap.

Come lavarsi le mani con acqua e sapone?

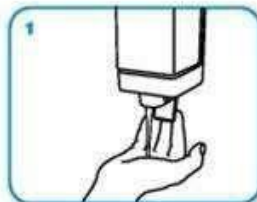
LAVA LE MANI CON ACQUA E SAPONE, SOLTANTO SE VISIBILMENTE SPORCHE! ALTRIMENTI, SCEGLI LA SOLUZIONE ALCOLICA!



Durata dell'intera procedura: **40-60 secondi**



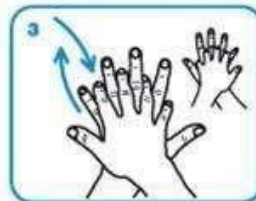
Bagna le mani con l'acqua



applica una quantità di sapone sufficiente per coprire tutta la superficie delle mani



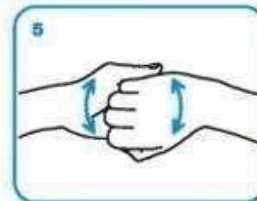
friziona le mani palmo contro palmo



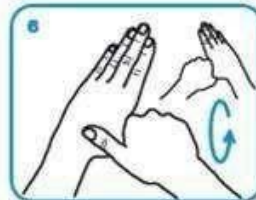
il palmo destro sopra il dorso sinistro intrecciando le dita tra loro e viceversa



palmo contro palmo intrecciando le dita tra loro



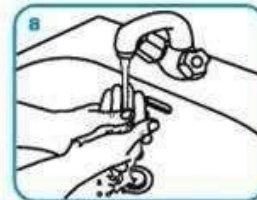
dorso delle dita contro il palmo opposto tenendo le dita strette tra loro



frizione rotazionale del pollice sinistro stretto nel palmo destro e viceversa



frizione rotazionale, in avanti ed indietro con le dita della mano destra strette tra loro nel palmo sinistro e viceversa



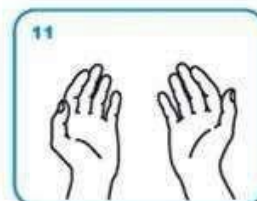
Risciacqua le mani con l'acqua



asciuga accuratamente con una salvietta monouso



usa la salvietta per chiudere il rubinetto



...una volta asciutte, le tue mani sono sicure.

The use of respiratory protection devices together with the adoption of social distancing measures are fundamental points in the measures to prevent transmission.

The devices currently available are surgical masks and face masks with filters. It should be noted that these devices are created with different purposes, have different characteristics and meet specific technical standards according to their category.

Before any further consideration, we must remind you that even when using respiratory protection devices, all transmission prevention measures must still be adopted, above all social distancing.

Proper use is essential to obtaining maximum benefits and to prevent the risk of false security. They must always be combined with other prevention and personal hygiene and respiratory measures and with all precautions required by the competent authorities and your own organisation for the COVID-19 emergency. You must always follow the device instructions of storage, wear, use, removal and disposal. Therefore, it is important that you read and understand all rules and instructions carefully.

If they are not worn correctly, their effectiveness decreases significantly; washing your hands before and after use is a fundamental hygiene measure.

Respiratory protection devices are strictly personal and must not be used by more than one person.

Surgical masks

Surgical masks: these are medical devices made according to EN 14683: 2019. These devices are subject to CE marking, with the exception of exemptions foreseen by current legislation for the emergency period only and which in any case must comply with the specific relevant legal provisions issued.

There are 3 types: I, II and IIR. Types II and IIR offer greater filtration efficiency. In addition, IIR is also splash-resistant. They prevent the transmission of the virus to other persons, as they provide a protective barrier in the diffusion of pathogens that can be transmitted by air, such as aerosols and droplets.

Although designed to protect others, they can also offer a partial barrier for the wearer them due to their resistance to respiratory droplets and filtering power.

This is more significant with type II and II R surgical masks, which offer maximum protection, though not comparable to PPE FFP2-FFP3. They are generally made with an external filtering layer, a central layer impermeable to liquids and permeable to air and an internal layer in contact with the skin.

They are very light and generally comfortable. They are disposable and can be used for 2 - 4 hours, depending on the type of work, the environmental conditions and the physiological effort, as they get damp and lose their effectiveness. Protection among people is achieved only if everyone is wearing one.

Note: *in order to guarantee additional measures to protect workers and the community and to contain the spread of the COVID-19 virus, until the end of the state of emergency, throughout Italy, for workers who cannot objectively maintain an interpersonal distance of one metre, surgical masks without the CE mark and produced in derogation of the current marketing standards shall be considered personal protective equipment (PPE),*

pursuant to Article 74, paragraph 1, of Legislative Decree no 81 of 9 April 2008.

Filtering masks (facepieces) FFP2 - FFP3

These are PPE made according to EN 149:2001+A1:2009. These devices are subject to CE marking, with the exception of exemptions foreseen by current legislation for the emergency period only and which in any case must comply with the specific relevant legal provisions issued.

They are designed and tested to protect the wearer. FFP2 devices block at least 92% of the particles found in the air while FFP3 devices block at least 98% of the particles found in the air. This means that, as well as the

adequate category, they must be worn properly in order to provide effective protection. They generally have a shape similar to a cup or shell and come in two different models: with and without exhalation valve.

The valve, which reduces exhalation resistance, as well as heat and moisture under the mask, does NOT guarantee outflow protection. Therefore, they are not effective in preventing possible transmission of the infection when breathing out. The models without a valve, on the other hand, despite being designed and tested to protect the wearer from external pollutants (aerosols and particles) do provide a filtering barrier even when breathing out, which thus protects other people.

The effectiveness and duration of a filtering mask depends on the possible concentration of the contaminant, the environment (indoors, outdoors, temperature, humidity, ventilation) and the physiological activity (e.g. high-fatigue work, medium intensity work or work requiring little muscular effort, etc.). In any case, an FF cannot be used if wet and dampened. FFs with the abbreviation NR cannot be washed and dried to be reused again and have a duration ranging from 4 to 8 hours, which can also be determined on the basis of respiratory fatigue.

Instructions for wearing surgical masks

There are 4 main actions to wearing a surgical mask

1) Check - 2) Wear - 3) Protect - 4) Observe.

1. First: Check. Wash your hands thoroughly; read the instructions carefully; For proper protection, the face must be clean shaven with no beard or moustache. Check that the mask is intact, new and has no obvious defects (fabric, ear loops, flexible side, etc.).

2. Then: Wear Hold it in the correct position (inside/outside and top/bottom) with the light coloured inside (usually white) towards the face and the flexible edge at the top that will be shaped around the nose. Separate the flaps to create a shell shape without creases. Place the mask on the face, taking care to cover the mouth and nose, fitting it close to the face and tightening the ear loops.

3. Always: Protect, Do not touch the mask with hands or gloves during use. Small adjustments can be made by touching the ear loops with clean hands (washed thoroughly). Use a surgical face mask only for the maximum time allowed. If the mask is removed in the contaminated environment, clogged (identified by respiratory fatigue) or dampened/wet or damaged, it must be replaced.

4. Finally: Observe. Take good care. Remove the surgical mask with clean hands without touching the front part, instead starting from the nape of the neck. Place the mask in a closed container used for this type of waste. Wash your hands again.

Instructions for wearing filtering masks

There are 4 main actions to wearing a filtering mask

1) Check - 2) Wear - 3) Protect - 4) Observe.

1. First: Check. Wash your hands thoroughly; read the instructions carefully; For proper protection, the face must be clean shaven with no beard or moustache. Check that the mask is intact, new and has no obvious defects (fabric, ear loops, flexible side, etc.).

2 Then: Wear. Hold the FF in the correct position (inside/outside and top/bottom) with the nose clip at the top. For filtering masks with adjustable elastic straps, lengthen the elastic to position it correctly. Position the mask under the chin to that it covers the mouth and nose. Place the lower elastic strap at the nape of the neck under the ears and the upper strap around the head and above the ears. Adjust the tension, taking care to tighten the adjustable elastic straps so that the mask fits close to the face, by pulling first the upper one and then the lower one. Adjust the nose clip to ensure a close fit. Check the fit as follows: Place your hands (thoroughly cleaned) on the mask and inhale deeply (with a good fit, the filtering mask contracts inwards slightly). If you feel air leaks between the mask and the face, adjust the mask for a closer fit by tightening the nose clip and pulling the elastic straps

3. Always: Protect. Do not touch the mask with hands or gloves during use. Small adjustments can be made by touching the straps with clean hands (washed thoroughly). Use a filtering face mask only for the maximum time allowed. If the mask is removed in the contaminated environment, clogged (identified by respiratory fatigue) or dampened/wet or damaged, it must be replaced.

4. Finally: Observe. Take good care. Remove the filtering mask with clean hands without touching the front part, instead starting from the nape of the neck. Place the mask in a closed container used for this type of waste. Wash your hands again.

ANNEX VII - GLOVES

Disposable gloves cannot be washed and reused after use; they usually come in different materials: vinyl, nitrile, latex.

Latex gloves can lead to undesirable and sometimes dangerous effects in some particularly sensitive people. Latex allergy can take the form of a skin rash at the contact site, such as allergic rhinitis, or have even more serious effects, worst of all anaphylactic shock. Continuous use could therefore lead to contact sensitization. Therefore, unless specifically required, gloves made of the other materials are preferable.

For the prevention of transmission in non-medical environments and where not required for reasons of sterility, there are no particular technical specifications for using polymeric materials of this type, such as vinyl, PVC and especially nitrile.

The desirable conditions are impermeability, elasticity, mechanical strength, touch sensitivity and comfort and of course the right size. In addition, you should always check the need, and possible specific procedure depending on the case, for using two pairs of gloves, one on top of the other.

It is important to note that incorrect use of gloves could constitute an additional risk. In fact, gloves must be removed according to a specific procedure in the areas at risk and must not be taken outside of these areas, which would risk cross-contamination and increase the possibility of spreading the infection.

Gloves must always be removed correctly at the end of an operation or when leaving an area or a workstation. Therefore, gloves are changed very often.

In some cases, you can use hand sanitizer even on gloves you are wearing, if there are particular operations to be performed.

To remove gloves, remove them without touching the outside with your hands and, once removed, they must be placed in the closed and specific marked waste container.

You must then wash your hands thoroughly. Remember that these gloves are made of combustible polymeric material and must be stored and used taking into account this specific risk. Therefore operations involving an open flame, heat sources or sparks cannot be carried out using this type of gloves.

Instructions for putting on gloves

The steps to follow for putting on gloves correctly

- ensure your hands are clean and dry before putting on gloves
- avoid jewellery and long nails
- remove gloves if they are damaged
- do not immerse your hands in highly chemical products with disposable gloves (use a suitable reusable glove with a long cuff)
- throw away used gloves and wash your hands

Operating instruction for removing gloves



ANNEX VIII – MANAGING A SYMPTOMATIC PERSON AT THE UNIVERSITY

As foreseen in Annex 12 of Prime Ministerial Decree of 11 June 2020:

- a. in the event of person at the university developing a high temperature and symptoms of respiratory infection, such as a cough, they must report it immediately to the Supervisor of the building and the staff office (or equivalent); the person must be isolated according to the provisions of the health authority, as well as all other people in the same areas; the building supervisor shall warn the competent health authority immediately and call the COVID-19 emergency numbers provided by the Regional Authority or by the Ministry of Health
- b. the university works together with the health authorities to identify any persons in “close contact” with a person found at the university who tests positive for COVID-19. This enables the authorities to apply the necessary and appropriate quarantine measures. In the period of investigation, the university may ask persons who have been in close contact to leave the university as a precautionary measure, according to the indications of the health authority
- c. at the time of isolation, the worker shall be provided with a surgical mask if they do not already have on.

Procedure:

1. Ask the worker to call their GP or local health authority and follow the instructions of the competent authority;
2. Ensure they put on a SURGICAL MASK immediately, should they be without;
3. For as long as the person remains on university premises, ensure they stay DISTANCED AND ISOLATED from other persons in the area (workers, visitors);
4. Isolate persons who potentially been in contact with the worker to check possible infection; 5. Notify their GP;
6. CLEAN THE WORK STATION according to regional guidelines;
7. Notify the Health and Safety Department;
8. Employers and their collaborators must COLLABORATE with the competent local health authority (ASL) by making available all information they have for the purpose of identifying persons who may have been in contact with the worker suspected of infection

Useful numbers:

REGIONAL HEALTH AUTHORITY: 800938811

VENETO REGIONAL AUTHORITY: 800462340

NATIONAL EMERGENCY NUMBER: 1500