

Action Plan for Possible COVID-19 Cases on Campus

September 24, 2020

ACTION PLAN FOR POSSIBLE COVID-19 CASES ON CAMPUS

Introduction

This document describes actions to be taken in the event that someone on campus develops COVID-19 symptoms. These measures are aimed at creating a safe environment for the IESE community and at guaranteeing that the activities on our campuses can proceed normally.

Who should read this document

This document should be read by all IESE employees, and in particular those people who are directly involved in COVID-19 response efforts, which, as described below, are: Program Directors, Area Directors and Department Directors.

1. Organization and flow of information

The people responsible for information flow and incident management, depending on the division, are the following:

DIVISION	PERSON RESPONSIBLE
Students and Participants	Program Director
Faculty and Staff	Department or Area Director
Employees of business suppliers	Area Director who contracted the service

The people responsible for handling COVID-19 incidents must report all virus-related matters to **IESE's Global COVID-19 Manager, Luis Jover** (ljover@iese.edu), who will serve as the point person for this information, and to the **COVID-19 medical manager**, Xavier Bertrán (xbertran@iese.edu), IESE's in-house physician.

The Global COVID-19 Manager will then pass on relevant information to:

- Joint Service for the Prevention of Occupational Risks, Joan Escartín, together with healthcare providers (for employees) and the People Area's Eva López.
- Operations Management of the corresponding campus (Pablo Herraiz and Mercè Jorba).
- Eric Weber, the Barcelona campus response leader, and María Coello, the Madrid campus response leader.

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2. Detection of COVID-19 cases

IESE has established measures to take under 3 different scenarios:

- **POSSIBLE OR SUSPECTED CASES**
 - High fever and cough
 - Early development of **three or more** of the following symptoms: fever, cough, general tiredness/fatigue, headache, aches and pains, sore throat, acute rhinitis, difficulty breathing, nausea/vomiting, diarrhea, altered mental state.
- **PROBABLE CASES**
 - Anyone who has met the above criteria, and is also a close contact of a probable or confirmed case.
 - Anyone who has a chest radiograph that indicates COVID-19.
 - Anyone who has lost their sense of smell or taste for no other reason.
- **CONFIRMED CASES**
 - Anyone who has tested positive for COVID-19, regardless of the symptoms they may have.

2.1. Serological test

Should the results of the serological test indicate total antibodies (+) and IgM (+) and IgG (-), IESE health questionnaire will not generate the QR code to access campus. In this case, the person must go to the health center to confirm their COVID-19 status with a PCR test. A preventative period of isolation will likely be recommended.

In the event that the health center does not see it necessary to take the test, Dr. Bertrán (XBertran@iese.edu) must be consulted.

2.2. Symptoms

- **Anyone with COVID-19 symptoms** should not come to campus until confirming that there is no risk to themselves or others. These people should consult their health center to receive information on how to best proceed.
- Anyone living with a person experiencing COVID-19 symptoms **who has had, or is scheduled to have, the PCR test**, should not come to campus until they know the results of the test. In the event that medical professionals do not consider it necessary to carry out the PCR test, these people can access campus, unless healthcare specialists advise against it.
- **Anyone experiencing COVID-19 symptoms** while on campus should contact the person in charge of COVID response. **They will be escorted to a separate room – with adequate ventilation and a trash bin for disposal of masks and disposable tissues – and be given a regulation facemask.**

This person should immediately contact their health provider and follow their instructions. They will leave campus and will not be able to resume face-to-face activity until confirming there is no risk to themselves or others.

3. Close contact tracing

A close contact is defined as someone who has been in contact with a confirmed or probable case and who also meets the following **three criteria** of having been:

- Less than 2 meters of distance
- During more than 15 minutes
- Without a facemask

The COVID-19 manager will be responsible for tracing close contacts from the moment the presence of symptoms is reported. IESE’s doctor will determine who is a close contact.

The period to be considered is **2 days before the onset of symptoms** through the moment in which the case is isolated.



REMEMBER: The close contact of a close contact is **not a close contact**.

Example 1: My child/spouse/partner is a confirmed positive case. I am a close contact (because I have been less than 2 meters from them, for more than 15 minutes, without a facemask).

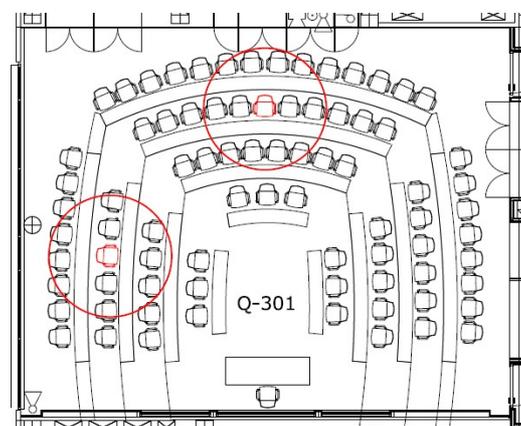
Example 2: My child/spouse/partner has a friend/colleague who is a confirmed positive case. I am not a close contact.

CLASSROOMS

Everyone must wear facemasks in all classrooms, except the professor while teaching class.

If the infected person has been sitting in the front row of the classroom, the professor will *not* be considered a close contact case, so long as the participant was wearing a mask throughout the entire session and the professor did not remain within a close distance of him or her for more than 15 minutes.

Example: My classmate is a confirmed or probable case. I’m not considered a close contact if I’ve maintained required distancing and worn a facemask.



Self monitoring

To facilitate the monitoring of **close contacts**, it’s important that all people who are regularly present at IESE campuses and facilities record their movements around the campus on a daily basis and make note of the names of people they’ve interacted with for more than 15 minutes, without a mask and not respecting the 2m distance.

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4. What to do in different cases: STUDENTS and PARTICIPANTS



PROTOCOL FOR COVID-19 CASES: STUDENTS AND PARTICIPANTS
2020)

(Updated: 15-09-

	Possible Cases		Probable Cases		Confirmed Cases	
	Symptoms compatible with COVID-19 (cough, fever, etc)		Doctor confirms clear COVID-19 symptoms, and student undergoes PCR testing and is awaiting result		Positive PCR test result: confirmed case	
Communication within IESE	1	Students or participants who develop symptoms compatible with COVID-19 must contact their Program Director.	8	The student has undergone PCR testing and is awaiting the results.	12	The student advises the Program Director of a positive PCR test result, and thus becomes a confirmed COVID-19 case.
	2	The Program Director will then contact IESE's doctor (Xavier Bertran) and Global COVID-19 Manager (Luis Jover), who will then inform others involved in IESE's COVID-19 response efforts.				
The student or participant	3	Students with symptoms should not come to campus. If they develop symptoms while on campus, the Program Director will take them to the campus health service, ensure that they have a facemask, and assist them in returning home or going to a health clinic. In the most urgent cases, 112 emergency services will be called.	9	The student must remain at home while waiting for the PCR results, but will be able to continue their program online.	13	The student must self-isolate at home, following national health recommendations.
	4	The Program Director will advise the student to consult a doctor (in a National Healthcare system walk-in clinic or primary care clinic, or in a private clinic) and follow their recommendations on whether to undergo PCR testing.	10	If the PCR test is negative, IESE's doctor will clear the student's return to campus. Upon return, the student should answer the health questionnaire based on their health prior to the symptoms, since the negative PCR result indicates that they were unwell due to another sickness.		
	5	The Program Director will follow up on the case, and keep IESE's doctor and Global COVID-19 Manager informed. If an outside doctor does not recommend a PCR, IESE's doctor will evaluate whether to prescribe one (at IESE's discounted price). The student must inform the Program Director of the test result.				
Close contacts	6	The Program Director must begin to identify the student's close contacts within IESE, without causing undue alarm or taking further decisions. The idea is to compile the information in order to be prepared if necessary.	11	While the student is awaiting the results, IESE's doctor and Global COVID-19 Manager will evaluate whether to inform close contacts of the situation and request that they remain at home. In all cases, students will be able to continue their program online.	14	Close contacts must undergo PCR testing and self-isolate for the time required by national health authorities. IESE's doctor will clear students' return to campus.
	7	<p>According to regulations, a close contact is someone who has been in contact with a confirmed case and who also meets the following three criteria:</p> <ul style="list-style-type: none"> 1) Less than 2 meters of distance 2) During more than 15 minutes 3) Without a facemask <p>In the period starting 48 hours before the onset of symptoms to the moment the case is identified.</p> <p>Remember: The close contact of a close contact is not a close contact.</p> <p>Example 1: My child/spouse/partner is a confirmed positive case. I am a close contact (because I have been less than 2 meters from them, for more than 15 minutes, without a facemask).</p> <p>Example 2: My child/spouse/partner has a friend/colleague who is a confirmed positive case. I am not a close contact.</p> <p>The work of identifying close contacts is limited to those within IESE: classroom, team, cafeteria, shared spaces.</p>				

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What to do in different cases: EMPLOYEES



PROTOCOL FOR COVID-19 CASES: EMPLOYEES AND COLLABORATORS (Updated: 15-09-2020)

	Possible Cases		Probable Cases		Confirmed Cases	
	Symptoms compatible with COVID-19 (cough, fever, etc)		Doctor confirms clear COVID-19 symptoms, and employee undergoes PCR testing and is awaiting results		Positive PCR test result: confirmed case	
Communication within IESE	1	Employees who develop symptoms compatible with COVID-19 must contact their Area Director and consult IESE's doctor.	8	The employee has undergone PCR testing and is awaiting the results.	12	The employee advises the Area Director of their positive PCR test result, and thus becomes a confirmed COVID-19 case.
	2	The Area Director will then inform IESE's Global COVID-19 Manager (Luis Jover) of the relevant medical details (current status and next steps). He will inform others involved in IESE's COVID-19 response efforts.				
The employee	3	Employees with symptoms should not come to campus. If they develop symptoms while on campus, the Area Director will direct them to the campus health service, ensure that they have a facemask, and assist them in returning home or going to a health clinic. In the most urgent cases, 112 emergency services will be called.	9	The employee must remain at home while waiting for the PCR results, but will be able to continue working from home.	13	According to government recommendations, the employee must self-isolate at home until three days after the absence of symptoms, and a minimum of 10 days from the onset of symptoms.
	4	The Area Director will advise the employee to consult a doctor (in a National Healthcare system walk-in clinic or primary care clinic, or in a private clinic) and follow their recommendations on whether to undergo PCR testing.	10	If the PCR test is negative, IESE's doctor will clear the employee's return to campus. Upon return, the employee should answer the health questionnaire based on their health prior to the symptoms, since the negative PCR result indicates that they were unwell due to another sickness.		
	5	The Area Director will follow up on the case, and keep IESE's Global COVID-19 Manager informed. If an outside doctor does not recommend a PCR, IESE's doctor will evaluate whether to prescribe one (IESE will assume the cost). The employee must inform the Area Director of the test result.				
Close contacts	6	The Area Director must begin to identify the employee's close contacts within IESE, without causing undue alarm or taking further decisions. The idea is to compile the information in order to be prepared if necessary.	11	While the employee is awaiting the results, IESE's doctor and Global COVID-19 Manager will evaluate whether to inform close contacts of the situation and request that they remain at home. Employees will be able to work from home.	14	Close contacts must undergo PCR testing and self-isolate for the time required by national health authorities. If the results are negative, close contacts of the employee will be cleared to return to campus.
	7	<p>According to regulations, a close contact is someone who has been in contact with a confirmed case and who also meets the following three criteria:</p> <ol style="list-style-type: none"> 1) Less than 2 meters of distance 2) During more than 15 minutes 3) Without a facemask <p>In the period starting 48 hours before the onset of symptoms to the moment the case is identified.</p> <p>Remember: The close contact of a close contact is not a close contact.</p> <p>Example 1: My child/spouse/partner is a confirmed positive case. I am a close contact (because I have been less than 2 meters from them, for more than 15 minutes, without a facemask).</p> <p>Example 2: My child/spouse/partner has a friend/colleague who is a confirmed positive case. I am not a close contact.</p> <p>The work of identifying close contacts is limited to those within IESE: classroom, team, cafeteria, shared spaces.</p>				

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5. Concentric circles of isolation

With the aim of reducing the number of close contacts and, as a result, achieving smaller isolation circles, various actions are proposed with the focus on **maintaining stable groups** of people in their shared activities and facilities.

With the following measures, minimal isolation groups will be established as working teams for Executive Education and as a section for the MBA and MiM programs. In the MBA and MiM programs, classes are daily and the level of interaction is much greater.

ExEd program actions

Seating in classrooms should not be random as it has been up to now, but rather carried out in such a way that the members of each working team sit close together. The same criteria will be maintained at lunch time.

Each program will have a different assigned space for coffee breaks. It's important to recommend to participants that during those breaks they spend less than 15 minutes with any participant who does not belong to their working team and that they always maintain a safe distance and wear a mask.

The program director must make sure that the seating chart has been uploaded to the Virtual Campus and that participants sit in their assigned place. This will make identifying close contacts much easier.

MBA and MiM program actions

Seating in the classrooms should be kept fixed and the program director should keep a seating chart of it in order to carry out possible contact tracing.

To avoid crowding and maintain fixed groups:

- a. During breaks, an area will be assigned in the cafeteria for each section.
- b. During lunchtime, each section will use the self-service area and cafeteria according to a determined schedule and occupying specific tables.
- c. A guard will be present during lunchtime to guarantee required occupation levels, social distancing and compliance with other safety measures.

Staff actions

Avoid face-to-face meetings of entire departments or areas.

To avoid crowding and maintain fixed groups at lunchtime:

- On the Barcelona campus, each area will have set times to use the self-service area and cafeteria tables.
- On the Madrid campus, employees should try to have lunch at the same time each day.

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6. Disinfection in case of exposure to COVID-19

Campus spaces where an infected person has remained for more than two hours must be disinfected with NDP Air Total + Green CE. The Operations team will be responsible for disinfecting the area.

Two NDP units are available:

- 50ml container to disinfect areas up to 40m³.
- 300ml container to disinfect areas up to 150m³.

6.1.1 Aerosol can disinfection

The person who applies the product must wear:

- Gloves (a double pair if more than one room is being disinfected)
- Surgical mask
- Leg protectors
- Protective glasses

Procedure:

1. Either the ventilation grills will be sealed or the system valves of the affected premises will be closed.
2. Enter equipped with PPE's.
3. Attach the aerosol can.
4. The door must be closed and sealed from the outside and marked "Disinfection process - access prohibited." The reopening date and time will be indicated.
5. Clean the external doorknob with a cloth and Sanytol.
6. If another nearby place must be disinfected, the outer gloves will be removed, new ones will be placed on top of the bottom pair and the procedure will be repeated.
7. If no additional spaces are being disinfected, remove the leg protectors and gloves. Wash hands, glasses and mask with hydroalcoholic gel. To remove non-reusable PPE:
 - a. Place it placed in a plastic bag (BAG 1) that must be properly closed and placed in a second garbage bag
 - b. (BAG 2), next to the exit of the affected premises.
 - c. BAG 2, with the previous waste, is deposited with the rest of the waste in a garbage bag (BAG 3) corresponding to the garbage bin.
 - d. BAG 3 will also close properly.
8. After the disinfection time has elapsed, garbage bins will be collected by individuals wearing a mask and gloves. These materials will be removed as described above.
9. Wash hands with hydroalcoholic gel.

6.1.2. General disinfection

The cleaning service will carry out a cleaning and disinfection of the remaining common areas of the building using a surface disinfectant included in the list of products approved by the Ministry of Health.

6.2 Coordination of business activities

If outside companies providing services at IESE facilities become aware of a case of COVID-19 or its symptoms among its staff, they must inform the director of whichever area outsourced the service.

7. Modification of this document

This document is subject to change according to the evolution of the health situation and related risks.

Any contingency plan will be adapted to the specifications established by different government orders, regulations and instructions regarding both hygiene and prevention measures, as well as conditions in which related activities are to be carried out.