CONTINGENCY PLAN
COVID-19
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Preamble

In early January 2020 a large number of infections of an unknown virus, which shared very similar symptoms with pneumonia was reported in China. The outbreak emerged in the city of Whuan, counting already with some casualties; meanwhile, other cases have been detected as well, in countries like the USA, France, Thailand, Japan, Taiwan, and Australia. The virus was identified as a new stripe of coronavirus. The infection of any employee can lead to the contagion of others and that is why this Contingency Plan was elaborated.

1. Scope

The Business Contingency Plan aims to anticipate and manage the impact of the current SARS-CoV-2 Coronavirus disease outbreak, the causative agent of COVID-19, hereinafter mentioned as COVID-19; in the Company, particularly focusing on its employees and customers.

The main goal of this Contingency Plan is to enable the Company to face the risk of infection and deal with possible cases of illness, minimizing its transmission and impact on the company and in the community.

This Plan was elaborated following the guidelines of the Directorate-General of Health (DGS), and intends to:

• Prepare a reaction to minimize the conditions of COVID-19 transmission;

• Define Company’s coordination structure;

• Answer to the communication needs inside and outside the Company.
2. Terms and Expressions Used

Contingency Plan
It has the purpose of highlighting all the measures adopted by a Company, including the activation of manual procedures that will restore confidence in the business’s vital processes as soon as possible. This way is prevented a longer period of paralysis, avoiding major costs for the corporation. This document establishes the responsibilities of an organization to respond to an emergency and it contains detailed information in what concerns this field features or systems involved.

Employees
For the Company, all those who work here are employees, regardless of position, work, activity or length of service.

Coronavirus
Coronaviruses are viruses that are found in animals, including camels, cats, bats, and some of them, in humans. These viruses are known to cause respiratory infections ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). 2019-nCoV is a new coronavirus that has not yet been identified in humans. The clinical picture of Acute Respiratory Disease by 2019-nCoV is not fully known, as well as its pattern of lethality, mortality, and infectivity. The way it spreads among people is not yet well established too. Symptoms may appear from two to 14 days after exposure and there is lack of reasoned information about the transmission period.

Vulnerability is general. The clinical spectrum of the infection is wide and ranges from a simple cold to a severe pneumonia. The clinical signs and symptoms reported are mainly respiratory. The patient may present symptoms as fever, cough, and breathing difficulties.

Virus Features: This new Coronavirus belongs to a family of viruses that include common flu and viruses like SARS and MERS. Some coronaviruses can affect animals. Coronavirus is rarely transmitted by animals to people. This new strain of coronavirus is named COVID-19. It is a virus with a single chain of RNA, enveloped, and sensitive to disinfection.
3. **Suspected Case Definition**

The definition below is based on the information available to date at the European Centre for Disease Prevention and Control (ECDC):

<table>
<thead>
<tr>
<th>Clinical Criteria</th>
<th>Epidemiological Criteria</th>
</tr>
</thead>
</table>
| Acute Respiratory Infection (fever or cough, and breathing difficulties) requiring hospitalization or not | Travel History to areas with community transmission levels, within 14 days before the onset of symptoms
  | AND                                                                              | OR Contact with a confirmed or suspected case of SARS-CoV-2 / COVID-19 infection, 14 days before the onset of symptoms
  |                                                                  | OR Healthcare professional or person who was in a healthcare facility with COVID-19 patients |

4. **Infection Transmission**

Covid-19 modes of transmission:

- via small respiratory droplets (particles are bigger than 5 μm in diameter);
- by direct contact with infectious secretions;
- via aerosols generated by therapeutical procedures (inferior to 1 micron).
5. Contingency Plans

5.1. Organizational chart - Employee with COVID-19 symptoms situation

The employee must inform his/her line manager by phone and head to the isolation area following the preset track.

The line manager contacts the Hotel Board or the Duty Manager and HR, warning them about the situation and makes sure that the employee receives all the assistance needed.

Employee calls SNS 24 (808 24 24 24)

SNS 24 questions the employee.

Non suspected case

SNS adopts the right procedure according to the clinical situation

Valid Suspected Case

Suspected case

SNS contacts Doctors Help Line (LAM)

Employee puts on the masks and gloves

INEM transports the employee to the Hospital

Employee's line manager informs Board or Duty Manager and HR of valid suspected case

Collection of biological samples in the hospital

Case closed for COVID-19

SNS 24 establishes the procedures according to Employee's clinical situation

Not Valid Suspected Case

Employee contacts line manager

Local Health Authority informs the employer about the positive lab test results and operates contact management.

Local Health Authority informs the employer about the negative lab test results

Case closed for COVID-19

Employee's line manager informs Board or Duty Manager and HR of valid suspected case

Not confirmed case

Employee puts on the masks and gloves

INEM transports the employee to the Hospital

Employee's line manager informs Board or Duty Manager and HR of valid suspected case

Confirmed Case

SNS 24 establishes the procedures according to Employee's clinical situation

Not confirmed case

Local Health Authority informs the employer about the negative lab test results

Case closed for COVID-19

Local Health Authority informs the employer about the positive lab test results and operates contact management.

Local Health Authority informs DGS about the adopted measures

The employer provides the "isolation" area with cleaning and disinfection

Local Health Authority lift the ban after decontamination

Local Health Authority informs DGS about the adopted measures

Employee contacts line manager

Case closed for COVID-19

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Valid Suspected Case

Employee puts on the masks and gloves

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Valid Suspected Case

Employee puts on the masks and gloves

INEM transports the employee to the Hospital

Employee's line manager informs Board or Duty Manager and HR of valid suspected case

Collection of biological samples in the hospital

Case closed for COVID-19

SNS 24 establishes the procedures according to Employee's clinical situation

Not Valid Suspected Case

Employee contacts line manager

Local Health Authority informs the employer about the positive lab test results and operates contact management.
5.2. What to do when a company employee is suspected of being infected

5.2.1. Sequence of procedures

a) The suspect reports his / her situation to the line manager, preferably via phone;
b) The Line Manager indicates the Employee to move to the “isolation” area, following the circulation plan defined for the unit;
c) The Line Manager immediately informs the Chief Executive Board and HR Director (Américo Baptista);
d) The HR records the incident in a specific document;
e) The Workers that may be needed to assist an employee with a suspected case must be defined and already in place in case their help could be needed. They should, if possible, maintain a safety distance of at least one meter from the suspected employee and wear a surgical mask and protective gloves, according to all safety procedures;
f) It is the suspected Employee that must contact SNS Line 24 (808 242424), reporting his own situation;
g) If the health professionals of SNS 24 HelpLine do not consider the Employee as a suspected case, the Employee must follow their advice and inform the company;
h) If, on the other hand, the case is considered suspicious by the health professionals of SNS 24 Helpline, the DGS Doctors HelpLine (LAM) will be contacted to validate this suspicion;
i) If the case is considered not valid, the procedures defined in this Contingency Plan will be deactivated;
j) If, on the contrary, this validation is confirmed, DGS will contact INEM, INSA, and Regional Health Authority to start the Epidemiological Investigation and proper Contact Management of the case;
k) The employee must wear a mask and gloves;
l) The Employee must inform the result by phone to the Line Manager, who will in his/her turn report the Hotel Board and HR of the case validation.
m) HR will work with the Health Authority to identify every close social contact of the employee with the validated case;
n) The Chief Executive Board will also inform the other company employees about the validation of this suspected case that is still waiting for the results of the laboratory tests;
o) The ill Employee must remain in the “isolation” area (with a surgical mask, as long as his/her clinical condition allows), until the arrival of the National Institute of Medical Emergency (INEM) team, called by DGS. They will ensure the transportation of the patient to the hospital, where biological samples will be collected for the laboratory tests procedures;

p) The isolation area used must be restricted until its decontamination process (cleaning and disinfection) is approved by the Local Health Authority. The decontamination process is supervised by the Board, which will guarantee the storage of the waste in a 50/70 micron thick plastic bag, closed with a clamp, which will later be sent to a licensed operator for the management of hospital waste with biological risk;

q) The Local Health Authority together with the Occupational Health Doctor will inform the DGS of all the measures implemented in the company and the contact risks identified according to the criteria defined by the DGS.

5.3 - General Guidelines of Communication

5.3.1 - Internal Use
All internal communications regarding suspected COVID-19 cases should preferably be made by telephone. HR will keep on record all occurrences reported.

5.3.2 - External Use
All contacts made by the media and others must be redirected to the Hotel's Manager who will forward them to the Chief Operating Officer (COO).
5.4 - Organizational chart - Customer with COVID-19 symptoms situation

Customer with symptoms ¹

Hotel Unit manager must be immediately informed

Reception staff must be informed of all the procedures implemented in this situation so the right support can be provided to the customer ²

The reception must inform the customer that he/she should remain inside his/her room and call immediately the emergency services.

SNS 24 questions the customer

Non suspected case

SNS adopts the right procedure according to the clinical situation

Suspected case

SNS contacts Doctors Help Line (LAM)

Valid Suspected Case

Customer outs on the masks and eloves

INEM transports the customer to the Hospital

Recepção informa Direcção| Duty Manager |RH do caso validado

Collection of biological samples in the hospital

Not confirmed case

Local Health Authority informs the employer about the negative lab test results

Case closed for COVID-19

Confirmed case

Local Health Authority informs the customer and the Hotel about the positive lab test results and operates contact management.

Case closed for COVID-19

Local Health Authority informs DGS about the adopted measures

The room occupied by the customer is cleaned and disinfected by the Hotel.

Local Health Authority lift the ban after decontamination

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¹ Symptoms: nasal discharge, headache, fever, cough, sore throat, general weakness (Acute respiratory infection) AND
a) Contact with a confirmed or suspected case of SARS-CoV-2 / COVID-19 infection within 14 days before the onset of the symptoms OR
b) Travel History to areas with community transmission levels, within 14 days before the onset of the symptoms OR
c) Healthcare professional or person who was in a healthcare facility with COVID-19 patients.

² If there is the need to assist the customer in his/her room (e.g. locomotion disabilities), the receptionist should wear the appropriate protective materials and avoid passing in places where groups of people can gather. The receptionist must always maintain the social distance safety distance of at least 1 meter.
6. Cleaning and Disinfection Protocol

6.1. HOW TO PROTECT YOURSELF

✓ **Wash your hands** frequently and properly
  *(The World Health Organization advises to hygiene the hands with water and soap or use an alcohol-based hand rub if you don’t have immediate access to soap and water.)*

✓ **Avoid touching** your eyes, nose, and mouth without washing your hands first.

✓ **Avoid close contact** with people that are sick

✓ **Avoid areas where animals are sell or breed**, especially in regions where many cases of the virus were reported.

✓ **Wear a mask if advised by local authorities and in places where its use is well regulated.**

✓ **Seek medical advice immediately** if you have a fever or any other symptoms after traveling. Tell your doctor where were you travelling.

6.2. HOW TO PROTECT OTHERS

<table>
<thead>
<tr>
<th>Reduce the risk of infection</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clean and disinfect</td>
</tr>
<tr>
<td>Stay home if feel sick</td>
</tr>
<tr>
<td>Avoid social contact and keep 1 - 2 meters of social distancing</td>
</tr>
</tbody>
</table>

When sneezing or coughing cover mouth and nose with flexed elbow or tissue. Throw tissue into a closed bin immediately after use.
6.3. HAND HYGIENE

✅ Promoting good hand hygiene practices

- **WET**
  - wet your hands with running water,
  - turn off the tap
  - and apply soap

- **APPLY SOAP**
  - in the back of both hands,
  - between your fingers and underneath your nails.

- **RUB**
  - for at least 20 seconds.

- **RINSE**
  - rinse well your hands with running water.

- **DRY**
  - your hands using a dry clean towel or let them dry in the air

<table>
<thead>
<tr>
<th>Product</th>
<th>Dosage</th>
<th>Exposure time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Epicare Des</td>
<td>3 ml</td>
<td>30 Seconds</td>
</tr>
</tbody>
</table>

*IF WATER AND SOAP ARE NOT AVAILABLE,*

use an alcohol-based solution to disinfect:
1. Use enough product to cover all surfaces of the hands.
2. Rub all surface of the hand for 30 sec.
3. Let it dry.

6.4. DISINFECTION

NON FOOD CONTACT

✅ Clean and disinfect all hard surfaces and critical objects with approved disinfected spray.

✅ Increase cleaning frequency if necessary.

- **- PRE-CLEANING**
  - Pre-clean all visible dirty areas to be disinfected. Rinse with a damp cloth and let it dry naturally.

- **- DISINFECTION**
  - For an emerging viral pathogen, use a disinfectant with proven efficiency against the viruses involved. Consult the product’s packaging for usage directions.

- **- WAIT**
  - Allow to take effect on the surface for the time indicated in the product application instructions.

- **- DRY**
  - Clean the surface with a dry disposable cloth or let it dry naturally.
FOOD CONTACT

- Clean and disinfect all hard surfaces and critical objects with approved disinfected spray.
- Increase cleaning frequency if necessary.

6.5. DIFFERENT SPACES PROCEDURES

RESTAURANTS/BARS/DINING AREA AND BREAK ROOM

Specific points:
- Dinning Tables
- Buffets
- Sideboards/Trolleys
- Beverage stations
- Doorknobs/Drawer knobs
- Pressure plates
- Switches
- Faucets
- Cabinet
- Handrails
- Chairs
- Garbage bins

To help protect against COVID-19, it is necessary that the surface remains wet for a certain amount of time.

<table>
<thead>
<tr>
<th>Product</th>
<th>Dilute</th>
<th>Exposure time</th>
</tr>
</thead>
<tbody>
<tr>
<td>KitchenPro Des</td>
<td>1%</td>
<td>15 Minutes</td>
</tr>
<tr>
<td>Sirafan Speed</td>
<td>Ready to use (RTU)</td>
<td>30 Seconds</td>
</tr>
</tbody>
</table>
**SUPPORT AREAS/KITCHENS**

- **Specific points:**
  - Counters / tables
  - Food preparation surfaces
  - Vats
  - Equipment
  - Thermometers
  - Beverages trolleys
  - Garbage bins
  - Doorknobs / Drawer knobs
  - Equipments Pressure plates
  - Switches
  - Faucets / faucet handles
  - Cabinets
  - Dispenser handles / pressure plates
  - Vat’s towel dispenser handle
  - Cleaning tools / buckets
  - Management PCs (= computers), keyboards and telephones

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**WORKING AREAS/PUBLIC AREAS/ELEVATORS**

- **Specific points:**
  - Doorknobs and pressure plate knobs
  - Glass surfaces and railings
  - Client and Staff lifts
  - Lift buttons (Inside and outside)
  - Staircase
  - Reception Front Desk
  - Shared telephones
  - Shared Computers
  - Switches
  - Chair and Desks

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<tr>
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<th>Dilute</th>
<th>Exposure time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oásis Pro 20 Premium</td>
<td>0,75%</td>
<td>15 Minutes</td>
</tr>
<tr>
<td>Sirafan Speed</td>
<td>Ready to Use (RTU)</td>
<td>30 Seconds</td>
</tr>
</tbody>
</table>
GUESTROOMS/RESTROOMS/HALLWAYS

Specific points:

- Doorknobs and pressure plates
- Glass surfaces and railings
- Telephones
- TV remote control
- Switches
- Armchair
- Coffee tables
- Light fixtures
- Desks
- Doorknobs and pressure plates
- Towel rack
- Faucets and handles
- Soap dispensers bar
- Door safety latches and toilet handles
- Garbage receptacle’s contact points
- Changing tables
- Carpets, footers

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FITNESS CENTER AND SPAS

Taking into account the current scenario and following the recommendations of the Directorate-General of Health, we inform that this service is closed until new developments.