

UNIVERSITY OF IBADAN



COLLEGE OF MEDICINE

COLLEGE OF MEDICINE COVID-19 (COMUI COVID-19) COMMITTEE

DRAFT REPORT ON

THE PROPOSED GUIDELINES AND REQUIREMENTS FOR

COVID -19 INFECTION PREVENTION AND CONTROL

TOWARDS THE RESUMPTION OF ACADEMIC ACTIVITIES

NOVEMBER, 2020

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COLLEGE OF MEDICINE COVID-19 COMMITTEE

PROPOSED GUIDELINES AND REQUIREMENTS FOR COVID -19 INFECTION PREVENTION AND CONTROL TOWARDS THE RESUMPTION OF ACADEMIC ACTIVITIES

1.0 PREAMBLE

Impact of COVID-19 on Teaching and Research

COVID-19 had impacted many sectors of society. Its impact on the educational sector had been quite phenomenal as it had disrupted school curriculum in many respects. Though the short-term effects are manifest, and the intermediate effects can be anticipated, the long-term effects are still yet to be fully appreciated. The World Bank estimates that the disruption to learning would cost the current cohort of children that are out of school as a result of the pandemic up to \$10 trillion in lifetime earnings.

The long time lay-off from school and full interaction with a diverse population made up of students, teachers, workers and visitors from within and outside the country are likely to negatively impact the psychosocial well-being of teachers, students and workers. Also, the unusual long stay with parents, siblings and other family members may have created unresolved conflicts and anxieties that may take some time to wear off. Thus, it is not to be unexpected that learners may return to school with learning deficits, poor work habits and some residual psychological issues that may require patience and a supportive environment to resolve. Academic and non-academic staff may also struggle with the anxieties of settling back into an active work environment, catching up on lost time and the fear of COVID-19 transmission associated with closed spaces. All these concerns would require a responsive and empathetic systems approach to resumption and continuation of rigorous academic activities

Research is one of the requirements of an educational system. It unlocks new knowledge and opens the frontiers of human development. Unfortunately, and rightly so, the pandemic had resulted in the slowing down of research that is not related to COVID-19 amidst fears of infection transmission to participants as well as investigating teams. Human subject research

requiring interventions or minimally invasive/highly invasive procedures have been temporarily halted in some instances or slowed down considerably with risk reduction strategies instituted. Behavioural research on the other hand had shifted to online models while animal-based studies had temporarily been halted for fear of transmission to animals and subsequent touch-related transmission among humans.

The pandemic had stretched on for a long time and as such, it is to be expected that the general populace inclusive of the learning community would be tired of sheltering and restrictions occasioned by the pandemic. This pandemic fatigue calls for innovative approaches that are premised on the principle of preventing the spread of the infection while understanding the issues people face. Thus, strategies that allow the learning community to move on with their daily lives while reducing the risk inherent in the everyday lived experience would be very important.

It is in response to these identified challenges and the resumption of academic activities that COMUI Management has once again taken the lead in being proactive. This is to be achieved through a holistic, multi-disciplinary and multi-sectoral approach to develop guidelines and provide the needed infrastructure to ensure that the staff and students of COMUI are protected from COVID-19.

2.0 INAUGURATION OF THE COLLEGE OF MEDICINE, UNIVERSITY OF IBADAN COVID-19 (COMUI COVID-19) COMMITTEE

The Management of the College of Medicine, University of Ibadan (COMUI) to ensure the safe resumption of staff and students in the reality of COVID-19, approved the setting up of its COVID-19 Committee which was inaugurated on the 8th of October, 2020 by the Provost, COMUI- Prof.OlayinkaOmigbodun who was represented by the Deputy Provost, COMUI- Prof. A.F. Adeniyi.

The 21-member committee chaired by Dr Hannah Dada-Adegbola had the following terms of reference (ToR):

- 1. To identify the needs of staff and students in respect of COVID-19 prevention and control
- 2. To facilitate initial and continuous education on prevention and control of COVID-19 for students and staff of COMUI
- 3. To guide the College Management on facilities to be made available for adequate prevention and containment of COVID-19
- 4. To provide suggestions on ways to safely conduct teaching, research and clinical training within the COMUI area
- 5. To facilitate round-the-clock monitoring and evaluation of COVID-19 risks across all interests of the COMUI (COM UCH premises, Pre-clinical area in UI, Department of Nursing in UI, Human Nutrition area and Ibarapa Community Health Programme).
- 6. To provide necessary suggestions on the safe resumption of academic activities in respect of COVID-19 and safety at work environment for staff and students and any other details as deemed necessary by the Committee.

The Committee after being inaugurated coalesced the six ToRs into four themes and constituted four sub-committees to develop the ToRs into guidelines and requirements necessary to ensure Coronavirus infection prevention and control among staff and students of the various faculties and departments in COMUI.

The coalesced ToRs and the sun-committee members are:

Table 1: COMUI COVID-19 Sub-Committee and Members

S/N	Sub-Committee (ToR Number it represents)	Membership†
1.	Sub-Committee on the identification of the needs of staff	Dr E.A. Bamgboye
	and students on COVID-19 infection prevention and control	Mr S.O.A. Ogunfowora
	(IPC) (ToR ToR1)	Mr A.A Olawale
		Dr O.C. Uchendu
		Mr AgboolaKehinde
		Mr. A.A. Olawale
		Dr Folashade A. Bello
		Dr Mary E. Osuh
		Dr J.I. Afolami
2.	Sub-Committee on the facilitation of initial and continuous	Dr Hannah O. Dada-Adegbola
	education on infection prevention and control of COVID-19	Dr O.S. Michael
	for staff, students and other stakeholders who work in	Dr Yetunde O. John-Akinola
	COMUI area (ToR 2)	Dr J.I. Afolami
		Dr AdeolaFowotade
		Dr Beatrice M. Ohaeri
		Dr Olumide Dada
		Dr O.A. Odukanmi
		Dr O.M. Morakinyo
3	Sub-Committee on the safe conduct of teaching, research	Dr A.O. Adebiyi
	and clinical training within the COMUI area (ToR 4)	Dr B.O. Ogunbosin
		Dr O.A. Odukanmi
		Dr Mary E. Osuh
		Mr S.O.A. Ogunfowora
		Mr A.A. Olawale
		Dr M.O. Adewumi
		Dr Beatrice M. Ohaeri
		Dr Folashade A. Bello
		Dr Hannah O. Dada-Adegbola
4	Sub-Committee on the safe resumption of academic	Dr Folashade A. Bello
	activities and safety of the on-campus residential	Dr Mary E. Osuh
	environment for students of COMUI (ToR 6)	Dr O.M. Morakinyo
		Dr R.S. Ajani
		Dr M.O. Adewumi
		Dr O.C. Uchendu

†Core members are in bold fonts

3.0 GROUP 1 REPORT

SUB-COMMITTEE ON IDENTIFICATION OF NEEDS OF STAFF AND STUDENTS

ON COVID-19 INFECTION PREVENTION AND CONTROL (IPC)

Objectives of the Terms of reference (ToR)

- To identify the COVID-19 prevention and control needs of the staff of the College of Medicine
- To identify the COVID-19 prevention and control needs of the College of Medicine students
- To proffer possible solutions for instituting infection prevention and control (IPC) measures for staff and students of the College of Medicine

Expected Outcome

A multi-pronged stakeholders approach to identify the needs for a comprehensive COVID-19 IPC measures for COMUI:

- Identify document the number of staff, students and other service providers in the academic, learning and students' residential spaces for which IPC measures have to be provided.
- To document available facilities and capacity of learning and residential spaces
- Identify and document available COVID-19 IPC measures instituted by COMUI Management
- Identify the immediate, mid-and long- term IPC requirements for COVID-19

Strategies for the needs assessment (Table2)

- Data collection
 - Quantitative and Qualitative Methods of Data Collection
 - o To be harmonized with the data needs of other sub-committees
- Personnel (Staff and Students) Use of spreadsheet to collect information on:
 - O Staff strength by departments/cadre/academic and non-academic
 - Number of students by departments and level
- Infrastructure Use of a spreadsheet to obtain information on:

- o Number of lecture theatres and capacity
- Available office spaces
- Available equipment and facilities for lecturing (onsite and online)
- Baseline KAP and Needs Assessment on COVID-19 IPC
 - Web-Based Google form to obtain information on knowledge of COVID-19 preventive measures, risk perception, fears and concerns
 - Key Informant Interview with Student Stakeholders (Hall Chairman,
 Departmental Association Presidents)

Others

- o Number of service providers (food vendors, shop owners)
- Available space utilised by service providers
- In-depth interviews with service providers (food vendors, shop owners) in the halls of residence and offices

Activities conducted so far:

- Meeting with ABH Hall Chairman and other Student Association Presidents
 - To conduct an IPC needs assessment in the hostels, lecture rooms, clinics, laboratories, etc.

Summary of suggestions by the student representatives:

Representatives of COMUI students whose academic activities are domiciled in the UCH Campus of COMUI, met and made some suggestions as follows:

- Need to ensure that IPC measures (physical distancing, hand hygiene, use of face mask) were instituted in the hostels and places of academic activities (clinic, lecture rooms, theatre, laboratories, etc)
- The use of online learning platforms with a means of capturing student attendance and participation during the lectures
- Need for optimal COMUI wifi services to the hostels or COMUI area to enable students to access the online learning platform

Table 2: Summary of Information and its Source required for the Next Assessment of Staff and Students on COVID-19 IPC

Areas for Need	Methods	Content of Assessment	Remarks
Assessment		tool	
Personnel (Staff	Use of Google	• Staff strength by	To be completed
and Students)	spreadsheet to	departments/cadre/acad	by Heads of
	collect	emic and non-academic	Department with
	information	• Number of students by	support from
		departments and level	Registrars office.
Infrastructure	Use of Google	• Number of lecture	Onsite and Online
	spreadsheet to	theatres and capacity	requirements will
	collect	• Available office spaces	be linked to
	information	Available equipment	recommendations
		and facilities for	from Group 3`
		lecturing (onsite and	
		online)	
Assessment of	Web-Based	• Knowledge of COVID-	This will be
COVID-19 IPC	Google form	19 preventive	shared among
practices in		measures,	Staff, Students
COMUI		• Risk perception,	Stakeholders
		• Fears and concerns	
Service	Key Informant	The number of service	To be conducted
Providers	Interview/ In-	providers (food vendors,	in Halls of
	depth	shop owners etc.)	residence and
	Interviews	Available space utilised by	Restaurant,
		service providers food	Shops,
		vendors, shop owners etc.)	Photocopying
			centres etc.

Sub-Committee Members (Core members are in bold fonts)

1.	Dr E.A. Bamgboye	5.	Mr. A.A. Olawale
2.	Mr S.O.A. Ogunfowora	6.	Dr Folashade A. Bello
3.	Mr A.A. Olawale	7.	Dr Mary E. Osuh
4.	Dr O.C. Uchendu	8.	Dr J.I. Afolami
5.	Mr AgboolaKehinde		

4.0 GROUP 2 REPORT

SUB-COMMITTEE ON THE FACILITATION OF INITIAL AND CONTINUOUS EDUCATION ON INFECTION PREVENTION AND CONTROL (IPC) OF COVID-19 FOR STAFF, STUDENTS AND STAKEHOLDERS WHO WORK IN COMUI AREA

Objectives of the Terms of reference (ToR)

- Help staff and students to achieve, promote and protect their health through their efforts
- Promote the development and proper use of available facilities
- Make their health a valuable asset by taking steps to protect themselves from COVID-19

Expected Outcome

A totality of educational efforts aimed at helping, motivating and encouraging staff and students to:

- Want to be healthy
- Know how to stay healthy
- Do what they can to prevent and control COVID-19
- Seek help as and where needed link to where to seek help in COMUI

General Control Measures

- 1. Enhanced hygienic and frequent cleaning of surfaces
- 2. Training of COM cleaners on maintaining good hygiene and cleaning measures
- 3. Ensure constant water supply in all COMUI buildings
- 4. Social distancing
- 5. Good ventilation in buildings, classrooms, rooms, offices
- 6. Use of face masks and/or shields
- 7. Class crowding avoidance through staggered classes; time table adjustments etc.

Strategies to Adopt to Take Up Some Essential Health Behaviour

1. Community involvement – face-to-face identification of information needs of staff and students; suggestions from staff and students

- 2. Training of Trainers of academic and non-academic staff nominees, student representatives and cleaners from each department on COVID-19 prevention measures
- 3. COM campus COVID-19 enlightenment/communication messages at strategic places (canteens, accommodations) on the importance of adopting and maintaining safe behaviours generally
- 4. Inclusion of COVID-19 prevention messages into the curriculum (e.g. last slide of lectures short videos, electronic messages, verbal information)
- 5. Electronic information communication short videos after lectures, communication screens in strategic places, short messages on Whatsapp platform/Develop short multimedia pieces that present key information
- **6.** Fun and innovative approaches e.g. production of cartoons
- 7. Hotlines operated by staff/students
- 8. Voluntary COVID-19 prevention and control actions should be promoted, reinforced by persuasion, shared understanding and common ownership/compliance group instead of a task force

Type of Educational documents/materials

- IEC such as Posters, Handbills and Hand Bands, Face Caps, Vests (Posters INCLUDE WHERE STAFF AND STUDENTS CAN SEEK HELP IF NECESSARY
- 2. Production of Jingles on Diamond FM
- 3. Production of Short Videos for Streaming on TVs/Electronic screens positioned in Halls of Residence, Central Areas located on both Campuses, Faculty entrances, etc.

Key behaviours to observe – 3 main messages

- 1. Wash hands keep washing your hands regularly
- 2. Cover face wear mask/shield
- 3. Space out/physical distancing 1 metre apart in a classroom, shared offices, laboratories, lecture halls, canteens, etc. generally indoor and outdoor spaces

Content of the Educational Documents/Good Communication Requirements

- Hand washing procedure
- Types of Face masks and Correct use of Face Masks +/-
- Did and Don'ts of Face mask use

• Key points of COVID-19 cause and Course

Cause: Primarily contracted through droplets generated when an infected person coughs, sneezes or speaks. Also by touching a contaminated surface and then touching your eyes, nose or mouth without washing or disinfecting your hands first. So we should avoid close contacts with anyone who is ill, spitting in public, regular surface disinfection, large mass gatherings

Course: Spread of infection from person-to-person specific situations like educational institutions/household levels depends on (i) duration of infectiousness (ii) probability of infection being transmitted during contact between the susceptible and infected individual(s) and (iii) average rate of contact between the susceptible and infected individual(s)

Presentations range from mild symptoms to severe illness. Common symptoms include fever, dry cough, shortness of breath (3-most common symptoms), tastelessness, respiratory distress, fatigue, muscle or body ache, sore throat, congestion, and diarrhoea.

The average incubation period (the period between acquiring an infection and beginning to show symptoms) is about five days

Symptoms may develop from 2 days to 2 weeks following exposure to the virus from an infected person

- Definitions of terms in relation to COVID-19
- Spatial and Physical or Social Distancing rules
- Cough and Sneezing Etiquettes
- How to recognize suspected cases of COVID-19
- Symptoms and Signs of COVID-19
- Accessing Diagnosis and Treatment of COVID-19
- Education on Stigma Prevention COVID-19 disease is not a death sentence.
 Nobody is a permanent carrier of the virus.

Others:

- Where to go or who to call when help needed
- Self-isolation
- Minimising contact with someone unwell

- Promoting and facilitating regular and good hand hygiene before eating, after using bathroom/toilet
- Avoid touching hand, mouth and nose
- If possible, always hold a personal hand sanitiser in your pocket or handbag
- Cover mouth and nose with a disposable tissue when coughing or sneezing, and dispose appropriately in a covered bin and wash hands or disinfect with hand sanitizer immediately
- OR sneeze or cough into the crook of the elbow
- Encourage covered bins instead of open bins throughout COMUI premises
- Ensuring adequate ventilation and use of adequately ventilated rooms
- Transmission of COVID-19 respiratory droplets are through coughing, sneezing, talking, breathing through close contact or touching contaminated surfaces
- Signs on toilet doors for students and staff to immediately wash their hands after usage
- Avoid sharing tools and equipment as much as possible; Wipe down immediately after each use
- Avoid sharing of supplies e.g. stationeries

Delivery Mode and Frequency (TIMING of dissemination of information is important)

- Jingles can be Twice daily Between 7.00 am and 8.00 am
- Short Videos can be inserted into GES lectures or Lecturers to add the 1-3 minutes Video on COVID-19)/Diseases prevention to their Lectures
- Posters in front of the Lecture Rooms and at the Entrance
- Poster on Handwashing procedure to be pasted on the wall housing hand-washing stations

Sub-Committee Members (Core members are in bold fonts)

- 1. Dr Hannah O. Dada-Adegbola 6. Dr Beatrice M. Ohaeri
- 2. Dr O.S. Michael 7. Dr Olumide Dada
- 3. **Dr AdeolaFowotade** 8. Dr O.A. Odukanmi
- 4. **Dr Yetunde O. John-Akinola** 9. Dr O.M. Morakinyo
- 5. **Dr J.I. Afolami**

5.0 GROUP 3 REPORT

SUB-COMMITTEE ON THE SAFE CONDUCT OF TEACHING, RESEARCH AND

CLINICAL TRAINING WITHIN THE COMUI AREA

Preamble: Employers and training organizations have a responsibility to ensure that all members of their organization are aware of the risks associated with their stay in such organizations. Besides, they have a statutory responsibility that the health, safety and well-being of staffers and learners are secured so that work and/learning do not unnecessarily harm them. In this respect, guidelines, risk reduction strategies and how to seek care must be made available and communicated regularly to workers and learners.

Objectives of the Terms of reference (ToR)

- 1. Generate a list of the likely impact of COVID-19 on teaching and research in COMUI
- 2. Evaluate the COVID-19 risk that may be associated with teaching and research in COMUI
- 3. Generate guidelines and tools for workplace, students and workforce COVID-19 risk assessment in COMUI
- 4. Suggest general guidelines for risk reduction among Students, Lecturers and Staff of COMUI
- 5. Generate guidelines and tools for assessing the safety of student placements and postings to include:
 - a. Classroom-based postings
 - b. Clinic-based postings
 - c. Theatre based postings
 - d. Laboratory-based postings
 - e. Outside postings
- 6. Recommend mechanisms for identifying and responding to students and staff COVID-19 related concerns and well-being

To achieve the safe conduct of teaching, research and clinical training, the College of Medicine, University of Ibadan would therefore hinge its approach on a three-pronged strategy of risk assessment, workplace safety and workplace well being

- 1. Risk Assessment: The general purpose of risk assessment is to ensure that work, learning and research are conducted in a way that minimizes risk to individuals and others within the learning community. Two key concepts are integrated into our approach to risk assessment i.e., individual risk assessment and workplace and work-related assessment
- 2. Workplace safety: This is geared towards making the workplace safe and suitable for learning and work within the reality of the constant threat of COVID-19. In this regard, each department and unit is expected to have a safety sub-committee in place headed by a safety officer. Teaching and practice should also be organized in such a way to maximize learning opportunities, minimize risk while not compromising the learning standards as enshrined in the curriculum.
- 3. Workplace well-being: Life as we once knew it has undergone unprecedented changes as a result of the COVID-19 pandemic. This has tremendously affected everyone, at individual levels as well as at population levels. It is to be expected that resumption of academic activities would bring with it a lot of anxiety, fears and some maladaptive coping strategies resulting from the uncertainty of the situation at hand. Also, health scares, suspect cases of COVID-19, and a few infections are not unexpected. Consequently, the COMUI would have to be in a state of heightened preparedness to be able to anticipate, identify and act decisively in a responsive manner to these health concerns

RISK ASSESSMENT

1. Individual risk assessment

Before returning to work/learning individual risk and vulnerability profiles need to be assessed. Similarly, it is the responsibility of the individual to ensure that he/she avails himself/herself of the opportunity of using the tools made available for individual risk assessment to continually assess self at regular intervals and as he/she rotates through the learning environment. The risk assessment tool has two parts.

Section A assesses the individual's previous exposure to COVID-19 and aids in prioritizing the need for testing.

Section B documents the individual's vulnerability to suffering from severe illness if he/she contracts COVID-19 and their mental status. An assessment of the vulnerability would help in making decisions about job placements, time-gated exposure during learning, individual's learning options and priorities for prevention and treatment.

- i- Students with background co-morbidities that may negatively impact on their COVID-19 outcome;
 - i. Hypertension
 - ii. Chronic heart condition
 - iii. Diabetes mellitus
 - iv. Chronic lung diseases
 - v. Chronic liver disease
 - vi. Chronic kidney condition
 - vii. Chronic neurology condition e.g. cerebral palsy, epilepsy
 - viii. Background immunosuppression; malignancy, HIV, asplenia
 - ix. Sickle cell disease
 - x. Seriously overweight BMI > 40
 - xi. Pregnancy
 - xii. Age above 65 years
- ii- Students with a history of mental health challenges may have peculiar needs with regards to coping in the COVID-19 era.

It is the responsibility of the Head of Department and posting instructor to ensure that the general guideline for the individual risk assessment is adhered to and discussed.

It is recommended that risk assessment be done anytime an individual return to the learning community from elsewhere and whenever new postings or job placements must be done.

2. Workplace and work/posting related assessment

Each unit and department have the responsibility to document hazards that are inherent in the workplace, the probability of harm and the likely hierarchy of control measures. The workplace assessment must necessarily lead to the institution of appropriate control measures. Workplace and work-related assessments are detailed as follows:

- **a. Workplace assessment:** Each unit must use the appropriate tool to assess the suitability of their work environment to support health especially within the scope of COVID-19 preventive measures. The areas covered within the assessment includes:
 - Adequate space for teaching and work-related activities. This must take into cognizance need for physical distancing and the number of staff and students expected
 - Adequate cross and open ventilation
 - Adequate facilities for hand washing
 - Adequate conveniences for males and females
 - Access to flowing water supply
 - Adequate and appropriately placed waste disposal facilities
 - Adequate and appropriate warning signs for imminent danger or risk
 - Adequate provisions for wiping tabletops, doorknobs, etc
 - Adequate mechanism for disseminating appropriate COVID-19 guidelines to staff and obtaining feedback
 - Existence of mechanism for procurement of cleaning agents in required quantities and a logistic management system
 - Assurance that cleaning staff are trained appropriately
 - Availability of a designated safety officer to ensure compliance and the smooth running of the safety processes
- **b.** Work/posting related assessment: Each unit/department must assess the risks associated with their work processes before staff are assigned tasks or assignments. For academic units/departments, situations and environments that put students and instructors at risk of contracting the SARSCOV2 virus must be pre-identified and mapped before the commencement of any posting (internal or external). Where such

risks are substantial, such postings must be suspended or an alternative arrangement put in place. The critical questions to ask before each posting or new placement are:

- Does the student placement or posting involve exposure to or contact with potential COVID-19 patients?
- Does the student placement or posting involve exposure to aerosol-generating procedures?
- Is there the possibility of overcrowding or challenges in ensuring adequate distancing?

I.

Additionally, the following should apply to ensure safe work procedures and postings:

- COVID-19 hazards associated with work processes must be mapped and documented
- The mapping of the hazards should assist in decisions about the suitability of posting and mitigation strategies
- Mitigation strategies must be made known to students and staff before the commencement of any posting or before they are assigned any task or assignment
- Asynchronous learning approaches should be used liberally in as much as it does
 not conflict with any learning objective as detailed in the curriculum
- Before any new posting/long term task, everyone should be assessed for individual vulnerability to suffering from severe illness if he/she contracts COVID-19. This should inform exemption from certain procedures or tasks and/time-gated exposure during learning, individually tailored mitigation strategies and individualized/ personalized learning options. The guiding principle is to ensure that no individual is at a learning or grading disadvantage as a result of their health vulnerability.
- Opportunities for reporting exposures and feedbacks should be established for staff and students

WORKPLACE SAFETY

The learning and work environments include our classrooms, clinics, theatres, laboratories as well as the "outside posting" environments that our learners are exposed to. The management of

the College of Medicine and its devolved units have the responsibility to ensure that the workplace is relatively free from hazards that may pose an unnecessary risk to the health of its employees, students and visitors. This does not in any way relieve the individual of the responsibility for his/her safety and for acts of unwisdom that may result in injury to health.

General precautions in the classroom, clinic, theatre, laboratory and outside postings

The overarching principle for COVID-19 prevention remains the reduction of transmission via the known routes of transmission; droplet and contact. However, documented evidence overwhelmingly supports increased heightened risk of transmission in enclosed spaces for long periods. Also, early identification and isolation of suspected cases are important.

- All staff and students will have relevant information with regards to COVID-19 prevention
- The use of a face mask is compulsory at all times
- While in clinical or laboratory settings, at the minimum, a medical mask must be used at all times
- For clinical, theatre or laboratory settings where potentially aerosol-generating procedures will be carried out, it is advised that students be excused from such settings. Where that activity is integral to their learning experience, a N95 mask must be used.
- All student grouping and activities should be undertaken with due cognizance to adequate distancing, a minimum of 2meters between students is recommended. Where necessary, multiple grouping for the same activity might need to be considered.
- For clinical, theatre and laboratory group activities, it is suggested, that groups be restricted to not more than 8 per group.
- Hand hygiene facilities should be provided at strategic locations in the classroom, clinic, theatre and laboratory.
- Students and staff are encouraged to carry on their persons, personal hand sanitizers at all times
- Each classroom or learning space should also have an automatic alcohol hand sanitizer installed
- Students and staff who feel unwell should stay at home and should not attend school or any educational or public setting

- Provision must be made to ensure regular, scheduled disinfection of frequently touched objects and surfaces. Preferably disinfection should also occur in between use, where multiple groups use a class or laboratory in a day.
- Students and staff should consult and utilize other prevention guidelines with regards, hand hygiene, cough etiquette, distancing in the different IEC tools provided by COMUI.
- Social gatherings are discouraged at this time of the COVID-19 pandemic.
- Special consideration and alternative prevention measures should be considered for students and staff with disabilities that preclude the use of face mask in them e.g. those hard of hearing that rely on lip reading, or the use of hearing aid makes use of face mask difficult for them.
- Student and staff with a recent history of travel should inform relevant College authority and adhere to National guidelines with regards quarantine.

Specific guidelines for laboratory settings

- a. The College of Medicine will document all laboratories where teaching, service of research activities take place.
- b. Provide adequate information on research activities to staff and students
- c. Perform a site-specific and activity-specific risk assessment to identify and mitigate risks in all laboratories
- d. Risk assessments and mitigation measures depend on the procedures performed in the lab, identified hazards involved in the process and/or procedures, the competency level of lab staff, the laboratory equipment and facility as well as the resources available
- e. Ensure that standard precautions are taken during routine laboratory practices and procedures for decontamination of work surfaces and management of laboratory waste are strictly followed.
- f. All laboratories will have a Health and Safety Officer and a risk mitigation plan as it relates to COVID-19.

WORKPLACE WELL-BEING

Work can have a positive health effect on people. It can as well have a negative health effect. The workplace includes the biological, physical and psychosocial environments. In terms of the pandemic, some hazards and anxieties come with many people being together in closed spaces.

The psychosocial impact is huge. Anxiety, fears, social isolation, maladaptive coping strategies such as drug abuse, excessive social media usage, depression and suicidal behaviours have increased. There are also attendant financial concerns, while social media fake news have also worsened anxiety concerns.

Mechanisms of identification

- Interactive Zoom Town Hall meetings to discuss the psychosocial impact as well as coping strategies and available help options (separately for students and staff)
- Provide infographics and posters with common symptoms and coping strategies
- Online surveys to evaluate psychological wellbeing and functioning
- Use of peer to peer support and monitoring using Class Reps and Student Union officials for students, and Sub Deans/Faculty Officers/Departmental Representatives for Staff.

Responses

- Encourage cultivating and enhancing social support and investing in good interpersonal relationships
- Provide helplines for psychosocial support
- Augment with in-person Psychosocial support as may be indicated
- Training of peer to peer counsellors to enhance detection, early identification, provision of basic psychological first aid, and prompt referrals of peers in distress
- Use of IEC materials such as posters
- Staff and lecturers to exhibit compassion and kindness towards students and colleagues...it is trying and tough time for everyone
- Frequent online engagements via social media infographics, useful tips and strategies etc.
- Adhering to the preventive and control measures (handwashing, use of alcohol-based hand sanitizers, face mask and social distancing, cleaning of frequently use surfaces)
- Virtual classes where feasible eg for tutorial sessions

System to ensure well being of students and staff

Halls

- Individual risk assessment and follow up testing as appropriate
- Adequate spacing in halls

- Ensuring that only official assigned students are accommodated
- Dining in batches to maintain social distancing
- Temperature checks at the entrance
- Restricting vendors to only officially assigned persons
- Reduction in the number of shop assistants in hall

Classrooms

- Adequate spacing with directive tapes
- Reduction of lecture hours
- Virtual classes

General

- Hand washing stations- with pedal lock with soap and dryers at strategic places
- Hand sanitizers
- Temperature checks stations
- Waste disposal bin

GUIDELINES FOR THE SAFE CONDUCT OF RESEARCH

Human research and research with animals present a huge challenge in the pandemic period. As much as possible, the interface with human beings would need to be reduced so that the risk of transmission is substantially reduced. The principal investigator has the responsibility to ensure that the research team and participants are protected from any potential harm from the transmission of SARSCOV2. The specific guidelines are as follows:

- As much as practicable, face to face research is to be discouraged. Online modes of data collection are to be preferred
- For vulnerable researchers, they should assign their roles to other members of their team
- Screener questions are important for an assessment of the research participants to avoid putting the research team through unnecessary risks
- Severely sick individuals should be exempted from participating in research during the pandemic period unless it is highly necessary; in which case, all heightened precautions must be put in place
- As part of non-maleficence, research participants must be informed about steps taken to reduce the risk of exposure to SARSCOV2 during the research process

- Interviews and data collection efforts must be conducted in open spaces or spaces which guarantees adequate physical distancing with natural ventilation
- All interview and data collection tools must not be protected with coverings that can be disinfected and sharing of these items are strongly discouraged
- During face-to-face interviews, adequate precautions such as physical distancing, face mask, avoiding touching surfaces indiscriminately, wearing of gloves as necessary, washing of hands after the interview and shortening interview time should be practised

Sub-Committee Members (Core members are in bold fonts)

Dr M.O. Adewumi

1.	Dr A.O. Adebiyi	6.	Mr S.O.A. Ogunfowora
2.	Dr B.O. Ogunbosin	7.	Mr A.A. Olawale
3.	Dr O.A. Odukanmi	8.	Dr Beatrice M. Ohaeri
4.	Dr Mary E. Osuh	9.	Dr Folashade A. Bello

10.

Dr Hannah O. Dada-Adegbola

6.0 GROUP 4 REPORT

SUB-COMMITTEE ON THE SAFE RESUMPTION OF ACADEMIC ACTIVITIES AND

SAFETY OF ON-CAMPUS RESIDENTIAL ENVIRONMENT FOR STUDENTS OF

COMUI

Objectives of the Terms of reference (ToR)

- To identify the COVID-19 prevention and control needs in residential areas of students
- To develop a student-led COVID -19 IPC guideline for residential areas to promote and protect their health through their efforts
- To suggest recommendations to COMUI Management on providing required COVID-19
 IPC equipment

Expected Outcome

To provide a COVID-19-free living environment for students through their active participation

Strategies Required to Achieve the Objectives

- Accommodation:
 - It is officially limited to 2 per room (1 per room in some PG rooms). This might be adequate.
 - Illegal accommodation ('squatting') is the problem, as these are undocumented.

o To limit this:

- Residents' ID cards with room numbers displayed should be provided & IDs
 for business owners and staff as well. (However, this might mean that no
 visitors will be allowed in the hall at all; including the canteens, shops and
 common room for events)
- Students' clinical activities will have to end before nightfall, so they can safely get to their outside residence (no-take rounds, no calls, no late surgeries).

- Provision of tents in open areas to receive visitors. No visitors allowed within rooms
- Staff members will be encouraged to observe all safety protocols in their quarters.
- Hands-free wash hand basins at the hall entrance and outside each block: Provision of consumables (e.g. soap) must be maintained.
- We recommend that water is piped from the tanks behind A block, to fixed, permanent sinks
 and taps adjacent to the porters' lodge. These will work better than Veronica buckets and
 promote regular handwashing.
- Educational posters at the gate and around the hall (another subcommittee is in charge of education)
- Enforcement of handwashing and temperature checking at hall entrance:
 - To be done by porters and errant individuals to be barred by security guards on duty.
 The use of automatic taps and temperature checker is recommended.
- Enforcement of mask-wearing all over the hall, except within the rooms and bathrooms.
- Observations of spatial distribution, hand washing and cough etiquette.
- Put in place measures that ensure routine cleaning of all frequently touched surfaces.
- Avoid congregations/gatherings through the following suggestions:
 - The cafeteria should be limited to 50% capacity. Only half of the chairs at each table may be occupied. Once there are no available seats left, food can only be sold in takeaway packs.
 - o Students' meetings and assemblies to be held online whenever possible.
 - When physical meetings must occur, there must be at least one-metre distance between seats, the windows must be left open and the meeting rooms cannot be more than 50% capacity.
 - Visits to fellow students' rooms are discouraged.
 - Student champions will be engaged to help to monitor and encourage compliance.
- Students that develop symptoms should be evaluated rapidly. One room each in the male and
 female blocks, respectively, should be left unallocated for the use of students on isolation.
 Occupants must follow the standard protocol for shared bathrooms (use last, and to be
 cleaned up after him/her)

• Students are required to each own a COVID-19 pack for personal use.

IMPORTANT TERMINOLOGIES

- Symptoms of COVID-19: Includes fever, cough, shortness of breath, fatigue, muscle or body aches, headache, new loss of taste or smell, sore throat, congestion or runny nose, nausea or vomiting, or diarrhoea.
- Quarantine: Involves separation and restriction of the movement of people who were exposed to a contagious disease to see if they become sick.
- Close Contact for COVID-19: anyone who was within 6 ft. of an infected person for at least 15 minutes starting from 48 hours before the person began feeling sick until the time the patient was isolated (NCDC). The close contacts may include classmates, friends, faculty, staff, workers, etc.
- COVID-19 sanitization/ disinfecting pack: the COVID-19 pack includes a set of cloth mask, a digital thermometer and a bottle of hand sanitizer.

Categories

- Experiencing symptoms of COVID-19 as shown above
- Have been exposed to someone who tested positive for COVID-19
- Your COVID-19 test result came out positive

GENERAL STUDENTS GUIDELINES

- Design a form to obtain travel history on arrival at the hostel. Follow national guidance for international travel (at present, the requirement is 7 days' quarantine and negative COVID test)
- All students will be required to have a sanitization/ disinfecting (COVID-19 pack) and ensure the responsible use of the items.
- Daily self-monitor: All students should monitor for COVID-19 symptoms daily
- Students who upon arrival to campus or class and appear to have COVID-19 symptoms or who become sick during the day with COVID-19 like symptoms, should immediately separate from others, and seek medical attention.

Sub-Committee Members (Core members are in bold fonts)

1. Dr Folashade A. Bello 6. Dr R.S. Ajani

2. **Dr Mary E. Osuh** 7. Dr M.O. Adewumi

3. **Dr O.M. Morakinyo** 8. Dr O.C. Uchendu

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8.0 APPENDICES

8.1 Questionnaire For Needs Assessment Of College Of Medicine Students In Preparation For Resumption

Section A: SOCIO DEMOGRAPHIC CHARACTERISTICS

1. Gender: 1. Male 2. Fema	ile			
2. Age in years (as at last birtho	day):			
3. Marital Status:				
i. Single i	i. Married			
4. Ethnic group: 1. Yoruba.	2. Igbo.	3. Ha	usa.	4. Others
5. Religion: 1. Christianity	2. Mu	ıslim.	3. Tı	aditional
6. Faculty				
7. Department				
8. Level			_	

Section B: Knowledge on Corona Virus(Covid-19) Pandemic

15. Have you heard of the corona virus pandemic? Yes No
16 If yes, where did you get information on the corona virus pandemic?
1. Social Media 2.Friends 3 Family 4. Health Care Workers 5. Internet 6. News

	True	False	I don't know
17 Not all managers with the Common views will develop to govern again			
17. Not all persons with the Corona virus will develop to severe cases			
18. Eating or having contact with wild animals may result in infection			
with the Corona virus			
19. Persons with the Corona virus cannot transmit to others once fever			
is not present.			
20. The isolation period required for suspected/confirmed cases of Covid			
19 is 14 days			

21. The following are signs and symptoms of the corona virus infection

	Yes	No
1. Body temperature above 36°C		
2. Feverish condition		
3. Difficulty in breathing		
4. Dry Cough		
5. Sneezing		
6. General body weakness		
7. Loss of taste		
8. Loss of smell		
9. Dizziness		
10. Diarrheoa		
11. General body weakness		

22. The corona virus infection can be transmitted through the following methods

	Yes	No
1. Droplets		
2. Contact with contaminated surfaces		
3. Air borne		
4. Touching eyes with unwashed hands		
5. Putting unwashed hands into nose		
6. Putting unwashed hands in the mouth		

23. the following are ways of preventing Coronavirus (Covid-19) infection

	Yes	No
1. Regular hand washing with soap and running water		
2. Use of facemask		
3. Use of alcohol based hand-rubs in the absence of water		
4. Social distancing		
5. Avoid putting unwashed hands in eyes, nose and mouth		
6. Ensure gathering places are adequately ventilated		
7. Covering your nose with your hands		
8. Eating ginger, garlic e. t. c		

Perceived concerns of students towards resumption

1 crecived concerns of students towards resumption					
QUESTIONS ON GENERAL CONCERNS	SA	A	U	D	SD
Current standard of infection control measures in medical					
school are effective in preventing the spread of COVID-19					
I am bothered about developing COVID-related symptoms if					
school resumes					
I am bothered about getting infected if school resumes					
I am scared that the symptoms could be life threatening					
I am concerned about the testing arrangements by College of					
Medicine					
I will be discriminated against if tested positive for Covid-19					
I am worried about confidentiality of test results					

QUESTIONS ON CLINICS	SA	A	U	D	SD
I am concerned about patients observing physical distancing					
I am bothered about patients staying in a well-ventilated area					
I am bothered about increased risk of transmission from patients					

QUESTIONS ON ECTURE HALLS	SA	A	U	D	SD
I am concerned about physical distancing within the lecture					
hall.					
I am bothered about hand washing practices of students					
I am bothered about compliance with wearing of facemasks					
during lectures					
I am scared that the symptoms could be life threatening					
I am concerned about proper ventilation at lecture hall					
I am bothered about proper checking of body temperature at the					
entrance.					

QUESTIONS ON HALLS OF RESIDENCE	SA	A	U	D	SD
I am concerned about the number of occupants in the room.					
I am concerned about proper ventilation in the rooms					
I am bothered about increased risk of transmission from visitors					
I am bothered about increased risk of transmission from business vendors at the hostel					
I am concerned about temperature checks at the entrance					

QUESTIONS ON LABORATORIES	SA	A	U	D	SD
I am concerned about physical distancing within the laboratory.					
I am bothered about hand washing practices by students					
Iambotheredaboutcompliancewithwearingoffacemasksduringlaboratory sessions lectures					
I am concerned about proper ventilation at the laboratories					
I will be bothered about proper checking of body temperature at the entrance.					

QUESTIONS ON OPERATING THEATRE	SA	A	U	D	SD
I am concerned about overcrowdingduring theatre sessions					
I am bothered about wearing appropriate PPEs					
I am bothered about increased risk of transmission from patient.					
I am concerned about proper ventilation					
I am concerned about the testing arrangements by College of Medicine					
I will be discriminated against if tested positive for Covid-19					
I am worried about confidentiality of test results					

Perceived needs of students towards resumption

LECTURE HALLS

QUESTIONS	YES	NO
Provision of face-masks		
Availability of hand-washing points		
Provision of hand-sanitizers		
Availability of infra-red thermometers		

HALLS OF RESIDENCE

QUESTIONS	YES	NO
Provision of face-masks		
Availability of hand-washing points		
Provision of hand-sanitizers		
Availability of infra-red thermometers		

LABORATORIES

QUESTIONS	YES	NO
Provision of face-masks		
Availability of hand-washing points		
Provision of hand-sanitizers		
Availability of infra-red thermometers		

OPERATING THEATRES

QUESTIONS	YES	NO
Provision of face-masks and other personal protective		
equipments		
Availability of hand-washing points		
Provision of hand-sanitizers		
Availability of infra-red thermometers		

8.2 Datasheet for number of personnel and facilities in the departments, faculties, institutes and offices of COMUI

8.3 Risk Assessment Tools

8.4 COMUI COVID-19 Health Education Tools 1: SIGNS AND SYMPTOMS OF COVID-19

SIGNS AND SYMPTOMS OF COVID-19

- Most people with COVID-19 develop mild or uncomplicated illness,
- Approximately 14% develop severe disease requiring hospitalization and oxygen support and
- · 5% require admission to an intensive care unit (ICU)
- · Common signs of infection include:
- Respiratory symptoms (nasal congestion, cough with or without sputum production)
- Fever (Temp. =/< 38°C)
- · Sore throat, anorexia, malaise, muscle pain
- · Shortness of breath and breathing difficulties (dyspnea)
- In severe cases, it causes pneumonia, severe acute respiratory syndrome, kidney failure and even,
- · Death.
- Others are: Headache, Neck stiffness, decreased consciousness, lethargy, unexplained bleeding, nausea and persistent vomiting and diarrhoea.

INFECTIVE DOSE OF CORONAVIRUS

- Successful infection require 1000 viral particles (vp) = Exposure X Time
- · Typical environmental spread activities:
- Breath: ≈ 20 vp
- Speaking: ≈ 200 vp
- Cough: ≈ 200 million vp (enough of these remains in air for hours in a poorly ventilated environment)
- Sneeze: ≈ 200 million vp
- "The virus spreads easily between people" (CDC, US) most importantly through close contact from person to person

8.5 COMUI COVID-19 Health Education Tools 2: Hand hygiene Education

Hand Hygiene

- This simply means keeping our hands neat and clean.
 How can we get our hands contaminated?
- > Touching dirty things, objects, the ground, railings, etc
- > Holding materials including money, biro, sticks, ball, door handles etc
- > Shaking hands with our friends or fellow students
- >Touching our nose, mouth and mucus membranes

What is Hand Hygiene?

- Hand Hygiene is a part of personal hygiene and a major component and most important and most effective method of preventing transmission of disease causing organisms including COVID-19.
- Nearly any microorganism can be transmitted from one person to another or from one part of the body to another from contaminated hands.
- To get rid of these organisms from the hand, it must be washed correctly and regularly.

HAND HYGIENE

HAND HYGIENE-

- Alcohol-based hand rubs ("Hand Sanitizer") should ideally be available always with you, in case water is no available, you should use it to clean non-visibly dirty hands.





HAND HYGIENE: How?

- Hands should always be washed with soap and water if hands are visibly soiled, or exposure to spore-forming organisms is proven or strongly suspected.
 Follow the standard hand washing technique and wash hand for at least 20 30 seconds then rinse.
- If resources permit, perform hand rubbing with an alcohol-based preparation when hands are not obviously dirty i.e. not visibly soiled.
- Perform hand hygiene by means of hand rubbing with hand sanitizer, only when hands are not visibly dirty.
- You may leave hand to dry in the air or use personal hand towel (not communal) to dry hands.

HAND HYGIENE- When?

- · Hand hygiene should be performed
- √After contact with the outside environment, soil/floor (playground), or whenever you returned to your room
- Immediately after touching blood, body fluids, non-intact skin, mucous membranes.
- √Always before eating (even snacks) at school or
- √after using the restroom (toilets), and
- ✓ after coughing or sneezing into a tissue as part of respiratory hygiene.







8.6 COMUI COVID-19 Health Education Tools 3: Cough Sneezing Etiquette

Failure to institute simply source control measures in clients (students, lecturers, other staff and visitors) with respiratory symptoms can lead to transmissions. Evidence shows that containing coughs and sneezes can help prevent and control the spread of respiratory illnesses and COVID 19.

COVID 19 can spread by:

- > Coughing, sneezing, talking or singing
- > Touching your face with unwashed hands after touching contaminated surfaces or objects
- > Touching surfaces or objects that are frequently touched by others

Measures of Control of Spread

- > Cover your mouth and nose with a tissue when you cough or sneeze
- > Throw used tissues in the trash
- > If you don't have a tissue, cough or sneeze into your elbow, not your hands
- Wash your hands with soap and water or use alcohol based sanitizer if hand washing station is not readily available, after blowing your nose, coughing and sneezing

2. Visual Alerts

Post visual alerts (in simple languages) at strategic places like cafeteria, saloons, religious centers), with instructions:

- Seeking help early if respiratory symptoms of infection (coughing, sneezing, running nose), are seen
- Use face mask

> Social distancing

Avoid close contact with people who are sick, keep one meter distance from others to

protect them from getting sick too.

> Stay home when you are sick.

If possible, stay home from work, school, and errands when you are sick. This will help

prevent spreading your illness to others.

Institutional Roles

Healthcare facilities should ensure the availability of materials for adhering to

Respiratory Hygiene/Cough Etiquette in waiting areas for students and visitors.

Ensure that mask are easily available, affordable and usage enforced

> Provide tissues and no-touch receptacles for used tissue disposal.

> Provide conveniently located dispensers of alcohol-based hand rub Ensure that

supplies for hand washing (i.e., soap, disposable towels) are consistently available.

References

Centers for Disease Control and Prevention: Coughing and Sneezing

:https://www.cdc.gov/healthywater/hygiene/etiquette/coughing sneezing.html

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PREVENTION



Regularly and thoroughly wash hands with soap under running water or use alcohol-based sanitiser if water is not available



Cover your mouth and nose with your bent elbow or tissue when you cough or sneeze. Dispose properly into a dustbin and sanitise your hands



Avoid touching your eyes, nose, and mouth with unwashed hands



Maintain at least 2 metres distance between yourself and anyone who is coughing or sneezing around you



If you have travelled recently from a country with widespread community transmission of COVID-19 outbreak in the last 14 days, and you have a fever, cough, or breathing difficulty, call NCDC



If you have travelled recently from a country with widespread community transmission of COVID-19 outbreak in the last 14 days, stay at home and isolate yourself

NCDC Toll-free Number: 080097000010

SMS: 08099555577 / Whatsapp: 07087110839 / Mobile: 07036708970

Twitter/Facebook: @NCDCgov WWW. NCDC.GOV.NG

World Health Organization



