

# Safe Human Participant / Field SRC Plan Form

Before completing this form, please consult <u>Principles and Guidance for the Limited Resumption of</u> <u>Human Participant and/or Field SRC Activity</u> and determine if your proposed human participant and/or field SRC activity is permissible during the current phase of SRC resumption.

## For on-campus human participant SRC activities:

- 1. Complete Sections 1, 2, and 4 of this form and submit it to your Department Chair or School Director for their approval and then Dean-level approval.
- Please complete the <u>Request for Access Limited On-Campus SRC Activity Google form</u>, which facilitates tracking and approvals.
- 3. If your human participant SRC activity **can be accomplished while maintaining 2-metre physical distancing**, submit your Chair/Director/Dean-approved application through the <u>Online</u> <u>Ethics Portal</u>.
- 4. If your SRC activity involves human participants where 2-metre physical distancing cannot be maintained, your Chair/Director/Dean-approved application will be reviewed by EHS. Following a successful review by EHS, submit your Chair/Director/Dean/EHS-approved application appended to your ethics protocol through the <u>Online Ethics Portal</u>.
- 5. Submit your REB-approved form to OVPRI for final approval.

### For field- or travel-related human participant SRC activities:

- 1. Please complete Sections 1-4 of this form and submit to your Department Chair or School Director.
- 2. If your human participant SRC activity is taking place in a location where normal access is restricted due to COVID-19 (such as Indigenous, rural, or remote communities), please attach to this form an email or letter of permission from an appropriately authorized individual indicating the willingness and authorization of the community to host these SRC activities.
- 3. Complete the <u>Request for Limited Off-Campus / Field SRC Activity Google Form</u>, which facilitates tracking and approvals.
- 4. If your field- or travel-related human participant SRC activity **can be accomplished while maintaining 2-metre physical distancing**, submit your Chair/Director/Dean-approved application through the <u>Online Ethics Portal</u>.
- 5. If your field- or travel-related SRC activity involves human participants where 2-metre physical distancing cannot be maintained, your Chair/Director/Dean-approved application will be reviewed by EHS. Following a successful review by EHS, submit your Chair/Director/Dean/EHS-approved application appended to your ethics protocol through the <u>Online Ethics Portal</u>.
- 6. Submit your REB-approved form to OVPRI for final approval.

# For field- or travel-related SRC activities that do not involve human participants:

- 1. Please complete Sections 3-4 of this form and submit to your Department Chair or School Director, followed by approval at the Dean level.
- 2. Complete this <u>Request for Limited Off-Campus / Field SRC Activity Google Form</u>, which facilitates tracking and approvals.
- 3. Your Dean or their designate will inform you if your request has been approved.

# **Section 1: Rationale for Resuming SRC Activities**

# **Faculty Member\* Information**

\*Non-faculty members (students, PDFs, RAs) must submit their request through their faculty supervisor.

Name:	
Date Submitted:	
Department/School:	
Faculty:	
Cell Phone	
(for emergency contact):	
Email:	

# **Rationale for SRC Activity**

Provide a rationale for requesting approval for your SRC activity, addressing why the SRC activity cannot be completed virtually or through online means:

# List All Members of the Ryerson Team Participating in the SRC Activity

Name	Project #	Student/One Card #	Email	Туре*

\*Student level and year; PDF; staff; etc.

**Team Participation Acknowledgement** 

I hereby acknowledge by checking this box that the individuals listed above have confirmed their willingness to participate in the proposed SRC activities.

# Section 2: Ryerson Safe Human Participant SRC Activity Plan Form

#### Study/Project Details

Project Title	Existing Approved REB Protocol # (if applicable)	Total # of Participants	Estimated # of participants per week

# SRC Space/Site

Where will in-person human participant research be conducted? If on-campus, provide building and room numbers. If off-campus, provide details in Section 3: Ryerson Safe Field SRC Activity Plan Form.

Building:	
Room #:	

#### **Brief Description**

Briefly describe the area or room in which the human participant SRC activity is to be performed.

#### **Third-Party Site Safety Measures**

If your project involves research at a third-party site, such as a community organization, Indigenous community, private sector partner or affiliated hospital, please describe (or provide the website link to) additional safety measures to Ryerson's guidance, or any issues or restrictions at the third-party site(s) that may affect the proposed work.

#### Authorization for Restricted Location

If your human participant SRC activity is taking place in a location where access is restricted due to COVID-19 (such as Indigenous or remote communities), please attach an email or letter indicating the willingness and authorization of the community to host these SRC activities.

I have attached a document indicating community authorization to host SRC activities.

#### Personnel

How many Ryerson personnel will be in the space where the study is to be performed compared to what was typical pre-COVID-19?

#### **Use of Shared Facilities**

Will your study make use of any shared facilities? If so, please describe how scheduling will be handled by the groups sharing the facilities and note these in your scheduling calendar below.

# **Project Dates**

Project Title	Start Date	End Date

# Scheduling

Provide a description and/or representative schedule or calendar of access for each identified SRC space. Make note of any coordination required for shared spaces or facilities.

A sample weekly calendar with potential slots has been provided for use but can be modified to match particular circumstances. If you have supporting documents you would like to include to support this request (schedules), please attach them to this form for your Chair/Director.



I have attached supporting scheduling documents.

# **Description of Schedule**

## Weekly Schedule

	Monday	Tuesday	Wednesday	Thursday	Friday
8am — 12pm					
12pm _ 4pm					
4pm - 8pm					

# **Additional Considerations**

Biohazard level of research laboratory (NA/BSL-1/BSL-2/BSL-3/Other).

# **Support Service Requirements**

Brief description of support services requested or required (e.g., shipping/receiving, chemical/hazardous waste disposal, liquid N<sub>2</sub> access, equipment calibration/maintenance, increased HVAC, etc.):

# Human Participant SRC Activity Risk Assessment and Mitigation Plan

#### **Close Interactions**

Will close interactions (<2 metres of physical distancing) be required between the study team members and the human participants or their support personnel? If not, why not? If so, please describe what additional safety precautions will be put into place to ensure the safety of all involved, including the provision and use of appropriate PPE.

#### **Study Population**

Who is the study population? What is the age range, and are there any inclusion or exclusion criteria that will ensure the exclusion of individuals at high risk for COVID-19? Alternately, what specific precautions will be taken to mitigate risk? Does the study population comprise members of the Ryerson community, the general public, or both?

#### **Parents and Guardians**

Will any guardians, parents or other persons attend? What specific precautions will be taken to ensure that individuals accompanying participants are not at high risk of contracting COVID-19, or what specific precautions will be taken to mitigate risk?

#### **Screening and Consent**

Will screening and consent take place remotely? If not, why, and how would you accomplish this on-site?

#### **Participant Arrival**

Describe your plans for handling human participants as they arrive to participate in the study. How will you manage the timing and flow of human participants upon arrival, during waiting periods, and on their departure?

#### **Biological Samples**

Will any biological samples be collected? If so, please describe the safety precautions to be put into place to ensure the safety of all involved.

#### **Masks for Human Participants**

Will human participants be able to wear masks for the duration of the study visit? If not, please describe what safety measures will be put in place to ensure the safety of all involved.

**Equipment and Cleaning Protocols** 

What equipment will be used as part of the visit? Describe the cleaning protocols that will be put into place.

#### Shared Surfaces

What shared surfaces will be touched by participants or researchers as part of the visit? Describe the cleaning protocols that will be put into place.

Institutional Collaboration

Does this research involve collaborations with any other institutions? Do they have COVID-19-related protocols that need attention/implementation? Please describe them.

#### Safe Shutdown

In the event a study team member or participant tests positive for COVID-19, what are the plans to follow the <u>guidance for self-isolation</u> and a safe shutdown of the study/project?

Additional Relevant Information

# Section 3: Ryerson Safe Field SRC Activity Plan Form

This document applies only to SRC activities in field or third-party locations within Canada (as allowable by travel restrictions). These guidelines do not apply to SRC activities that are restricted, including activities within or near to vulnerable, isolated, or remote communities without the express formal consent of an appropriate authority within the community. Further guidance pertaining to field SRC activities in restricted locations and internationally will be developed as local conditions and international travel restrictions dictate.

Project Title:	
Proposed Start Date:	
End Date:	

# **SRC Activity Location**

Provide an address and describe the off-campus location(s) where SRC activity will occur.

Address:	

#### Description

1			
1			

#### **Travel Plans**

Describe your plans for all team members to safely travel to the field site.

Plan to Comply with Public Health Directives

Describe your plan to comply with public health directives, including physical distancing, hygiene protocols, and any quarantine or self-isolation requirements upon arrival (and return) as required by public health in the area where you are working and during all aspects of the field SRC activities.

If your field SRC activities involve human participants, only detail those activities outside of human participant SRC activities, which have been detailed in the Safe Human Participant SRC Activity portion of this form.

#### **Additional Safety Measures and Restrictions**

If your project involves SRC activities at a third-party site, such as a community organization, Indigenous community, private sector partner, or affiliated hospital, please describe (or provide the website link to) additional safety measures to Ryerson's guidance, or any issues or restrictions at the third-party site(s) that may affect the proposed work.

#### **Necessary Accommodations**

Is accommodation required? If yes, please describe what the planned accommodations are, and any COVID-19-related precautions being taken.

#### **Non-Participant Interaction**

Does your project require you to interact with other people (who are not study participants)? Why? How many at a time? How will physical distancing be managed?

#### **Certificates/Approvals**

Certificates/Approvals required if relevant (Animal Care, Biohazard, etc.). Note that these must be completed prior to the commencement of field work as per normal operations.

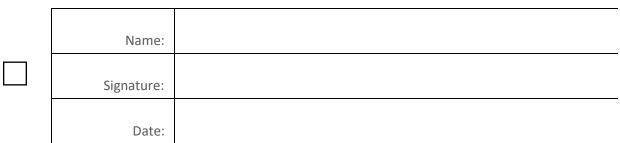
# **Section 4: Confirmation and Approvals**

## **Faculty Member**

By submitting this form to my Chair/Dean, I verify that the content of this form is complete and accurate, and I also agree to abide by this plan, and all Ryerson University and public health directives, should my SRC activities be approved.

# Department/School Comments (if any)

#### Approval



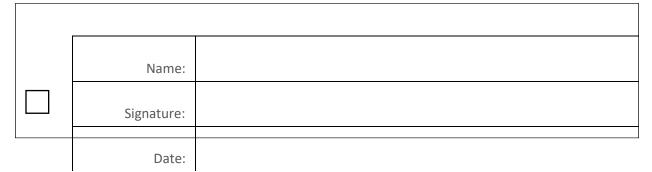
# Faculty Comments (if any)



#### Approval

Name:	
Signature:	
Date:	

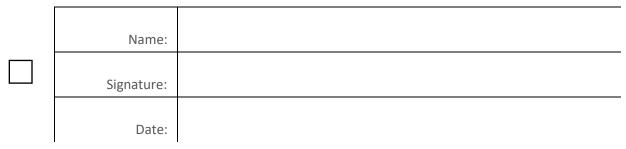
# EHS Comments for Human Participant SRC Without Physical Distancing (if any)



Approval

# **REB** Comments for Human Participant SRC (if any)

# Approval



# **OVPRI Comments for Human Participant SRC (if any)**

## Approval

