

COVID-19 Return-to-Work / Research Resumption Safety Plan

UBC Department of Obstetrics & Gynaecology Providence Health Care (PHC) Location – 9th floor, 1125 Howe St

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INTRODUCTION

Since research curtailment in March 2020 due to the COVID-19 pandemic, UBC and PHC are implementing a gradual, phased resumption of on-site research activities from the beginning of June. In keeping with public health guidelines and institutional policies, on-site research and scholarly activity will be limited to those that cannot be conducted remotely, while the majority of our faculty and staff are to continue working remotely as much as possible. The phased resumption will slowly and responsibly restore clinical services and research across PHC's facilities, and is dependent on (a) alignment of research requirements with PHC's COVID-19 recovery plan, (b) type and extent of clinical services required, (c) ability of the clinical area to support the research, and (d) approved safety plan. For more information, visit <https://med-fom-obgyn.sites.olt.ubc.ca/files/2020/07/COVID-19-Safety-Plan-Guidelines-PHCRI.pdf>, <https://www.vchri.ca/covid-19-information-and-faqs> and <https://research.ubc.ca/planning-phased-resumption-campus-research-scholarship-and-creative-activities>.

This document is the proposed safety plan for the research operations of the ObGyn department at the offices of 1125 Howe Street, Suite 930 at PHC, and is aligned with the VCHRI/PHCRI COVID-19 Return to Work Safety Plan and the UBC FoM Research Resumption Plan for Stage 1. The safety measures and guidelines outlined in this document apply to all ObGyn research activities taking place in PHC and are to be followed by all ObGyn research PIs, staff, and trainees at this site. Where the research is conducted concurrently with clinical care of patients, researchers will also abide by the approved Safety Plan for specific areas at PHC.

The goal of this safety plan is to allow researchers to be able to return to their workspaces and resume important research activities that can only be done on-site, while maintaining safe practices for physical distancing and infection control. It is essential to follow processes that will allow us to resume and/or continue our research while minimizing the risk of COVID-19 spread or infection; the health and well-being of faculty, health professionals, staff, trainees, patients, research participants, and the public is of paramount importance.

This safety plan is meant to be complementary to the policies and procedures of PHC and UBC. It is the responsibility of all research trainees, staff, and investigators to adhere to the terms of this safety plan. As well, the orders, notices, and guidance of the Provincial Health Officer, VCH, and WorkSafeBC will be followed. Where procedures specified in this safety plan are not in alignment with institutional policies, the latter will take precedence. This plan may be updated from time to time as the pandemic situation/response evolves and new information becomes available, or as public health guidance is updated.

RESPONSIBILITIES & TRAINING

1. **Faculty members/Principal Investigators (PIs)** or their designate should review the [PHC safety guidelines](#) and the [Safety Plan Checklist](#) in the first instance. All documentation can be found on the [OBGYN Safety Plan website](#). After reviewing the guide, the PI completes the detailed spreadsheet for unit access and submits to the departmental **Site Research Manager** at <mailto:nkoenig@providencehealth.bc.ca> for review.
 - **Approval by PHC must be granted before any on-site research activity can be resumed/continued.**
 - The PI is responsible for:

- Establishing research, personnel, and maintenance schedules for their research team to ensure adherence to the safety and maximum occupancy rules outlined in this document and following the orders, notices, and guidance of the Provincial Health Officer, PHC, and WorkSafeBC;
- Establishing a research team-specific safety plan in compliance with rules and guidelines in this document and following the orders, notices, and guidance of the Provincial Health Officer, PHC, and WorkSafeBC. PI must ensure all research staff and trainees who are returning/continuing to work in PHC are properly trained in all safety procedures and/or will be appropriately supervised;
- Ensuring that all research personnel under their supervision have read and understood all policies pertaining to their research, and are adhering to this safety plan and following the orders, notices, and guidance of the Provincial Health Officer, PHC, and WorkSafeBC;
- Posting contact information for themselves and the research personnel given permission to enter their research spaces at PHC;
- Communicating to his/her research team, with copy Site Research Manager (n.koenig@providencehealth.bc.ca), and Site Head (d.wilkie@providencehealth.bc.ca), and Administrative Director (andi.martin@ubc.ca) a weekly schedule for all members of the team who are expected to be in the building at any given time/day.
- Procuring and supplying PPE for research staff and trainees for research taking place at 1125 Howe Street. UBC has a procurement policy for PPE; for more information visit <https://srs.ubc.ca/covid-19/health-safety-covid-19/working-safely/personal-protective-equipment/>
- Provide or arrange for training in appropriate PPE use to research personnel as appropriate. Be sure to keep documentation of all training completed.

NOTE: The excel spreadsheet is for your (each PI's) use / for your information if helpful. It serves to document the requests of individual PIs and allows the department to gather and compile resumption request information as a unit. Once the spreadsheet has been reviewed by the Site Research Manager you can then forward to PHC for approval. **Research staff and trainees** are responsible for:

- Completing the online training on [Preventing COVID-19 Infection in the Workplace](#) (mandatory for all UBC employees and students) before returning to work at PHC, or as soon as possible if on-site research is continuing per previous research exemption approvals;
- Monitoring their own health and not going to PHC if they, or someone in their household, is ill. Visit [Thrive Health BC](#) for information about COVID-19 symptoms and testing;
- Reading and understanding this safety document and following all established safety protocols;
- Completing training in proper hand hygiene and use of PPE as applicable. UBC employees at PHC must complete online training modules on hand hygiene and PPE use. Be sure to document all training in writing.
- Following all established regulations and policies pertaining to performing research during the pandemic;

- Reporting concerns regarding COVID-19 safety guidelines and compliance to faculty supervisors as appropriate in the context of UBC and BC privacy regulations;
 - Wearing their hospital-issued photo ID at all times when at PHC, and being prepared to show it to hospital security on request.
2. **PHC Site Research Manager** for the department reviews their individual PI's research request submission(s) and in conjunction with the Administrative Director and Department Head will approve at the departmental level.
 - All resumption requests will be reviewed and evaluated for:
 - Eligibility for the research to be prioritized, according to criteria spelled out in the [PHC documentation \(Safety Plan Guidelines and Safety Plan Checklist\)](#);
 - Rationale for need to resume/continue on-site research activity;
 - Inclusion of adequate safety measures to maximize physical distancing and minimize risk of COVID-19 infection/spread.
 - The OBGYN Site Research Manager based at PHC will liaise with individual research teams who have submitted a project(s) for review to seek clarification or obtain additional information in support of the proposed research resumption, if necessary.
 - The OBGYN Site Research Manager based at PHC will work closely with PHC as well as department Site Head, Associate Head of Research, and Administrative Director in the planning, preparation, implementation, and updating of this safety plan as needed.
 3. **Health Authority (PHC)** reviews department's site-level research resumption plan submissions to provide feedback/approve plan(s).
 4. Once approved by the PHC, the decision will be communicated to the department for further dissemination back to individual PIs. PIs are reminded that, although occupied by the FoM and PHC, **Howe Street is a mixed-use and/or shared building, there may be multiple approvals required before on-site research activities can resume or continue.**
 5. **PHC Building Director(s)** and **ObGyn senior admin team** are responsible for:
 - Working with service providers to ensure adequate housekeeping and security are provided for ObGyn research personnel working in Suite 930, 1125 Howe Street;
 - Purchasing and distributing ABHR / hand sanitizer for common areas;
 - Mediating conflicts, responding to, and investigating reports of non-compliance;
 - Addressing any concerns raised by research faculty/Pis, staff, or trainees regarding work safety and referring them to the appropriate help;
 - Regularly communicating policy updates to all PHC ObGyn faculty, staff, and trainees;
 - Liaising with PHC, as necessary, regarding other building occupants.
 6. **If UBC-affiliated research faculty/staff/trainees have questions concerning their resumption to on-site work:**

UBC Occupational and Preventive Health
 Faculty of Medicine Health and Safety – Paul Gill
 UBC HR Advisors – Ekjot Dhatt / Pui Lam

604-827-4713
 604-827-1982
 604-822-8649 / 604-822-0628

FOM AND HEALTH AUTHORITY RESEARCH GUIDING PRINCIPLES

The following principles will be used to guide decision making and processes by the Faculty of Medicine and Health Authority Research Institutes related to staged-in resumption of on-site activities:

- The health and well-being of faculty, health professionals, trainees, staff, patients and the public is paramount.
- The orders, notices and guidance of the Provincial Health Officer, Health Authorities and WorkSafeBC will be followed.
- Approval for on-site activities (including research, education and administration) will only be granted to those who require on-site resources and cannot conduct this work remotely.
- **All activities that can continue remote work must do so.**
- There will be a staged and coordinated approach across each building and site (includes university, health authority and clinical research spaces).
- Staged resumption of activity may need to be reversed and stricter curtailment conditions imposed in response to public health guidance or changes to the situation at any particular site.
- Equity and personal circumstances will be considered in evaluating how to plan and conduct resumption of on-site activities.

Prioritization guidelines of on-site activities

- COVID-19 research
- Current research activity exemptions as approved previously (no new research or additional related activities)
- Clinical trials concurrent with clinical care
- Graduate students who need to be on-site to complete lab work for graduation as determined by the student's Supervisory Committee for completion of thesis
- Positions required to run core research facilities that are essential for approved on-site research
- Upcoming time sensitive activities that cannot be done remotely and require on-site research access
- Equity considerations for those that cannot work from home for various circumstances
- Non-time sensitive activities that cannot be done remotely for limited access

Contextual information

Given that OBGYN space at PHC is a mixed-use and/or shared building, there may be multiple approvals required before on-site activities can resume or continue. PIs who are approved to resume specific on-site activities will be required to develop a safety plan for approval, and complete and post weekly schedules of research personnel who will be on site at any given time/day. Rotational schedules among different laboratories and clinical areas may be required to accommodate on-site requests and meet occupancy limit requirements. Reporting of non-compliance to the guidelines for Stage 1 research resumption will follow the processes outlined in "Monitoring" section below.

UBC and PHC's building's maximum occupancy at any time for this stage will be limited and safety physical distancing must be adhered to. PHC may implement limited operating hours that research teams would need to comply with, in which case any PI/research team member wanting to work on a shift basis will need to make a request through their Building administrator. It may not be possible to accommodate all requests. It is recognized that a small number of researchers have scientifically justified research protocols that require sampling/observations/data collection over an extended period of time and beyond regular working hours. For special procedures for extended work hours, please note the protocol for work between 6:00 pm – 7:00 am or on weekends and stat holidays will be as follows:

1. The PI must notify their department head / director and building administrator that there will be work continuing beyond the regular hours.
2. Building administrators will notify security ahead of time which lab(s) will have people working extended hours (time, date, location and who).
3. The researchers will post a notice on the door to their research space that late-night or weekend work is underway, indicating name(s) and working hours.
4. The researchers must abide by their department or unit's working-alone policy (i.e., two-person working principle) with a safety plan to ensure that there are regular checks on researchers.
5. PIs are responsible for ensuring that their research staff and trainees are trained in appropriate safety / physical distancing / infection control protocols, as well as cleaning protocols for their research space including cleaning high-contact surfaces, shared equipment, doorknobs and other common areas within their research space on weekends.
6. Researchers must respect the custodial servicing of labs and spaces during regular working hours and be mindful of custodial staff working in other areas of the building while researchers are in their research space afterhours.

PHC COVID-19 RETURN TO WORK SAFETY PLAN

Before considering a return to work please review the [OBGYN Safety Plan website](#) for the appropriate documentation.

PUBLIC HEALTH & INFECTION CONTROL KEY PRINCIPLES & SAFETY PLAN

1. Assess your health before coming to the office/clinic

Research faculty/Pis, staff, and trainees should never come to work with COVID-19-like symptoms. Do not come to work if you feel unwell and alert your PI or manager. If you are experiencing any symptoms of COVID19, you must self-isolate and call 8-1-1 or your primary care provider. Contact tracing will be done by the Provincial Public Health Authority.

Common COVID-19 symptoms according to the WHO are:

- Fever
- Dry cough
- Tiredness
- Loss of taste/smell
- Sore throat

If you develop symptoms consistent with COVID-19 while at work, you should don a surgical/procedure mask, complete any essential tasks, notify your supervisor if appropriate, and then leave work. Testing is strongly recommended, and timing for return-to-work will be determined by Public Health.

If a member of your household has symptoms of COVID-19, do not come into the office/clinic. Please consider your own risk level before entering the building. If you or a loved one belong to a high-risk group for COVID-19, we strongly advise against returning to on campus work at this time. Contact your PI, and Human Resources or Graduate Studies if necessary, to determine a course of action.

If you have traveled within the past 2 weeks outside of Canada, or to a high-risk region within Canada, follow current provincial guidelines for self-quarantine before returning to work.

2. Always maintain a minimum distance of two metres between yourself and others

Return-to-work rules are based heavily on maintaining physical distance from others at all times, whether in the common areas, offices, clinic, or lab spaces. If your research protocol requires that you be in close proximity to another person, discuss the protocol and options for remote study assessment options with your PI and the sponsor of the research study. If on-site study visits with participants cannot be avoided, PPE must be used as appropriate. Personnel should be minimized where feasible, in order to reduce the number of interactions in the workplace. Avoid handshakes and any other physical contact with others. Avoid sharing food or snacks.

Obey directional markings on doors and floors, if available. They are there to prevent accidental proximity. Avoid passing others on stairs whenever possible.

3. Avoid all gatherings

Meetings and training sessions should be done digitally/virtually as much as possible. No lab meetings, journal clubs, seminars, etc. are to be held in-person. If in-person interactions cannot be avoided, maintain physical distance.

4. Hand sanitizing

Sanitize your hands when entering the building and before leaving. Frequently wash your hands or use a ABHR/hand sanitizer station throughout the day. ABHR stations are available throughout the clinical areas of the building and are to be supplied by individual research teams for use in research-only spaces in the building. PHC does not provide sanitizer or other PPE for use in research-only activities that are not concurrent with clinical care.

5. Maintain a sanitized work environment

De-clutter and minimize equipment and supplies so effective environmental cleaning and disinfection can be achieved. Products (e.g. creams, lotions) should be dedicated to a single user, whenever possible. Each person working must have access to a disinfectant wipes and/or spray bottle of disinfectant (70% ethanol or other disinfectant recommended for use by the Province). Individual research teams are responsible for procuring and supplying their own disinfectants for research spaces that are used for research-only activities not concurrent with clinical care. PHC does not provide sanitizer or other PPE for use in research-only activities that are not concurrent with clinical care.

Sanitize your work area before starting your work and at the end of your workday. Shared workstations should be minimized where possible to reduce cross-interaction with surfaces. If sharing of work space cannot be avoided, shared work areas must be sanitized on arrival and at completion of your work. Exchange of papers, shared pens and other office equipment should be minimized/limited to the extent possible. After using shared equipment, spray/wipe it thoroughly with sanitizer/disinfectant wipes, ensuring that any points of contact or potential contamination are covered.

Common areas and high-touch surface areas should be cleaned and disinfected frequently and at least once a day, with a focus on high-touch points such as counter tops, seating areas, doorknobs, handrails, light switches, phones, keyboards, photocopier console, etc. The frequency and assignment of cleaning activities will be defined by the PI in alignment with [VCH IPAC guidelines](#), and cleaning protocols should be posted clearly in work spaces and cleaning supplies made available to research personnel.

Individual PIs and their research teams are responsible for proper cleaning and disinfection of research-specific supplies and equipment. When disinfecting, be sure to leave the disinfectant on for the specified length of contact time to neutralize any remaining organisms. Always read the instructions of the product you are using in order to ensure proper disinfection.

For cleaning and disinfecting electronic and other devices, follow the [VCH IPAC Guidelines for Cleaning and Disinfecting Devices](#).

6. Personal Protective Equipment (PPE) is the last defense

PPE is used to prevent injury and illness in workers when eliminating workplace hazards is not possible. Information around the safe use of PPE at UBC-affiliated work spaces can be found in the [UBC Employee COVID-19 PPE Guidance](#) document. For the most up-to-date PPE recommendations, refer to the IPAC document for the [Ambulatory Care Setting](#).

Cloth masks that are either commercially or personally made are acceptable and encouraged unless additional respiratory protection is indicated due to an underlying medical condition or specified by the research protocol. UBC employees are permitted to use non-medical masks while at work, provided they do not prevent workers from carrying out their duties in a safe way. Non-medical masks are not classed as PPE and cannot be considered as part of workplace safety planning however. If using a non-medical mask at work it is important to [understand the limitations and risks associated with them](#). Each person is responsible for care and cleaning of their own mask.

As PHC does not provide masks or other PPE for research use, research teams are to separately procure PPE for research staff where the research requires direct in-person interactions with research participants that are not concurrent with clinical care. More information, including the process to order PPE, is available on the UBC Safety & Risk Services website at <https://srs.ubc.ca/covid-19/health-safety-covid-19/working-safely/personal-protective-equipment/>.

NOTE: The 2-metre physical distancing and room occupancy measures remain the most effective means of minimizing COVID-19 spread and infection, and are therefore to be followed wherever possible regardless of PPE use.

7. Additional safety protocols for research involving human participants in PHC must be strictly adhered to

a. Optimize Screening

- i. Research study team members will self-assess routinely for COVID-19 symptoms or contacts.
- ii. Research participants will be screened (by phone or email) prior to site visit to determine if they or their family members have developed COVID-19-like symptoms and have recent travel history. If the participant or their family has any COVID-19-like symptoms, the PI should be notified and should determine if the study visit should be postponed, canceled, or replaced by a virtual visit if possible. Any positive responses on the COVID-19 screen will result in delaying any in-person study assessments to a minimum of 14 days after symptom onset and after symptoms have resolved. All COVID-19 screening procedures conducted with research participants, and their responses, are to be documented in writing by research staff.

iii. Participants should be provided a contact number for the research staff, and reminded to notify study staff of any changes in their health prior to coming to their study visit. The BC Centre for Disease Control (BCCDC) website has a [COVID-19 Self-Assessment Tool](#) that participants can use to self-assess, and they are to call 8-1-1 or their primary care provider if they develop any COVID-19-like symptoms.

iv. Study staff should remind participants that they will need to undergo repeated COVID-19 screening assessments at various points throughout their study visit.

v. Research participants will be screened and assessed on arrival to site at first point of entry, for COVID-19 symptoms or contacts. Upon arrival at PHC, participants and their family/caregiver (if applicable/necessary for participant to be accompanied) must be greeted at the entrance by a member of the research team who has received proper training in safety/infection control practices. As part of the check-in process, each participant and companion/caregiver arriving to PHC for their study visit will be asked COVID-19 screening questions. Participants must be asked the following 4 questions:

1. "Do you have a fever?"
2. "Do you have a new-onset cough, shortness of breath, or difficulty breathing?"
3. "Have you travelled outside of the country in the last 14 days?"
4. "Have you been in contact with anyone who is self-isolating due to possible COVID-19 exposure in the last 14 days?"

vi. If research participant cannot effectively be screened by verbal means upon arrival to site at first point of entry, research personnel should use a point-of-care risk assessment to determine their level of risk and the PPE required to provide care safely.

b. Maximize Remote Assessments

i. Research staff working remotely to continue doing so when and where feasible.

ii. Study protocols will be evaluated for any on-site activities that could be reasonably done remotely (by telephone or video conferencing). This will be communicated with the sponsor for approval. Process and criteria for remote study assessments (timing, security, access to technology, IT infrastructure/support etc.) should be defined and approval sought from study sponsor as well as research ethics board, as applicable.

iii. For cleaning and disinfecting electronic and other devices, follow the [VCH Guidelines for Cleaning and Disinfecting Devices](#).

c. Optimize Research Study Visit Bookings

i. Study visit bookings may need to be limited in order to ensure that space occupancy limits are respected and that research participants can properly follow physical distancing recommendations while accessing services, but may need to be prioritized by urgency and time constraints of the research.

ii. Study visit bookings should be made while keeping in mind that resources and spaces are being shared among multiple PIs, research teams, and projects. Safety and maximum room occupancy rules are to be observed at all times. PHC asks that research visits be booked in the afternoon if at all possible, as clinic traffic tends to be busiest on weekday mornings. Alternatively, research visits may be booked on weekends if research staff prefers, provided that appropriate departmental after-hours safety policies are followed.

iii. Vendor (e.g. MRI, ECG, laboratory) requirements and availability should be assessed ahead of booking study visit.

iv. Participant study visits should be optimized to minimize the amount of time participants need to spend on-site. Participants should be encouraged to arrive for their appointment on time but should not be subject to unnecessarily long wait times. Alternative solutions to waiting in common areas should be considered; these can include sending text message and/or calling when participant is ready to be seen. Participants and guests should be encouraged to enter PHC when it is time for their research visit and exit promptly upon completion.

v. When booking study visits with participants, allow a minimum of 15 minutes between participant visits in order to ensure occupant capacity does not exceed maximum occupancy limits/restrictions, and to allow sufficient time to clean and disinfect items, equipment, and space.

d. On-Site In-Person Assessments

i. Guests should not be allowed to accompany research participants for their study visits unless required by the study protocol, or unless there is a clinical need for participant safety or consent. If necessary, a maximum of one companion/caregiver may accompany the research participant to their study visit. However, guests who present with visible COVID-19-like symptoms will not be permitted to enter the facility, for the safety of all patients and staff.

ii. Certified Guide or Service animals are allowed into the facility. No other animals or pets are permitted.

iii. Physical distancing of 2 metres is to be maintained in waiting areas.

iv. Posters and signs are to be installed in and around research spaces to provide visual cues to assist in directing one-way directional flow if appropriate, and to remind participants/guests and staff of frequent hand hygiene, physical distancing, and respiratory hygiene.

v. All staff working with research participants must use PPE and practice proper hand and respiratory hygiene procedures. If physical distancing cannot be maintained due to research activity, mask/gloves/eye protection must be worn by research staff. Safety, physical distancing, and infection control practices per this guidance document must be followed.

vi. At arrival, research participants (and guests if applicable/required) should perform hand hygiene. Ensure they remove gloves, if applicable, and perform hand hygiene. Gloves should not be put back on until the participant/guest is ready to leave following completion of the study visit. If a participant/guest insists on putting on their gloves again, their gloved hands must be sanitized. "Magic gloves", stretchy mittens or similar hand wear are not permitted because they cannot be disinfected adequately.

vii. Research participants/guests who are in good health at arrival and during the study visit are not required to use masks unless they prefer to keep their own mask on. Masks and other PPE will not be routinely issued to research participants or their guests/family. **Only participants with visible and/or self-declared COVID-19-like symptoms, who are not wearing a surgical/procedure mask already, will be provided with, and required to wear, a surgical/procedure mask.** Guests who present with visible COVID-19-like symptoms will be asked to leave the building, for the safety of all patients and staff. The participant will be asked to leave and the research visit terminated should they refuse to comply with safety measures as requested.

viii. If the research space has physical distancing constraints, the use of masks for all research participants, regardless of COVID-19 status, is recommended.

ix. Throughout the research visit, respiratory etiquette should be followed by both research personnel and participants, such as coughing and sneezing into the elbow, and avoid touching the face/mouth/nose/eye/mask (if applicable).

- x. Research participants should be reminded to maintain physical distancing throughout their visit and encouraged to perform hand hygiene frequently. They are to perform hand hygiene at the completion of the research visit, before leaving DHCC.
- xi. Research personnel must perform effective hand hygiene before/during/after each participant, and change to new gloves between each participant.
- xii. Research personnel should avoid unnecessary travel between rooms/areas for research activities or assessments. Consider assigning personnel to rooms, and planning to bring all required supplies for the research visit ahead of time to reduce travel.
- xiii. All research rooms, equipment, and common-use items must be properly cleaned and disinfected between each participant. When possible, single-use equipment and supplies are recommended.

e. Emergency Containment for Suspicious Symptoms During Visit (i.e. not identified during screening)

- i. All activities to be discontinued as soon as it is safe to do so.
- ii. COVID-19-like symptomatic individuals require droplet and contact precautions and are to be placed in isolated room until directed by health care professional. In consultation with the clerical/nursing staff, the research team should identify a dedicated room/space ahead of time, for direct placement of high-risk/COVID-19-like symptomatic individuals in the event that they present to the site.
- iii. Research personnel who interacted with the high-risk/symptomatic individual to perform effective and thorough hand hygiene and then change to clean PPE.
- iv. All surfaces and rooms that have been in contact with the high-risk/symptomatic individual need to be cleaned. Rooms and equipment that have been in contact with participant should be closed to further access until terminal clean can be performed.

TRAFFIC FLOW

1. Health Care Buildings

Our research space is located within health care facilities. Providence Health Care (PHC) have set policies for their spaces and we must respect them.

2. Building Entry

This safety plan relates to the administrative and research space at 1125 Howe Street, 9th floor only. Hospital based patient studies are covered by alternative safety plans.

Enter building by main door. At the entrance, follow directions posted and marked on the floor to assist you in maintaining 2 metres distance. Follow posted protocols for elevators (maximum 2). The offices on the 9th floor require swipe card access at all times so there are no walk ins.

3. Elevators & Stairwells

Follow maximum occupancy posted for elevators at all times. Maintain distance from others while waiting. Priority is to be given to patients and hospital staff.

Staff who are able, are encouraged to use stairwells for access to their office/clinic/research space, in order to reduce elevator crowding. As stairs are bi-directional due to fire code restrictions, be aware and maintain appropriate physical distancing. Priority is to be given to hospital staff.

4. Research Spaces

Follow posted signs and markings on the floor indicating physical distance requirements and directing traffic in to / out of spaces and areas.

If shared space is not large enough to accommodate adequate physical distancing, plan for staggered work schedules and/or use of alternate spaces that will allow physical distancing and occupancy rules to be followed.

OCCUPANCY RESTRICTIONS

UBC and PHC have directed that prioritized and time-sensitive research may resume, with the goal of not exceeding one-third of normal occupancy (i.e., a maximum of 1/3 of the personnel are allowed in the research space at the same time). For example, for a research space with 12 research personnel (including the research PI), no more than 4 people may be in the space at any one time.

Each research team must assess whether members actually require access to the building; any work that can be done remotely should be done at home, so that some research teams will not reach their maximum (1/3) numbers in the building for this first Stage of research resumption. Regardless of the number of people from a given research team permitted in our space at any given time, there are strict occupancy limits for spaces within the building. Do not exceed these numbers for any reason without consulting the department Administrative Director.

Each research faculty/PI must develop a plan to ensure that no more than their allotted number of research team members are on site at any one time. A schedule and contact numbers of research team members must be posted at a central location in a research space that can be accessed by the building managers and security; the PI must communicate to the Administrative Director or designate ahead of time to specify which members will be working at PHC at any given day/time. This plan should be updated on a weekly basis (or any time the schedule changes) and posted.

Prior to resuming work each research team must:

- Ensure there is sufficient PPE available if required;
- Ensure the research space has sufficient sanitizer/bottles/disinfectant wipes for each worker during their shift;
- Develop a working plan for the research space's physical layout (directional flow, physical distancing marker placement, etc). Maximum occupancy can never be exceeded regardless of the number of research personnel that may return.

Once the research space is prepared, shift work may commence.

- Coordinate shifts within shared spaces to remain below maximum occupancy;
- All study team members must be compliant with the department's working alone/in isolation procedures, and the working after-hours procedures, if applicable.

1. Open Office Spaces/Workstations

In accordance with UBC and PHC policy, work that can be done off-site must be performed remotely. Hence open office spaces and workstations should not be heavily used. However, if necessary, maintain distance from others by ensuring only one person per bay unless physical barriers are present to separate workstations and protect workers from cross-interactions. **It is the responsibility of staff to sanitize their own workstations regularly.**

2. Internal Rooms and Offices

Internal rooms for research may be small with restricted space. **Their occupancy limit is set at one.** Exceptions to this rule may be made in the case of larger rooms. In this case, the occupancy limit should be determined in compliance with current physical distancing and occupancy rules and posted at the entrance(s) to these rooms. **The space at 1125 Howe Street has an internal conference room. This space will be limited to two people at one time to allow for social distancing.** If you have a space you think should have a higher occupancy limit than one, contact the Administrative Director.

Offices should be minimally used at this time as much of the work should be conducted remotely whenever possible/feasible.

COMMUNICATIONS PLAN

This document will be disseminated via the [OBGYN website](#) and email to all research faculty/Pis and members of the local safety team. It is the responsibility of Pis to ensure all their research staff and trainees are provided a copy of this document and that they understand the material within.

As updates to restrictions are made by UBC, PHC, or the Province, this document will be updated and reissued accordingly.

MONITORING & COMPLIANCE

It is the research faculty/PI's responsibility to monitor compliance with this COVID-19 safety plan, in accordance with University and Health Authority directives. The department's senior admin team and the VGH Site Research Manager are also available to assist if necessary.

If anyone has concerns regarding compliance, they should contact the Administrative Director.

Non-compliance with this safety plan may result in suspension of access privileges to the building and research facilities.

The resumption of research activity in UBC/VCHRI spaces will be managed in phases, which have been developed and articulated in close collaboration with faculty members, Deans, the UBC Executive, Health Authority staff, and others. To resume research activity successfully will require a commitment from each member of the research community to the principles and plans that the University and Health Authority have established:

- The health and well-being of faculty, trainees, and staff are paramount.
- The orders, notices and guidance of the Provincial Health Officer will be followed.
- Permission to conduct on-site research and scholarship at PHC will be limited to those who require on-site resources and cannot complete the work remotely.
- There will be a phased and coordinated approach across all research units at PHC and in other PHC/UBC research facilities.
- Phased resumption of activity may need to be reversed and stricter curtailment conditions imposed in response to public health guidance or changes to the situation at PHC.
- If an employee has a concern about returning to work, they will have an opportunity to discuss that with their supervisor, Human Resources, and their employee group as appropriate.
- Equity will be considered in evaluating how to plan and conduct research resumption.

Faculty and PI level plans for resuming research activity will reflect these principles, and will account for relevant safety protocols. There will be common protocols around handwashing and physical distancing, building-specific protocols for cleaning, and unique protocols for individual research teams and their research spaces. It is of paramount importance that all ObGyn department members involved in on-site research activities at DHCC comply with these safety protocols at all times. Failure to comply with these protocols may result in access permissions being withdrawn, lead to disciplinary actions being undertaken, and/or more importantly may present a risk to the health and well-being of research personnel and the community.

Individual PIs are responsible for the health and safety of personnel working in their research spaces. Academic Heads of Unit are responsible for the health and safety of everyone who reports to them, and also responsible for ensuring that everyone in the Unit is adequately trained and supervised. The supervisor – the PI or the Administrative Head of Unit – is responsible for investigating any complaints of non-compliance with a specific safety protocol, non-compliance with the guiding principles above or non-compliance with guidance from the Provincial Health Officer. For support in investigating incidents of non-compliance or similar concerns, Administrative Heads of Unit or the Principal Investigator can contact their Human Resources Advisor, the Faculty Relations Senior Manager, or PHC designate.

Circumstances may occur where there is a perception of non-compliance, when in fact that is not the case. An example would be two work colleagues who live in the same home who are seen to be working less than 2 metres apart from one another. In most cases, a quick discussion with the individuals involved may help to resolve any concern.

Where non-compliance with safety protocols is clearly occurring, however, it is important to understand the expected reporting procedure.

1. Non-compliance with a safety protocol within a research space is first reported to the supervisor/PI. Non-compliance on the part of a PI is first reported to the Administrative Head of Unit or Administrative Director.
2. The supervisor (PI or Head of Unit) must investigate the situation without delay by contacting the appropriate people in the team or research space. They may also seek advice from UBC Safety & Risk Services and/or PHC.
3. As part of the investigation, it may be advisable, though not always feasible, to do visual inspection of the research space in question.
4. If a claim about non-compliance is substantiated, the supervisor (PI or Head of Unit) will consult with Human Resources, Faculty Relations, Safety & Risk Services, and/or PHC to determine an appropriate response. The response could include:
 - Suspension of access to on-site facilities;
 - Curtailment of the type or location of activity that can be undertaken at PHC;
 - Depending on the nature and severity of the non-compliance, suspension or other employment-related discipline.
5. Resumption of activity can only occur with the agreement of the supervisor who investigated the complaint, and only when they are satisfied that the conditions leading to the non-compliance have been resolved.

Supervisors are expected to share this document with their teams, to ensure everyone involved in resuming research activity is aware of the importance of respecting the safety protocols put in place, of

the mechanism for investigating complaints of non-compliance, and of the potential consequences for non-compliance.

EMERGENCY PROCEDURES

In the event of an emergency, follow PHC local area-specific emergency procedures, while maintaining appropriate physical distancing and infection control practices as best as possible.

RESEARCHER ACKNOWLEDGMENT

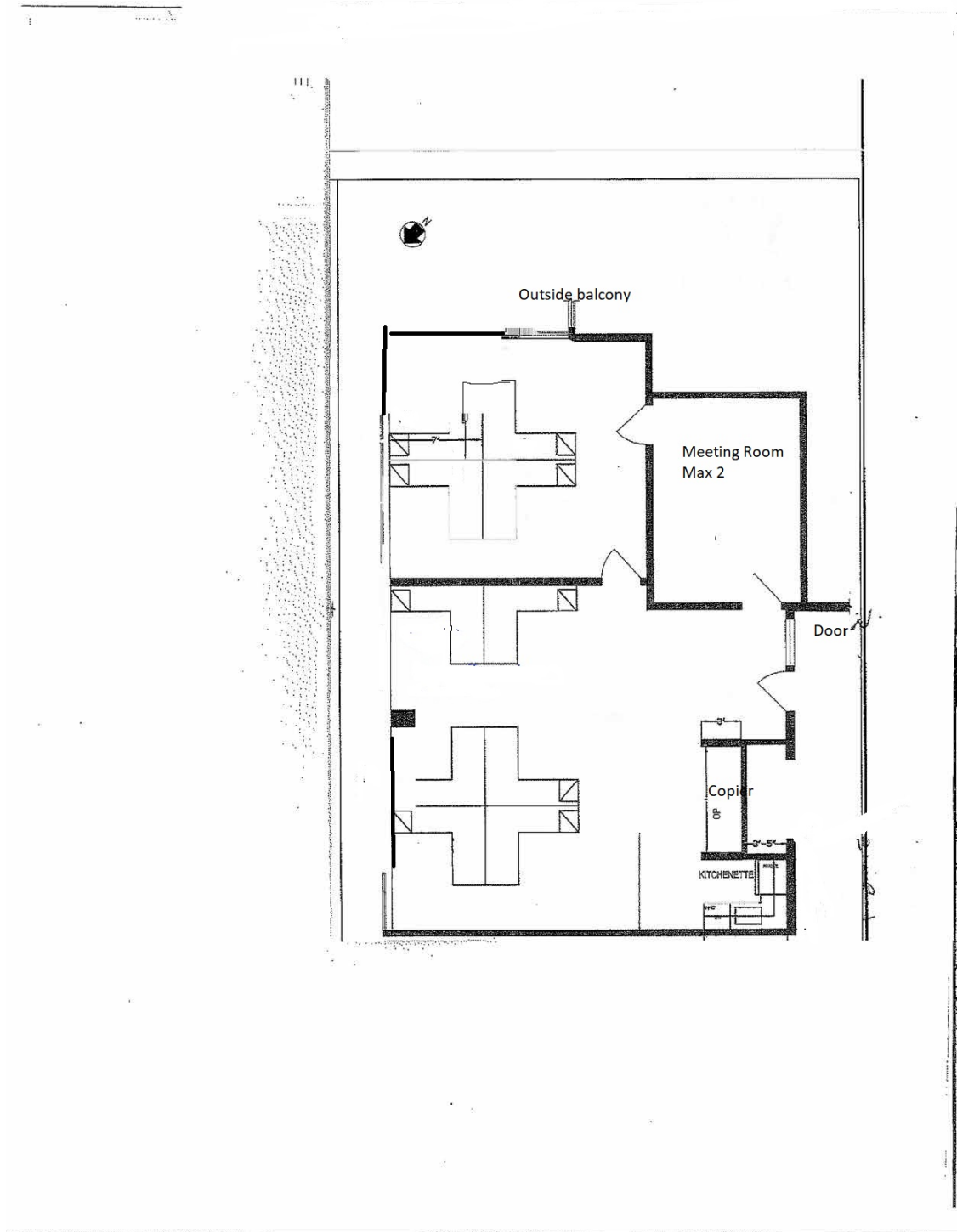
I have read and understand the above guidelines and precautions being taken in ObGyn research spaces at PHC in order to reduce risk to ourselves and others from COVID-19 when prioritized on-site research is resumed. I agree to abide by and to work in compliance with this policy at all times.

Printed Name

Signature

Date (DD-MMM-YYYY)

APPENDIX: 1125 Howe Street Floor Plan



REFERENCES & RESOURCES

All supporting documentation can be found on the [OBGYN Safety Plan](#) website under Research Activities.

[UBC FoM Resumption Safety Plan](#)

[UBC and Health Authority Resumption Guidelines \(version dated 26May2020\)](#)

[PHC Safety Plan Guidelines](#)

[PHC Safety Plan Checklist](#)

[VCH Infection Prevention & Control \(IPAC\) – Cleaning & Disinfection](#)

[UBC COVID-19 PPE Guidelines](#)

[Building Operations COVID-19 website – Service Level Information](#)

[UBC Employees COVID-19 Essential In-person Meetings/Trainings Guidance](#)

[Workplace Physical distancing Planning Tool and Signage Kit](#)

[UBC Facilities COVID-19 information](#)

REVISION HISTORY

Version Number	Version Date	Date Superseded	Reason(s) for Change
v1.0	29-JUL-2020		Original version.