In Phase 3 of recovery from the COVID-19 pandemic we can begin resumption of research involving human participants using a phased-in approach as well as the following principles and timing:

**Overarching principles**

- All studies must be approved by your respective academic unit process. As needed, these units may consult with Acting Associate Vice-President (Research), Kevin Shoemaker or Occupational Health and Safety.
- Studies with participants or researchers with known susceptibilities for COVID-19 will require specific discussions between the respective academic unit, Western Research and/or Occupational Health and Safety as per the links above.
- A phased-in approach will be used to provide time for researchers to develop good safety practices in advance of higher-risk studies.
  - First, studies of people already on campus (students, staff or faculty participants).
  - Later in Phase 3, studies will begin using non-Western participants who travel onto campus, following Western-approved COVID-19 screening mechanisms.
  - Also later in Phase 3, face-to-face studies conducted off-campus can commence and will require adherence to both Western risk mitigation strategies (physical distance, masks, hand hygiene, gloves) and those outlined by the organization or community where the research will be conducted. **Please note:** in the case of off-campus face-to-face meetings, you must provide additional documentation about safety guidelines for the organization where the study will be conducted, along with the adherence plan.
- Please refer to overarching Research Recovery Plan guidelines for further information.

**Studies allowed in Phase 3**

1. All study models approved in Phase 1 and Phase 2.
2. Studies with no more than minimally invasive* data collection methods where physical contact is required to attach data collection instruments, under the following conditions:
   a) Limited to low-risk populations in the early portions of Phase 3.
   b) Acute studies that can be reversed or stopped in the event of a viral rebound.
   c) Researchers and participants will wear surgical masks and practice good hand hygiene while in the research area, even if physical distancing can be achieved.
   d) When physical contact is required, researchers will don surgical masks, face shields and gloves.
   e) Interventions or study procedures are restricted to research manoeuvres/interventions that retain low levels of breathing volumes that can be achieved while wearing a surgical mask or a filtered respiratory gas collection setup that prevents the spread of exhaled droplets (viral and bacteria capture filters are available).
3. Studies conducted within hospital clinics under the oversight of hospital guidelines and personnel.

**Studies delayed until late Phase 3 at least**

4. On-campus face-to-face studies of persons who express higher risks for COVID-19 susceptibility or morbidity.
5. Studies involving data collection at ventilation volumes above levels sufficiently supported while wearing a surgical mask (e.g., exercise, altered inhaled levels of oxygen or carbon dioxide).

**Keep in mind: The safety of our community is paramount: we must remain flexible and prepared to return to an essential services model should external or internal circumstances change.**

*Minimally invasive refers to studies of alert participants asked to do simple tasks with or without instrument monitoring in accordance with approved Human Research Ethics documentation.*