



Canadian Research Insights Council (CRIC)

Post COVID-19 Guidance

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The COVID-19 pandemic has created unprecedented challenges for the research, analytics and insights industry and Canada as a whole. It has also demonstrated the resilience of our industry and the value that we offer to Canadian businesses and organizations to help them navigate through these challenging times. Our industry has been able to quickly and seamlessly transition to a work from home environment and remain open to provide the critical insights businesses and organizations need to understand the dramatic and immediate impact the crisis has had on the priorities, attitudes and behaviours of Canadians. While much of the support offered by our industry has been through custom work for clients, CRIC members have also released more than 100 COVID-19 research studies publicly to help inform the public, the media and other stakeholders about the pandemic's impact. Summaries and links to these studies are being added regularly to the [CRIC COVID-19 Public Opinion Research Hub](#).

The [Canadian Government indicates](#) that current evidence suggest person-to-person spread of COVID-19 is efficient when there is close contact. COVID-19, which causes infections of the nose, throat and lungs, is mostly commonly spread from an infected person by:

- respiratory droplets generated when you cough or sneeze;
- close, prolonged personal contact, such as touching or shaking hands; and
- touching something with the virus on it, then touching your mouth, nose or eyes before washing your hands.

This guidance presents recommendations to help research companies minimize the risk that they will contribute to the spread of COVID-19. This guidance has been developed to highlight the official advice and requirements that are most relevant to Canada's research, analytics and insights industry. It also aims to establish best practices that are aligned with the official guidelines and requirements. As the situation is rapidly evolving, government policy is frequently changing to best reflect the latest developments. This guidance does not take precedence over national or regional laws. This guidance is not legal advice and should not be relied upon as such. CRIC members are responsible for fully complying with all applicable laws and are encouraged to seek legal advice on specific issues.

A key focus of this guidance is supporting the safe return to face-to-face research. Our industry has long used virtual and online methods to conduct research and has been able to quickly transition much of the research that was planned as face-to-face. Face-to-face will remain an essential part of our toolbox and some research can only be done or can much more effectively be done using face-to-face



methodologies. Ensuring that no harm comes to research participants and research staff is a fundamental principle of our standards and, as part of our duty of care, we must ensure that we take all reasonable steps to ensure safe conditions when conducting face-to-face research post COVID-19. A key focus of this guidance is to help face-to-face research facilities, research agencies, and clients be aware of the best practices that should be followed to protect research participants, clients and agency staff upon the return to face-to-face research.

CRIC is here to support our members. Should you have any questions about COVID-19 or any other matter, please contact CRIC's Chief Administrative Officer John Tabone at john.tabone@canadianresearchinsightscouncil.ca or 647-740-9790.

1. Current State of Reopening

As the COVID-19 situation evolves, Canada's Federal, Provincial and Territorial Governments are working towards gradually re-opening the economy. The approaches and timelines vary by province/territory and are constantly evolving to respond to the latest developments related to the outbreak. For a quick snapshot of the latest state of reopening for each province, we recommend reviewing the [National Reopening Government Regulation Tracker](#) offered by the Canadian Business Resilience Network. For additional details, use the links below to review the latest reopening updates for provinces/territories that you operate in or do business in.

Alberta	Northwest Territories	Quebec
BC	Nova Scotia	Saskatchewan
Manitoba	Nunavut	Yukon
New Brunswick	Ontario	
Newfoundland and Labrador	Prince Edward Island	

In addition to the provincial reopening plans you should review the current [travel advisory](#) issued by the Government of Canada.

CRIC also recommends that you review the latest guidance for the industries that your clients operate in. Several industry associations offer extensive resources for re-opening that will provide essential background for guiding the design of a research project. This includes guidance from the [Retail Council of Canada](#), [Restaurants Canada](#), the [Tourism Industry Association of Canada](#) and the [Canadian Association of Manufacturers and Exporters](#).

CRIC is also available to assist members in helping to clarify and confirm the provincial reopening developments. Member companies are encouraged to contact CRIC's Chief Administrative Officer [John Tabone](#) if you require clarification on any official requirements.



2. Sourcing Personal Protective Equipment

With the increased demand for Personal Protective Equipment or PPE (masks, hand sanitizer, surface sanitizers, disposable gloves, infrared thermometer, etc.) several companies have retooled to produce PPE. Consider using the [Rapid Response Platform](#), supported by the Chamber of Commerce and several leading industry associations, to help find suppliers of the PPE that your business requires.

CRIC has also identified one company ([Clear Mask LLC](#)) that currently has supplies of transparent masks available. These masks do not obscure facial expressions to the same extent as other masks and these masks might be preferable when conducting face-to-face research. These masks can be purchased by contacting their distributor Oaktree Products at 1-800-347-1960. A box of 24 masks is \$60 (USD) plus shipping.

3. Contact Tracing using Mobile Devices

Contact tracing using mobile devices is being recommended by some experts as an important tool to help minimize the spread of COVID-19. Traditionally contact tracing is done by having healthcare workers ask those infected with a contagious virus for a list of those they have had contact with. Healthcare workers would then attempt to follow up with those individuals to let them know of the possible risks. This process is very labour intensive and limited by the recollection of those infected with a virus.

The use of mobile device apps that keep records of close contact with other mobile devices would make the process more efficient but opens up privacy concerns. Surveys of Canadians featured in the [CRIC COVID-19 Public Opinion Research hub](#) have found that Canadians are divided in their support for mobile contact tracing apps. Alberta was the first province to launch a contact tracing app and the Canadian government is working on developing a national strategy with respect to mobile contact tracing.

While mobile contact tracing is not research it does bring the topic of privacy of location data to the forefront and it highlights the importance for our industry in following CRIC's high standards when collecting geolocation data. The CRIC adopted [ICC/ESOMAR International Code](#) ensure transparency with data subjects on the information we collect, the purpose for collecting it and with whom it might be shared and in what form. Whether we are collecting primary data (Article 4) or analyzing Secondary data sources (Article 5), our standards ensure that the use of the data will not cause harm to data subjects.

4. General Guidance for Research Companies with Offices

We recommend that all companies in the industry review the [Risk mitigation tool for workplaces/businesses operating during the COVID-19 pandemic](#) published by the Government of Canada. This document highlights the risks to businesses and recommends measures to mitigate those risks. The Canadian Center for Occupational Health and Safety also provides [tips for re-opening businesses](#). Consistent with this guidance, CRIC recommends that companies in our industry do the following as they begin to have staff return to the office:

- 4.1 Continue to encourage work from home while the [risk to Canadians is considered high](#).
- 4.2 Continue to use virtual meetings with clients and suppliers.
- 4.3 Screen employees daily and do not allow them to enter the workplace/office if they have in the past 14 days:
 - experienced any COVID-19 symptom (including fever, cough, sore throat, shortness of breath, difficulty breathing, chills, or headache);
 - been in contact with someone who has or is under investigation for having COVID-19; or
 - travelled outside of Canada or been in contact with someone who has traveled outside of Canada in the past 14 days.
- 4.4 Consider the use of non-contact (infrared) thermometers to assess employees for fever.
- 4.5 Encourage employees at risk of having COVID-19 to [self-isolate](#) for 14 days and use the [self-assessment tool](#) for their province/territory for further guidance.
- 4.6 Communicate with staff to ensure they have accurate information about COVID-19 and how they [can help to reduce the spread](#) including following proper [hand washing](#), using hand sanitizers when soap and water are not available, practicing [physical distancing](#), coughing into their sleeve instead of their hands, and avoiding touching their mouth, nose or eyes.
- 4.7 Provide increased access to hand sanitizers including at reception areas, outside of frequently used doors such as washrooms and at entrances and exits.
- 4.8 Increase the frequency that employee work environments are cleaned and sanitized.
- 4.9 Mitigate risk from exposure to high touch services by frequently [disinfecting](#) high touch surfaces (e.g., shared photocopiers, elevator buttons, washrooms, door handles, etc.) and minimizing sharing of equipment (such as headsets, phones, laptops, keyboards, work spaces, stationery, etc.).
- 4.10 Ensure only [Health Canada approved hard-surface disinfectants and hand sanitizers](#) are used
- 4.11 Promote physical distancing (keeping a distance of 2 metres apart).
- 4.12 Spread-out onsite workers and provide barriers (e.g., plexiglass) and encourage the [proper use](#) of [non-medical masks](#) or personal protective equipment (PPE) where physical distancing requirements cannot be met including at reception desks.
- 4.13 Stagger breaks and working hours to avoid workers congregating at entrances/coffee rooms and to avoid peak hours for those taking public transit.



- 4.14 Avoid in-person meetings and maintain physical distancing where in person meetings are required.
- 4.15 Manage flow of staff within the office by using one-way markings, posters and barriers.
- 4.16 Support and encourage employees to [take care of their mental health](#) and review the Mental Health Commission of Canada's [Resource Hub: Mental health and wellness during the COVID-19 pandemic](#).
- 4.17 Mitigate risk for [employees with higher risk of severe illness](#) and those living in the same household as a vulnerable individual. Employers should identify those vulnerable employees and minimize their risk by allowing them to continue to work from home, adding additional controls to protect them when in the office and modifying their roles to limit their contact with other employees, clients or research participants.

5. Guidance on Face-to-Face Research

5.1 Designing Face-to-face Research

- 5.1.1 Before considering a face-to-face research design, practitioners must first determine whether face-to-face research is permitted by the province/territory based on the current state of reopening (see links provided earlier in this document).
- 5.1.2 Where research will be conducted outside of a research facility, government guidelines must be considered for the intended location (in-home, retail environment, outdoors, etc.)
- 5.1.3 When designing face-to-face research, practitioners should keep in mind that many provinces and territories are following a multi-phase approach to re-opening and will retighten restrictions should it appear that re-opening has led to an increase in the spread of COVID-19. There is also the risk that an outbreak could result in the sudden closure of a facility. Flexibility should be built into the planning of face-to-face research to account for the possible need to postpone the research in the event that the province or territory reintroduces measures that do not permit face-to-face research or that an outbreak causes the temporary closure of a facility.
- 5.1.4 When designing group research, the size of the group should be minimized to accommodate the physical distancing limitations of the research facility or the location of the research.
- 5.1.5 When research is conducted at a facility that will be conducting multiple groups, the start times should be staggered to avoid participants from multiple groups arriving at the same time.

5.2 Research Staff and Consultants Involved in Face-to-Face Research

- 5.2.1 Research staff who are from a [vulnerable population](#) or who are living in the same household as an individual who is should not participate in face-to-face research.
- 5.2.2 Research staff should self-isolate for 14 days and not be involved in face-to-face research in roles that involve contact with other staff or research participants if they have:

- experienced any COVID-19 symptom (including fever, cough, sore throat, shortness of breath, difficulty breathing, chills, or headache);
 - been in contact with someone who has or is under investigation for having COVID-19; or
 - travelled outside of Canada or been in contact with someone who has traveled outside of Canada in the past 14 days.
- 5.2.3 Research staff at risk of having COVID-19 as outlined in 5.2.2 should be encouraged to use the [self-assessment tool](#) applicable for their province/territory before working in roles that involve contact with other staff or research participants. Research staff who are required to self-isolate, if well enough to do so, should be used for other activities that can be done remotely including phone/online data collection, analysis and report writing.
- 5.2.4 Research companies should maintain a roster of staff/consultants who could fill-in on short notice to replace research staff who begin exhibiting symptoms or who have faced potential exposure within 14 days of scheduled face-to-face research. Research staff designated as backups should avoid contact with the research staff they could be required to fill-in for.
- 5.2.5 Where research will be conducted in multiple locations, locally-based research staff/consultants including moderators should be used to minimize travel.
- 5.2.6 Research staff involved in face-to-face research should be trained on how to undertake their activities safely and in accordance with government requirements. This training should include
- Understanding where and when data collection can safely take place.
 - Maintaining physical distancing of 2 metres.
 - The [proper use](#) of non-medical masks and PPE.
 - Avoiding physical contact and touching of own face especially mouth, eyes and nose.
 - Appropriate handling and disinfecting of data collection tools (laptops, pens, papers, handouts, stimulus materials, etc.) and incentives.
 - Sanitization of items/surfaces that research participants have come in contact with.
 - How to ask appropriate health questions to assess for COVID-19 symptoms.
 - Being able to identify potential symptoms of COVID-19.
 - Etiquette for dealing with research participants who exhibit a possible symptom of COVID-19 before or while participating in face-to-face research.
 - Recognizing that participating in face-to-face research in the current environment may cause increased stress and concern. Research staff should offer reassurance to minimize that concern and should be able to answer likely questions from research participants on the safe conduct of face-to-face research post COVID-19.

5.3 Recruiting Participants for Face-to-Face Research

To protect research participants and research staff, the following additional screening questions and steps should be taken when determining the eligibility of individuals to participate in research

- 5.3.1 Potential research participants should be informed of measures taken to protect the safety of participants during face-to-face research including screening of research staff and research participants, maintenance of physical distancing and sanitization measures.
- 5.3.2 Potential research participants must be informed that they will be asked some health-related questions to assess whether they can participate in the research and that these questions are being asked to protect research participants and research staff. Participants should be informed of other purpose(s), if any, for collecting this data and how long it will be retained. If the health information is collected only to protect respondent safety, it should be deleted upon completion of the face-to-face research.
- 5.3.3 Potential research participants who are part of a [vulnerable population](#) or who are living in the same household as an individual who is should not participate in face-to-face research
- 5.3.4 Screening questions should ask potential participants in face-to-face research if they:
- are experiencing any of the potential COVID-19 symptom including fever, cough, sore throat, shortness of breath, difficulty breathing, chills, or headache;
 - have been in contact with someone who has or is under investigation for having COVID-19 in the past 14 days; or
 - have travelled outside of Canada or been in contact with someone who has traveled outside of Canada in the past 14 days.
- 5.3.5 The Canadian Government advises that individuals who say yes to any of the screening questions in 5.3.4 should self-isolate for 14 days. Any research participants answering yes to the questions in 5.3.4 should be excluded from face-to-face research that will take place within 14 days of them experiencing a COVID-19 symptom or within 14 days of the possible exposure (from contact/travel). These individuals are encouraged to use the [self-assessment tool](#) for their province/territory for the latest government advice.
- 5.3.6 Screening questions must confirm that research participants are comfortable wearing a mask and disposable gloves for the duration of the research. They should be informed that they will be provided with mask and gloves upon arrival.
- 5.3.7 If research participants would prefer to bring their own masks and gloves, it should be confirmed that those mask and gloves are consistent with those provided. Researchers should keep in mind that some masks will obscure facial expressions more than others and will offering varying levels of protection. Section 2 of this guide identifies a supplier that offers a transparent mask minimizes the degree to which the mask obscures facial expressions.
- 5.3.8 Confirmed research participants should be asked to inform the research company if their health situation or their risk of exposure changes. The research company should provide a phone number and e-mail address to the potential research participant.
- 5.3.9 Research participants should be notified that the research company will recontact them to reconfirm their participation in advance of the face-to-face research to determine if their health situation or risk of exposure has changed. They should also be informed that they will be required to repeat the self-assessment upon arrival at the location of the face-to-face research.



- 5.3.10 Research participants should be informed ahead of time if non-contact (infrared) thermometers will be used to screen for fever.
- 5.3.11 Research companies should reconfirm with all research participants the day before and the day of the planned face-to-face research. The health screening questions should be repeated during each reconfirmation.
- 5.3.12 Individuals should be provided with the CRIC Research Verification Service Code for this face-to-face research project and they should be encouraged to verify the legitimacy of this research project and address any additional questions they have about the research with the Canadian Research Insights Council.

5.4 Conducting Face-to-Face Research

To protect research participants and research staff and minimize the risk of spreading COVID-19, the following additional measures should be implemented at the location of the face-to-face research.

- 5.4.1 Ensure physical distancing is maintained in all interviewing rooms, client viewing rooms, reception areas and circulation paths. Seating should be arranged to ensure a two-metre separation. Some seating may need to be removed. One-way circulations paths should be used where possible.
- 5.4.2 All surfaces and materials that research participants come in contact with should be sanitized before and after their use. This includes door handles, washrooms, seating, tables, laptops, stationery, handouts and stimulus materials.
- 5.4.3 Stimulus materials that will be reused should be produced using durable material that can easily and effectively be disinfected.
- 5.4.4 Any incentives supplied to research participants should be wrapped, sealed and cleaned before being transferred to participants or should be delivered electronically.
- 5.4.5 Protective shields should be installed at reception areas to maintain separation between research participants and reception staff.
- 5.4.6 Markings should be used to ensure two-metre physical distancing is maintained for research participants when they line up at the reception area.
- 5.4.7 Doors to enter a facility should be propped open where possible to avoid physical contact.
- 5.4.8 Participants should be asked to sanitize their hands upon arrival and be given disposable gloves and a mask that they must wear while at the research location. Participants should be allowed to use their own gloves and masks so long as it is consistent in terms of protection and the extent it obscures facial expressions with those provided by the research facility.
- 5.4.9 Before participating in the research, reception staff should require all potential participants to complete a health screening questionnaire asking them if they have:
 - experienced potential COVID-19 symptoms including fever, cough, sore throat, shortness of breath, difficulty breathing, chills, or headache;

- been in contact with someone who has or is under investigation for having COVID-19 during the past 14 days; or
 - travelled outside of Canada or been in contact with someone who has traveled outside of Canada in the past 14 days.
- 5.4.10 Those answering yes to questions in 5.4.9 or exhibiting potential symptoms should be excluded from the research.
- 5.4.11 As an additional precaution, non-contact (infrared) thermometers could be used to assess participants for fever. Participants should be notified prior to arrival if this measure will be used.
- 5.4.12 Participants in face-to-face research should be encouraged to promptly contact the research facility by phone or e-mail if they learn that they might have had COVID-19 while participating in face-to-face research.
- 5.4.13 Research participants should be informed that their name and contact information will be retained for up to 45 days so that they can be informed should it be discovered that anyone attending the face-to-face research was suspected to have COVID-19 at the time. The research company should ensure that anyone who was potentially exposed to COVID-19 is promptly notified.
- 5.4.14 All physical contact (such as handshakes) should be avoided.
- 5.4.15 All food served should be individually wrapped and beverages should be served in individual bottles or cans. No communal foods should be served.
- 5.4.16 Face-to-face research conducted outside of a research facility (retail, in-home, outdoors, etc.) must comply with COVID-19 guidance that applies to the location. The area where the research is conducted should be cordoned-off to ensure physical distancing between research participants and the researcher and to protect the privacy of the research participants.
- 5.4.17 Clients should be encouraged to observe face-to-face research remotely.