**NJIT**

**Research Continuity and Recovery Plan**

**Phase-2 Research Operation (PRO-2) Plan**

**Recovery Phase-2 Protocol**: Most research operations, whether sponsored through external grants and contracts or internally funded, may be restarted through the approval of department chairs using significant social distancing and safety protocols with restrictions on the number of researchers and staff present in laboratories at one time.

* The Phase 2 restart may require developing flexible work schedules, plan for supply chain issues, and prepare core and fabrication facilities in advance of need. To ensure social distancing requirements and to reduce density of research personnel in university research spaces, the lab directors should consider permitting flexible lab access schedules, work shifts or staggered workdays, and extended facilities support to enable more round-the-clock operation of research facilities. Under no circumstances should safety be sacrificed due to lack of adequate supplies, type, and quality of PPE.
* Research that can be conducted completely remotely should continue to be conducted in that manner. In addition, work that can be done remotely in conjunction with necessary on-campus work should be done remotely.

Research Lab/Facility Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Research Lab/Facility Location (Room #, Building): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Multiple Locations (Yes/No): If Yes, provide other locations: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of Lab/Facility: Dry \_\_\_\_\_\_ Wet \_\_\_\_\_\_\_\_ Computational \_\_\_\_\_\_\_\_\_\_

Use of Hazardous Material: Yes/No Special Utility Needs: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Research Lab/Facility Director Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Research Lab/Facility Director Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Department: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

College: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Information: Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Submitted: \_\_\_\_\_\_\_\_\_\_\_\_

Chair Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

Dean Approval: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_

1. Personnel request for lab access for minimal research operations (list all personnel and their emergency contact information for EHS)

Total number of researchers and staff in the Lab for whom the lab access is requested (lab access to undergraduate students requiring supervision may not be requested in Phase-1):

Personnel Information:

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Rank: Faculty, Research Professor, Post-Doc, Staff, Graduate Student, Undergraduate Student, Staff

Phone: \_\_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_\_

1. Name: \_\_\_\_\_\_\_\_\_\_\_\_\_

Academic Rank: Faculty, Research Professor, Post-Doc, Staff, Graduate Student, Undergraduate Student, Staff

Phone: \_\_\_\_\_\_\_\_\_

Email: \_\_\_\_\_\_\_\_\_\_

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1. Provide a schedule of lab access for above listed researchers. Based on the lab space, equipment, type of research and number of students, you may schedule students to come to the lab on different days (such as one group on MWF and another on Tu, Th, S; or on alternate days) and/or at different times during the days. Such flexible scheduling can help in enforcing social distancing and safety protocols without overcrowding the lab or facility/building.

If multiple locations, please provide lab access schedule for each location.

Lab Access Schedule (Location \_\_\_\_\_\_\_ ):

Weekdays (Monday – Friday):

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Day | Start Time | End Time | # of faculty and Res Professor | # of Post-Docs | # of Graduate Students | # Other Personnel |
| Monday |  |  |  |  |  |  |
| Monday |  |  |  |  |  |  |
| …. |  |  |  |  |  |  |
| Tuesday |  |  |  |  |  |  |
| ….. |  |  |  |  |  |  |
|  |  |  |  |  |  |  |

Saturdays:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Start Time | End Time | # of faculty and Res Professor | # of Post-Docs | # of Graduate Students | # Other Personnel |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

Sundays:

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Start Time | End Time | # of faculty and Res Professor | # of Post-Docs | # of Graduate Students | # Other Personnel |
|  |  |  |  |  |  |
|  |  |  |  |  |  |
|  |  |  |  |  |  |

1. Description for Phase-2 Research Operation (Describe the purpose with a brief summary of the project and lab activities):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C.1. Use of Animals: Yes/No; If yes, describe any protocol for the use of animals with the IUCUC approval information and justification for limited animal research in Phase-2:

IACUC Approval Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

IACUC Protocol Summary \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Location of Lab Facility for Animal Use: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type and Number of Animals to be Used in Phase-2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type and Number of New Animals to be Ordered: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Justification of the Use of Animals in Phase-2: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C.2. Use of Human Subjects: Yes/No (Exempted projects should mark “Yes”). If yes, describe human subject protocol and whether it is already approved and essential to the research project. (Use of human subjects for face-to-face interactions must be well justified, re-approved by institutional IRB for Phase-2 operation, and follow the social distancing and safety protocols.):

IRB Approval Number and Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Human Subject Protocol Summary\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_

Justification for Face-to-Face Interaction: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Justification for the requested Phase-2 Research Operation (PRO-2).

Provide a brief justification for the urgency for Phase-2 research operations:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D.1. Externally Funded Grant Supporting Research:

Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funding Agency: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

D.2. Graduation Requirements

Graduate Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Graduation: \_\_\_\_\_\_

Graduate Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Graduation: \_\_\_\_\_\_

…….

1. Availability of PPE and other supplies needed for personnel and lab safety protocols for Phase-2 research operations.

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1. Anticipated risks and risk management plan in response to COVID-19 outbreak (describe any safety, health and other risks associated with the requested research operation and how they will be minimized through lab safety maintenance, disinfecting and social distancing protocols).

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Please submit a copy of the completed form with approvals from department chair and college dean to the senior vice provost for research ([dhawan@njit.edu](mailto:dhawan@njit.edu))