

# COVID-19: BRI FREQUENTLY ASKED QUESTIONS

Updated: June 5, 2020

This FAQ has been created to answer frequently asked questions about COVID-19 as it relates specifically to the Bloorview Research Institute. We will update this document regularly based on new questions that may arise. The new/updated sections are highlighted.

## **BRI Recovery Process**

### **1. When will the BRI re-open?**

- The BRI is working in close collaboration with the hospital on an internal strategy on how and when to bring our staff, students, volunteers, clients and families back on-site when it is safe to do so. The BRI and TLI working group have submitted a draft plan for review and approval.
- The recovery strategy will be a phased approach.  
Phase 1 (timing still to be determined)
  - Have maximum of 25 per cent of BRI workforce onsite in order to ensure social distancing measures are in place.
  - Research that does not occur in inpatient or clinical areas except regulated clinical trials or COVID-19 research and requiring on-site equipment resumes on-site. Computers and network infrastructure accessible remotely are not considered required on-site equipment.
- We will share more details of the research restart program once it's approved by the hospital leadership team.
- Our priority will be keeping everyone safe and minimizing potential exposure to the COVID-19 virus. We will continue to follow directives from provincial and federal authorities. While we work on a framework for re-opening, we can't provide a timeline when we can start ramping up again.

### **2. I am a staff member and currently working from home. Can I continue to do so for the foreseeable future? With school and camp closures, I have limited daycare options now for my kids.**

- Yes, you can for now as long as you have your manager's approval, but as we start to ramp up our recovery process to re-open BRI, more staff will be returning to work onsite.
- I would recommend speaking to your manager to work out a schedule that meet your needs as well as the organization's.

1. Why is the BRI using this app?

- This app will help with scheduling and tracking the number of staff onsite to maintain a threshold of 25% of the workforce is onsite at all times.
- The app can be downloaded from the App Store and is compatible via web, iOS and Android.

2. Will it track my movements at the BRI?

- No, it is only tracking when a staff or trainee member has entered and left the building. It will not track where a staff member is while they are onsite.

3. Who needs to download this app on their phone?

- Leadership groups (scientist and lab managers who will have staff and trainees scheduled to be onsite) will be set up with accounts and receive training.
- Staff and trainees who are required to be onsite will also be set up with accounts so that they can take, swap and cancel shifts. These staff members will have to sign in and sign off at the end of each shift.

**4. I have some privacy concerns about my employer knowing where I am while at work. Is this really necessary?**

- The application is used to track when staff are arriving at the hospital and when they leave after signing off.
- Please be re-assured that this is information is not being collected for payroll and human resources purposes.
- The information collected through this app is no more extensive than what would be normally collected, the only difference being we are now logging your entry and exit times and collecting this information in a more streamlined way.

***Economic Aid for Medical Research Sector – Update (updated June 5)***

**Federal Subsidy Update**

The funding formula to determine how funds will flow to each research institute is still being determined.

Once the federal government makes their decision, this needs to be approved by the Canadian Research Coordinating Committee before individual research institutes like the BRI can receive these subsidies.

There are no official timelines, however advocacy continues from the leaders of various research institutes across Canada.

**Tri-Council Funded Personnel Subsidy**

CIHR has provided unconfirmed information that another \$291M will flow through the tri-agencies to support staff, trainees, and post-docs that are paid from tri-council grants or awards.

Specifically for CIHR:

- \$8.2M for award extensions of trainees that hold eligible scholarships e.g. CGS, Banting, Vanier and are not receiving other supplements e.g. CERB, CESB.

- \$80M to provide support for approximately 5,000 to 6,000 active CIHR grants; specifically to support staff wages as long as they are not benefitting from other programs e.g. CERB, EI, and redeployment. Approximate amount per project may be based on “wage” expenses.
- There are no timelines available at this point.

**1. Can you provide an overview of the federal government’s economic aid package?**

- Total announcement for medical research institutes across Canada is \$450 million and is an extension of the federal government’s wage support subsidy.
- The funding package will be retroactively effective to approximately mid-March 2020. However, an official expiry date has not been announced yet, although the overall CEWS has been extended to end of August 2020. The wage supports will be to a maximum of 75% of an individual’s salary during the funding period with a maximum of \$847/week.

**2. How much is Holland Bloorview’s allocation of the total aid? (Updated June 3)**

- At this time, we do not have official confirmation about allocations of the \$450 million total package. The formula for allocation of funding per institute is determined by the Secretariat and Treasury Board. Advocacy continues to happen at different tables, including a newer push to change the allocations from the originally proposed 50/50 in two waves to **a more realistic proportion such as 75/25**. Timelines are still not available at this point.
- Funding will be split into two waves:
  - **Wave 1 –roughly 50% of the allocated amount per institution. The timing on when this funding will occur is still to be determined. It will not flow in June communicated earlier.**
  - Wave 2 – the remaining 50%, will require demonstration of ongoing financial aid and will flow at a later date post Wave 1. Eligibility to demonstrate financial aid has not yet been formally communicated; it may mirror the eligibility requirements for the CEWS e.g. drop in revenue of 15 to 30%. A list of eligible expenses will be announced for Wave 2.
- **Other funding sources being explored are provincial reimbursements through the Ministry of Health and philanthropic donations.**

**3. When can Holland Bloorview expect the cash inflow from the federal economic aid?**

- At this time, we do not have official timelines. However, it is anticipated it will take approximately a few weeks before Wave 1 of the funding package is disbursed. Timelines for Wave 2 (if eligible) are unknown.
- Regardless of when the funds arrive, the aid will be retroactively active from mid-March 2020.

**4. How will determinations about which employees’ wages are supported be made?**

- It is anticipated the federal government or their delegates will provide eligible expenditure guidelines as we get closer to the date of disbursement. The institutions will determine based on the eligibility guidelines provided by the federal government on research staff that are eligible for the wage subsidy.
- As always, we are committed to providing you with complete and reliable information in a timely manner. We are certain the information provided above will evolve in the coming weeks, and further details will be provided.

### **Research Studies**

#### **1. I have a study ongoing, am I allowed to continue?**

- a. As of March 17, 2020 Holland Bloorview has paused all research activities until further notice, with two exceptions:
  - i. regulated clinical trials.
  - ii. REB-approved research that is or will be conducted virtually (all activities must be virtual)
- b. Recruitment of new participants for studies is not permitted until further notice.
- c. All on-site data collection is paused. Instead, consider virtual alternatives of data collection, obtaining consent and training.

#### **2. How can I get approval to do my research activities remotely?**

- a. The Holland Bloorview Research Ethics Board (REB) has developed an expedited amendment process for those seeking approval to reduce and/or replace in-person participant interactions. Please see the [REB website](#) for more information or contact Marie Steele, Research Ethics Manager, at [msteele@hollandbloorview.ca](mailto:msteele@hollandbloorview.ca)

#### **3. I am an investigator. Can I ask REB to review my study now so that when pandemic restrictions on research are lifted, I can start the recruitment process immediately?**

- a. Yes you can. Please submit your study to REB so they can be reviewed online. Please appreciate that the review process may take some time. We also don't know at this point when you can start actively recruiting.

#### **4. Will BRI consider permitting any new non-COVID related studies to be conducted virtually while we wait for in-person studies to re-start?**

- a. Yes. We will consider those. Any studies that can be conducted virtually can be submitted to REB's [electronic platform](#) for approval.
- b. New studies will take about two weeks to be approved by REB.

### **COVID-19 Related Funding Opportunities**

#### **5. I'm interested in any research funding related to COVID-19. Can you help me find these grants?**

- a. Here are links to COVID-19 related funding from the tri-councils:
  - i. [CIHR Updates](#)
  - ii. [NSERC Updates](#)
  - iii. [SSHRC \(including NFRF updates\)](#)
- b. Meghann Proulx, Grants, Contracts & Awards Officer, sends out a list of the latest COVID-related funding opportunities every Wednesday. If you have any questions, please email her at [meghann.proulx@hollandbloorview.ca](mailto:meghann.proulx@hollandbloorview.ca) for more details.

### **Work Arrangements**

#### **6. Am I able to work at the hospital?**

- a. **Staff** – staff can remain on-site if they are conducting essential business needed to be completed at the hospital. For any other business, it must be deferred or completed remotely. To protect our on-site BRI staff, the hospital has implemented active screening measures to ensure no one at risk is entering the building. Please note that all staff must enter the building through the Bloorview School entrance for screening until further notice.
- b. **Research Students and Trainees** – students and trainees have been asked not to come on-site at least until further notice.

#### **7. How can I get access to hospital systems to work from home?**

- a. Hospital IS will be providing remote access to Citrix or VPN for scientists and research staff to work remotely. Please appreciate that it will take some time to scale up remote access for a larger volume of users.
- b. VPN access to BRI Network: Users with BRI credentials have been notified about obtaining VPN access to the BRI network drives. If you have not received a notification, please contact [Ka Lun Tam](#) by email.

Note: Those with Holland Bloorview laptops may be required to come on-site to install VPN. Those with personal devices only will be provided Citrix access remotely.

#### **8. How can I hold meetings remotely?**

- a. BRI has expanded our Zoom licenses to handle the increased demand. The recording option may be used; however, it is essential to record to your local hard drive on Holland Bloorview-sanctioned machines for immediate transfer to hospital servers. Do NOT save your recordings to the cloud option provided by Zoom.
- b. To increase Zoom meeting security, BRI has disabled the one-click join feature. This update will require attendees to enter the meeting password to join the Zoom conference. Please remember to communicate the password to meeting attendees when sending out your Zoom meeting link.
- c. If you are using Zoom for data collection, please inform your participants to only use their first name when joining the session.
- d. The chat feature on the BRI Zoom accounts has been disabled.

Further questions with regards to Zoom can be directed to [Wei Su](#)

### **Hospital's Upgrade to Microsoft Office 2016**

1. I heard that IS is upgrading our computer systems to Microsoft Office 2016. How does this impact me if I have MS Office 2010?

- The hospital has migrated to MS Office 2016 because MS Office 2010 is no longer supported.
- MS Office 2016 comes Word, PowerPoint, Excel and Outlook.
- Changes to the upgrade include: removal of Access and Visio.
  - If you still need Access or Visio, please contact the Help Desk as it can be reinstated for a fee.
- It also does not come with OneDrive or Teams as this is not supported by the hospital's license.
- This upgrade will occur automatically for those who are on VPN, while others will be upgraded once they are back onsite.

### **Travel Expenses**

9. I have incurred travel expenses as a result of the impacts of the COVID-19 pandemic, what should I do?

- a. The three federal granting agencies will [reimburse](#) non-refundable travel fees from agency funds due to the impacts of COVID-19. More details can be found on their website:  
<https://cihr-irsc.gc.ca/e/51898.html>

Here are the links for each of the three federal grant agencies regarding COVID-19 impacts:

- [CIHR](#) (updated Mar 23)
  - [NSERC](#)
  - [SSHRC](#) (updated Mar 23)
- b. For all other funding, researchers are asked to speak with their funding agencies to determine if the expenses are eligible as per the agencies' guidelines. Those who incurred personal out-of-pocket expenses should email Mani Kang, Director of Research Operations, at [mkang@hollandbloorview.ca](mailto:mkang@hollandbloorview.ca)

### **Other Questions**

10. I have a package arriving at Holland Bloorview. Will it be delivered to my office or lab?

- a. No, packages are no longer being delivered to BRI. You must arrange your own pickup for packages with receiving.

If you have other questions/concerns, please contact Mani Kang, Director of Research Operations, at [mkang@hollandbloorview.ca](mailto:mkang@hollandbloorview.ca)

For Holland Bloorview's latest updates on COVID-19, visit: [www.hollandbloorview.ca](http://www.hollandbloorview.ca)

## General information on the COVID-19

### What is a coronavirus/ novel coronavirus (COVID-19)?

Coronaviruses are a large family of viruses that are known to cause illness ranging from the common cold to more severe diseases such as Middle East Respiratory Syndrome (MERS) and Severe Acute Respiratory Syndrome (SARS). A novel coronavirus (COVID-19) is a new strain of coronavirus that has not been previously identified in humans.

### What are the symptoms of someone infected with a coronavirus?

Common signs include respiratory symptoms, fever, cough, shortness of breath, and breathing difficulties. Most cases are mild. In more severe cases, infection can cause pneumonia, severe acute respiratory syndrome, kidney failure and in rare cases death.

### Can coronaviruses be transmitted from person to person?

Yes, some coronaviruses can be transmitted from person to person, usually after close contact (two meters) with an infected person. Transmission occurs through droplets when a person coughs or sneezes.

### Is there a vaccine available for this infection?

At this time there isn't a vaccine available for the COVID-19.

### What is a pandemic? Are we in one?

A pandemic is the worldwide spread of a new disease impacting populations over a large geographic area. It occurs when a new virus emerges and spreads around the world, and most people do not have immunity. The World Health Organization and local health officials consider a number of factors and have not declared the current coronavirus situation a pandemic.

As of March 11, the World Health Organization has declared the COVID-19 situation a global pandemic.

### Are there reliable places I can get more information?

Yes, you can get more information at any of these sites:

- [Public Health Ontario](#)
- [Public Health Agency of Canada](#)
- [Ontario Hospital Association](#)
- [World Health Organization](#)
- [Centres for Disease Control and Prevention](#)

### What's the difference between seasonal coronaviruses and Covid-19?

The seasonal coronavirus is NOT the same as the novel coronavirus, COVID-19. Seasonal coronaviruses are common and are typically associated with mild illnesses (including the common cold), and can spread easily between people. Common symptoms include fever, cough, shortness of breath and breathing difficulties. There are strains of coronaviruses that have caused more severe illness in humans in the past, such as Severe Acute Respiratory Syndrome (SARS), Middle East Respiratory Syndrome (MERS) and now, the novel coronavirus (COVID-19). COVID-19 is a new strain that has not been previously identified in humans. The most common symptoms of COVID-19 are fever, tiredness, and dry cough

