**PROTOCOL FOR CARRYING OUT COVID-19 RESEARCH ON TRINITY PREMISES**

**May 5th, 2020**

1. PI informs Dean of Research (DoR) of intention to do Covid-19 Research on Trinity premises
2. PI gets sign off from their Head of School or Director of TRI as appropriate
3. DoR reviews request together with a cohort of relevant reviewers - namely Deans, HoSs and Directors of TRIs and relevant Estates & Facilities personnel
4. Following agreement from the review panel the DoR signs an access permission form
5. PI provides list of those who need access to HoS/Director of TRIs so they can update essential staff/student lists, so that appropriate access paperwork can be generated
6. PI provides clear instructions to team about best practice and behaviour while on Trinity premises.

**FORM REQUESTING ACCESS TO TRINITY PREMISES FOR THE PURPOSE OF COVID-19 RESEARCH**

**NAME:**

**CONTACT DETAILS:**

**BRIEF OVERVIEW OF INTENDED RESEARCH**

(paragraph)

**FUNDING SOURCE (if funded):**

**EXPECTED START DATE :**

**PEOPLE**

|  |  |
| --- | --- |
| Please name the existing staff and students that require access  |  List of staff/students  |
| Name the individual or individuals who will be physically present on-site to supervise the research at all times |  |
| If you have plans to hire, please give details | Number of hires, level of hire, expected dates? |
| Beyond your own research team, name the individuals who will need access to College to help with the research | List of people and roles |
| Have these people been made aware of your requirements and agreed to be involved? | YES  NO  |

**CONTAINMENT LEVEL 3 REQUIREMENTS**

|  |  |
| --- | --- |
| Does this require containment level 3 facilities?  |  YES  NO  |
| Have you worked through the Collegewide CL3 committee to get written agreement to use the CL3 facilities\* | YES  NO Please attach written agreement |

\*These facilities are limited and it should not be assumed that your work can be accommodated. You may also have to cover costs associated with use of these facilities.

**CMU Facilities**

|  |  |
| --- | --- |
| Does this work require access to the CMU facilities?  |  YES  NO  |
| Has the CMU agreed to facilitate your needs? | YES  NO  |

**LOCATION OF RESEARCH/PHYSICAL FACILITIES**

|  |  |
| --- | --- |
| What locations will be used to carry out the research? | List of locations – please list Primary School, building/lab and room numbers |
| What other access to physical, operational and/or characterisation facilities will be needed?'  | e.g. shared instrumentation, loading bays, delivery services, waste facilities …List location of these facilities |
| Have the managers/owners of these facilities agreed that you can have access? | YES  NO  |

**HEALTH & SAFETY**

|  |  |
| --- | --- |
| Describe any additional safety issues which need to be considered in light of a skeleton operation on college properties i.e. fire safety |  |
| Is PPE equipment needed for your research? | YES  NO  |
| Have you a plan to maintain your PPE supply required for these projects during the current worldwide PPE shortage? |  YES  NO N/A  |
| If involving biological agents, have you completed the University Biological Project risk assessment; prepared SOPs and submitted to the University Biological Safety Committee for review? |  YES  NO  |
| If involving biological agents, have you notified the HSA of your first-time use? |  YES  NO  |
| If research involves GMM/GMO have you notified the EPA? |  YES  NO  |
| Do you foresee any additional major risks not covered above? |  |

|  |  |
| --- | --- |
| Can you confirm that NONE of the named researchers requiring access are in the at risk group according to the HSE COVID-19 guidelines?  |  I confirm  |

|  |  |
| --- | --- |
| Confirm that you understand that if any of the information is found to be incorrect approval can be revoked |  I confirm  |

Finally, please attach a short **plan** that will be circulated to your team to ensure best practices are followed. The plan should include information about how many people are allowed access at a time, any rota plans, directions to register with SafeZone while on campus, rules around use of lifts and other shared facilities on the premises, information about who else might be sharing the facilities, information on how access to PPE is managed, directions on how to safe guard against lone working, and any details of other best practice in your domain.

Signatures

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PI HoS or Academic Director of TRI