

Guidelines for Safe Implementation of Field Survey During COVID-19

(Guidelines Developed based on WHO, ICMR, Govt. of India/Health Department, Govt. of Rajasthan)

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Table of Contents

CHAPTER 1: BACKGROUND	3
IIHMR University	3
Survey Research	3
Overview of COVID 19 pandemic.....	4
Scope of this document	4
Objectives of fieldwork guidelines	4
CHAPTER 2: GUIDELINES AND PROTOCOLS DURING FIELDWORK	5
Key messages for data collection during COVID-19.....	5
Checklist for protocols and procedures before initiating fieldwork.....	5
Planning for fieldwork and training of field investigators	6
Screening and Tracking.....	6
Standard Guidelines for Fieldwork	6
Field working sites and procedures	6
Measures to be taken <i>BEFORE</i> data collection	7
Measures to be taken <i>DURING</i> data collection	7
Conduct the interviews/ discussions following the required measures.....	7
Measures to be taken <i>AFTER</i> data collection.....	8
Guidelines during and outside of data collection activities.....	8
CHAPTER 3: GUIDELINES DURING TRAVEL AND MOVEMENT OF TEAM IN FIELD	10
Travel Guidelines	10
Vehicles Guidelines.....	10
Hygiene Guidelines	10
Supplies, Cleaning, & Disinfection.....	11
CHAPTER 4: ESSENTIAL AND OTHER GENERAL SAFE GUIDELINES DURING FIELDWORK	12
General Safe Practices.....	12
Staying in the field	12
Accommodation guidelines.....	12
Essential supplies for staff screening and sanitation.....	12
Other precautionary measures during emergency	13
Continuity Planning.....	13
Wrap Up	13

CHAPTER 1: BACKGROUND

IHMR University

IHMR University is a specialized research University in management research, postgraduate education, and training in the health sector. The University aims to generate new knowledge and technologies to provide evidence and inputs for developing effective policies and health interventions and strategies. The faculty is multi-disciplinary that represents public health, management, economics, statistics, demography, social and behavioural sciences, rural development, and pharmaceutical sector.

The University has collaborations with major universities and institutions like Johns Hopkins University, USA; Chester University, UK; University of Montreal, Canada; Curtin University, Australia; and BP Koirala Institute of Public Health, Nepal. The Ministry of Health and Family Welfare, Government of India identified it as 'Institute of Excellence' for its significant contribution to strengthening health systems by promoting and conducting health policy and program management, research, training, and capacity building. Over the past three and half decades, the University is engaged in research, education and capacity building in the core areas of Public Health, Health and Hospital Management, Pharmaceutical Management, Health Economics and Finance, Population and Reproductive Health, Rural Management, Institutional Networking and capacity building.

IHMR is in its fourth decade of research in the healthcare sector. Over the past decades the institution has conducted more than 800 research projects and studies in health policies and programs at the national and international levels. These studies have high relevance to health policies and programs. IHMR has extensively worked on assignments/consultancies for studies and projects funded by various bilateral agencies, the Government of India, and State Governments.

These research areas include health system, human resource and training, family welfare, maternal and child health, medical education, health management information system, evaluation, education and communication, information technology survey, project implementation plan, health economics and financing, drugs, strategy planning, HIV/AIDS, nutrition, communication behaviour, national health policy, health insurance, quality assurance, operations research, reproductive health, and gender health. In this endeavour, the IHMR University continues its efforts in expanding its focus on research in policy and program management in the health sector.

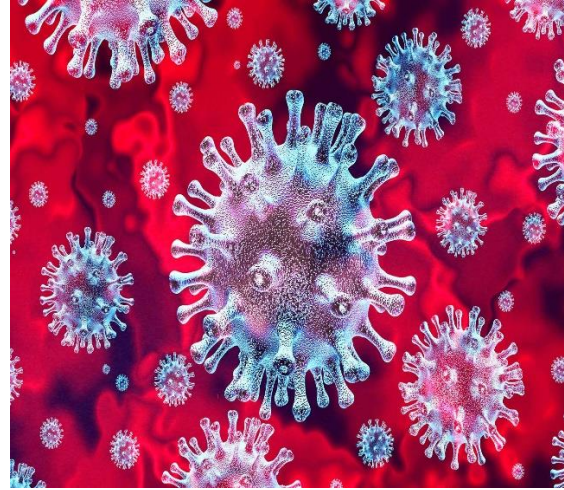
Survey Research

A survey is a list of questions aimed at extracting specific data from a group of people. Surveys may be conducted by phone, mail, via the internet, and sometimes face-to-face on busy street corners or in malls. Surveys are used to increase knowledge in fields such as social research and demography. Survey research is often used to assess thoughts, opinions, and feelings. Surveys can be specific and limited, or they can have more global, widespread goals. Psychologists and sociologists often use surveys to analyze behavior, while it is also used to meet the more pragmatic needs of the media, such as, in evaluating political candidates, public health officials, professional organizations, and advertising and marketing directors. Survey research has also been employed in various medical and surgical fields to gather information about healthcare personnel's practice patterns and professional attitudes toward various clinical problems and diseases. Healthcare professionals that may be enrolled in survey studies include physicians, nurses, and physical therapists, among others. A survey consists of a predetermined set of questions that are given to a sample. With a representative sample, that is, one that is representative of the larger population of interest, one can describe the attitudes of the population from

which the sample was drawn. Further, one can compare the attitudes of different populations as well as look for changes in attitudes over time. A good sample selection is key as it allows one to generalize the findings from the sample to the population, which is the whole purpose of survey research.

Overview of COVID 19 pandemic

The coronavirus disease (COVID-19) which originated in the Wuhan city of China in December 2019 was characterized as a pandemic by the World Health Organization (WHO) on 11 March 2020. Common symptoms of the disease include fever, dry cough, shortness of breath, fatigue, and other symptoms. While most cases are mild, people with underlying health conditions (diabetes, heart and lung diseases, HIV, etc.) and from elderly age groups are thought to be at highest risk. Affecting almost every country in the world, many governments have enforced and physical distancing measures ordered the closure of borders, imposed nationwide shutdown of non-essential services, and restriction of movements. The most vulnerable populations are the hardest hit with limited access to



health-care facilities and no social support system for covering loss of income due to disrupted livelihoods.

The rapid spread of the disease globally is linked to the ease of human to human infection. According to WHO, “the disease can spread from person to person through small droplets from the nose or mouth which are spread when a person with COVID-19 coughs or exhales. These droplets land on objects and surfaces around the person. Other people then catch COVID-19 by touching these objects or surfaces, then touching their eyes, nose, or mouth. People can also catch COVID-19 if they breathe in droplets from a person with COVID-19 who coughs out or exhales droplets”.

Scope of this document

The guidelines outlined in this document will assist field data collectors to practice safe fieldwork. It will help to ensure the COVID-19 health and safety considerations for the protection of all research/survey team members and target/sample population.

Objectives of COVID-19 fieldwork guidelines

1. To design a checklist for protocols and procedures before initiating fieldwork
2. To develop guidelines for planning for fieldwork and training of field investigators
3. To develop fieldwork sites procedures
4. To assist the field team with standard guidelines before, during and after data collection
5. To develop guidelines during travel from one field site to other
6. To design general safe and hygienic practices during field data collection
7. To develop accommodation protocols for field team in the working site
8. To design emergency protocols, continuity planning, and wrap up procedures.

CHAPTER 2: GUIDELINES AND PROTOCOLS DURING FIELDWORK

Key messages for data collection during COVID-19

- Always ensure the protection and safety of both staff members as well as members of local communities, while trying to provide key information on the humanitarian situation as well as respecting containment measures always.
- Ensure all mandatory measures (based on both national and global guidance) for protection of staff members and local communities are being taken
- Ensure only critical and essential data collection exercises are carried out during their period. All other nonessential exercises can be put on hold until the risk subsides
- Ensure there is no unnecessary duplication of data collection efforts by closely coordinating all such efforts with stakeholders of the humanitarian community and promoting Coordinated Needs Assessment wherever relevant.
- Ensure all data collection efforts undertaken during this period are done so in the most reliable, transparent and methodologically robust manner possible given the circumstances (for example, being aware of respondent biases that may result from remote data collection techniques, factoring these biases into the analysis and declaring all known biases and limitations within the information products), to be able to provide an accurate and reliable evidence base for decision-making.
- Ensure there are stronger and more stringent data management systems and processes as a prerequisite for switching to remote data collection, specifically in terms of data protection and management of personally identifiable data as well as data cleaning and processing to ensure the highest possible quality of data collected during this period.
- Throughout, ensure adherence to the core values of IIHMR University that are consistent with COVID-19 and including Institutional Review Board (IRB) guidelines.

Checklist for protocols and procedures before initiating fieldwork

- Review physical distancing, equipment handling, disinfection procedures, signs/symptoms of COVID-19
- Communication options in the field, check-in procedures, and emergency procedures.
- Team members should have dedicated PPE, provisions, and supplies, if feasible, to minimize sharing.
- Team members have the right to refuse participation without fear of penalty if they feel conditions are unsafe.
- Each team member should be asymptomatic for at least two weeks before fieldwork and will not participate should they feel ill or have reasonable cause to believe they have been exposed to COVID-19.
- Maintain reliable communication to receive updates or get assistance
- Remain aware of local public health requirements and COVID-19 guidelines issued by central and state government
- Review responsible conduct in the field, community, minimize contact with the public.
- Backup plan or flexibility at any time to self-isolate or return home.

- Follow reporting protocol if you, a team member/ colleague, or an immediate family member tests positive.

Planning for fieldwork and training of field investigators

- Try to ensure questionnaires are no longer than 15 minutes to avoid prolonged
- Training of field investigators needs to be conducted in a manner that ensures the recommended at least 1-meter distance between persons.
- Conduct it in a large enough room with good ventilation, spreading participants out, or split the group up into smaller units and conduct several rounds of training if needed
- As much as possible, use field investigators that are familiar with mobile data collection to avoid having to be close to them while training on the tool (field investigators with more experience will require less support from facilitators meaning less close interactions are required)
- Alternatively, training can be conducted remotely over Skype or similar communication platforms. If this is the case, make sure that all participants have access to a computer or phone and that the training material is shared with the participants before training. If training is conducted remotely, it is important that the participants have prior experience in mobile data collection and ideally are familiar with your organization/team.

Screening and Tracking

1. All researchers must self-monitor for symptoms daily. If a researcher is feeling unwell in any way, they are to stop work, inform their team and supervisor immediately, and complete the Government of India COVID-19 self-assessment tool. The results of this tool will determine the next steps for that person.
2. Keep detailed records of where and when you have traveled, who you have traveled with, and the locations of the fieldwork such that tracking can be provided to the local public health unit should a researcher become ill with COVID-19.

Standard Guidelines for Fieldwork

- The participation of each team member in the fieldwork must be entirely voluntary.
- All researchers must conduct daily self-monitoring for symptoms and should be encouraged to use the Government of India COVID-19 self-assessment tool.
- If individuals are feeling unwell in any way or are advised to initiate further medical follow up on completion of the self-assessment tool, they should immediately refrain from fieldwork, return home, and self-isolate as soon as possible. Other team members should be able to continue fieldwork if they have always strictly adhered to distancing and cleaning requirements and are not working alone.
- All research team members must also know how to access the nearest hospitals and emergency medical services.
- The research team must be able to monitor, daily, any new directives from public health officials, police, or administration for the area they are in.
- You must have a contingency plan for any team member to return home in the event they cannot continue their work for any reason.

Field working sites and procedures

- Do not share pens, notebooks, computers, etc. but provide each researcher with their supplies where possible.

- Clean and disinfect all equipment used each day using soap and water, if possible, or disinfectant wipes. Remove gloves and wash hands once the cleaning of equipment is complete.

Measures to be taken *BEFORE* data collection

- Obtain required clearance from relevant authorities, especially if movement restrictions in place.
- Make sure everyone in the team (field supervisor, investigators drivers, logisticians, etc.) are up to date on the most recent information from the WHO and state and central government and adhere to their guidelines
- Before data collection and training, collect information about specific referrals system for suspected COVID-19 cases and ensure that all field investigators have updated information (e.g. leaflets from the government or other relevant organizations) to share with respondents if asked
- Make sure that the relevant IEC materials on COVID-19 (factsheets, brochures, etc.) are available and shared with all staff.
- Develop and train staff on appropriate reporting and communication channels to ensure safety and early response (if needed).
- Field coordinators or field supervisor or Research Officer must be informed in case any field investigator develops COVID-19 symptoms or visits a household or respondent who may have shown symptoms or respondent has/ develops any COVID-19 symptoms as stipulated by WHO.

Measures to be taken *DURING* data collection

1. Every morning remind the team for the general guidance and protocols
2. Approach respondent(s) for interviews/ discussions in line with the required measures
3. Inform the respondent(s) of the COVID-19 measures (based on existing guidelines) clearly, before starting the interview or discussion
4. Maintain the recommended distance (at least 1 meter) when approaching respondents
5. Avoid physical contact (handshaking, hugging, etc.) to greet respondents. As this may be perceived as culturally inappropriate, clearly explain why you are doing this

Conduct the interviews/ discussions following the required measures

- Conduct the interview/ discussion outside (if possible)
- Maintain at least 1-meter distance from other people throughout, specifically the respondents.
- Don't touch anything in or around the households/ interview sites that you are visiting
- Avoid contact with the elderly or people with chronic diseases²⁶ if possible
- Household (HH) surveys: maintain distance from other household members as well. If you are asked to go inside and it is not possible to maintain the safe distance, then take the respondent outside or terminate the interview.
- Key informant (KI) interviews: maintain distance from other people in addition to the KI
- Focus group discussion (FGD): place participants with at least 1-meter distance from one another and conduct the interview outside unless you have a large room with good ventilation
- Ensure measures are being followed within the team throughout as well (i.e. not just between field investigators and respondents during the interview or discussion process)

- Do not pass on things to other people, e.g. bottles, pens, phones, leaflets, visibility material, etc. If you do so, wash your hands and wipe off the item carefully with hand sanitizer
- Do not drink or eat from the same containers and do not use utilities from another person.
- Wash hands with soap/ sanitizer following advisories by state and central government

Measures to be taken *AFTER* data collection

- Ensure all staff returning from data collection (field investigators, drivers, etc.) thoroughly wash their hands with soap (at least 20 seconds)
- Ensure field investigators are reporting back to field supervisors or Research Officer as established in the protocols
- Field investigators should report to team leaders any health symptoms such as a high temperature (above 37.5), or any other mild symptoms such as tiredness, dry cough (common symptoms), shortness of breath, aches and pains, sore throat, or runny nose (other symptoms). If any staff is experiencing symptoms, they should self-quarantine for at least 14 days/ until recovered.
- Field Investigators should confirm location and report of any interaction with an interviewee that exhibited symptoms of fever, cough, or shortness of breath
- Field supervisor or Research Officer should prepare a daily report on any interaction with the interviewee that exhibited symptoms of fever, cough or shortness of breath should be reported to nearest Government Health facility (Sub center / Primary Health center/ District Hospital)
- Ensure investigators submit the data collected and clean data collection devices daily
- investigators to upload their forms to the server daily
- investigators to wipe off all devices with disinfectant or soap and water before handing them back and place all phones in a zip-locked plastic bag with their name written on it. This is to ensure that devices change hands as little as possible.

Guidelines during and outside of data collection activities

- Check your temperature every morning. In case of high temperature (above 37.5 Celsius), or any other mild symptoms such as tiredness, dry cough (common symptoms), shortness of breath, aches and pains, sore throat, or runny nose (other symptoms), inform the team leader. Any person with these symptoms should not engage in data collection and self-quarantine for 14 days.
- Field coordinators or field supervisor or Research Officer should ask if field investigators have been in contact with anyone with a confirmed or suspected case of COVID-19. If yes, the person should not be participating in the activity and self-quarantine for a minimum of 14 days.
- Wash hands thoroughly and regularly (ideally every 1 to 2 hours and definitely in between each interview conducted) with soap and water or alcohol-based hand rub.
- Do not touch your (or anyone else's) face – particularly eyes, nose, and mouth.
- Physical distance (2m) must be maintained between any individual, including other team members. At the same time, field workers should not work alone.
- Keep distance also in cars, i.e. use enough cars so you are a maximum of 3 people per car. If not enough cars, see if you can use less number of field investigators and extend data collection time.
- Do not have any physical contact with other people. That includes no greetings such as handshakes, hugs, etc

- Sanitize all data collection items before each interview (pens, phone, tablets, notebooks, ID cards, anthropometric equipment's, etc.)
- Ensure items are not shared among team members
- Provide pens for each staff member
- Provide zip-locked bags to place field investigator phones/devices
- Ensure field team phones have internet so that they can upload the forms daily to the server. Alternatively, ensure that field team can access Wi-Fi at the end of the day.
- Do not spit in public
- Do not engage in any field research where you cannot maintain appropriate physical distancing (2m).
- Access to restricted areas as mandated by Central / State Governments and Indigenous Communities must be adhered to. If access to restricted areas is essential, authorization and documents must be obtained from the appropriate bodies. Always keep these documents with you during the fieldwork.
- Do not engage in any field research requiring face to face discussions with members of the public unless physical distancing can be maintained.
- Physical distancing should be followed while handling documentation, reports, and paperwork
- Use technology for communication as much as possible (e.g., text messaging and mobile phones) rather than having in-person conversations. Where possible, use technology to send and receive paperwork (e.g. scanning equipment).
- Inform your field coordinators or field supervisor or Research Officer immediately if feeling unwell
- Field coordinators or field supervisor or Research Officer should ensure you know the protocol to follow and referral mechanisms to use to inform the right people about any observations of symptoms or sickness among field staff during data collection

CHAPTER 3: GUIDELINES DURING TRAVEL AND MOVEMENT OF TEAM INFIELD

Travel Guidelines

- Review restrictions by Indian and State Governments regarding travel within the state and across India.
- Do not travel by more than one person in a car or pickup truck where physical distancing cannot be maintained. If restricted to a single vehicle in specific situations, a detailed plan for exposure prevention must be outlined in the fieldwork risk assessment as to why only one vehicle can be used. Consideration in your assessment must also include transportation availability should any individual need to leave for any reason and specifically if becoming ill.
- Up to two people may travel in a large van with 3 or more rows of seats where the two individuals can sit at least 2 m apart. The car ventilation should be set to fresh air only (no recirculation of air) and if possible, windows should be open to maximize airflow.
- Eliminate clutter in the vehicles and organize gear to limit the contact between belongings and to make cleaning easier. Have a garbage bag in the cab of the vehicle.
- Research teams must have access to essential services, including grocery stores, gas stations, etc. Only one team member should be tasked with accessing these services and should do so with limited frequency. If physical distancing is not achievable and hand hygiene is not available, then a surgical mask and gloves must be used while accessing these services.

Vehicles Guidelines

1. Transportation to Worksite
 - Avoid public transportation.
 - Meet at the worksite (each team member should have their field vehicle). If not feasible, exceptions of two persons per vehicle allowed with supervisor approval. Both must wear face covers and keep windows open.
 - All common areas should be wiped with a disinfectant before and after the use of the vehicle.
 - Everyone should handle their bags and belongings during loading and unloading.
2. Fuelling Vehicles/Service Stops
 - Maintain social distancing from anybody at the fuel location, store, etc.
 - Be cognizant of what you touch at any service station, stores, etc.
 - Use disinfecting wipes on handles or buttons before you touch them, or single-use towels as a barrier.
 - Use hand sanitizer before re-entering your vehicle.

Hygiene Guidelines

- Handwashing with soap and water for at least 20 seconds or use of alcohol-based hand sanitizer should be performed immediately before and after each vehicle ride.
- Team members must have appropriate supplies to thoroughly and regularly clean vehicle surfaces and equipment, including before any use by other team members. Supplies should

- include disinfectant wipes, disposable gloves for use in cleaning and disinfection, disposable garbage bags, hand sanitizer with at least 60% alcohol, and paper towels.
- Before each trip, clean or disinfect the frequently touched surfaces including door handles, seatbelt buckles, steering wheels, etc. in the vehicle.
- Follow the manufacturer's guidelines on the use of the cleaning/disinfecting products and wear disposable gloves if necessary.
- Proper training on donning and doffing gloves is necessary if gloves are required. After the removal of gloves, appropriate hand hygiene must be conducted.
- Avoid unnecessary contact with frequently touched surfaces such as door frames/handles, seatbelt buckles, steering wheel, etc.
- Trucking rest stops present a possible exposure risk – review IHSA documents in the Resources section at the end of this document. Washrooms, gas pump handles, countertops, keypads, etc. are areas of possible exposure. Hand washes or sanitize after touching these surfaces. Avoid the use of cash whenever possible.
- When refilling the vehicle, wipe down gas pump handles, touchpads, and other highly touched surfaces before use. If this is not possible, wash hands or use sanitizer after use.

Supplies, Cleaning, & Disinfection

Shared surfaces, equipment (laptop/CAPI/Anthropometric equipment's/others), and vehicle gear should be cleaned, disinfected, and dried before use. Any disinfecting product used should be used with more than 60 percent alcohol. The following should be available with the team all the time.

1. Hand soap
2. Hand sanitizer (> 60% alcohol)
3. Single-use paper towels
4. Disposable nitrile gloves
5. Tissues and Extra face covers
6. Carry a thermometer in first aid kit
7. Personal water bottles

CHAPTER 4: ESSENTIAL AND OTHER GENERAL SAFE GUIDELINES DURING FIELDWORK

General Safe Practices

- Maintain social distancing of at least 6 feet, whenever feasible.
- Keep from touching face (specifically eyes, mouth, and nose); follow CDC guidance to Prevent Getting Sick.
- Wear a face cover in common areas, while in proximity to others; follow local public health requirements.
- Wash hands with soap and water frequently for at least 20 seconds.
- Use hand sanitizer when soap and water are not available.
- Cover your mouth and nose with a tissue when you cough or sneeze or use the inside of your elbow. Throw used tissues in the trash and immediately wash your hands.
- Clean and disinfect frequently touched surfaces.
- If cough or other symptoms develop, wear a face cover to prevent spread via saliva droplets; return home.

Staying in the field

Accommodation guidelines

- All research team members must have individual accommodations during overnight stays.
- Bedding (unless using hotel accommodations), clothing, and other personal supplies must be bagged and kept separate from that of others
- Launder clothes and shower as soon as possible upon arriving home.
- Meals must allow for appropriate distancing and avoid sharing of any utensils including large spoons, tongs, etc.
- Each team member should be responsible for their field provisions for the day
- Water, food, snacks, etc., should all be prepared and brought individually or from home, if possible.
- Each team member should have at least two gallons of drinking water available per workday.
- If coolers are used, each team member should have their own designated cooler.
- Stops to make purchases in the field should be kept to a minimum to lessen contact with the public.
- For overnight trips, ensure extra lodging is available to maintain social distancing, i.e. single rooms, single tents.

Essential supplies for staff screening and sanitation

- Thermometers
- Hand hygiene items (hand sanitizers and soaps, ideally liquid soap instead of soap blocks)
- Each staff traveling to the field should have their hand sanitizer with them.
- Enough soap should always be available in the office and for all staff (this includes drivers, gardeners and others who might not be frequenting the office space)
- Soap should also be brought along with the data collection teams, together with water, so that team members can wash their hands properly once field activities are done for the day (provide field staff water bottles that they clean thoroughly externally before use)

- Hand-disinfectant rub for field investigators and others involved in data collection (e.g. drivers) and other cleaning material to sanitize common spaces including office, cars, and data collection equipment.

Other precautionary measures during emergency

Continuity Planning

- Utilize video meetings for training, planning, and discussion, when possible, to minimize in-person interactions.
- Discuss how to prioritize the most time-critical tasks if team members are unable to work.
- Consider dividing into smaller field teams that will work separately from other teams for the season.
- All team members must be able to provide clear and precise directions to the worksite.
- Cell phone service must be available
- If no cell service, describe communication plan and check-in procedures; or attach project field safety plan and map to the nearest hospital.

Wrap Up

- Clean & disinfect all shared equipment, touched surfaces.
- Bag up used supplies; return to IIHMR University or field office for disposal, if possible
- Debrief with all participants.