Preparing a Request for Permission to Access the Department of Chemistry for **TEACHING** Purposes

Dept of Chemistry
September 4\textsuperscript{th}, 2020
General instructions

• These instructions are for TEACHING ACCESS only. For access for research or other purposes, these instructions are not valid.

• The form for requesting permission to access the chemistry department building or facilities is at the Chemistry department Covid-19 website:
  https://www.chem.queensu.ca/safety/covid-19

• The following instructions are based upon the version of the form available on 31 August 2020 but will be updated when the situation changes.

• Room capacities are also listed on the Chemistry department Covid-19 website:
  https://www.chem.queensu.ca/safety/covid-19
Submit the form to Anne Petitjean and Kevin McEleney, with a cc to Elisa and Heather at
- anne.petitjean@chem.queensu.ca
- kevin.mceleney@queensu.ca
- recept@chem.queensu.ca
- Heather.Drouillard@chem.queensu.ca

If any team members have already received approval for access to the building for TEACHING, and THIS APPLICATION IS TO RENEW THAT APPROVAL, then state their names and the end dates of their approved access. Approval of the present application will effectively extend their period of approved access to the end of term after the date of this approval.

If any team members have received approval for access to the building for purposes OTHER THAN TEACHING, don’t mention that here. It’s not relevant.
No one should perform lab work alone. Who else will be in the room? Does that person have permission to access the building? If no one else has permission to access the building, then allocate a second person to accompany the worker so that they are not alone.

Only include people who actually need access to the space.

You must include your name in the list if you will be accessing the facility.

<table>
<thead>
<tr>
<th>Name</th>
<th>Category (see next page)</th>
<th>Priority Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

You must place an integer from 1 to 6 here. See next page for your options.

• If you chose category 1, then put a 1 here.
• Categories 2 and 3 are not appropriate for teaching purposes. Please consult the instructions for “How to Apply RESEARCH”.
• If you chose category 4, 5, or 6, leave this column blank.
Access Categories  (in bold, teaching-relevant categories)

1. Preparation for Fall or Winter Remote Teaching: Describe why the preparation work needs to be completed on campus.

2. Priority Research Timeline 1 or 2: Describe why the research to be conducted falls into these timelines.

3. Data Collection for Students Outside of Priority Research Timelines 1 and 2: Clearly indicate that the student no longer has sufficient data to continue to work remotely and explain how the work that will be done will permit a return to productive remote work.

4. Extenuating Circumstances (Graduate Students and PDFs): Describe the work that was anticipated to be completed since the move to remote work in March and explain how those expectations have not been met.

5. Extenuating Circumstances (Faculty and Staff): Explain why it is necessary to work on campus and outline the kind of work that will be done.

6. Key Graduate Exams: Describe the exam that will be done and explain why it is critical to occur on campus.
If you are using a shift system, make sure that the start of a shift is 1 h after the end of the previous shift, so that incoming personnel don't encounter departing personnel.

- If you are using a shift system, specify hours. e.g. 7 am to 2 pm and 3 pm to 10 pm
- If you are using a days-on/days-off system, specify days: e.g. MonTueWed for team A and ThurFriSat for team B
- If the number of people to gain access is at or below the Covid room capacity, and therefore a shift system is not required, then state "full time".

Don't forget to change the dates when you ask for a renewal.

The END OF TERM is the current limit. However, you must reapply if either of the following occurs:
- the end date of the previous authorization is reached, or
- a personnel or other significant change has occurred so that the authorization request form is no longer correct.

Provide planned work schedule in facility

<table>
<thead>
<tr>
<th>Dates:</th>
<th>Times:</th>
</tr>
</thead>
</table>

For each person listed above, please indicate the requested access category (see section 2 of the unit’s return to campus plan) and briefly explain why access is being requested within the category. (300 words max)

The pertinent details for each category are:
1. Preparation for Fall or Winter Remote Teaching: Describe why the preparation work needs to be completed on campus.
2. Priority Research Timeline 1 or 2: Describe why the research to be conducted falls into these timelines.
3. Data Collection for Students Outside of Priority Research Timelines 1 and 2: Clearly indicate that the student no longer has sufficient data to continue to work remotely and explain how the work that will be done will permit a return to productive remote work.
4. Extenuating Circumstances (Graduate Students and PDFs): Describe the work that was anticipated to be completed since the move to remote work in March and explain how those expectations have not been met.
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6. Key Graduate Exams: Describe the exam that will be done and explain why it is critical to occur on campus.

Justify here the requested access category for each person included in the permit (these individuals are the same as those listed in the 'Contact information' table). You may group individuals who share the same justification into one paragraph (please bold names of individuals for visibility).
If you check a facility here and your application is approved, then your listed workers have permission to use this facility. No separate application is required for access to the facility, but they may be asked by the facilities manager to prove that access was approved. In that case, simply forward the approval email.

For facilities outside of Chemistry, you may need to make a separate application for access.

<table>
<thead>
<tr>
<th>Location(s) of facility where access is being requested</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty:</td>
</tr>
<tr>
<td>Building:</td>
</tr>
</tbody>
</table>

Please identify any “pinch points” (i.e., room with a single door or tight spaces):

<table>
<thead>
<tr>
<th>Location(s) of other shared or common facility/equipment space that will be accessed</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Shipping Receiving</td>
</tr>
<tr>
<td>□ Science Stores</td>
</tr>
<tr>
<td>□ Hazardous Waste Disposal</td>
</tr>
<tr>
<td>□ Liquid N₂ or Dry Ice</td>
</tr>
<tr>
<td>□ electronics repairs shop</td>
</tr>
<tr>
<td>□ Other (please specify below)</td>
</tr>
</tbody>
</table>

Brief description of other location:

| Department: |
| Building: | Room Number(s): |

Please identify any “pinch points” (i.e., room with a single door or tight spaces):

For facilities outside of Chemistry, you may need to make a separate application for access.

- an instrument shared between several research groups but not physically in your lab
- a facility elsewhere in the university
- a library
<table>
<thead>
<tr>
<th>Additional Considerations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Human research (yes/no): *If yes, please stop filling out this form – human research is approved centrally (see <a href="https://www.queensu.ca/vpr/covid-19/human-participant-research-guidelines-and-sop">https://www.queensu.ca/vpr/covid-19/human-participant-research-guidelines-and-sop</a>).</td>
</tr>
<tr>
<td>Animal research (yes/no): *If yes, the application will be submitted to the ADR after departmental review.</td>
</tr>
</tbody>
</table>

| Do you require hospital facilities or is your laboratory in the hospital (yes/no): |
| Chemicals (yes/no): |
| Radioactive materials (yes/no): |
| Biohazard level of research laboratory (NA/BSL-1/BSL-2/BDL-3/Other): |

| Certificates/Approvals number and date of approval if relevant (Ethics; Animal Care; Bio-hazard) (yes, no, pending): |

For this section, don’t circle or highlight your choices. Type YES or NO.

Don’t list the chemicals. Just say YES or NO.

Include certificate number and date of approval for every relevant certificate.
### Computing and IT Requirements

<table>
<thead>
<tr>
<th>Centre for Advanced Computing required (yes/no):</th>
<th>Internal GPUs or servers (yes/no):</th>
</tr>
</thead>
<tbody>
<tr>
<td>Other:</td>
<td></td>
</tr>
</tbody>
</table>

### Support Service Needs

Brief description of support services needed **other than those already mentioned above** (e.g., chemical/hazardous waste disposal, equipment calibration/maintenance, HVAC etc.):

### Other personnel who will be accessing this room

List all **other** personnel (who are **not** in your group) who will be accessing the room(s) in the next month.

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For this section, don’t circle or highlight your choices. Type YES or NO.

Other than the people who are the subjects of this application, list ALL students/staff who will be working in the affected rooms, including for example:

- TAs or staff preparing another course
- trades people (e.g. for instrument repair)
The safety committee needs to be sure that people will be appropriately placed to maintain physical distancing and avoid frequent crossing of paths.

If you are using a shift or days-on/days-off schedule, explain the schedule and identify which personnel are in which shift.

How to make the requested map? Use PowerPoint, as explained on the next page. ChemDraw would also work.

- What is the room capacity under the Covid-19 rules (see the list on the department’s Covid-19 website)?
- Will you be using shifts or days-on/days-off?
- Have you coordinated your plans with other supervisors who share the same room(s)?
How to make the map required for the form

1. Copy the appropriate map from the end of this document and paste it into a blank Powerpoint slide.
2. Crop the map to only show the relevant room(s).
3. Put yellow initials at the desk and bench locations of each person who is a subject of this application.
4. If you are using a days-on/days-off or shift schedule, change the initials of the personnel in the second shift (e.g. afternoon or ThurFriSat) to light blue.
5. Put a yellow or blue letter X at the desk and bench locations of any other person who will be simultaneously working in the same room(s), such as members of another group.
6. Either a) take a partial screen shot of your map or b) export it as a JPEG/JPG file.
7. Paste the image into your application. Crop it if necessary.
Plan for public health related measures

Describe plans to implement Queen’s COVID-19 related public health measures (i.e.: physical distancing, disinfection, PPE usage, etc.):

See Queen’s University Return to Work Guidelines for up-to-date public health guidelines and recommendations. Note that daily check-ins by the supervisor are an important part of this process. Further, please ensure that all individuals are aware of the procedure from reporting a COVID infection in their space.

Mention ALL of the following:
• The students/staff will access and abide by the department’s Return to Work plan. The most recent version can be obtained from the Dept. of Chemistry Covid-19 website.
• All work that can be performed remotely will be performed remotely.
• All people will be spaced ≥2 m apart. Masks will be used if at any time physical distancing is not possible.
• Frequent hand hygiene will be practiced.
• Frequently touched surfaces will be disinfected as per Ministry guidelines.
• Before each access to Chernoff Hall, everyone will self-screen using the Queen's SeQure app on a smart phone or pad, and be able to show the green QR code upon request to inspectors or supervisors. App users will follow the app’s instructions, and communicate with their supervisors in case of potential symptoms or exposure. Those without a smart device will continue to use the Ontario Govt. self-assessment website. https://covid-19.ontario.ca/self-assessment/ and have pdf copies of the assessment results sent to their research supervisor (if any), with copy to the instructor who is making this request, for record keeping.

If outsiders will be involved, specify their protocols and attach documentation (such as a letter), if available, listing their protocols.
### Plan for overnight shutdown.

How will the equipment and experiments be left at the end of the day? What measures will be taken if the student or worker is unwell or the building is shutdown the following morning?

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### Plan for rapid shutdown, if needed.

Describe what measures will be taken if a situation arises where rapid shutdown is needed:

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Even if the building is shut down in the morning, researchers will likely be allowed to enter in order to turn off an experiment.

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This might happen if
- The responsible staff member gets sick overnight
- The building is shut down
- A power failure occurs

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This might happen if
- The responsible staff member needs to leave suddenly (e.g. gets sick)
- The building is shut down
- A power failure occurs
Appendix - maps

Please copy and past relevant portions of these maps into the form to illustrate placement of students or staff.
4th floor

Security Camera (5)
"Allen" Key Lock
Fuel Storage & Generator
Electrical Room
Elevator
Elevator Mechanical
Housekeeping
Mechanical
Storage
Telecommunications
Washrooms
Food Area
PhotoCopier
Telephone

Fumehood Court
Capicciotti 3
Liu 8
Macartney 4
Nunzi 2
Petitjean 5
Ross 6
Stampleskie 6
Wang 4

Total 46