



## **JOINT AGREEMENTS ON FIELD PROTOCOLS IN THE PERIOD OF HEALTH CRISIS**

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## **I. INTRODUCTION**

The Corona Virus is clearly a threat to all Research Practitioners who go on field to collect data; a critical part of marketing and opinion research and used for Insighting and data analytics.

We, the Marketing & Opinion Research Society of the Philippines (MORES) and Association of Marketing research Operations Specialists (AMOS) are concerned about the well being of all data collectors as they are the one who are most exposed to the threats of the Covid-19 pandemic. The following measures are being recommended for them and at the same time to also protect observers of the research process (clients/agencies/consultants). In drafting this, the DOH guidelines and on-the-job experience were considered.

## **II. GENERAL HYGIENE AND PROTECTION PRACTICES**

1. Washing of hands with soap and water for at least 20 seconds as frequently as possible is recommended. The more times one is able to wash his/her hands, the better. If handwashing is not possible, use a hand rub with at least 60% alcohol concentration. However, please remember that if your hands are visibly dirty, handrub is not enough. You really have to wash your hands.
2. Always bring a small bottle of spray alcohol with at least 60% concentration for frequent hand cleaning and sanitizing.
3. Do regular disinfecting of tools/devices used in data collection (i.e. phones, tablets, laptops). When cleaning devices i.e. phones, tablets, laptops, please follow below guidelines:
  - a. Make sure device is turned off
  - b. Spray alcohol to a clean cloth or cotton balls or flat cotton pads, BUT limit spray to avoid spills/drips in between the keys
  - c. DO NOT spray alcohol or water directly on electronic devices
  - d. Gently wipe the keys, edges and underneath the keyboard. Gently wipe the monitor screen as well.
  - e. Wait for it to dry before using the device.
4. Avoid touching any part of your face.
5. Do not come to work when feeling fatigued, with cough (your immune system is challenged), have fever (you are obviously sick)
6. Always practice SOCIAL DISTANCING. When talking to a person, observe the “1-meter-distance” rule. Avoid any form of physical contact (i.e. shaking hands, doing a high-5).
7. Wear a mask. Surgical mask is recommended, however if it is not available, wear a cloth mask. It will certainly be better than no mask at all as the cloth face cover is meant to protect other people in case you are infected. This may also help you avoid touching your face and infecting yourself while out in public places. If possible wear a face shield as well.

8. If you are in a private setting and do not have on your surgical mask or cloth face covering, practice the following cough and sneeze etiquette: Cover your mouth and nose with tissue. Throw the tissue in the trash bin then wash your hands immediately. If you do not have tissue, sneeze or cough into your flexed elbow not with your bare hands.

### **III. FIELD BRIEFING PRACTICES**

1. Do briefing virtually / via digital platform as much as possible.
2. If face-to-face briefing is really needed, limit the number of attendees. The number of attendees will depend on the size of the briefing room. The room should allow for the required 1 meter minimum social distancing. This means chairs/tables should be at least 1 meter apart but if you could afford more, that would be better.
3. Should the briefing room be small, and a face to face is required, multiple briefings for small groups should be conducted.
4. Clients should be allowed to join briefing via digital platform c/o research agency/field partner.
5. Ensure that the briefing rooms are properly sanitized including the equipment and furniture before and after use of the facility.

### **IV. RECRUITMENT PRACTICES**

Recommended preliminary questions asked by interviewers

1. History of travel of target respondent. It is recommended we terminate anyone who travelled outside of the country or to areas/ places on the DOH list with local transmission within specific barangay or area of coverage or outbreak of COVID-19 in the past 3-4 weeks.
2. History of travel of respondent's household members. It is recommended we terminate anyone who has household members who travelled outside of the country or to areas places on the DOH list with local transmission or outbreak of COVID-19 in the past 3-4 weeks.
3. Whether the respondent or any member of the household is experiencing any of the following conditions: fever, dry cough, difficulty in breathing, shortness of breath, tiredness/fatigue. It is recommended we terminate anyone living in the above environment.
4. Whether respondent has been in contact with a confirmed or suspected Covid 19 case. It is recommended that we screen out respondents who have a recent contact with a confirmed or suspected COVID-19 case.

## **V. FIELDWORK PRACTICES,**

### **a. Spots to Cover**

1. It is recommended that before going out on field, we identify the high risk (high incidence of COVID-19 patients) and locked down barangays so they can be excluded from generation of spots (based on updated DOH list).
2. It is also recommended that a courtesy call to all barangays must be practiced at all times. Calls must be done so we can get permission for field personnel to cover area and to ensure personal will be safe. We should secure formal letter of approval from said barangays.
3. Let us avoid doing fieldwork in barangays with big hospitals and hotels, schools and buildings that are being used as Suspected Isolation Facilities.
4. In generating spots in barangays without hospitals, hotel, school, and buildings that are used as Suspected Isolation Facilities, ensure that the random starting point is a good distance away (i.e. one block clockwise) from barangay health centers or clinics. Right coverage should be followed but going away from the barangay health center/DOTS center.

### **b. House to House Interviews**

1. Field personnel should bring around an alcohol bottle for personal use. As cited, regular hand cleaning is encouraged (i.e. before and after an interview).
2. Field personnel should report a “not feel well” condition at least 3 hours before the call time. Anybody that registers a at least 38 degrees temp shall not be allowed to work.
3. Once sent home, the interviewer has to give daily updates on his situation to the field coordinator/project manager. For conditions that last for more than 3 days, a medical certificate shall be required before resuming work.
4. Should field personnel feel uncomfortable doing fieldwork due to news on community outbreak, he/she must report the news to her immediate supervisor for NEXT STEPS. Do not proceed with fieldwork in said area.
5. Wear a mask during interviews at all times. If possible wear a face shield as well.
6. Practice social distance even if wearing protective cover – follow the minimum 1 meter rule.

### **c. Central Location Tests**

1. Whenever possible avoid doing central location tests as this methodology requires congregation of a number of people in one area and can be a way to spread the virus.
2. In areas where cases are low as defined by government classification of areas, central location tests can possibly be done but please ensure the following when doing central location tests
  - Limit number of people entering the panel site
  - Number of people allowed in the CLT site should be dependent on size of venue (How many tables can a venue accommodate assuming 1 meter radius distance per table)
  - When considering number of people, include field personnel in the count
  - Central Location sites must have a handwash area.
  - Disinfecting of area must be done thoroughly and frequently BEFORE AND REGULARLY DURING THE DAY (AM, LUNCH BREAK, MID AFTERNOON)
  - Ensure that food handler have face mask, hairnets, gloves and hand sanitizers at all times during fieldwork.
  - Field personnel doing interviews should also wear masks at all times.
  - Ideally, a no contact thermometer is recommended for use to screen respondents and an alcohol spray should be applied on their hands before entering the CLT site
  - Each table has to have alcohol spray for regular disinfection of the field personnel during the day
  - Respondent can be allowed to use her own mask during interviews. We recommend we provide them one if they don't have one.
  - Receptacles for proper disposal of face masks and other protective paraphernalia should also be made available in the panel sites at all times

### **d. FGDs / IDIs/ Home Visits**

To avoid unnecessary exposure, we are recommending all face-to-face fieldwork for Qual to be put ON-HOLD, and conducted online, until it is safe for respondents to participate without the PPEs required by government.

## **VI. OTHER ITEMS**

### **A. RESEARCH AMONG IMMUNO-COMPROMISED SEGMENTS**

It is recommended that research among Immuno-compromised segments be limited to ONLINE RESEARCH and TELEPHONE INTERVIEWS ONLY. No face to face encounters for the following profiles:

- Children
- Elderly (50 yrs and above)
- Pregnant women
- Individuals who have been diagnosed to have life threatening conditions such as cancer, diabetes, COPD, hypertension

Resumption of face-to-face research among Patient groups, pregnant moms, children, the elderly shall be put on hold till such time DOH declares its safer for these segments to socialize.

### **B. RESEARCH AMONG HEALTH CARE PROFESSIONALS IN HOSPITALS/HEALTH CENTERS**

It is recommended that research among health care professionals be limited to ONLINE RESEARCH or TELEPHONE INTERVIEWS ONLY

## **VII. MOVING FORWARD**

We recommend that everyone keep abreast of the latest guidance issued by leading local and international health institutions tracking the disease. Please review daily the developments from reputable sources such as DOH, WHO, CDC. Monitoring government's contingency plans and its implications to us will be of utmost importance as we all navigate how best to do our work.

We encourage all MR practitioners to regularly visit the following websites:

- Updates on COVID-19
  - Updates from the Department of Health
  - COVID-19 Tracker from the Department of Health, based on Testing Facility
- General Information
  - Frequently Asked Questions In Filipino, from the Department of Health
  - In English, from the World Health Organization
  - In English, from the Centers for Disease Control and Prevention

Let us also share experiences with each other so we can all learn how to do our work safely and efficiently.