Preliminary Results of the COVID-19 Research Impact Study

May 21, 2020

The following is a **preliminary report** from our recent baseline COVID-19 impact survey. If you participated, our warmest thanks. The results of this survey will be discussed during the [COGR Virtual Meeting](#) June 10-12, 2020, and a detailed reporting of results to date will follow after the meeting.

Survey respondents will receive invitations for brief follow up questions over the next few months, and we hope you will be able to respond. We plan to send the next request on June 1.

**Profile of Responding Institutions**

One hundred thirty-six current member institutions participated in the study, for a 73% response rate. Reflecting COGR's overall membership demographics, two-thirds of the participants are public, and the remainder are private/not-for-profit institutions. 125 (90%) responded on behalf of degree-granting institutions, 50 (37%) for academic medical centers (AMCs), and six as independent research institutions (IRIs), primarily private.

A third of degree-granting institutions responded on behalf of academic medical centers, and most (84%) of medical centers were also categorized as degree-granting institutions. Many institutions reported specific research parameters, e.g., only COVID-19-related or other "critical" projects are being performed generally with suspensions on human subjects research otherwise.

**Major Concerns**

When asked about the most pressing issue relative to the current pandemic's impact on their institutions, many concerns reflected a short-term horizon (most critically, the looming expiration of OMB's 90-day M-20-17 window, paid leave time running out, and undertaking staff planning for the summer).

However, long-term considerations were also key, e.g., what supplemental support will be available to complete funded research; what non-project-specific federal support may ultimately manifest; and, above all, how institutions can reopen safely.

**Select Findings**

A large majority of institutions reported mostly on-line/remote classes (as applicable) and staff, with all but a handful reporting largely remote labs, to the extent that researchers are working (see figure on next page).

AMCs reported similar circumstances, with most outpatient visits conducted via telemedicine. All IRIs likewise reported mostly remote staff work.

Dates of conversion to remote research operations most often had occurred in mid-March, beginning the 13th. However, wind-downs continued throughout April, reflecting the variability in virus cases and state and local orders.

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**Participating Institutions**

- 136 Participating Institutions
- 73% Response Rate
- 2/3 Public/ 1/3 Private or NFP

> 70% of Participating Institutions moved research operations off campus between March 3rd & March 21st
All respondents reported that they were accepting new awards from funders. About six of ten were delaying start dates.

Final comments centered on the difficulty of reducing complex operational shifts to a few questions. For example, some differentiate source(s) of funds and tenure track status when continuing compensation for idle faculty. A few institutions are beginning to reopen, whether selectively or more fully; however, most face serious questions of funding for continued personnel compensation and delayed completion of funded research.

**Summary**

These baseline findings reflect uncertainty regarding the timing, scope, and process through which institutional reopening can occur. Also, research administrators highlighted the huge commitment that continued compensation for idle staff (overall, provided to one third to one half) entails, under essentially a ticking clock. COGR will discuss the initial results at the June meeting and provide a detailed report thereafter.

If you have questions about this report or the survey, please contact Kristin West, COGR’s Research and Ethics Compliance Director at kwest@cogr.edu.