Participant Consent Form

Informed consent is required by all participants. This means that a participant's decision must be voluntary and based on adequate understanding of the project. The <u>National Health and Medical Research Council National Statement on Ethical Conduct in Human Research paragraph 1.12 states:</u> "Respect for human beings involves giving due scope to people's capacity to make their own decisions."

The headings are to guide you for content that should be included. To ensure the information statement is easy to read we suggest you use the headings as they are in bold and provide the relevant information underneath. The headings also help break up the text to make the information more readable and ensure all relevant points are included.

In the template there are prompts for content in the dot points and suggested text in *blue italics*. Please address the dot points but it is not intended that they be answered as questions. Select the most appropriate suggested text in blue italics and format to standard type. Delete any blue italic statements that are not relevant to your project.

Additionally please:

- Ensure you use plain language, short sentences and use "we" and "you". It addresses the person directly, it is familiar and friendly and the tone is warmer.
- Use active rather than the passive voice
 - The active voice is more to the point and lively.
 - The passive voice makes your writing more long-winded.

✓ ACTIVE	X PASSIVE
We will send you a short report of the results.	A summary of results will be sent to all study participants.
We will take a small blood sample from your child.	A small blood sample will be needed from your child.

Once you have finished please proof read your document. Get a friend or colleague to proof read as well to ensure consistency, spelling, simplicity and readability. Remember you need to aim your information sheet to a 13 year old reading level. The best guide is to get someone unfamiliar with your research to read it and make sure it can be easily understood.

Refer to the example consent forms provided on the <u>SiREN website</u>, these will give you a sense of how they can be formatted and designed (although design is not a requirement).

This template has been adapted from: Curtin University. Good research practice guidelines: Participant consent form template. Perth, Western Australia: Curtin University 2017 [Available from: http://research.curtin.edu.au/ethics-integrity/human/guides-help/.

Template for Participant Consent Form

CONSENT FORM

HREC project number:	If you have applied for ethics clearance the Ethics Office will advise you of this number after you have submitted your project.
Project title:	This must be in plain English and match the consent form title
Chief Investigator or primary contact person:	Insert the title, first name and surname, position of the principal investigator/contact person.

- I have read, (or had read to me in my first language delete if not appropriate), the information statement and I understand its contents.
- I believe I understand the purpose, extent and possible risks of my involvement in this project.
- I voluntarily consent to take part in this project.
- I have had an opportunity to ask questions and I am satisfied with the answers I have received.
- I understand I will receive a copy of this Information Statement and Consent Form.

Participant name	
Signature	
Date	

<u>Declaration by investigator/contact person:</u> I have supplied an Information Letter and Consent Form to the participant who has signed above, and believe that they understand the purpose, extent and possible risks of their involvement in this project.

Investigator/contact	
person name	
Signature	
Date	

Note: All parties signing the Consent Form must date their own signature.

ONLY USE IN PROJECTS WITH IMPLIED CONSENT

Please inse	rt the following tick box	at the top of your questionnaire.			
	I have received information regarding this project and had an opportunity to ask questions. I believe I understand the purpose, extent and possible risks of my involvement in this project and I voluntarily consent to take part.				
	EXAMPI	LES OF OPTIONAL CONSENT TICK BOXES			
		es, information about each option MUST be described in Section of the Information Statement under a heading titled OPTIONAL			
l do	I do not	consent to being video-recorded			
☐ I do	☐ I do not	consent to being audio-recorded			
☐ I do	I do not	consent to being photographed			
☐ I do	☐ I do not	consent for the investigators to contact my GP/family doctor			
□Ido	I do not	consent to the investigators accessing my medical records			
☐ I do	☐ I do not	consent to data linkage			
□Ido	☐ I do not	consent for the investigators to contact my child's school teacher			
□Ido	☐ I do not	consent to be contacted about future projects that are related to this project			
☐ I do	☐ I do not	consent to the storage and use of my information in future ethically-approved projects related to this (project/disease)			