**PARTICIPANT INFORMATION LETTER**

**Online Survey**

***\*\*Guideline: The information in blue italics is for guidance only. Please revise as necessary for individual projects. Ensure to write to the participant in the first person. Eg “You are invited…” Do not change headings or re-arrange the order and ensure that the language is non-technical and relevant for the intended audience, as this information sheet will help the participants to decide whether to participate. Adherence to these instructions will expedite the approval process and the need for additional review. As necessary, this letter should be translated for the local language and may also be used as a verbal script to be read out to participants eg for cultural or literacy reasons.***

***NB Only this ACU Participant Information Letter (PIL) will be accepted by the ACU HREC. Please ensure the Version number and date in the Footer is completed.***

***\*\*DELETE this blue italic guidance information or change to black text all writing that is relevant to your research PRIOR to submission.*** ***Most black text is compulsory*** ***and can be adapted to suit your research.***

**PROJECT TITLE:**

**APPLICATION NUMBER: (2023-** add the ethics 4-digit number generated in ORION**)**

**PRINCIPAL INVESTIGATOR:   
STUDENT RESEARCHER:**

**STUDENT’S DEGREE:**

Dear Participant,

You are invited to participate in the research project described below.

***1*. What is the project about?**

The research project aims to [*describe the project in plain English, its aims and objectives, why it is/should be important to the participants and what you hope to achieve*] You are invited because (*insert reason for invitation)* and your contact details were obtained from (*insert if known and appropriate - how/where they were obtained)*

***2.* Who is undertaking the project?**

This project is being conducted by [*insert names of all researchers*] and (*if appropriate*) will form the basis for the degree of (*insert degree*) at the Australian Catholic University under the supervision of (*insert name of supervisor if appropriate*]. The researchers are experienced (*Researcher qualifications and expertise relevant to the project should be included here*) *Xx* has a strong background in *(xx, along with several years of experience in xx. )*

***3.* Research Funding, Sponsors, and collaborators:**

This research is funded by (*list the funder/funding organisation – if no funding, sponsors or collaborators, then state ‘This research has no funding’*) *Add as necessary -* *This study is part of a national/international collaborative study coordinated by (Australian, Canadian etc – insert collaborators details) This study is being sponsored by (name of commercial or other entity and any state the conflict of interest which one or more investigators may have)*

**4. Who can take part in this study?**

To participate in this research project, we need to ensure that it is ok for you to take part in this study.

You will need to meet the following to be **included**:

* (*Outline the inclusion criteria eg, age)*

If you meet the following, you will be **excluded**: *(delete if unnecessary)*

* *(Outline the exclusion criteria eg diseases/conditions)*

(*Delete if screening is not required*) You will complete a screening questionnaire via a (*delete where necessary* *- online questionnaire, paper questionnaire, telephone or online interview.)* asking about (*insert details*). The screening questionnaire will determine if you are eligible to take part in this study. Completing the screening measures will take approximately (*insert expected time*). If you meet the criteria for inclusion, then you will *(insert as appropriate – be contacted by a researcher or be able to start the research project after providing informed consent).* If the screening questionnaire shows that you cannot be in the research project, (*explain what will happen e.g. you will exit the survey* *and all data collected about you will be deleted*)

**(NB. A screening tool can only be used once consent has been obtained and information provided about what will happen to this data, including for those who don’t meet the criteria)**

**5. What will I need to do to participate in this study??**

If you decide to take part in this research, you will complete an online survey. The survey (or researcher) will ask you to answer questions about (*Indicate the nature of the activities in lay terms – i.e. types of questions asked and examples, what you want them to do, and if there are any follow up requirements)* It is anticipated the online survey will take approximately (*insert approximate time)* to complete. *(if there are follow-up surveys, describe how many and how and when they will be contacted. If the data will be coded to link the data, then explain the process, especially if the code will be generated by the participant)*

*If there are options for interviews or Focus Groups, then explain the details and the process. Eg If interested in participating in an optional interview/Focus group, you will be asked to leave your contact details at the end of the survey, where a new screen/link will open where you can leave your contact details separate from the survey results.*

**6. Do I have to take part in this research?**

There is no obligation to participate in this research and if you do not wish to take part, you do not have to. Your participation is completely voluntary, and you may withdraw without consequence at any stage. . *. If the participant is in a dependent relationship with any of the researchers eg. students, then address this issue and add this statement – ‘Your decision to participate or not, or to take part and withdraw, will in no way affect your relationship with the ACU or have any effects on your* *(grades/employment/organisation’ – delete and insert where necessary)*

Before deciding to take part in this research study, please read the information carefully and feel free to ask questions, or to talk things over with a relative or friend (or doctor). If you agree to participate in this study, you will be asked to “sign” an online Consent Form at the end of this document and to keep a copy of this form.

**7. Are there any risks associated with participating in this project?**

*Describe any risks associated with the project. If there are no foreseeable risks, you should state this rather than saying there are ‘no risks’. Every project contains some risk.*

Whilst there are no foreseeable risks, you may find *eg. some of the questions uncomfortable or distressing. (Insert what risks are applicable to your research and indicate how any risks will be mitigated or managed.)*

If you were to become distressed or upset by any of the questions, you can skip a question, take a break, or simply stop and close your browser, as this research is completely voluntary.

(Delete if not applicable) If you require support from someone not involved in this research, please contact the free service/s below: *provide support contact details for whatever is relevant to this research and appropriate to the country of research eg,* ACU student counselling if ACU students are the participants, or Beyond Blue if the research is about depression or anxiety, or an autism specific research contact such as Amaze.org.au etc

|  |  |
| --- | --- |
| E.g., ACU student counselling (ACU students only) | 1300 638 485 or text 0488 884 191 |
|  |  |

**8. Are there any costs or reimbursements?**

There are no costs to participating in this study. (if applicable or delete where necessary)However, we will provide (provide details eg voucher or draw details) to reimburse you for your time. *Include information about how they can claim the reimbursement and provide details on how their contact details will be securely stored and managed.eg, “a new screen/link will open at the end of the survey where you can leave your contact details separate from the survey results.”*

***9*. What are the benefits of the research project?**

It is anticipated findings of this study will provide *Describe the general realistic benefits of the project to the participant. Be careful not to overstate the benefits or provide unrealistic expectations. If there are no immediate benefits to the participant, this should be stated such as – ‘although there are no direct benefits to your involvement in this research, the benefits from this research may….’*

**10. Can I withdraw from the study?**

*Delete whichever option below is not applicable to your research project*

**Anonymous surveys** (delete if not applicable)

Participation in this study is completely voluntary. You are not under any obligation to participate. If you agree to participate, you can withdraw from the study at any time without adverse consequences by closing the browser before submission, and your data will not be used for this study. Once you have submitted the survey however, we will not be able to withdraw your responses, as the survey is anonymous. Your decision not to participate or to withdraw from the study, will not affect your relationship with ACU *or (list the names of organisations/funders if applicable).*

*\*If using codes to link confidential data sets eg multiple surveys and the participants will still be unidentifiable to you, you will need to provide specific information about how the code will be self-identified, and for withdrawal, you will need to advise they need to quote their unique ID to withdraw, which will result in identifying who they are ( if emailing you for example).*

**Identifiable surveys** (delete if not applicable)

Participation in this study is completely voluntary. You are not under any obligation to participate. If you agree to participate, you can withdraw from the study at any time without adverse consequences by closing the browser before submission, and your data will not be used for this study. Once you have submitted the survey, you can withdraw by contacting the researchers on the contact details below before this date (insert date) or prior to data aggregation (delete as applicable) and your data will be deleted from the dataset.

If you decide to withdraw from the research study, the researchers will destroy any information that has already been collected. Your decision not to participate or to withdraw from the study, will not affect your relationship with ACU *or (list the names of organisations/funders if applicable)*

**11. Will anyone else know the results of the project or have access to my information?**

The data from this research project will be stored by the researchers on the ACU secure server OneDrive for 15 years in a *(choose the applicable option below and delete where necessary)*

* *Identifiable format, where your identity will be known,*
* *Re-identifiable format where a unique identifying code will replace details such as your name, contact details, DOB,*
* *non-identifiable format where your identity will remain unknown*.

Data will only be accessible to the research team, and will be shared securely via *(insert method eg Teams/Onedrive/ACU server/Sharepoint). Data will also be shared (insert other source if applicable)*

ACU will manage your personal information in accordance with its Privacy Policy (link: www.acu.edu.au/privacy) and in line with our privacy obligations under the Privacy Act, 1988, the Australian Privacy Principles (APPs) and, where applicable, international regulations, such as the EU/UK’s General Data Protection Regulation (GDPR*).* *(See further information regarding GDPR on our website, or contact* [*privacy@acu.edu.au*](mailto:privacy@acu.edu.au) *for guidance)*

Please contact XXX@acu.edu.au *(add contact person’s details)* to withdraw consent, access or correct. If you have a privacy enquiry or complaint or, if GDPR applies to you, and you wish to erase, request portability or restrict/object to processing, please contact privacy@acu.edu.au

*If you intend to use the data for future research or share* ***with Third Parties,*** *then include the below statement (suggest using as you cannot add retrospectively – delete if not applicable)*

The data from this research may be used for future research and may be shared by the research team if you choose this option in the consent form. Only data that is specific to the aims of this research, an extension of, or closely related to, will be shared. All information will be shared in a format that will not identify you in any way. *if research will be shared with Third Parties, say it will be shared with X, but that any further disclosure will not occur without consent or authorisation by law.*

**12. Will I be able to find out the results of the project?**

The results of the study will be published *or reported (insert if applicable and where)* All information about you will be published in a way that will not identify you (or will identify you) in an aggregated format *(or other method). If applicable -provide information about individual results and feedback)* If you would like to receive a copy of the results, please contact a member of the research team listed below, *or you can provide an email address on the Consent Form.*

**13. Who do I contact if I have questions about the project?**

If you have any questions or concerns about the project, please contact a member/s of the research team below.

**Research Team Contact/s**

|  |  |
| --- | --- |
| **Name** | [INSERT full name] |
| **Position** | [INSERT position title] |
| **Telephone** | [INSERT work telephone number] |
| **Email** | [INSERT work email address] |
| **Name** | [INSERT full name] |
| **Position** | [INSERT position title] |
| **Telephone** | [INSERT work telephone number] |
| **Email** | [INSERT work email address] |

***What if I have a complaint or any concerns about the research study?***

The study has been reviewed by the Human Research Ethics Committee at Australian Catholic University (review number 2023- insert 4-digit ethics id). If you have any complaints or concerns about the conduct of the project, you may write to the Manager of Research Ethics and Integrity, the Office of the Deputy Vice Chancellor (Research and Enterprise).

|  |  |
| --- | --- |
| **Name** | Manager, Research Ethics and Integrity |
| **Address** | c/o Office of the Deputy Vice Chancellor (Research and Enterprise)  Australian Catholic University  North Sydney Campus PO Box 968, North Sydney, NSW 2059 |
| **Telephone** | 02 9739 2519 |
| **Email** | Resethics.manager@acu.edu.au |

Any complaint or concern will be treated in confidence and fully investigated. You will be informed of the outcome, where possible.

**14. I want to participate, what do I have to do?**

Submission of the online survey is an indication of your consent. By clicking ‘yes, I agree to participate’ after the Consent statement below and clicking the submit button at the end of the survey, you are providing your permission for the research team to collect and use information about you for the research study.

Yours sincerely,

**RESEARCHER NAME/S AND SIGNATURE/S**

* ***Please retain a copy of this information letter insert weblink or PDF***

**Consent Form – Survey**

**Declaration by the participant**

* I have read the Participant Information Sheet, or someone has read it to me in a language that I understand. I have had an opportunity to ask questions and I am satisfied with the answers I have received. I understand the purposes, study tasks and risks of the research described in the study and understand that I am free to withdraw at any time during the study, and withdrawal will not affect my relationship with any of the *insert* named organisations and/or research team members.
* I may exit the survey at any time by closing the survey ‘window’ on my device and there is no obligation to answer all questions or finish the survey.  If I exit the survey before submitting my responses, my responses will not be included in the research.
* (*if anonymous data – delete if not)* I understand my responses to this survey are anonymous, and responses cannot be withdrawn after submission because they are not individually identifiable.
* *(If identifiable data – delete if not)* I understand my responses to this survey will be identifiable, and I can withdraw after submission by contacting the researchers on the contact details in the Participant Information Letter before this date *(insert date),* or prior to data aggregation (delete as applicable) and my data will be deleted from the dataset.

***\*\* The above information is compulsory (except where not applicable to your research).***

***Include as required from the below options or add as necessary to reflect what you have advised in the PIL. You may add extra options if mentioned in the PIL, ensuring to delete what is not relevant.***

**Personal Information and Privacy/ GDPR**

*Privacy Consent for personal information (name, address, email addresses, phone numbers DOB etc) (delete from below what is not applicable to your research)*

* *By ticking this form, I consent to ACU collecting, using, and storing my personal information for the purpose of conducting research into (XXXX explain what the research is about).*
* *I consent to my personal information being shared with Third Party researchers (insert name) for the purpose outlined, but any further disclosure will not occur without consent or authorisation by law.*
* *If GDPR applies to me, I consent to transferring and storing my personal information in Australia.*
* *I agree for my data from this research, as described at section 11 of this document, may be used for future research, and may be shared by the research team. Only data that is specific to the aims of this research, an extension of, or closely related to, will be used. All information will be shared in a format that will not identify me in any way.*
* *I agree to the Collection of (insert type e.g., sleep diary, diet diary information etc).*
* *I would like to use a pseudonym, rather than my name, in any publications and presentations related to this project.*
* *I provide my consent to be identifed in publications relating to this research*
* *I provide my consent for my name and contact details to be retained in a register so I can be contacted about other research projects in the future*
* clicking ‘yes, I agree to participate’ below, will open the survey. Are you happy to proceed?

|  |
| --- |
| yes, I agree to participate  Insert link to survey |

**\*\*\*\* DELETE ALL THE BELOW INFORMATION AFTER READING as this information should be added at the end of the survey!**

**At the very end of the survey (not this consent form), provide the following information as applicable (and DELETE ALL THIS INFORMATION below from the consent form)\*\***

**If an anonymous survey:**

Submitting your survey responses is considered consent to participate.  Responses cannot be withdrawn after submission because they are not identifiable.

|  |
| --- |
| SUBMIT |

(Focus Group/interview sign up) (if applicable – delete where necessary)

* If you would like to participate in a follow-up Focus Group/interview, please click on 'yes' below to leave your contact details/Expression of interest. You will be taken to a new screen/link separate from your responses, so that your survey remains anonymous.

|  |
| --- |
| yes  Insert link to new screen |

**If an identifiable survey:**

Submitting your survey responses is considered consent to participate.  After submission, responses can be withdrawn by contacting the researchers on (insert details) by this date (insert date)

|  |
| --- |
| SUBMIT |

**Reimbursement/voucher**

Please click on 'yes' below *(delete as necessary) to be included in the draw for the chance to win/ for the voucher of (provide details)* You will be taken to a new screen/link separate from your responses, so that your survey remains anonymous.

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| yes  Insert link to new screen |

**\*\**Optional insert if applicable (delete what is not required*)**

(if applicable) I would like to receive a copy of the study results via email or post, I have provided my contact details below and ask that they be used for this purpose only.

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**