

Participant Consent Form:

Project Title: Tim's Bits - Braintrust

Researcher(s): Brandon Eagan, Undergraduate, Faculty of Engineering and Applied Science, University of Regina, 1-306-527-6979, eagan20b@uregina.ca

Supervisor: Timothy Maciag, Faculty of Engineering and Applied Science, PHONE NUMBER, EMAIL

Purpose(s) and Objective(s) of the Research:

- We are collecting this data to better understand the needs of potentially users of our product, BrainTrust, particularly with respect to usability.
- We may use this data for presentations to our class and additionally when making decisions in the future with respect to the User Interface of the product.
- Additionally, the supervisor may hand this research on to another team of students at the end of our term.

Procedures:

- You will be asked to fill in a short pre-usage survey
- Following this you will be asked to use our product unsupervised and given a list of goals to accomplish while doing so.
- Finally, a post-usage questionnaire will be given to you to fill in
- At no point will the members of this team attempt to guide or help you use the product and you will given privacy while filling in the post-usage questionnaire
- Please feel free to ask any questions regarding the procedures and goals of the study or your role.

Potential Risks:

- There are no known or anticipated risks to you by participating in this research

Potential Benefits:

- Your organization (eHealth) may receive a product that is notably better than had we not conducted this usability research.

Compensation:

- There will be no compensation for participating in this research.

Confidentiality:

- All data will be seen solely by whichever team member will compile it. At this point they will only keep the data which you enter into the questionnaire and no personally-identifiable information.
- You will have the option to abstain from all questions which you feel could in any way be used to personally identify you
- **Storage of Data:**
 - Anonymised data will be stored publicly.
 - Your consent forms will be stored by Timothy Maciag in a secure manner.
 - Your questionnaires will be destroyed once the data has been compiled and anonymized.

Right to Withdraw:

- Your participation is voluntary and you can answer only those questions that you are comfortable with. You may withdraw from the research project for any reason, at any time without explanation or penalty of any sort.

- Whether you choose to participate or not will have no effect on your position [e.g. employment, class standing, access to services] or how you will be treated.
- Should you wish to withdraw, please write in large letters “WITHDRAWN” on the front page of your questionnaire and indicate to the nearest member of our team that you wish to do so.
- No attempt to coerce or compel you to complete the questionnaire will be made by any member of the research team

Follow up:

- To obtain results from the study, please contact Janice or Tim using the contact information above

Questions or Concerns:

- Contact the researcher(s) using the information at the top of page 1;

Consent

By completing and submitting the questionnaire, **YOUR FREE AND INFORMED CONSENT IS IMPLIED** and indicates that you understand the above conditions of participation in this study.

<i>Name of Participant</i>	<i>Researcher's Signature</i>	<i>Date</i>
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