

# Informed Consent for [Pop the Bubbles!1

Yes No

#### 1. Taking part in the study

I have read the Participant Information Sheet, or it has been read to me. I have

been able to ask questions about the study and my questions have been answered

to my satisfaction.

I consent voluntarily to be a participant in this study and understand that I can refuse to answer questions and I can withdraw from the study at any time during

data collection, without having to give a reason.

If you are using an anonymous online questionnaire:

I consent voluntarily to be a participant in this study and understand that I can refuse to answer questions and I can withdraw from the study at any time, without having to give a reason, up until the online survey is submitted; and that after the survey is submitted it will not be possible to withdraw (as it will not be possible to link you personally with the information submitted online).

I understand that taking part in the study involves [insert details based on information contained in the PIS, e.g. use of audio recording of interviews].

If there is a potential risk from taking part in the study provide an additional statement:

I understand that taking part in the study involves [insert details] as potential risk.

### 2. Use of the information in the study

I understand that information I provide will be used for [insert details of planned outputs as detailed in the PISI.

I understand that personal information collected about me that can identify me, such as my name or where I live, will not be shared beyond the study team [may

be restricted to the researcher; you should indicate if someone outwith the team is undertaking transcription of audio recordings that include such information].

If you intend to use anonymised quotes in research outputs:
I agree that anonymised direct quotes can be used in research outputs.

If you intend to use named quotes:

I agree that my real name can be used for direct quotes in research outputs.

If written information is provided by the participant (e.g. personal diary):
I agree to joint copyright of [insert nature of the written information] to [insert name of researcher].

<sup>&</sup>lt;sup>1</sup> This document is adapted from the UK Data Service Template Form April 2018 retrieved from <a href="https://www.ukdataservice.ac.uk/manage-data/tools-and-templates.aspx">https://www.ukdataservice.ac.uk/manage-data/tools-and-templates.aspx</a>



### 3. Future use and reuse of the information by others<sup>2</sup>

If you are applying for, or in receipt of, grant funding your funder may require that you make your data available to other researchers. Future re-use of data will not be possible unless you have fully informed participants in a way that is transparent and easily understood, and you have gained their consent. With regard to the type of data, you should state the form in which the data will be deposited (e.g. audio recording of a focus group), for each type of data that you intend to deposit. Details of the de-identification of data (if applicable) will have been provided in the PIS. In addition, information as to whether use or access restrictions will apply to the data in future will have been detailed in the PIS.

I give permission for [detail the type(s) of data] that I provide to be deposited in [detail the data repository] so that it can be used for future research and training.

4. Signatures		
Name of Researcher Date	Signature of Researcher	
	nave difficulty reading the Participant signing the consent form, there is ar sent.	
<i>name and date]</i> Participant's Name	[researcher con	mpletes participant's
Participants unable to	sign their name should mark the box	x instead of signing
to the potential partici participant understand	out the Participant Information Shee pant. To the best of my ability, I hav ds what they are freely consenting to ccordance with their wishes.	e ensured that the
Name of Researcher Date	Signature of Researcher	
Consent Form with the	accurate reading of the Participant In e potential participant and the indivice estions. I confirm that the individual h	dual has had the
Name of Witness	Signature of Witness	Date

If the participant is unable to mark the box but is able to indicate consent orally, or in another manner, then the signatures of the witness and the researcher will

<sup>&</sup>lt;sup>2</sup> Please refer to Forms A and B: Additional Guidance on Data Management



be sufficient. In such cases the researcher should indicate below how consent was given:

Form of consent for participants unable to provide a signature or to mark the box:

## 5. Study contact details for further information

[Insert details of contact name, phone number and email address]

#### **6. Alternative formats**

The researcher should offer to provide a copy of the Participant Information Sheet and Consent Form in alternative formats (e.g. large print, Braille). Advice on alternative formats can be obtained from <u>Disability Services</u> (email: <u>altformats@dundee.ac.uk</u>).