

AKSHAY VEERAMANENI

200394333



PROJECT: Call Centre application unification program.

12TH JUNE 2019

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APPLICATION FOR RESEARCH ETHICS APPROVAL

INSTRUCTIONS

Who should complete a different form?

If you are a PROFESSOR who is applying for course-based approval, utilize the REQUEST FOR ETHICAL APPROVAL OF COURSE BASED STUDENT RESEARCH PROJECTS.

If you are a STUDENT and your research study is for a course in which the professor holds current approval from the Georgian College Research Ethics Board (REB) to oversee course-based student research, please submit this application to your professor for review. If your study falls outside of the course-based approval held by your professor, then they will refer the application to the Georgian College Research Ethics Board for review.

Who should complete this form?

The range of research activities requiring review by the Research Ethics Board includes all research that involves living human subjects, human remains, cadavers, tissues, biological fluids, embryos or fetuses, regardless of whether the research is funded or non-funded, is performed by Georgian College students, faculty, support staff, or administrative staff, is a collaborative research undertaking with strategic college or university partners, or is for commercial or information purposes. This also includes individuals not associated with Georgian College who wish to complete research that involves Georgian College staff, students or community members. The following criteria may be used as a guideline to determine if this form should be completed.

An application to involve human participants in research must be completed if the research involves one or more of the following:

- Research involving human participants recruited from Georgian College
- The use of the College's name in a contract bid or proposal to an outside private or public organization
- College sponsorship of research through professor classroom release time, sabbatical (study leave), or direct funding
- Researchers accessing College facilities, resources, College employees, machines, and other College services or resources, and where the College administers a grant from an outside agency or individual (private or government)
- Data formally collected, through whatever means or methods, from College students, faculty, administration, support staff, or other members of the College community, or from any database containing information about the aforementioned groups
- Research involving human participants planned by Georgian College and Georgian College University Partnership Centre students requires REB review and approval when:
 - The intent of the research is to educate students on research processes used to explore and expand existing theories and conceptual knowledge;

- Students compare new techniques, practices, programs with standard approaches to determine which is more effective;
- The results or findings are written in a format that would be acceptable for a research journal or academic conference presentation; or
- Primary data are collected and organized for analysis and distribution or dissemination.

Research exempt from ethics review and therefore not requiring completion of this form includes:

- Research about a living individual involved in the public area or about an artist, based exclusively on publicly available information
- Quality assurance and quality improvement studies, program evaluation activities, and performance reviews, or testing within normal educational requirements when used exclusively for assessment, management or improvement purposes, including:
 - Academic departmental administrative research projects approved by the Dean or Director of the department; for example, class data related to marks or attrition;
 - Data collection, management, and reporting for routine administrative purposes by Georgian College departments;
 - National or provincially mandated studies such as Key Performance Indicators (KPIs) or College Ontario studies; or
 - Primary data collection (such as surveys or focus groups) designed and administered by Organizational Planning and Development for review and renewal of programmes and college services.
- Georgian College student information gathering activities classified as skill development and not research where the intent is to:
 - Use the information to provide advice, diagnosis, identification of appropriate interventions, or general advice for a client;
 - Develop skills which are considered standard practice within a profession (e.g. observation, assessment, intervention, evaluation, auditing);
 - Collect information as part of the normal relationship between a student and the participants (e.g. classroom teacher and students, nurse and patient, lawyer and client); or
 - Teach about the design, conduct and process of research and might involve 'practice' data collection from or about a few students within their class and the research is considered minimal risk.

What do I need to do?

Familiarize yourself with the applicable policies

See links in the Application Checklist attached to these instructions.

Institutional approvals

In addition to ethics approval, you will need permission from the manager(s) of the area(s) in which you plan to do your research (usually deans or directors). Managers may ask to read your application, including the attachments. Other institutional approvals may also be required. Attach all letters/emails of permission or support to your application.

Important: Investigators will need to seek permission from individual professors if they wish to visit classrooms to give a brief recruitment speech. Access is not guaranteed. Also, in most cases it is highly inappropriate to use classroom time for data collection. Researchers are advised to consider this as they plan their methodology.

How do I complete the form?

First save a copy to your computer. You may also need to click "Enable Editing" on a yellow status bar at the top of the window.

This is a fillable form. You may use the Tab key to move forward one field, and Shift+Tab to move back one field. To select (or to deselect) a tick box, either click it with your mouse or navigate to it with the Tab key and use the spacebar to click the box.

Type in the text boxes provided. They will grow as you type. To insert a tab within your response, use Ctrl+Tab. (Using Tab only will move you forward one field.)

Handwritten signatures are required. You may submit the completed and signed application as a single Adobe Acrobat PDF document to reb@georgiancollege.ca, or you may submit your scanned signature pages as a separate PDF as long as it comes from the same email address.

Whom may I contact if I have any questions?

Please contact your professor or the Georgian College Research Ethics Board Chair Dr. Richard Rinaldo, at 705-728-1968 ext. 5583 or reb@georgiancollege.ca.

Important!

Do not commence any recruitment or data collection activities until you have received final ethics approval.



APPLICATION CHECKLIST

1. Read <u>Responsible Practice and Ethics Review in Research</u> , Procedure #2-119.	<input checked="" type="checkbox"/>
2. Read <u>Research Integrity</u> , Procedure #1-132.	<input checked="" type="checkbox"/>
3. Complete the <u>TCPS 2 Tutorial Course on Research Ethics (CORE)</u> and save the certificate of completion.	<input checked="" type="checkbox"/>
4. Familiarize yourself with <u>Freedom of Information and Protection of Privacy Act (FIPPA)</u> and any other applicable privacy legislation and institutional procedures. Employees may wish to read the Access and Privacy Office information on the Employee Intranet.	<input checked="" type="checkbox"/>
5. Complete the attached <u>APPLICATION FOR RESEARCH ETHICS APPROVAL</u> and submit it to reb@georgiancollege.ca as one complete file. Be sure to attach the following:	<input checked="" type="checkbox"/>
• Recruitment scripts and advertising materials (e.g. in-person classroom recruitment script, online Research Participant Pool description, posters and emails)	<input checked="" type="checkbox"/>
• Informed consent script(s) and letter(s) Include email and phone number of Georgian REB Chair for participants' questions or concerns.	<input checked="" type="checkbox"/>
• Questionnaire(s), interview guide(s) or other test instrument(s)	<input checked="" type="checkbox"/>
• Debriefing form or script if applicable	<input checked="" type="checkbox"/>
• Approval letter(s) from other institution(s), along with the application(s) they approved	<input checked="" type="checkbox"/>
• Approval letter(s)/letters of support from department managers	<input checked="" type="checkbox"/>
• Certificate(s) of completion from the TCPS 2 Tutorial Course on Research Ethics (CORE) for all investigators	<input checked="" type="checkbox"/>
• Completed signature page Note: If you are submitting your application as a Word document, you may scan the signed signature page and send it as a separate document. It will be accepted as part of the application provided it comes from the same email address.	<input checked="" type="checkbox"/>



APPLICATION FOR RESEARCH ETHICS APPROVAL

Application to Involve Human Participants in Research

The personal information collected on this form will become part of the records held by the Georgian College Research Ethics Board and will be used to assist in the review of your application and provision of services for your study. A copy of this form may be reviewed by external parties in order to meet legislative, audit and/or regulatory requirements. The information is collected under the legal authority of the Ontario Colleges of Applied Arts and Technology Act, 2002 and in accordance with Sections 38(2) and 41(1) of FIPPA. If you have any questions or concerns about the information collected, please contact the Research Ethics Board at reb@georgiancollege.ca or 705-728-1968 ext. 1774. For more information about FIPPA, please contact the Access and Privacy Office at 705-728-1968, extension 5770 or accessprivacy@georgiancollege.ca.

SECTION A – GENERAL INFORMATION

1. Title of the Research Project: Call centre application unification program

2. Investigator Information

	Name & position	Dept./Address	Phone No.	E-Mail
Principal Investigator (PI) *:	AKSHAY VEERAMANENI	Georgian College	705-220-6932	Akshay.veeramae ni@Mygeorgian.c a
Faculty: Co-Investigator(s)				
Faculty/Thesis Supervisor(s): (if the PI is a student)	Michael Payne	Georgain College	705-716-2023	michael.payne@g eorgiancollege.ca
Other: Investigator(s)				

3. Has this research proposal been reviewed by a Georgian College manager?

☐ Yes ☒ No ☐ N/A

If Yes, attach a copy of the decision with signatures.

4. Project Start/End Dates

Indicate the anticipated start date for this project: JUNE 16 2019

Indicate the anticipated completion date for this project: AUGUST 12 2019

Note: The commencement date should be the date the principal investigator (PI) expects to actually begin interacting with human participants (including recruitment). The completion date should be the date that the PI expects that interaction with human participants, including any feedback or follow-up, will be complete.

5. Indicate the location(s) where the research will be conducted (Please include all campus locations.): Add the location of where you are and also where the sponsor is.

6. Other Research Ethics Board Approval

Has this project been submitted/reviewed/approved by any other institutional Ethics Board?

☐ Yes ☒ No

i) If Yes, please provide the following information:

This project has been: ☐ Submitted ☐ Reviewed ☐ Approved

Title of the project: NA

Name of the Other Institution/Ethics Board: NA

Date of the Decision (if applicable): NA

A contact name and phone number for the other Board: NA

ii) If Approved, provide:

1. A copy of the clearance certificate/approval, AND
2. A complete copy of the approved application

7. Project Funding

This project:

- ☒ Has not and will not be submitted to an external agency for funding
- ☐ Has been submitted to an external agency for funding
- ☐ Will be submitted to an external agency for funding
- ☐ Is currently funded.

Please indicate:



Period of Funding: From: NA To:

Agency or Sponsor (funded or applied for): NA

Does the funding agency prohibit/restrict publication? ☐ Yes ☐ No ☒ N/A

If Yes, explain any restrictions: NA

Note: If the funding source changes, or if a previously unfunded project receives funding, you must submit a change/amendment form to the Research Ethics Board.

8. Conflict of Interest

- a) Will the researcher(s), members of the research team, and/or their partners or immediate family members receive any personal benefits (for example a financial benefit such as remuneration, intellectual property rights, rights of employment, consultancies, board membership, share ownership, stock options etc.) as a result of or connected to this study?
☐ Yes ☒ No ☐ N/A
- b) Are there any real, perceived or potential conflicts of interest of which you are aware (for example, researchers who will benefit financially from the research, research which may be in conflict with institutional roles and responsibilities, faculty members who may be responsible for awarding participant grades)?
☐ Yes ☒ No ☐ N/A
- c) Are there any restrictions regarding access to or disclosure of information (during or at the end of the study) that the sponsor or institution has placed on the investigator(s)?
☐ Yes ☒ No ☐ N/A
- d) Is there the possibility of commercialization of the research findings?
☐ Yes ☒ No ☐ N/A

If you answered Yes to any of the above, please explain: NA

SECTION B – SUMMARY OF THE PROPOSED RESEARCH

9. Rationale

- a) In clear and simple terms, describe the purpose and background rationale for the proposed project:

PMRJ1009, as part of the course learning objectives, requires a project to be done where a student does an audit of the Project Management Process, working with a sponsor. The company that I have selected meets the selection criteria of the course, where I will audit a specific project or their overall Project Management Processes.

This project audit will help in identifying opportunities for improvement across the company's project management processes. It will also identify areas where the company is meeting the standards based on PMBOK.

- b) State the hypothesis(es)/research question(s):

What Project Management Process does the company do well compared to the Project Management Book of Knowledge?

What Project Management Process needs to be optimized to meet the requirements outlined in the Project Management Book of Knowledge.

What Project Management Process would the company need to start doing to meet the requirements of the Project Management Book of Knowledge.

All companies use some level of Project Management Tools and Techniques when executing activities that are unique, time bound and have a defined beginning and end.

10. Methodology

List, in order of administration, all the methods of collecting data that involve research participants. Describe sequentially, and in detail, what the participants will be asked to do (e.g., paper and pencil tasks, interviews, surveys, questionnaires, physical assessments, physiological tests, time requirements for each task plus total time requirement, location(s), etc.) Describe in detail the role/actions of the investigators during each activity.

The PI will conduct 1-2 meetings, via email, phone or in person, to discuss the process for collecting information and to review the logistics of working together (1-3 hrs.)

The PI will conduct 1-3 interviews or more and depending on preference of sponsor, via phone, email and/or in person, collect information about their project management processes, using the audit checklist as a guide (1-4 hrs.)

The PI will ask the participants (Project Sponsor) to attend the Showcase Event at the end of the course if interested.

Note: Attach a copy of all questionnaire(s), interview guides or other test instruments.

11. Participants

- a) Describe any relevant characteristics of the participants (number, age, gender, institutional affiliation):
NA
- b) Describe, if any, groups that are excluded and why:
NA
- c) Is this a captive population (e.g. professor-student; manager-employee, co-worker)?
☐ Yes ☒ No

If Yes, describe how you will deal with potential coercion issues for recruitment:

- d) Is this a vulnerable population (e.g. children, Aboriginal people, people residing in institutions such as correctional facilities or long-term care residences, medical research involving people receiving medical attention, and people who lack the capacity to consent for themselves)?
☐ Yes ☒ No

If Yes, describe how you will protect their interests: NA

12. Recruitment

How do you plan to recruit participants (please check any that might apply in the course of your project):

- ☒ Investigators will approach their own students/patients
☒ Investigators will receive referrals from other faculty
☐ Indirect advertising (e.g. poster, web-based, other media)

Describe locations:

- ☒ Email

What email system/distribution list(s) will you use?

- ☒ Online research participation pool
☐ In-person classroom recruitment

Note: You must obtain permission from the professor of each class.

How much time you will need for each recruitment visit:

List the classes you plan to visit:



☐ Educational records (e.g. academic performance information, Student Information System)

☒ Other (specify): LinkedIn and through word of mouth from others in the industry.

STUDENTS: Ensure that you attached a copy of the letter that we developed for you to send to prospective project sponsors.

Note: If you add or change a method of recruitment, you must first request an amendment from the REB.

Attach a copy of all recruitment scripts and advertising materials (e.g. in-person classroom recruitment script, online Research Participant Pool description, posters and emails).

13. Informed Consent

a) Will you be seeking *written* consent from participants?

☒ Yes, my form is attached

☐ Yes, my online consent document is attached (Participants must actively indicate their consent.)

☐ No. (Provide details of how you will obtain consent, including any plans for obtaining third party consent. Attach any related scripts, letters or forms.): See Informed consent letter attached.

Note: Participants should actively choose whether or not to participate. A lack of response (i.e. a statement such as "you will be assumed to want to participate unless you indicate otherwise to the researchers") should not be construed to imply consent.

Written consent is not required in all circumstances. For example, you could require participants to click a box in an online survey or provide verbal consent.

b) Will participants have the option to withdraw from this study? ☒ Yes ☐ No

If Yes, what do they have to do to withdraw (include any deadlines)?

To withdraw from being a Project Sponsor, they just need to email, call or discuss in person that they no longer want to be a Project Sponsor.

If No, please explain the rationale:

c) Indicate what will be done with the participant's data and any consequences for the participant withdrawing from the study.

Any information collected will be deleted and/or destroyed using the Georgian College confidential shredding bid (as needed).

d) Is deception involved in your research? ☐ Yes ☒ No

If Yes, please elaborate (including issues around debriefing and an explanation of why the deception is necessary): NA

14. Collection of Personal Information

a) Please check all types of data you intend to collect:

- ☒ Identifying information which identifies a participant through direct identifiers (e.g. full name, medical record number)
- ☐ Identifiable information which could identify a participant through a combination of indirect identifiers (e.g. DOB plus address)
- ☐ De-identified/coded information in which identifiers are removed and replaced with a code; the code can be used to re-identify participants
- ☐ Anonymized information in which all identifiers are removed and no code is kept
- ☒ Anonymous information in which no identifiers are collected
- ☐ Permission will be obtained to waive anonymity (please elaborate):

Note: Information should be collected at the lowest level of identifiability possible (e.g. initials instead of a name, age instead of a DOB).

b) In the table below, please detail the specific identifiers required for this study:

Identifier (Check all that apply)	Why is this necessary?
<input checked="" type="checkbox"/> Full name	S
<input checked="" type="checkbox"/> Initials	NA
<input type="checkbox"/> Student/Employee number	To ensure that the student is accurately identified as PI.
<input type="checkbox"/> Social Insurance Number	NA
<input type="checkbox"/> Health card number	NA
<input type="checkbox"/> Medical record number	NA
<input type="checkbox"/> Address	NA
<input type="checkbox"/> Full postal code	NA
<input type="checkbox"/> Partial postal code	NA
<input checked="" type="checkbox"/> Telephone number	The will be needed to contact the Project Sponsor
<input checked="" type="checkbox"/> Email	The will be needed to contact the Project Sponsor
<input type="checkbox"/> Physician	NA
<input type="checkbox"/> Date of birth	NA
<input type="checkbox"/> Age	NA
<input type="checkbox"/> Other: (Specify)	NA

15. Confidentiality

It is expected that the data be kept confidential unless the participants explicitly have given their permission otherwise.

- a) Please describe in detail how you will maintain confidentiality and ensure all records are secure. If data will be coded or will have identifying (or potentially identifiable) information removed, describe when this will be done and by whom.

All information collected will be kept on a secure computer that can only be access through a password. Additionally, all email communication with the Project Sponsor will be done through the Georgian College email system.

- b) If confidentiality will not be maintained, please explain:

NA

16. Storage and Protection of Information

- a) In which of the following ways will data be stored?

☐ Locked filing cabinet in locked institutional office

Paper files with identifiable information must be kept in a locked cabinet within a locked office (but not at home).

☒ Password-protected computer in a secure location

Electronic files with identifiable information may be stored on a password-protected computer on a secure access-controlled network (i.e. Virus protection, file backup, firewall, access limited) or they must be encrypted. Electronic files must be password-protected.

☒ On mobile devices with encryption

Electronic files with identifiable information may be stored on mobile devices (e.g. laptop, CD, USB, PDA), but no alternative method of storage; these files must be encrypted and password protected.

☐ Identifiers and participant data stored separately

Describe separate locations of data and who will have access to the code:

The code and consent forms must be isolated from study data and stored in a secure manner.

- b) How long will you keep the study data?

The information will be kept until the completion of the course.

Note: If this study requires Health Canada approval, records must be retained for twenty-five years. For all other studies, the REB recommends seven years, with a minimum of one year. Sponsors and Institutions may set out other requirements.

c) How will the data be destroyed?

Any information that is kept on the computer will be deleted. Any paperwork that was developed as a result of the work will be shredded.

Note: You are required to destroy identifiers or links at the earliest possible time. Destroy data stored on paper or other physical formats by cross-cut shredding, pulping or burning. Destroy data stored in electronic format with overwrite software or through physical destruction of drives.

17. Transmission of Data

If you require outside sources to have access to participant data (e.g. data sent for transcription or uploaded to a central data repository), you need to ensure that mechanisms are in place to ensure data security, confidentiality and anonymity.

a) Will you be transmitting (e.g. uploading/downloading or emailing) or transporting data?

☒ Yes ☐ No

b) If Yes, specify how:

☐ Fax (Note: Machines must be located in a secure, access-limited location.)

☐ Email (Note: Encryption protocol must be attached.)

☒ Upload/download to server. Specify name and location: Georgian College

☒ Transport via encrypted portable device (e.g. laptop, CD, USB, PDA) (Note: Encryption protocol must be attached.)

☐ Private Courier (Note: Delivery must be traceable.)

☐ Canada Xpresspost (Note: Regular mail may not be used. Delivery must be traceable.)

☒ Other: Phone discussions

Note: Identifying and/or identifiable personal information, especially Personal Health Information (PHI), cannot be transmitted by email or transported on a portable device unless it is encrypted.

Note: Data sent to the United States, or uploaded to American servers (e.g. Survey Monkey), is open to access by American regulatory bodies. Researchers must inform study participants of this possibility.

18. Secondary Use of Data

Use of data for purposes other than those for which the data was originally collected is considered to be secondary use of data and requires participant's permission.

- a) Does this study use secondary data? ☒ Yes ☐ No

If Yes, please respond to the following:

- i) Did the participants consent to use of their data for secondary purposes?

☒ Yes ☐ No

If you answered No to i above, is there even a remote possibility participants can be identified indirectly? Explain:

- ii) Have you obtained administrative approval/consent from the holder to access the data (e.g. from a hospital, Registrar's office)?

☐ Yes (attach evidence of their administrative consent)

☒ No

- b) Will you combine your research data with any other data sets? ☐ Yes ☒ No

If Yes, please:

- i) Identify the dataset: NA

- ii) Explain how the linkage will occur: NA

- iii) Provide a list of data items contained in the dataset: NA

- c) Will your data be entered into another database for future use? ☐ Yes ☒ No

If Yes, please answer the following:

- i) Where it will be stored? NA

- ii) Who will be the custodian? NA

- iii) Who will have access to the database? NA

- iv) What security measures will be in place? NA

19. Compensation

- a) Will participants receive compensation for participation?

i) Financial ☐ Yes ☒ No

ii) Non-financial ☐ Yes ☒ No

If you answered Yes to either i or ii above, please provide details: NA

- b) If participants choose to withdraw, how will you deal with compensation?

NA

SECTION C – DESCRIPTION OF THE RISKS AND BENEFITS OF THE PROPOSED RESEARCH



20. Possible Risks to Participants

a) Indicate if the participants might experience any of the following risks:

i) Physical risk (including any bodily contact or administration of any substance)? Do not include "fatigue" as a risk unless it is significant for the population you are studying.

☐ Yes ☒ No ☐ N/A

ii) Psychological risks (including feeling embarrassed, worried or upset)?

☐ Yes ☒ No ☐ N/A

iii) Social risks (including possible loss of status, privacy and/or reputation)?

☐ Yes ☒ No ☐ N/A

iv) Economic risks (including expenses incurred for participation, long travel to research site)

☐ Yes ☒ No ☐ N/A

v) Are any possible risks to participants greater than those the participants might encounter in their everyday life?

☐ Yes ☒ No ☐ N/A

If you answered Yes to any of the points above, please explain the risk, and comment on the magnitude of harm (minimal, substantial, transient or longer lasting) and likelihood that participants will encounter harm (low, medium or high).

NA

Describe how the risks will be managed (including an explanation as to why alternative approaches could not be used). For example, indicate if a list of resources will be given to participants so they know where to go if needed (e.g., counseling).

NA

21. Possible Benefits to Participants

a) Discuss any potential direct benefits to the participants from their involvement in the project (not including compensation). Comment on the (potential) benefits to the scientific community/society that would justify involvement of participants in this study.

By Participating in the Capstone Project, the Project Sponsor (Participant) will get an more in-depth understanding of how the Project Management Processes are working and where there are opportunities for improvement. Additionally, the Project Sponsor, will begin to build a partnership with the program.

SECTION D – PARTICIPANT FEEDBACK

22. Details of Participant Feedback

Explain what feedback/information will be provided to the participants after participation in the project. (For example, a more complete description of the purpose of the research, or access to the results of the research). Indicate when results will be available and, if they will be made available on the internet, the URL to be used to access the results:

Note: Feedback should be provided in a way which is accessible to participants. For example, some participants may not have access to a computer so uploading results to a website may not be sufficient.

SECTION E – ADDITIONAL INFORMATION

Is there any additional information that you would like to add that may assist us in reviewing your protocol?

None

SECTION F – SIGNATURES

23. Annual Review

It is the principal investigator's responsibility to notify the REB when the project is completed, or if it is cancelled, using the appropriate form.

I understand that the completion of a Renewal or Final Report is required at least annually.

Principal Investigator Initial: AV

24. Adverse events

I understand that adverse events (i.e. unanticipated negative consequences or results affecting participants) must be reported to the Research Ethics Board and the Research Ethics Coordinator as soon as possible.

Principal Investigator Initial: AV



25. Principal Investigator (PI) Assurance (Print additional copies if needed.)

I have examined *Georgian College's Responsible Practice and Ethics Review in Research* policy (Procedure Number 2-119) and affirm that, to the best of my knowledge, the research conforms to the policy. I agree to conduct the research in accordance with the *Tri-Council Policy Statement: Ethical Conduct for Research Involving Humans*, Georgian College's policies and procedures for ethical conduct of research, and any conditions communicated by the Georgian College Research Ethics Board.

I also understand that if I make any changes whatsoever to the documents provided with this application (including, but not limited to, the application form, recruitment scripts, information and consent letters, survey questions, interview or focus group questions), I must complete a change request form and submit this to my faculty supervisor for review. I further understand that these changes, if determined to be substantive by my faculty supervisor or the REB, may require a new application if they constitute new research.

If any changes are made to the protocol submitted, or if unanticipated risks or adverse events are observed, I will bring these to the attention of the REB immediately. I understand that if I fail to advise my faculty supervisor or REB of any changes or adverse events, or fail to comply with research protocols outlined in this application, or make any unauthorized changes to any document submitted with this application, ethics approval may be rescinded.

I further understand that I may not start any research without receiving ethics approval. I further understand that ethical approval does not constitute institutional approval of this research.

AKSHAY VEERAMANENI 12th June 2019
Name and Signature of Primary Investigator (PI) Date

Michael Paul AlPeet 12 June 2019
Name and Signature Faculty/Thesis Supervisor (If the PI is a student) Date

Name and Signature of Co-Investigator Date

Name and Signature of Co-Investigator Date

26. Ethics Approval

This section to be completed by the Research Ethics Board Chair.		
_____ Project approved	_____ Project not approved	_____ Changes requested
Signature of Chair, Research Ethics Board		Date





Help a Student Learn About the Real World

Georgian College is in its second year of teaching a Project Management Post Graduate program. One of the courses in the second semester is the Major Project. This course challenges the students to examine project management practices in an organization and compare the real world application of project management practices with the standards taught in the Program.

Students will need access to one or two project managers to discuss how PM tools and processes are used in the organization. This normally involves 2 interviews about 1 hour long. Knowledge about specific projects is not required in situations where confidentiality is a priority. The students are not required to do paid work to complete the assignment. Opportunities to attend meetings or briefly shadow team members would add to the student's background knowledge and understanding but are not required. The emphasis is on project management practices. The student's research and the project report must be complete and delivered on or before end of July 2019.

Please contact me if I can be of assistance. Your contribution to the success of our program is greatly appreciated.

Thanks again

Michael J Payne MBA, PMP
michael.payne@georgiancollege.ca
705-716-2023

A handwritten signature in blue ink, appearing to be 'CJP', located in the bottom right corner of the page.

Letter of Introduction and Informed Consent Form

Study Title:

Call Centre Application Unification Program

Researcher

AKSHAY VEERAMANENI

Before agreeing to participate in this research, we encourage you to read the following explanation of the Capstone Project (PRJM1009). This statement describes the purpose and procedures of the Capstone Project. Also described is your right to withdraw from the Capstone Project as a Project Sponsor at any time. This Capstone Project has been approved by the Research Ethics Board of Georgian College.

Explanation of Procedures

This study is designed to examine the ways in which organizations manage their projects against established Project Management Book of Knowledge standards. I am conducting this research to learn more about how to conduct a project management audit/review working with external stakeholders. As a Project Sponsor, your role will involve supporting a few interviews where I will ask some basic questions about the project management practices that have been applied to an organizational project that you have undertaken. The interviews will be conducted by (me) one of the researchers. We will interview you either in person or via phone.

Risks and Discomforts

There are no risks or discomforts that are anticipated from your participation in the study.

Benefits

The anticipated benefit of participation is the opportunity to gain some insights the adherence level of the project management practices being used currently and also, learn of some potential opportunities to enhance the project management practices.

Confidentiality

The information gathered during this Capstone Project will be held confidentially and any reporting on the data will be done in such a way that you will not be identified. The results of the research will be submitted to my professor in the form of a research paper and also presented at our Capstone Showcase at the end of the semester. The knowledge obtained from this Capstone Project will be of great value in guiding professionals to be more effective in applying project management practices in their organizations.

Withdrawal without Prejudice

Participation in this study is completely voluntary. Refusal to participate will incur no penalty. You are free to withdraw consent and discontinue participation in this project at any time without prejudice or penalty. You are also free to refuse to answer any question asked of you.

Further Questions and Follow-Up

You are welcome to ask the researcher any questions that occur to you during the interview. If you have further questions once the interview is completed, you are encouraged to contact the researchers using the contact information given below. If, as a result of participating in this study you feel the need for further, longer-term support, you are welcome to contact michael.payne@georgiancollege.ca.



I have read this consent form and I understand the above information and all my current questions have been answered. I understand that if I have more questions, these will be answered. By signing this form, I agree to participate in this Capstone Project. I understand that I am free to refuse to answer any question and to withdraw from participating in the Capstone Project at any time. I understand that my responses will be kept confidential. A copy of the consent form will be given to you for your information.

Donald J. Phillips

PARTICIPANT'S NAME (PRINT)

Donald J. Phillips

PARTICIPANT SIGNATURE

June 12, 2019

DATE (MM/DD/YY)

I certify that I have explained the purpose and procedures of this research study and answered the questions from the above individual.

[Signature]

SIGNATURE OF PERSON OBTAINING CONSENT

June 12, 2019

DATE (MM/DD/YY)

Email address: donald-phillips@td.com

Researcher contact information: Akshay.Veeramaneni@MyGeorgiam.ca
705-220-6932

[Signature]



AUDIT CHECKLIST/QUESTIONS

Introduction

Project Audit checklist/Questions are prepared to ask specific stakeholders or core members of project about how they are managing their projects and this discussion will uncover different issues, matters and various challenges during the project. It also helps the project manager to learn about the facts needs to be improved to call the project successful at the end.

Akshay Veeramaneni
200394333



Audit Check List/Questions

Questions	Yes	No	Comments/response
COMPANY AND PROJECT SUCCESS			
1) What is your Companies Success?			
2) What is your company strategy?			
3) Are you able to achieve company strategy with your projects?			
4) Has an Organization Readiness been conducted?			
5) Has the Business need been clearly defined?			
SCOPE MANAGEMENT			
6) Is there a scope management plan?			
7) Has the project scope been baselined?			
8) Is Scope clearly defined to all to avoid scope creep?			
9) Are projects formally accepted by the customer or sponsor and documented accordingly?			
10) Is work break structure used or any other sophisticated tool used?			



Audit Check List/Questions

SCHEDULE MANAGEMENT			
11) Is there a Schedule Management Plan for monitoring and controlling project schedule?			
12) Is the schedule updated on a periodic basis?			
13) Do you use scheduling software like Microsoft Project?			
14) Is PERT / Critical Path or equivalent methodology being used?			
15) How you monitor critical path?			
16) Are target dates established for each milestone deliverable?			
17) Is the structure for tracking the project schedule well defined and assigned to a specific individual?			
18) Was the project schedule reviewed by all stakeholders and formally accepted?			
COMMUNICATION MANAGEMENT			
19) How communication plan is developed and updated?			



Audit Check List/Questions

20) Has everyone in the team are clear about communication plan?			
21) How you manage change requests?			
22) How you capture and manage action items?			
RISK MANAGEMENT			
23) How will you manage Risk?			
24) How will you Identify Risks?			
25) Have all team members been part of identifying risks?			
26) Are risk triggers captured and added to risk log?			
27) Have reserves been created to address risks?			
28) What are contingency plans?			
29) Are cause and effect determined for risks when they occur?			
30) Do Risk details are properly documented for future use?			
HUMAN RESOURCE MANAGEMENT			
31) What is your recruitment process?			
32) Has a Resource Management plan created?			
33) Are all details about resource is documented for			

Audit Check List/Questions

planning and tracking of project?			
34) How you maintain integrity among?			
35) How your rewards system is?			
36) Have Adequate resources been provided by management when required?			
37) Have project team accountabilities and responsibilities clearly defined?			
38) How you access skilled resources in deficiency?			
39) Do you have proper project work location?			
40) Are project leaders and team members committed full time?			
41) How you access and follow all government regulations and compliances?			
COST MANAGEMENT			
42) How you manage your costs?			
How you document Funding resources for monitoring?			
43) What are contingency plans when you exceed over budget?			
44) Have the procedures for identifying budget			



Audit Check List/Questions

variance been followed?			
45) How well your financial auditing processes are?			
46) How about your payment process and terms?			
47) How about your sponsor involvement in project financial matters?			

CLP

Audit Check List/Questions

QUALITY MANAGEMENT PLANNING			
48) Does the project have Quality Culture?			
49) Briefly tell about your Quality Management plan?			
50) Has a Quality Assurance plan been developed for the project?			
51) Are there adequate resources for Quality Assurance function?			
52) What quality management tools you used for this project and why?			
53) Are Quality Metrics clearly defined and communicated?			
54) Is there a process for Quality Inspection? And how frequent will you do?			
55) Is Quality monitored from the perspective of the customer's needs and expectations?			

CCH

Audit Check List/Questions

56) Do Quality assurance audit reports are communicated among?			
PROCUREMENT MANAGEMENT			
57) Do you have Procurement Management plan?			
58) Are procurement deliverables arriving on time and to specification?			
59) Are vendor contract reports, reviews and visits conducted periodically?			
60) Is documentation created for communication with suppliers and vendors?			
61) Are all payments made according to contracts?			
STAKEHOLDER MANAGEMENT			
62) Is there a stakeholder management plan?			
63) Have key stakeholders been identified?			

CLP

Audit Check List/Questions

64) Have stakeholder's accountabilities and responsibilities been clearly defined?			
65) Have stakeholder analysis is done for what and how much information should be given?			
66) Is there regular status reporting to appropriate stakeholder?			
PROJECT MANAGEMENT CLOSEOUT			
67) Is there clear process to close the project?			
68) Are all vendor contracts are closed out?			
69) Have lessons learned been documented for future use and for repository?			
GOVERNMENT REGULATIONS			
70) How you access and follow all government regulations and policies?			



DEPARTMENT OF RESEARCH AND INNOVATION
INTELLECTUAL PROPERTY AND NON-DISCLOSURE AGREEMENT,
FOR STAFF AND STUDENTS EMPLOYED BY GEORGIAN COLLEGE

Whereas Georgian College operates a Department of Research and Innovation, of which a purpose is to employ Georgian College students in applied research projects in furtherance of their vocational training,

And whereas the Undersigned is employed by Georgian College of Applied Arts and Technology ("Georgian College"),

And Whereas the Undersigned has agreed to work on the following Research and Innovation project (the "Project"):

Project Management Capstone Project (PRJM1009)

Now therefore for good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged, the Undersigned hereby covenants and agrees as follows:

Confidentiality

"Confidential Information" includes, but is not limited to, technical data, know-how, research, products, hardware, software, designs, inventions, ideas, processes, drawings, business plans, product implementations, financial information, marketing techniques, business operations and systems, pricing policies, information concerning employees, customers, and/or vendors disclosed.

The Undersigned acknowledges that in the course of employment, he/she may be entrusted with Confidential Information that is the property of Georgian College or the property of a party undertaking a research project with Georgian College ("Collaborator").

The Undersigned acknowledges and agrees that disclosure of such Confidential Information to any actual or potential competitor or to the general public may be harmful to Georgian College and/or the Collaborator(s). The Undersigned therefore agrees to maintain all such information in confidence and not disclose it to any party outside of the Department of Research and Innovation. The obligations of confidentiality hereunder do not extend to any information that:

- (a) was in his/her possession before employment by Georgian College;
- (b) is or becomes a matter of public knowledge through no fault of his/her own;
- (c) is rightfully received by him/her from a third party without a duty of confidentiality;
- (d) is disclosed under operation of law; or
- (e) is disclosed by him/her with Georgian College's prior written approval.

This covenant is not intended to restrict the right of the Undersigned to take with him/her any skills and/or general knowledge acquired in the course of employment. It is intended to restrict the use of confidential information that is the property of Georgian College and/or the Collaborator(s).

A handwritten signature in blue ink, appearing to be 'C. J.', located at the bottom right of the page.

Ownership of Work Product (including Intellectual Property)

The Undersigned acknowledges and agrees that any work product, including but not limited to intellectual property, developed in the course of employment shall be the property of Georgian College and/or the Collaborator(s), as Georgian College may in its sole discretion determine, and the Undersigned hereby transfers and assigns any such rights to Georgian College.

Work product includes, but is not limited, to information, trade secrets, inventions, discoveries, improvements, research materials and databases made or conceived by Employee alone or with others during the course of Employee's employment or relating to the business or affairs of Georgian College or its Collaborators.

The Undersigned agrees to execute any assignments and/or acknowledgments as may be requested by Georgian College from time to time, including documents required for patent, copyright and industrial design registration, without any further remuneration.

Return of Property

Upon completion of the Project, or termination of employment, however caused, the Undersigned will return to Georgian College all property belonging to Georgian College and/or the Collaborator(s) including all Confidential Information (including all copies thereof), keys, manuals, computer software and hardware, correspondence, monies, cards and supplies which may be in Employee's possession.

Privacy

The Undersigned acknowledges and agrees that as an employee of Georgian College he/she must comply with the *Freedom of Information and Protection of Privacy Act (FIPPA)*, R.S.O. 1990, c. F.31.

This Agreement is governed by the laws of the Province of Ontario.

Date: 5/12/2019

Understood and agreed to:

By: 
Signature

AKSHAY VEERAMANENI

(name: please print)

Witness: _____
Witness Signature

(witness name: please print)

Approved by:

Kevin Weaver, Vice President, International, Workforce Development and Partnerships



Certificate of Completion

This document certifies that

AKSHAY VEERAMANENI

*has completed the Tri-Council Policy Statement:
Ethical Conduct for Research Involving Humans
Course on Research Ethics (TCPS 2: CORE)*

Date of Issue:

12 May, 2019

