

Research Ethics Policy

|  |  |  |
| --- | --- | --- |
| Date of Issue | 12 June 2019 |  |
| Policy Owner | Head of Research |  |
| The Policy has been reviewed and supersedes all previous issues. It has undergone the following approval process: | | |
|  | | |
| Equality Impact Assessment | | * (2014 version; only minor updates since) |
| Research Ethics Committee | | 24th April 2019 |
| Academic Board approval | | 12 June 2019 |
| Other – if applicable |  | Eversheds LLP, Solicitors (previous version 2014) |
|  |  |  |
| The Policy was last approved June 2016. The principal changes in the latest version relate to:   * Expansion of the definition of research involving animals to consider work that may involve tissue cultures of animal origin;Further amendments to Policy relating to the Terrorism Act 2006 or the Prevent Duty in the Counter-Terrorism and Security Act 2015 (see 5.2) * Minor amendments to correct role/service titles, update hyperlinks and/or to improve clarity. | | |
|  | | |
| The next review of the Research Ethics Policy is scheduled by | | 2021 |

|  |  |  |  |
| --- | --- | --- | --- |
| **CONTENTS** | | | |
| 1. | **Introduction** | | 3 |
| 2. | **Scope** |  | 3 |
| 3. | **Governance** | | 4 |
| 4. | **Principles of Ethical Conduct in Research** | | 4 |
| 5. | **Understanding Risk in relation to Research Ethics** | | 5 |
| 6. | **Informed Consent** | | 7 |
|  | 6.1 | Provision of Information | 7 |
|  |  | 6.1.1 Misleading or withholding information | 8 |
|  | 6.2 | Participant consent | 8 |
|  |  | 6.2.1 Third party consent | 10 |
|  |  | 6.2.2 Seeking consent from vulnerable adults | 10 |
| 7. | **Confidentiality and Data Protection** | | 12 |
|  | 7.1 | Disclosure (extracted from BERA ethics p8, see Appendix 5 for reference) | 13 |
| 8. | **Dissemination of Research Findings and Intellectual Property** | | 13 |
| 9. | **Considerations prior to Applying for Ethical Approval** | | 13 |
|  | 9.1 | Health and Safety, Disclosure and Barring Service checks and data protection | 15 |
|  | 9.2 | Insurance, contracts, financial management and conduct | 16 |
|  | 9.3 | Potential damage to the University’s reputation | 17 |
| 10. | **Application for Ethical Approval: Process and Categorisation** | | 17 |
|  | 10.1 | Research undertaken by Undergraduate students within academic programmes | 18 |
|  | 10.2 | Appeals | 19 |
| 11. | **Financial Regulations: Gifts, Hospitality and Register of Interests** | | 20 |
| 12. | **Glossary** |  | 21 |
| Appendix 1: | | University response to the Concordat to Support Research Integrity |  |
| Appendix 2: | | Governance arrangements |  |
| Appendix 3: | | Guidance for Research Ethics Committee Sub-Group Convenors |  |
| Appendix 4: | | Information Sheet, Consent Form and Assent Form Templates |  |
| Appendix 5: | | Further Information and Sources of Supplementary Guidance |  |
| Appendix 6: | | Health and Safety Guidance for Research 2013 |  |
| Appendix 7: | | Application Process Flowcharts |  |
| Appendix 8: | | Application Form for Ethical Approval |  |
| Appendix 9: | | Guidance on roles and responsibilities within the Research Ethics approvals process |  |
| Appendix 10: | | Guidance to supervisors of Undergraduate projects |  |
| Appendix 11: | | Guidelines on the Ethical Approval Classification of Research Projects with Performance-based Outcomes |  |

|  |  |
| --- | --- |
| Appendix 12: | Record Keeping and Random Sample Testing of Applications for Ethical Approval |
| Appendix 13 | Granting of special Category A+ clearance for studies where information is withheld/there is an element of deceit or similar |
| Appendix 14: | Guidance Notes on Ethical Matters Arising from the Open Research Data  Agenda |
| Appendix 15: | Guidance Notes on Research Using the Internet and Social Media |

## Introduction

* 1. The Research Ethics Policy is an enabling policy and seeks to empower individual staff and students to take responsibility and negotiate ethical issues arising from their research activity in accordance with sector expectations and legal requirements where they relate to research ethics. The Policy has been produced following a review of existing documentation and practice and consideration of best practice across the sector.
  2. This document comprises the University’s policy on research ethics, the associated governance structure, and the process of ethical approval. It is intended to ensure that all students and staff members engaged in research are aware of their ethical responsibilities, equipped with a set of principles for guiding their conduct, and informed of the process by which they can seek ethical approval from the University. To avoid any doubt, each individual researcher (staff or student) has responsibility for their own actions. Those authorising ethical review applications have the responsibility to ensure the researcher (staff or student) has fully considered the ethical implications of their research activity prior to commencement and in accordance with the Research Ethics Policy.
  3. Staff and students should familiarise themselves with other policies and strategies that are referred to within (or relevant to) the Research Ethics Policy. These include, but are not limited to: Financial Regulations, Research Strategy, Health and Safety Policy, Public Interest Disclosure Policy, Anti-corruption and Anti-bribery policy, Safeguarding Children and Young People, Privacy Standard, Equality Scheme and the Data and Systems Security Policy. These policies can be found on the University website at https://[www.chi.ac.uk/about-us/policies-and-statements.](http://www.chi.ac.uk/about-us/policies-and-statements)
  4. Research ethics are an important component of the University’s response to the Concordat to Support Research Integrity which can be found in Appendix 1.
  5. The University provides Research Ethics training to its academic staff and research students as part of the staff development programme all academic staff and research students are advised to undertake this training as part of their ongoing development as researchers.

## Scope

* 1. This Policy covers all research activity whether it is undertaken by academic staff, professional services staff, undergraduate students, postgraduate students, research staff, or those in visiting academic or emeritus roles. The University’s definition of research is included in the Research Strategy which is available on the University website [http://www.chi.ac.uk/about-us/mission-and-vision/core-strategies.](http://www.chi.ac.uk/about-us/mission-and-vision/core-strategies)
  2. The Policy also includes research undertaken in the context of knowledge transfer and consultancy activity (the term ‘research’ is used to include all of these activities)1. This policy and related guidance covers all research activity, however the emphasis is on research with human participants. The University does not undertake research on animals. This exclusion would not prohibit the study of - or use of eukaryotic organisms, bacteria, amoeba, protozoa or other single microbial organisms – or tissues belonging to the biological family Plantae – or symbiotic composite tissues such as lichen. Also, the University prohibits the use of any tissue that would require approval under the Human Fertilisation and Embryology Act of 2015. However, by exception, animals may be involved in research activity. Any researchers who consider that the involvement of animals in their research project would be justified are required to contact the Research Office at the earliest opportunity. Researchers wishing to use tissue cultures in their research should contact the Research Office in the first instance. Researchers should consider the provenance of tissue samples/cultures/cell-lines and associated growth media (or similar) and whether immortalised and/or animal-free alternatives are available.

## Governance

* 1. The Research Ethics Policy seeks to empower individuals to take responsibility and negotiate ethical issues arising from their research activity. Within this context the University Research Ethics Committee has a duty to undertake ethical review and gain approval of research proposals by staff and students of the University of Chichester. The Research Ethics Committee may withhold approval for research that is not in compliance with the Research Ethics Policy or the ethical guidelines that have been agreed by the Research Ethics Committee. The Research Ethics Committee reserves the right to remove items that contravene the Research Ethics Policy from the University Research Repository and to request that the outcomes of research activity made available publically through other media be withdrawn. The Committee shall have the authority to investigate breaches of ethical practice in research, and may recommend that further investigation is undertaken in line with the University’s Disciplinary Policy.
  2. The Constitution and Terms of Reference of the Research Ethics Committee are provided in Appendix 2. Any queries relating to the Research Ethics Committee should be addressed in the first instance to the Research Office ([research@chi.ac.uk](mailto:research@chi.ac.uk)).
  3. If changes in activity, scope, or frame should occur during the course of a study (or matters arise after dissemination) that would cause the applicant/researcher to answer any of the questions on the Ethical Approval Application form differently, they should immediately seek advice from the Research Ethics Committee (via the Committee clerk) which reserves the right to consider a revised application for ethical approval and to act

1 The policy differentiates between ‘research like’ activities requested by a commercial client directly involving the client or their associates and requests by a commercial client to undertake research that requires the researcher to recruit or otherwise involve third party participants. In the first case ethical approval is not required, the work will be governed by appropriate codes of professional practice and Health and Safety policies, in the latter case approval from the Research Ethics Committee must be sought before undertaking the work.

accordingly. This may result in the Committee requesting that the research activity is temporarily or permanently ceased.

## Principles of Ethical Conduct in Research

* 1. Ethical issues in research are many and varied, and may be quite complex. All research activity is covered within the scope of this Policy however the emphasis is on research that involves human participants. Participants in research are taken to include all those involved in the research activity either directly (as someone being interviewed or answering a survey) or indirectly (as a member of a group being observed, as a public observer to the research activity) and either passively, such as when part of an educational context is being observed, or actively, such as when taking part in an interview procedure.
  2. Research involving human participants is undertaken by many different disciplines and conducted in a broad range of settings and institutions. Whilst some issues are specific to particular professional groups, all research should be guided by a set of fundamental ethical principles to ensure the protection of human participants.
  3. The principles adopted by the University are:
     + *Research integrity*: Research should be designed, reviewed and undertaken in ways which ensure integrity and quality. The concept of ‘research integrity’ covers honesty, rigour, transparency and open communication and care and respect for all participants in research2 (Sections 5-9).
     + *Effective provision of information*: Participants in research should be provided with as much information as possible about the purpose, methods and intended possible uses of the research, what their participation in the research entails and what risks are involved. This information should be provided in a timely manner and through a medium appropriate to the participant and the setting. Appropriate information should also be provided to any third parties (e.g. legal guardians, carers; Section 6).
     + *Voluntary consent and freedom to withdraw*: Research participants must participate in a voluntary way, free from coercion. Furthermore, they must be able to withdraw themselves from the study at any time without giving a reason (Section 6).
     + *Confidentiality and anonymity*: The confidentiality and anonymity of the information supplied by participants must be respected and treated in accordance with appropriate legislation (Section 7).
     + *Maximising Benefit and Minimising Harm*: Researchers should seek to maximise the benefits of their work at all stages, from inception through to dissemination. Underpinning these principles is the ethical imperative of DO NO HARM

2 See Universities UK, [*The Concordat to support research integrity* (](http://www.universitiesuk.ac.uk/highereducation/Documents/2012/TheConcordatToSupportResearchIntegrity.pdf)2012)

(nonmalficence) and, if possible, DO GOOD (beneficence). Consideration of risks versus benefits needs to be carefully weighed up by researchers (Section 5).

* + - *Independence of research*: Conflicts of interest between the aims of the research and interests of the researcher and those of the participant should be avoided (or made explicit and transparent) as should any potential conflict of interests of those reviewing applications for ethical approval (Section 9). Such conflicts might arise where there are pre-existing relationships between the researcher and participants

e.g. tutor and student, coach and player, friend or family member, or in externally funded research where a funder’s/client’s interests might be negatively affected by the research findings.

* 1. Further information and guidance about the issues underpinning these principles are set out in sections 5 to 9 below. Section 10 explains the process of formally gaining ethical approval for research projects. Section 11 gives a brief overview of principles governing the Financial Regulations as they relate to research activity. The appendices include the essential forms and procedural guidance for implementing the Research Ethics Policy.

## Understanding Risk in relation to Research Ethics

* 1. Risk can be defined as the potential physical or psychological harm, discomfort or stress to human participants that a research project may generate.3 These include risks to the participant’s personal social status, privacy, personal values and beliefs, personal relationships, as well as the adverse effects of the disclosure of illegal, sexual or deviant behaviour. Research that carries no physical risk can nevertheless be disruptive and damaging to research participants (both as individuals or whole communities/categories of people). It is important to acknowledge that it can be difficult to determine all potential risks at the outset of a piece of research. However, researchers should endeavour to identify and assess all possible risks and develop protocols for risk management as an integral part of the design of the project, and ensure that appropriate levels of ethics review are applied.
  2. The following research would normally be considered as involving more than minimal risk:
     + Research involving vulnerable groups (such as children aged 16 and under; those lacking capacity; or individuals in a dependent or unequal relationship);
     + Research involving sensitive topics (such as participants’ sexual behaviour; their legal or political behaviour; their experience of violence; their gender or ethnic status);
     + Research involving a significant element of deception;

3 This section draws heavily from the section on risk in the British Psychological Society Code of Human Research Ethics [(https://www.bps.org.uk/sites/bps.org.uk/files/Policy/Policy%20-](https://www.bps.org.uk/sites/bps.org.uk/files/Policy/Policy%20-%20Files/BPS%20Code%20of%20Human%20Research%20Ethics.pdf)

[%20Files/BPS%20Code%20of%20Human%20Research%20Ethics.pdf](https://www.bps.org.uk/sites/bps.org.uk/files/Policy/Policy%20-%20Files/BPS%20Code%20of%20Human%20Research%20Ethics.pdf)). Permission has been provided by the BPS for this usage. Copyright remains with BPS for text that is reproduced. Date accessed: 31/05/2019, date permission granted: 23/05/2013.

* + - Research involving access to records of personal or confidential information (including genetic or other biological information);
    - Research involving access to potentially sensitive data through third parties (such as employee data);
    - Research that could induce psychological stress, anxiety or humiliation or cause more than minimal pain (e.g. repetitive or prolonged testing);
    - Research involving invasive interventions (such as the administration of drugs or other substances, vigorous physical exercise or techniques such as hypnotherapy) that would not usually be encountered during everyday life;
    - Research that may have an adverse impact on employment or social standing (e.g. discussion of an employer, discussion of commercially sensitive information);
    - Research that may lead to ‘labelling’ either by the researcher (e.g. categorisation) or by the participant (e.g. ‘I am stupid’, ‘I am not normal’);
    - Research that involves the collection of human tissue, blood or other biological samples;
    - Research that involves material that might be regarded as sensitive in the context the Terrorism Act 2006 or the Prevent Duty in the Counter-Terrorism and Security Act 2015.
  1. Some research may pose risks to participants in a way that is legitimate in the context of that research and its outcomes. For example, research to reveal and critique fundamental economic, political or cultural disadvantage and exploitation may involve elements of risk. Further, some research may be considered legitimate if the longer- term gains outweigh the short-term immediate risks to participants (provided that these risks are minimal and neither have lasting effects nor induce prolonged personal discomfort). In instances where an element of risk is an unavoidable component of the research design, a detailed case outlining the cost-benefit analysis and the risk management protocol should be included in the application for ethical approval submitted to the Research Ethics Committee.
  2. Researchers also face a range of potential risks to their safety. Researchers need to consider safety issues in the design and conduct of research projects and adopt procedures to reduce the risk to themselves.
  3. The researcher must be able to justify her/his procedures, explaining why alternative approaches involving less risk cannot be used.

## Informed Consent

The principle of informed consent is based on research participants being provided with as much information as possible about the research in which they are being asked to participate and to give explicit voluntary consent on the basis of having understood that information.

This information should be provided in a timely manner and through a medium appropriate to the participant and the setting. Appropriate information should also be provided to any third parties (e.g. legal guardians, carers).

#### Provision of Information

* + 1. The researcher should normally provide participants with clearly communicated information in advance of their participation. Participants should be given plenty of time to study the project’s information sheet and consult other relevant parties, should they so wish.
    2. Typically the researcher will explain her/his procedures on an information sheet, written in language and style appropriate to potential research participants and the setting.
    3. The information sheet should set out: the purpose of the investigation; the procedures; the potential risks and benefits, if any, to the individual or to others in the future or to society; any discomfort, inconvenience or longer term effects that may be endured; the measures to be taken should adverse effects arise; a statement that individuals may decline to participate and are free to withdraw from the study at any time during the study without giving a reason; a reassurance that their confidentiality will be maintained; contact details of the researcher, an invitation to ask further questions; and information about how the research data will be stored and used (now and in the future). Participants must be informed at the outset of the study of the point in time after which it would be impractical to withdraw their data from the study (e.g. following publication of study data and/or conclusions). An information sheet template is provided in Appendix 4.
    4. It is important to ensure that participants are fully debriefed following their participation in the study. This will provide an opportunity to inform participants of the procedures and outcomes of the research, and to provide assurances on areas such as confidentiality, anonymity, and retention of data. Participants should have information on how to contact the researcher. They should also be made aware that they are able to do this for a prescribed period after the research has been completed. In the case of studies where information is withheld, the debriefing process will also provide the opportunity to inform participants of the full nature of the research, to identify any unforeseen harm, discomfort or misconceptions, and in order to arrange for assistance as needed. It will also include a post-hoc consent option.

#### Misleading or withholding information

* + 1. The researcher should avoid misleading participants wherever possible. It is recognised that there is an important distinction between a) withholding information from participants and b) deliberately misleading participants; the latter giving rise to more varied and complex ethical issues. Examples of the two methods are outlined in paragraph 6.2.3.
    2. Only in certain exceptional circumstances where withholding of information or misleading participants is necessary to preserve the integrity of research or the efficacy of professional services, will this be acceptable. In such cases, participants should be fully debriefed and where possible post-hoc consent obtained – please see paragraph

6.1.4 above. Further guidance and information from the sector on misleading of participants during research is available on request from the Research Office ([research@chi.ac.uk](mailto:research@chi.ac.uk)).

* + 1. Examples of withholding information and intentionally misleading participants:

|  |  |
| --- | --- |
| **Withholding information from participants** | **Intentionally misleading participants** |
| Example: In research involving the use of video equipment, the participant would be told that videoing will be used, but participants will not know when this is will happen. | Example: A management researcher interested in the influence of religion, science, and politics on consumer decisions might present participants with quotes attributed—sometimes falsely—to real, well-known figures from these different fields, before testing whether the different quote attributions influence subsequent consumer decision making. True attribution will be made clear to participants at the end of the study. |

#### Participant consent

* + 1. Researchers should ensure that every person from whom data is gathered for the purposes of research consents freely to the process on the basis of adequate information. They should be able, during the data gathering phase, freely to withdraw or modify their consent and to ask for the destruction of all or part of the data that they have contributed. The way in which consent is sought from people to participate in or otherwise contribute data for research should be appropriate to the research topic and design, and to the ultimate outputs and uses of the analyses. It should recognise in particular the wide variety of data types, collection and analysis methods, and the range of people’s possible responses and sensitivities. The principle of proportionality should apply, such that the procedures for consent are proportional to the nature of participation and the risks involved. In certain types of research obtaining consent from every individual present is neither practical nor feasible (e.g. observing behaviour in public places, attending large meetings, observing discussions on the internet). Research of this kind stretches the definition of what it actually means to be a human participant in research. In research of this kind researchers should ensure the following:
       - such research is only carried out in public contexts, defined as settings which do not require any particular negotiations or agreements in order to gain access to them;
       - if relevant, approval is sought from the relevant authorities;
       - if relevant, appropriate stakeholders are informed that the research is taking place;
       - specific individuals should not be identified, explicitly or by implication, in any reporting of the research, other than public figures acting in their public capacity (as in reporting a speech by a named individual, for example); and
       - attention is paid to local cultural values and to the possibility of being perceived as intruding upon, or invading the privacy of, people who, despite being in an open public space, may feel they are unobserved.
    2. Researchers should ensure that the protocol they follow for seeking, taking and recording consent is appropriate to local customs, legal frameworks and cultural expectations, and to the nature of the research and its topic, while adhering to the principle of validity. While written consent, as described below, will be the usual approach, other methods, such as audio-recorded verbal consent or implied consent (for example in choosing to input responses to an anonymous online survey on a non-

sensitive subject), may be preferable if based on a careful consideration of the research context. It is always important that consent should be documented in an auditable record.

* + 1. Participants should be free from coercion of any kind and should not be pressured to participate. Coercion infringes the human right to autonomy and coerced participation compromises the validity of research data.
    2. Inducements such as special services or financial payments or other inappropriate motivation should usually be avoided. Reimbursement of participants’ expenses, for example for travel, is not payment in the sense of reward, and can be provided. It is also reasonable to provide participants with a small gratuity to cover their time but this should be done cautiously and with consideration in order to avoid setting up a culture of expectation. However, explicit formal permission from the University to pay respondent expenses will be required and advice/guidance on this issue should be sought from the Director of Research. Compensation for damage, injury or loss of income should not be considered inducements. Risks involved in participation should be acceptable to participants, even in the absence of inducement. See Section 11 Financial Regulations: Gifts, Hospitality and Register of Interests.
    3. Participants must be free to withdraw from the study at any time. If participants appear uncomfortable, the researcher should respond sensitively and re-iterate the right of participants to withdraw if they so wish.
    4. The researcher needs to ensure that participants understand the purpose and nature of the study, what participation in the study entails, and what benefits are intended to result from the study (see section 6.1 on Provision of Information).
    5. The researcher has responsibility for seeking on-going consent during the study, where relevant, for example where the study is in several phases or if it is conducted over an extended period.

6.3.9. Consent, whether in a verbal recording, electronic or hard copy form, should include an explicit statement confirming that information about the research has been given to the participant and has been understood. It is important that participants do not misunderstand any collection of health-related data from them as constituting any form of medical screening. Such misapprehensions might lead them to be less vigilant in relation to seeking medical attention for risks or symptoms of illness.

* + 1. Normally, where written consent is taken, two copies of a consent form should be signed by the researcher and the consenting participant, and/or their parent/guardian. One copy should be retained by the participant and the other stored by the researcher. The copy retained by the participant should give contact details of a person who may be contacted in the case of any queries arising. For certain types of research, for example where there are identifiable risks, it will also be appropriate for the consent to be witnessed and signed by an independent third party. All records of consent, including audio-recordings, should be stored in the same secure conditions as research data, with due regard to the confidentiality and anonymity protocols of the research which will often involve the storage of personal identity data in a location separate from the linked data.
    2. Investigators should realise that they are often in a position of real or perceived authority or influence over participants. For example, they may be gathering data from their students, employees or clients, from prisoners or from other detained or vulnerable people. This relationship must not be allowed to exert pressure on people to take part in or remain in an investigation and the potential for a power relationship to bias the data should be considered. Similarly, where people in positions of power over potential participants, for example school teachers or prison staff, serve as gatekeepers or recruiters for research, the potential for coercion arising from the power relationships should be recognised and steps taken to avoid it.

#### Third party consent

* + 1. When third parties, for example parents, teachers or health care professionals, are directly involved in the care, education or treatment of potential participants, their informal consent should also be sought. In such cases, informal consent should involve sharing of information about the project.
    2. If the research is likely to interfere with the treatment or care being provided by a third party, they must be fully involved and give written consent to participate. In certain situations the affiliation of participants to particular organisations or special groups, such as educational institutions or hospitals, may necessitate the granting of permission to conduct the research project. In such cases any relevant policies or guidelines should be followed. For example, researchers wishing to undertake health or social care research with providers of those services may need to seek further ethical approval through the Integrated Research Application System (IRAS). This process is detailed and rigorous and may take several weeks or even months to complete. Researchers should contact the Director of Research if they think that they need to gain IRAS approval in addition to University Research Ethics Committee approval. See [http://www.hra.nhs.uk/resources/applying-for-reviews/integrated-research-application- system-iras/ .](http://www.hra.nhs.uk/resources/applying-for-reviews/integrated-research-application-system-iras/) Similarly, work with prisoners may also require approval from the National Offender Management Service<http://www.justice.gov.uk/about/noms> and work with the military may require approval from Ministry of Defence Research Ethics Committees (MODREC) (<http://www.science.mod.uk/engagement/modrec/modrec.aspx>). In the specific case of working with the Ministry of Defence, the Research Ethics Committee may base its consideration and approval on the documentation submitted and approved at the appropriate MoD ethical committee together with a cover letter that addresses any other issues pertinent to the University’s Research Ethics Policy but not covered in the documentation provided to the MoD.
    3. There may also be indirect participation by people other than research subjects per se. Any research may take place in proximity to passers-by and bystanders, if not attracting an actual audience; this is particularly true for field research, which takes place outside laboratories, classrooms or other environments dedicated to research. These people are indirect participants in that they are, potentially at least, open to effects, whether positive or negative, deriving from the research in progress in their vicinity. Whilst explicit consent of such indirect participants is not required their safety and well-being should always be considered.
    4. In auto-ethnography, the researcher uses her/his own life experience as a primary source of data. Since no life is lived in isolation, information about other people can never be completely excluded from auto-ethnography. These other people are,

therefore, indirect participants, raising questions about their opportunity to exercise informed consent with respect to the nature of their representation in auto-ethnographic material.

#### Seeking consent from vulnerable groups

* + 1. For children under 16 years of age and for other persons where capacity to consent may be impaired the additional consent of parents or those with legal responsibility for the individual should normally also be sought. In special circumstances such as where it may be important that views of such participants or findings about them should not be suppressed, the rationale for not seeking parental consent should be clearly stated and approved by the Research Ethics Committee.
    2. To the extent that it is feasible, which will vary with age, the willing consent of participants who are also children should be sought. Generally, children over age 16 may be assumed to be capable of giving informed consent.
    3. In the case of very young children, and persons with very limited competence, their assent should be regularly monitored by sensitive attention to any signs, verbal or non- verbal, that they are not wholly willing to continue with the data collection. A template for an assent form for younger children is provided in Appendix 4. The assent form is designed in such a way that children with limited reading and comprehension skills can confirm that they are happy to take part in the study. This should be used in conjunction with the consent form (for parents / guardians), also in Appendix 4.

6.5.4. In relation to the gaining of consent from children and young people in school or other institutional settings, where the research procedures are judged by a senior member of staff or other appropriate professional within the institution to fall within the range of usual curriculum or other institutional activities, and where a risk assessment has identified no significant risks, consent from the participants and the granting of approval and access from a senior member of school staff legally responsible for such approval can be considered sufficient (e.g. Head teacher acting in loco parentis). Where these criteria are not met, it will be a matter of judgement as to the extent to which the difference between these criteria and the data gathering activities of the specific project warrants the seeking of parental consent from children less than 16 years of age and young people of limited competence.

* + 1. If the Head teacher (or equivalent) is asked to provided consent in loco parentis, the researcher should consider if the parents should also be informed of the research (e.g. by letter) and given the opportunity to state if they do not wish their child to participate. If they decide that parents do not need to be informed they should make clear in the application for ethical approval as to the basis of this decision.
    2. Researchers (staff and students) need to be aware that where their work at the University involves them in having unsupervised access to children and/or vulnerable adults a Disclosing and Barring Service (DBS) (previously Criminal Records Bureau

(CRB)) check is always required4. Staff should contact Human Resources, and students should contact Admissions without delay, if you think that you may need to apply for a DBS check. Please note that the DBS check can take up to six weeks to process and there is a fee to pay. All work must adhere to the requirements of the University’s Safeguarding and Prevent Duty Policy5.

* + 1. Special care should be taken where research participants are particularly vulnerable by virtue of factors such as age, disability, their physical or mental health. The researcher needs to take into account the legal and ethical complexities involved in those circumstances where there are particular difficulties in eliciting fully informed consent. In some situations, proxies may need to be used in order to gather data. Where proxies are used, care should be taken not to intrude on the personal space of the person to whom the data ultimately refer, or to disturb the relationship between this person and the proxy. Where it can be inferred that the person about whom data are sought would object to supplying certain kinds of information, that material should not be sought from the proxy.
    2. The researcher needs to consider carefully the quality of consent of participants in a potentially dependent or pre-existing relationship with him/her (for example, patients, school pupils or employees) as willingness to volunteer may be unduly influenced by the expectation of benefits for compliance or fear of repercussions for refusal.
    3. Researchers should be very careful about taking photographs of research participants. Photographs of children should only be taken when explicit and written consent has been obtained from the parent or legal guardian. The storage of all such photographs and digital media must be secure and the parent/legal guardian advised in detail about their storage. Researchers are advised not to publish photographs (neither in hard copy nor electronically) with children in them. Participants in any published photograph must not be identifiable without explicit consent.

## Confidentiality and Data Protection

* 1. The researcher should strive to maintain participants’ confidentiality and anonymity and should not reveal the identity of any participant, nor any information which may lead to the identification of any participant, without obtaining explicit prior consent. Researchers should be aware of how a particular configuration of attributes can frequently identify an individual beyond reasonable doubt; and it is particularly difficult to disguise, say, office-holders, organisations, public agencies, ethnic groups, religious denominations without so distorting the data as to compromise scholarly accuracy and integrity.
  2. The researcher and any collaborators should manage all data obtained through the project so as not to compromise the dignity of participants or infringe upon their rights to privacy. Guarantees of confidentiality and anonymity given to research participants must be honoured, unless there are clear and over-riding reasons to do otherwise, for example, in relation to the abuse of children (see 7.13-7.15 on Disclosure). In research

4 <https://www.gov.uk/disclosure-barring-service-check/overview>

5 <https://www.chi.ac.uk/about-us/policies-and-statements/academic-and-student-support>

with children, researchers should have regard for issues of child protection and make provision for the potential disclosure of abuse. Specialist advice should be sought where relevant.

* 1. When personal identifiers are used in a study, the researcher should explain why this is necessary and how confidentiality will be protected.
  2. The researcher should endeavour to anticipate problems likely to compromise anonymity and follow procedures for protecting the confidentiality of participants, such as:
     + Taking precautions to maintain confidentiality when taking field notes or observations such as recording only data/information that is pertinent to the study, using pseudonyms and coding
     + Securing statements of commitment to confidentiality from individual research personnel (e.g. those undertaking transcription or translation)
     + Using pseudonyms to protect the identity of participants
     + Storing data with identifying information in a locked file or password protected/encrypted area on your computer. Access to these files must be restricted to the researcher or (in agreed cases) the designated members of a research team
     + Using codes for identifying participants when transcribing tapes, deleting the tapes on completion of transcription
     + Carefully disposing of information that could reveal participants, for example by shredding or placing in confidential waste at the University, rather than disposal in wastebaskets or recycling.
  3. Researchers should take special care when carrying out research via the Internet or mediated by the internet, whether it be observation of internet dialogues, use of images or data from the internet, or conducting online surveys and/or participant recruitment. Ethical standards for Internet research is a fast developing field6. Eliciting informed consent, negotiating access agreements, assessing the boundaries between the public and the private, and ensuring the security of data transmissions are all problematic in Internet research. Researchers who carry out research online should ensure they are familiar with on-going debates on the ethics of Internet research, and should err on the side of caution in making judgements affecting the well-being of online research participants. The British Psychological Society has published a guide7 on Internet- Mediated-Research (IMR) which researchers are advised to use in planning their research and seeking ethical approval. Do also refer to the University’s Data Systems and Security policy available on the University’s webpage.
  4. If you wish to access material for research purposes that might be regarded as particularly sensitive, indecent, offensive or obscene then you should gain written approval from your Head of Department and then approach IT services so that appropriate arrangements can be made for access.

6 <http://aoir.org/reports/ethics2.pdf>and <http://plato.stanford.edu/entries/ethics-internet-research/>

7<https://www.bps.org.uk/news-and-policy/ethics-guidelines-internet-mediated-research-2017>

* 1. Care should be taken when taking photographic or film images of research participants or indeed any member of the public. Images and other digital media of identifiable individuals should only be taken when explicit and written consent has been obtained. The storage of all such visual images must be secure and the participants advised in detail about the storage any photographs. Researchers are advised not to publish photographs (neither in hard copy nor electronically) which allow individuals to be identified unless they have the written consent of those participants.
  2. The researcher must be aware of the different legislation that covers data protection, confidentiality and disclosure. This legislation includes the Common Law Duty of Confidentiality8 which describes those circumstances under which disclosure of confidential information would be lawful (e.g. when consent has been obtained, to safeguard individuals or others, when disclosure is clearly and justifiably in the public interest, or when there is a court order requiring disclosure). Other relevant legislation includes data protection legislation which makes provision for the regulation of the processing of information relating to individuals, including the obtaining, holding, use or disclosure of such information. In addition, researchers should familiarise themselves with the [Electronic Information Security Policy](https://d3mcbia3evjswv.cloudfront.net/files/Electronic_Information_Security_Policy_March_2018.pdf?BhODsIF60ahQhGP9pJOo.juDO1LEzePM) and the [Privacy Standard.](https://d3mcbia3evjswv.cloudfront.net/files/Privacy%20Standard.pdf?RiXfu1M9IZXd2oVVuJz3vkzOMvITLeJm) Researchers who are also staff at the University of Chichester should also familiarise themselves with the Data Protection Guidance for Staff.
  3. The researcher needs to be aware of the risks to anonymity, privacy and confidentiality posed by personal information storage and processing, including computer and paper files, e-mail records, audio and videotapes, or any other information that directly identifies an individual.
  4. The researcher needs to inform participants about what kinds of personal information will be collected, what will be done with it, and to whom it will be disclosed.
  5. If the researcher is collecting, storing, using, disclosing or destroying identifiable personal information about deceased individuals, then they should ensure that they comply with the legal requirements of the Common Law Duty of Confidentiality (See above), as data protection legislation does not apply to the deceased. This can be a grey area and researchers are advised to contact the Research Office for further advice if they are unsure of what is required.
  6. The researcher should make provision for data security at the end of a project. Furthermore the researcher should be aware of the University’s Research Data Management Policy (available on the Research Moodle) which requires that data from publicly funded research should be made publicly available. Please contact the University’s Data Protection Officer [dpofficer@chi.ac.uk](mailto:dpofficer@chi.ac.uk) if you have any queries relating to Data Protection and the Research Office if you have queries relating to the Research Data Management Policy [research@chi.ac.uk .](mailto:research@chi.ac.uk)

8 <https://www.health-ni.gov.uk/articles/common-law-duty-confidentiality>

#### Disclosure (see Appendix 5 for reference)

* 1. Researchers who judge that the effect of the agreements they have made with participants, on confidentiality and anonymity, will allow the continuation of illegal behaviour, which has come to light in the course of the research, must carefully consider making disclosure to the appropriate authorities. If the behaviour is likely to be harmful to the participants or to others, the researchers must also consider disclosure. Insofar as it does not undermine or obviate the disclosure, researchers must apprise the participants or their guardians or responsible others of their intentions and reasons for disclosure.
  2. At all times the decision to override agreements on confidentiality and anonymity must be taken after careful and thorough deliberation. In such circumstances it is in the researchers’ interests to make contemporaneous notes on decisions and the reasoning behind them, in case a misconduct complaint or other serious consequence arises.
  3. Researchers should also observe the policies for disclosure and/or whistleblowing of any partner organisations and take appropriate precautions in liaison with those organisations. Further information on these matters can be found in the University’s Public Interest Disclosure Policy, and the policy on Safeguarding Children and Young People.

## Dissemination of Research Findings and Intellectual Property

* 1. All research proposals should include a plan for the dissemination of findings. The researcher should offer all participants and relevant stakeholders’ access to a summary of the research findings. The University is supportive of Open Access and believes that publicly funded research should be made available and accessible to the public. Furthermore, in accordance with the University’s Research Data Policy publicly funded research should be made publicly available. Further information on Research Data and Open Access are available on the Research Moodle.
  2. Reports to the public should be clear, understandable and accurately reflect the significance of the study. A useful guide is to write in a style that is likely to be understood by a 14 year old.
  3. Researchers need to clarify the ownership and potential exploitation of intellectual property prior to the commencement of the research – please see the Intellectual Property (IP) Policies for staff and students. - [https://www.chi.ac.uk/about-us/policies- and-statements/academic-and-student-support](https://www.chi.ac.uk/about-us/policies-and-statements/academic-and-student-support)

## Considerations prior to Applying for Ethical Approval

When beginning the process of seeking ethical approval please consider the following, in addition to the other requirements of the Policy.

#### Health and Safety, Disclosure and Barring Service checks, lone working

* + 1. *Health and Safety* - Any potential health and safety implications for all research participants and researchers should be identified and mitigated. All projects must adhere to the University’s Health and Safety Policy. Risk Assessment templates and protocols for specific activities are available on the University intranet. The University Health and Safety Officer is able to advise. For further advice on health and safety issues relevant to research activity please refer to Appendix 6. In some circumstances,

e.g. use of Sport Sciences laboratories there may be other protocols and approvals that are required before commencing research; please refer to the local guidance.

* + 1. *Disclosure and Barring Service checks* – Where the research involves the participation of vulnerable groups, such as older people, the young (under 18), or the sick, a Disclosure and Barring Service (DBS) check will be required before the research can commence (see also section 6.5).
    2. Sometimes a research project may require the researcher to undertake one to one interviews or activities with their research participants, or put themselves in unfamiliar places with others who might be vulnerable or potentially aggressive. Alternatives that don’t require the researcher to be in a 1:1 situation in a secluded unfamiliar place (e.g. the participants home) should always be considered, for example being accompanied by a colleague or holding the meeting in a public place. It is important that researchers consider the potential risks, discuss these with their supervisor or line manager and put in place appropriate measures to minimise risks. The Lone Working Risk Assessment template is available on the Health and Safety pages of the University’s intranet along with the University’s Lone Working Policy and Lone Working Guidance Precautions that should be considered are:
       - Take a personal alarm (and check that it is in working order)
       - Take a mobile phone and leave it on during the fieldwork/visit (consider if phone reception will be an issue, if so make alternative arrangements)
       - Agree an itinerary for any fieldwork/visits and lodge this with a nominated contact at the department (e.g. supervisor, line manager, colleague), agree with the nominated contact person the arrangement for the lone worker ‘checking-in’ and any action should any agreed check-in points be missed. The researcher should stick to the agreed itinerary or agree changes with the nominated contact person prior to the fieldwork/visit.
       - The researcher should anticipate the risks that might arise and rehearse their response to those situations as far as practicable,
       - Use exit strategies – have a pre-planned way to excuse yourself from a difficult situation.
       - If at any time you feel unsafe or vulnerable then cease the activity and return to a place where you feel safe. Your safety is the primary concern, which should be placed above completion of research tasks.
    3. If you are conducting fieldwork abroad, then working alone and remote from colleagues is to be discouraged as far as possible. Where it is not practicable to avoid it, lone working should only be sanctioned after a thorough assessment of the risks has been carried out (see also Appendix 6: Health and Safety).
    4. Further information on personal safety for lone workers can be found on the Suzy Lamplugh Trust website [http://www.suzylamplugh.org/personal-safety-tips/ .](http://www.suzylamplugh.org/personal-safety-tips/)

#### Insurance, contracts, financial management and conduct

* + 1. *Professional indemnity* – Professional indemnity insurance provides cover for claims brought against the policyholder due to their professional negligence. The University has Professional Indemnity cover in place to a value of £5,000,000. Any queries relating to the University’s insurance policy should be addressed to the Finance Department. Any queries relating to research or consultancy contracts should be addressed to the Finance Department.
    2. *Consultancy contracts* – Research activity might include either working as a consultant for a client or using external consultants to carry out work on the University’s behalf. The University has a standard contract that can be amended to cover this activity. Some clients will have their own standard contracts. You are required to liaise with the Research Office at the earliest opportunity if you have any query relating to research contracts. If the project has more than one funder then do consider any potential conflicts of interest that might arise due to different terms, conditions and provisions of each of the funders.
    3. *Financial management of research projects.* All research should be appropriately costed in accordance with University procedures. Researchers should contact the Research Office in the first instance for this to occur. Researchers should ensure that all individual projects are completed on time and within the agreed budget; records should be made available as and when required. Support can be given through the Research Office when applying for funding.
    4. *Fraud and misconduct* - Procedures will be in place to ensure that fraud and misconduct do not occur in any research project. These procedures are covered by the Financial Regulations, Disciplinary Policy, Academic Regulations, and within this policy (depending upon the nature of the activity). If individuals have concerns about research conduct they should refer to the Public Interest Disclosure Policy and Procedure.

#### Potential damage to the University’s reputation

* + 1. The Committee supports individual academic freedom. Some research projects may engage the researcher in particularly sensitive or politically charged issues that could potentially harm the reputation of the University (e.g. work with a tobacco company, work involving a country with a poor human rights record). It is the Committee’s responsibility to consider such projects and, where possible, to support the researcher in managing and mitigating potential reputational impacts. The Committee cannot withhold approval for matters relating to reputation however it has an obligation to alert the Chief Executive’s Team if at any time they are concerned about potential negative reputational impact arising from research.
    2. Bringing the institution into disrepute as a result of behaviour is not within the remit of this policy. This is covered in the Academic Regulations (Clause 3.1(m)) and in relevant HR Policies (e.g. Disciplinary Policy and Procedure, Appendix A)).

## Application for Ethical Approval: Process and Categorisation

This section outlines the processes and procedures for seeking formal ethical approval for research. All staff and students must adhere to the University policies and procedures related

to research. The process of Application for Ethical Approval is demonstrated in Appendix 7. Completed applications will be kept for five years after approval.

* + 1. Staff and postgraduate research students (Research Masters and PhD) will complete Application for Ethical Approval and submit it to the Ethical Approval Sub-group for review (Category B) / note by the Clerk (Category A), once it has been approved by the relevant authoriser. Please refer to Appendix 7.
    2. Undergraduate students and postgraduate taught students at Masters level will complete the Application for Ethical Approval form and submit it to their supervisor/tutor for categorisation as Category A or Category B. Category B forms will be submitted to the Ethical Approval Sub-Group as with staff and postgraduate research forms. Category A forms will be stored locally and logged on a spreadsheet by the programme coordinator or nominated academic.
    3. Activities conducted in the context of research are categorised according to the potential to cause harm. Applications categorised as ‘B’ may demonstrate a risk of harm and come under greater scrutiny. Specific guidance on categorisation into ‘A’ or ‘B’ is provided below:
    4. *An activity is likely to be classified as Category ‘A’ if:*
       1. It is a research study that does not involve a vulnerable group, or that engenders no additional risk of distress or harm to the participants or researcher and does not involve material that might be considered particularly sensitive.
       2. For studies that may involve a vulnerable group, it is part of routine activity which involves persons with whom the applicant works and that activity does not engender any additional distress or risk of harm e.g. Teachers working with children in a classroom setting, sports coaches working with youth sports teams, or research involving students in an academic setting (see section 6.5 on working with vulnerable groups).
    5. *An activity is likely to be classified as Category ‘A+’ if:*
       1. It is a single or double blind research design undertaken that entails no other reason for the project to be classified as Category B other than the withholding of information / intentional deceit.
    6. *An activity is likely to be classified as Category ‘B’ if:*
       1. It involves a vulnerable group such as children, people with a disability, or those with a mental health problem and 10.1.4b does not apply
       2. It is likely to produce distress or anxiety in participants beyond what would normally be expected in working with them
       3. It involves misleading participants as part of the methodology and 10.1.5a does not apply. For example, a management researcher interested in the influence of religion, science, and politics on consumer decisions might present participants with quotes attributed—sometimes falsely—to real figures from these different fields, before testing whether the different quote attributions influence subsequent consumer decision making
       4. It involves withholding information from participants as part of the methodology and 10.1.5a does not apply, for example, in research involving the use of video equipment, where the

participant would be told that videoing will be used, but not told when this will happen

* + - 1. It puts the researcher at risk of harm or distress beyond what would normally be expected in working with them
      2. It involves material that might be considered sensitive within the context of the Terrorism Act 2006 or the Prevent Duty in the Counter-Terrorism and Security Act 2015
      3. It could lead to reputational risk to the University such as working with a tobacco company or a country with a questionable human rights record.

The authoriser and/or the Committee may judge applications to be categorised as ‘B’ or refuse to approve them for other reasons than those listed above.

* + 1. Researchers should be aware that while this set of principles will assist them to anticipate in advance ethical dilemmas which may arise, managing such dilemmas is an on-going process that requires attention throughout the entire course of a project. Advice from supervisors or the University Research Ethics Committee should be sought if concerns arise at any stage of the research.

#### Research undertaken by Undergraduate students within academic programmes

* + 1. In undergraduate programmes and all other programmes below Master's level not all students will engage in formal research. However, there are many disciplines where it is necessary for the student to engage in work that may be regarded as research activity and involves human participants. In these cases such research must adhere to the University’s policies and procedures related to research.
    2. Undergraduate (UG) students involved in research must complete an Application for Ethical Approval. Where distinct group research projects are being carried out, the group may submit one application, with names of those involved listed on the application form. Failure to do so may result in failure of the module. Please refer to Appendix 7 and 10.
    3. Departments are developing their own supplementary guidance around research ethics in particular subjects that will be particularly useful in supporting the assessment of ethical issues and subsequent approval for research undertaken by undergraduate students. Supplementary guidance that has been agreed by the Research Ethics Committee is provided in Appendices 7-15.
    4. Lists of UG research projects - individual and group - and confirmation of ethical approval will be recorded and kept at academic department level. The Research Ethics Committee will periodically request information on undergraduate research projects for note and to inform future practice. Please see Appendix 12 for guidance.
    5. Heads of Academic Departments should ensure that clear records relating to research carried out by their students demonstrate compliance with the University’s procedures. If in doubt research proposals should be raised with the Ethical Approvals Sub-group who may require the proposal to be considered at the Research Ethics Committee.
    6. Where new academic programmes are being developed, consideration should be given to the ethical implications of the new programme, and where issues may consistently

arise, programme coordinators may be asked to attend the Research Ethics Committee to discuss the new programme.

* 1. Retrospective Ethics Review

Research involving human participants, should not begin before research ethics review has taken place and ethics approval granted. Retrospective ethics review is, therefore, not permitted. It is the responsibility of the researcher/principal investigator or, in the case of a student project, the supervisor, to ensure that ethics review is undertaken in good time. There are no exceptions to this principle.

However, there may be circumstances in which there is legitimate uncertainty about when research begins (or has begun). In particular, materials may originally be noted without any explicit intention to undertake research, but subsequently become of research interest (i.e. they could be used as data within research).

#### Appeals

Should the Application for Ethical Approval not be approved the student or member of staff can appeal to the Vice-Chancellor who can take Chair's action on behalf of the Research Ethics Committee. This does not affect the normal Appeals Procedure of the Academic Regulations for students and staff and is available on the University’s Intranet.

## Financial Regulations: Gifts, Hospitality and Register of Interests

* 1. Staff and students undertaking research need to be aware of the University’s Financial Regulations Anti-corruption and Anti-bribery policy, in terms of receiving gifts or hospitality. It is an offence under the Bribery Act 2010 ([http://www.legislation.gov.uk/ukpga/2010/23/introduction)](http://www.legislation.gov.uk/ukpga/2010/23/introduction) for anyone undertaking research at the University of Chichester to accept corruptly any gift or consideration as an inducement or reward for doing, or refraining from doing, anything in an official capacity or showing favour or disfavour to any person in an official capacity. The relevant policies can be found on the University website at [http://www.chi.ac.uk/about- us/how-we-work/policies/finance .](http://www.chi.ac.uk/about-us/how-we-work/policies/finance)
  2. Staff and students should be aware that they must follow the University’s Financial Regulations at all times. These are available on the University website at (<http://www.chi.ac.uk/about-us/how-we-work/policies/finance>). These regulations also include rules regarding maximisation of income, allowable expenditure and the ownership of assets purchased with University funds (which include those provided by research sponsors).
  3. In accordance with Companies Acts, the University Secretary maintains a Register of Interests relating to the Directors of the company, the University of Chichester, its subsidiary companies and also senior Finance Department staff. The Register is updated annually and at such times as circumstances change. The Deputy Vice- Chancellor is permitted to view entries in the case of an investigation of a potential conflict of interests, but this would be on an exceptional basis only.

Further information can be obtained from the Finance Department.

#### Glossary

**Anonymity** – the state of being anonymous; ensuring that an individuals’ identify is not disclosed and/or linked to individual responses through participation in or dissemination of a research project.

**Confidentiality** – ensuring that information is accessible only to those authorised to have access.

**Data** – any information which is processed automatically or recorded with the intention to process automatically; recorded as, or with the intention that it be part of a manual filing system; information contained in a health, educational or social services record.

**Health record** – information relating to the physical or mental health of an individual which has been created by a health professional in connection of the care of that individual

**Human participants** – any individual participating in the research activity; this includes samples of human tissues (e.g. blood, saliva or urine samples)

**Intellectual Property** – the concept of intellectual property refers to products (outcomes) of creativity and/or innovation, which can be allocated ownership through patents, trademarks or copyright. IP can relate to designs, inventions, research findings, systems or processes, unique formulae or mathematical models, written work, ideas and specific knowledge.

**Investigation / Studies** – work often conducted by undergraduate students as part of their programme

**Liability** - The University’s insurance policy covers almost all aspects of liability in the course of its normal work. If the nature of the research is particularly unusual or runs a particular risk of litigation then the application will also be scrutinised by the Research Office and/or Finance Department.

**Misconduct** – The fabrication or falsification, plagiarism or deception in proposing, carrying out or reporting of research findings or outcomes, or deliberated dangerous or negligent deviations from accepted research conduct.

**Personal data** – relates to a living or deceased individual who can be identified from that data.

**Plagiarism** – the theft or misappropriation of intellectual property and the substantial unattributed copying of text prepared by another author.

**Processing of data –** covers the manner of obtaining, recording, holding, altering, retrieving destroying or disclosing information

**Research** – a process of investigation leading to new insights, effectively shared

**Research ethics** – rules or principles of behaviour in the conduct of research

**Research participant / respondent** – any person from whom data /information is obtained.

**Risk assessment** – an assessment of all the risks that may be involved in conducting the research. At the same time the researcher should indicate the level of risk and any mitigation against those risks occurring.

**Sensitive data** –data that, if released to unauthorised persons, would be likely to cause damage or distress to one or more individuals or to the University, including personally and commercially confidential documents and infringement of intellectual property rights. Any data that could be used for illegal purposes is alsoincluded.

**Vulnerable group** – groups of individuals who may be particularly vulnerable to exploitation, harm or distress including but not limited to children, elderly, those suffering from mental illness.

# Appendix 1: University response to the Concordat to Support Research Integrity

The Concordat to Support Research Integrity was published by Universities UK in collaboration with HEFCE, Research Councils UK, the Wellcome Trust, the Department for Employment and Learning and the National Institute for Health Research in July 2012.

The Concordat is composed of five commitments intended to ensure the maintenance of high standards and integrity in research with indications of the responsibilities of researchers, employers of researchers, funders of research and other related organisations involved in research or related activities. The five commitments are:

#### Maintaining the highest standards of rigour and integrity in all aspects of research.

1. **Ensuring that research is conducted according to appropriate ethical, legal and professional frameworks, obligations and standards.**

#### Supporting a research environment that is underpinned by a culture of integrity and based on good governance, best practice and support for the development of researchers.

1. **Using transparent, robust and fair processes to deal with allegations of research misconduct should they arise.**

#### Working together to strengthen the integrity of research and to reviewing progress regularly and openly.

Following a sector wide consultation early in 2013, a Circular letter to all heads of HEFCE funded HE institutions from the Chief Executive of HEFCE confirmed that that from 2013-14, compliance with the Concordat would be mandatory for institutions in receipt of HEFCE grants, for institutions in receipt of research grant compliance will be demonstrated through the annual assurance statement to HEFCE. HEFCE have stated that for 2013-14 only, in recognition that compliance by some institutions may require a period of time to achieve, institutions in receipt of research grant from the Council may provide assurance either of their compliance, or that they are working towards compliance, with the Concordat.

HEFCE understands compliance with the Concordat to mean that institutions, as the employers of researchers, will act in accordance with the commitments and the related responsibilities for employers of researchers as outlined in the Concordat. This includes fulfilment of the expectations held by funders of research for employers of researchers, where these are stated in the Concordat. HEFCE recognises the autonomy of institutions and diversity of organisational structures and recognises that institutions will develop their own most appropriate approach to compliance with the Concordat.

The University of Chichester confirms that its current processes, policies and structures are compliant with the Concordat to Support Research Integrity. Placing a strong emphasis on the researcher’s personal responsibility for integrity and maintaining high professional standards this is supported by clear existing institutional processes for misconduct (including malpractice in research).

The University’s Researcher Code of Conduct including the protocols for dealing with allegations of research misconduct can be found here:

<https://www.chi.ac.uk/research/research-governance>

# Appendix 2: Governance arrangements

The University of Chichester

# Academic Board

**Research Ethics Committee**

1. **Constitution**

The Academic Board has established a sub-committee of the Research and Enterprise Committee known as the Research Ethics Committee.

## Membership

The Head of Research will chair the Research Ethics Committee which will comprise:

Six nominated Faculty members who must be ‘active researchers’ skilled in research methodology, to serve for a term of three years. The membership shall reflect the range of research traditions.

The Occupational Health and Safety Officer The University Chaplain

Two lay members who shall not be employees of University of Chichester. The Data Protection Officer

The Committee may co-opt additional members as it sees fit to consider specialist proposals in certain fields or unusual situations.

Total membership: 12

A quorum of the Committee shall be 50 pc of its membership, excluding co-opted members (6), provided at least three nominated Faculty representatives are present.

## Attendance at Meetings

Attendance by staff, other than Committee members, will be at the discretion of the Chair.

## Frequency of Meetings

The Research Ethics Committee shall normally meet four times a year with extra meetings, convened by the Chair when necessary, to discuss matters arising which require more immediate Ethical consideration between scheduled meetings.

## Authority

The Committee has the authority to require all those members of the University involved in research to provide such information as the Committee deems necessary in the performance of its duties.

The Committee shall have the authority to over-rule decisions made within the University, or externally where University of Chichester staff or students are involved, on grounds of ethical considerations.

The Committee shall have the authority to stop research already being undertaken if it becomes aware that either:

* 1. the research is not being conducted in accordance with the University’s Research Ethics Policy and is being conducted in a manner deviating from those principles approved by the Committee; or
  2. the research is not being conducted in a manner that adheres to the ethical guidelines agreed by the Committee at the time of the ethical approval of that research.

The Committee shall have the authority to investigate breaches of ethical practice in research, and may recommend that further investigation is undertaken in line with the University’s Disciplinary Policy.

The Chair of the Committee has the authority to consider Chair’s action on Applications for Ethical Approval requiring immediate attention.

## Duties

* 1. The Committee shall contribute to the biennial review of the University’s Research Ethics Policy and make recommendations to Academic Board.
  2. The Committee shall provide guidance to students and members of staff on the ethical conduct of research.
  3. The Committee shall monitor compliance with its guidance on the ethical conduct of research by all members of the University.
  4. The Committee shall ensure that all reported breaches of the University’s Research Ethics Policy relating to research are investigated and remedial and/or disciplinary action taken if appropriate.
  5. The Committee shall establish an Ethical Approval Sub-Group to serve as the first point of submission for staff and postgraduate research student applications, categorising and advising on submissions. It will do the same for undergraduate and postgraduate taught submissions that have already been classified for advice and guidance in relation to any category of submission.
  6. The Research Ethics Committee will consider, or note, as appropriate, all Applications for Ethical Approval referred to it by the Ethical Approval Sub-group.
  7. On occasions where the research involves collaboration with outside bodies (including members of the National Health Service (NHS) staff or research on patients/people referred by the NHS), the Committee is responsible for ensuring all relevant Research Governance rules are complied with.
  8. The Committee shall withhold approval for proposed research whenever the compliance of that proposed research with the Committee’s guidance cannot be

assured by the relevant authoriser of the application or members of the Ethical Approvals Sub-group, to whom the Committee has delegated authority for ethical review.

* 1. The Committee shall act on all matters of ethical concern relating to research and scholarship within the University that come to its attention and this will include consideration of potential reputational impacts arising from ethical implications of research activity.

## Reporting Procedures

The Minutes of the Research Ethics Committee will be classified as confidential and circulated to all members of the Committee, to the Vice-Chancellor and to the Clerk of the Research and Enterprise Committee for presentation at its next meeting. The notes of meetings refer to operational issues and will not therefore be released through the Freedom of Information Publication Scheme.

The Research Ethics Committee will produce an annual report to the Academic Board on its activities during the academic year at the first meeting of the following year. The Research Ethics Committee may bring any matter to a meeting of the Academic Board, which it deems appropriate.

## Clerking Arrangements

The Research Office will service the Committee.

Approved by Academic Board January 2018

The University of Chichester **Research Ethics Committee** **Approvals Sub-Group**

### Constitution

The Research Ethics Committee (a committee of the Academic Board) has established an Approvals Sub-Group.

### Membership

The membership of the Sub-Group is drawn from the Readers and Professors within the University of Chichester, and other academic staff who volunteer to be part of the pool of members. Each Sub-Group that reviews applications for ethical approval has a minimum of 1 convenor and 3 further members, ideally one of whom will be a lay-member of the Research Ethics Committee. The Convenor is nominated from within the Sub-Group.

The sub-group may invite other members of the Research Ethics Committee to join as appropriate. The Chair of the Research Ethics Committee has the right to co-opt non-members of the

Research Ethics Committee to support and augment particular expertise within the Approvals Sub-Group.

### Process for Approvals

The Sub-Group will be convened electronically using email. The Clerk of the Ethics Committee will circulate applications for ethical approval to the Sub-Group requesting comments from the sub-group within a specific time period (typically two weeks). Each member of the Sub-Group will be invited to comment on each application. The Convenor will collate comments and then present a recommendation in an agreed format for confirmation by the Sub-Group. The confirmed recommendation will be forwarded to the Clerk of the Committee who will then present the application and recommendation to the Chair of the Research Ethics Committee for final approval. The sub-group will endeavour to take no longer than 10 working days to provide feedback on an application to the clerk. It is the applicant’s responsibility to attend to any amendments requested by the approvals sub- group and to do so in a timely manner.

### Frequency of Meetings

The Sub-Group operates on an on-going basis considering proposals and making recommendations and approvals as they arise.

### Authority

The Research Ethics Committee has granted the Sub-Group the authority to assess applications for Ethical Approval on its behalf and in accordance with the Research Ethics Policy. The Sub-Group makes a recommendation to the Committee as to whether an individual application should be approved or not. The Sub-Group has the authority to request that applications are amended and then presented again either to the Sub-Group or to the full Committee before approval is granted.

### Duties

* 1. The Ethical Approval Sub-group serves as the first point of submission for staff and postgraduate research student applications, categorising and advising on submissions. It will do the same for undergraduate and postgraduate taught submissions that have already been classified as needing scrutiny. The Sub-Group will assess applications and make a recommendation to the Committee as to whether they are approved or not (see Authority).
  2. The Sub-Group may provide on behalf of the Committee guidance to students and members of staff on the ethical conduct of research where it relates to specific applications for ethical approval. More general guidance will be provided by the Committee via the Clerk.

### Reporting Procedures

Reporting comprises the recommendations agreed by the Sub-Group. Such recommendations will be made to the Chair of the Ethics Committee. Any approvals granted by the Chair on the basis of recommendation by the Sub-Group are recorded in the minutes of the next meeting of the Research Ethics Committee. Any notes and records of actions by the Sub Group will be treated as confidential and are not for wider publication.

Any notes and records of actions by the Sub Group will be treated as confidential and are not for wider publication.

### Clerking Arrangements

The Research Office will service the Sub-Group.

Agreed by Research Ethics Committee 24 April 2019

## Appendix 3: Guidance for Research Ethics Committee Sub-Group Convenors

*Research Office, March 2013*

The following is guidance for members of the Research Ethics Committee and to assist them in fulfilling their responsibilities as Sub-Group Convenors. These guidelines should be read in conjunction with the Terms of Reference of the Research Ethics Sub-Group and the Research Ethics Policy.

*The most helpful comments and feedback for applicants are those that are succinct and clear. Observations by members of the Sub-Group that do not need a specific response from the applicant should be clearly labelled and presented separately from any conditions that need to be met to secure a recommendation for authorisation by the Chair.*

The following template could be employed to assist with this task:

#### Queries and/or comments that must be addressed:

* be specific and clear
* don’t mention names of members of the sub-group; it is always ‘the sub-group recommends/noted/requires…..’
* try and be consistent, if you think that a similar project has been previously approved then ask the clerk to circulate the sub-group’s comments for that application
* only refer to substantive issues of ethical concern, making reference to the Research Ethics Policy as appropriate

#### Comments that the applicant may wish to take into account in this study, although they are not obliged to do so:

General comments that are designed to help the applicant

#### What happens next:

Typically one of the following:

1. Application recommended for approval by the Research Ethics Committee Chair with no amendments required.
2. Application recommended for approval by the Research Ethics Committee Chair following the receipt of minor amendments which have been confirmed by the authoriser who then signs the amended ethics approval form.
3. Revised applications require re-submission to the Sub-Group Convenor responding to points raised by the Sub-Group (upon the request of the Sub-Group Convenor).
4. Application requires re-submission to the Sub-Group (via the clerk) following clarification and/or significant amendments
5. Sub-Group Convenor contacts the applicant’s line manager (staff) or authoriser (PGR or student application) to discuss application further
6. Sub-Group requires review of application by the whole Research Ethics Committee

In all matters, the [University Research Ethics Policy](http://d3mcbia3evjswv.cloudfront.net/files/UoCEthicalPolicyFramework.pdf?X_.lYfmulGpquNYDhYdnm43jvFubOXLc) is the point of reference for judgements on applications received. Further guidance and the latest forms can be found on the Research Ethics Moodle: <http://moodle.chi.ac.uk/course/view.php?id=70320>

The most common response issued to applicants is:

b. (*Application recommended for approval by the Ethics Committee Chair following the receipt of minor amendments to be checked by the clerk)*.

Outcomes c-f will be employed in response to applications that are more complex or ambiguous. Outcomes e and f are likely to apply should the Sub-Group have concerns that the application raises issues that have not been covered by the Research Ethics Policy or are judged to beyond the authority of the Research Ethics Committee Sub-Group. In the latter instance, matters of this nature may be referred to the Committee Chair for appropriate subsequent action.

To ensure that all communications are fully documented, Convenors should, *in all cases,* pass on comments and feedback relating to Ethical Review Applications to the Research Ethics Committee Clerk in the Research Office ([research@chi.ac.uk](mailto:research@chi.ac.uk)) who will then email the applicant or contact the Chair. Please confirm to the Clerk that a minimum of three Sub-Group members have commented on the application.

Applicants should only communicate to the Sub-Group via the Clerk

Agreed by Research Ethics Committee: 16 April 2013

INSERT GUIDANCE TO CONVENORS

|  |
| --- |
| *Dear applicant*  *The recommendation from the Sub-Group is that this is approved as a category B application with the following feedback and amendments required:*  *In the view of the Ethics Committee sub-group this is a thoughtful and carefully written application.*  **Queries and/or comments that must be addressed:**  *Please use and refer to an encrypted memory stick (not just password protected) in the Ethical Review Application.*  *Although the consent form attached is thoughtfully written, the applicant should use the University Consent form and move the detailed information pertaining to this study into the information sheet.*  **Comments that the applicant may wish to take into account in this study, although they are not obliged to do so:**  *Consider again the feasibility of informing participants one month before submitting to British Library – is this practical?*  **Please revise your application as per the instructions above and re-submit with all attendant documentation to the clerk of the Research Ethics Committee who will then forward to the Chair for approval**  *Best wishes* |

# Appendix 4: Information Sheet, Consent Form and Assent Form Templates

### THIS TEMPLATE PROVIDES THE BASIC INFORMATION TO BE PROVIDED TO PARTICIPANTS TO ASSIST IN THE PROCESS OF ACHIEVING INFORMED CONSENT.

**DELETE THE RED HIGHLIGHTED INSTRUCTIONAL TEXT AND REPLACE / DELETE THE YELLOW HIGHLIGHTED TEXT AS REQUIRED.**

### ENSURE YOU REFER TO “you”, “your” instead of “participants”.

|  |  |
| --- | --- |
| new logo | **PARTICIPANT INFORMATION FOR UNIVERSITY OF CHICHESTER RESEARCH PROJECT**  **– Interview –** |
| **Title of research project**  **UoC Research Ethics Committee Approval Number xxx This will be provided to applicant by the Research Office if approval is granted** | |

|  |  |
| --- | --- |
| **Research team** Please list al  Principal Researcher: | l members and organisations in this section  Principal researcher’s name, position, e.g. Joe Bloggs PhD student |
| Associate Researcher(s): | 1st associate researcher’s name, position, eg. Mary Smith Director of Studies  2nd associate researcher’s name, position, eg. Mary Smith Associate Supervisor |
|  | **Department Institute** |
|  | **University of Chichester** |

**Why is the study being conducted?**

Please ensure the description is written in terms easily understood by the lay reader.

Ensure all acronyms are defined the first time used. As a minimum the following should be included:

This research project is being undertaken as part of an Undergraduate/PhD/Masters/etc study for name of researcher / student.

The purpose of this project is to xxx.

You are invited to participate in this research project because you xxx.

### What does participation involve?

Your participation will involve an audio recorded / video recorded interview at xxx or other agreed location that will take approximately xxx length of time of your time.

Questions will include:

xxx (include 2 or 3 indicative questions)

### What happens if you change your mind and want to withdraw?

Your participation in this research project is entirely voluntary. If you do agree to participate you can withdraw from the research project without comment or penalty. You can withdraw anytime during the interview. If you withdraw within xx weeks after your interview, on request any information already obtained that can be linked to you will be destroyed. If you wish to exercise your right to withdraw or request erasure of personal information after XX weeks and once the data has been collected, anonymised and analysed it may not be possible to erase your data without seriously impairing the achievement of the research objectives so we may not be able to accommodate this request. Your decision to participate or not participate will in no way impact upon your current

or future relationship with the University (for example your grades) or [associated external organisation].

This should mention the rights of participants under data protection legislation and that these rights are set out in the [University’s Privacy Standard](https://www.chi.ac.uk/about-us/policies-and-statements/data-protection). For example their rights include the right to withdraw at any time or request that their personal data is erased. Mention that their request may not be possible, however, having regard to permitted exemptions for research under data protection legislation i.e. where it would seriously impair the achievement of the research objectives. Participants also have the right to object, however, again this may be overridden in certain circumstances where the “processing is necessary for a task carried out for reasons of public interest”.

Revise the following statement accordingly regarding interview.

You will be able to review a transcript of your responses after the interview.

### What are the possible benefits for me if I take part?

It is expected that this research project will / will not benefit you directly. The outcomes of the research, however, may benefit xxx.

To recognise your contribution should you choose to participate, the research team is offering xxx. add any acknowledgment of participantion here, e.g. the chance to win…, a shopping/movie voucher, etc

### AND/OR

The research team will reimburse you with out-of-pocket expenses xxx. [add detail here, e.g. will reimburse you for your transport costs to and from University xx campus; up to £x etc]

If there is a prize draw, indicate the items below and provide the Terms and Conditions either as an attachment or hyperlink.

### What are the possible risks for me if I take part?

Choose **ONE** of the **THREE** following options

There are no risks beyond normal day-to-day living associated with your participation in this research project.

There are minimal risks associated with your participation in this research project. These include xxx. list any risks and how these will be minimised or managed.

There are significant risks associated with your participation in this research project. These include xxx. list any risks and how these will be minimised or managed

### Where the research may cause significant discomfort, appropriate independent counselling services should be offered, and participants provided with information on how to access these.

**What about privacy and confidentiality?**

All comments and responses are anonymous i.e. it will not be possible to identify you at any stage of the research, because personal identifying information is not sought in any of the responses and no traceable information is collected via the server or survey tool.

OR

All comments and responses are coded i.e. it will be possible to re-identify you. A re-identifying code stored separately to personal information (e.g. name, address), will only be accessible to the research team, and the code plus identifying information will be destroyed [when].

DEPENDING ON YOUR RESPONSE IN THE APPLICATION, AMEND ACCORDINGLY

Any personal information that could potentially identify you will be removed or changed before files are shared with other researchers or results are made public. The information that will be removed includes THIS WILL BE SPECIFIC TO THE POPULATION SAMPLE AND NATURE OF THE STUDY [eg. names, initials, postcode, date of birth, place of work, occupation, income, education]

OR IF RELATED TO ILLEGAL ACTIVITIES SUCH AS DRUG USE Personal identifying information or details of specific events are not sought in any of the responses. Given the generality of the responses captured in this research, it is unlikely to be relevant to or sought by any legal authority.

Any data collected as part of this research project will be stored securely as per the [University of Chichester’s](https://www.chi.ac.uk/about-us/policies-and-statements/data-protection) [Privacy Standard](https://www.chi.ac.uk/about-us/policies-and-statements/data-protection) and [data management policy.](https://moodle.chi.ac.uk/course/view.php?id=70370) Data will be stored for a minimum of 5 years, and can be disclosed if it is to protect you or others from harm, if specifically required by law, or if a regulatory or monitoring body such as the research ethics committee requests it.

The information sheet should include information on security measures, confidentiality, storage and retention of data (including signed consent forms, images and video material), including how long the data will be stored for, and when it will be disposed of. It should also include how the personal data of the research subjects will be anonymized where required.

The researcher should make provision for data security. Furthermore the researcher should be aware of the University’s Research Data Management Policy (available on the [Research Moodle)](https://moodle.chi.ac.uk/course/view.php?id=70370) which requires that data from publicly funded research should be made publicly available. Please contact the University’s Data Protection [Officer dpofficer@chi.ac.uk if you have any queries relating to Data Protection and the Research Office if you](mailto:Officerdpofficer@chi.ac.ukifyouhaveanyqueriesrelatingtoDataProtectionandtheResearchOfficeifyou) [have queries relating to the Research Data Management Policy research@chi.ac.uk](mailto:havequeriesrelatingtotheResearchDataManagementPolicyresearch@chi.ac.uk)

With regard to retention of personal data collected in connection with research this can be kept for 5 years so that research can be reconsidered or the data re-analysed at a later date but there must be appropriate security around this. In certain circumstances it may be permitted to process personal data beyond the purposes for which they were first collected i.e. if there is a legal basis for processing without a data subject’s consent, however, a balancing test with the rights of the participant would need to be undertaken and recorded. It should also include when the personal data of the research subjects will be anonymised, where appropriate.

This section should also include information on who will have access to the participants’ data, where the research might be disseminated and who would be able to view it. For example, identifiable information about the participants might only be seen by the researcher/s, but the anonymised data might be part of an Open Access article which would potentially be available to the public. If you wish to include direct quotes from your participants (where you have consent), this section should include who would be able to see those quotes, e.g. the public if the research is published.

Finally, this section should include a link to the University of Chichester’s Privacy Standard, which can be found [here.](https://www.chi.ac.uk/about-us/policies-and-statements/data-protection) Staff guidance on drafting privacy notices can be found on the Data Protection site on the Staff Intranet, under “Guidance and Policy”. Please also refer to the Data Protection guidance for Staff - Section 9 and Appendix 2 of that guidance is particularly relevant to research.

Please also note the following key issues:

Irreversibly and effectively anonymised data is not “personal data” and the data protection principles do not have to be complied with in respect of such data. Pseudonymised data remains personal data. If the source data is not deleted at the same time that the anonymised data is prepared, the anonymised data will still be considered “personal data”, under data protection legislation, where the source data could be used to identify an individual

from the anonymised data. Data can be considered “anonymised” from a data protection perspective when data subjects are not identified, having regard to all methods reasonably likely to be used by the data controller or any other person to identify the data subject.

Research concerning sensitive personal data: The GDPR forbids a controller from processing “special categories of data” – sensitive data revealing racial or ethnic origin, religious or political beliefs, as well as genetic, biometric, and health data – except in certain enumerated circumstances, such as where the data subject provides “explicit consent” or where the data that was “manifestly made public by the data subject” Researchers that process sensitive data are subject to the same obligations as researchers that process non-sensitive personal data, as described above. One distinction, however, is that profiling on the basis of sensitive data is forbidden, unless there are “suitable safeguards” and the processing was based on the data subject's explicit consent and substantial public interest.

Subject Access Requests: Research data must be anonymised or the usual rights of the Data Subject to view information held about them will apply. Individuals whose personal data is being used in research do not have the right to see their data or be supplied with details of it, provided that the results of the research or any resulting statistics do not identify the individuals concerned.

If the research project involves audio or video recording, information should also be included to inform participants. Delete/amend as necessary:

As the research project involves an audio/video recording:

* You will/will not have the opportunity to verify your comments and responses prior to final inclusion.
* The recording will be destroyed 5 years after the last publication.
* The recording will not be used for any other purpose.
* Only the named researchers will have access to the recording.
* It is / is not possible to participate in the research project without being recorded.

Every effort will be made to ensure that the data you provide cannot be traced back to you in reports, publications and other forms of presentation. For example, we will only include the relevant part of a quote, we will not use any names, or names will be changed, and/or details such as dates and specific circumstances will be excluded. Nevertheless, while unlikely, it is possible that if you are quoted directly your identity may become known.

OR

Every effort will be made to ensure that the data you provide cannot be traced back to you in reports, publications and other forms of presentation. For example, we will only include the relevant part of a quote, we will not use any names, or names will be changed, and/or details such as dates and specific circumstances will be excluded. Nevertheless, while unlikely, it is possible that due to the small number of people associated with [xxx organisation] invited to take part in the research project if you are quoted directly your identity may become known to others in the organisation as a participant in this research.

OR

You can choose to have your comments attributed to you by name, or you can choose to be cited anonymously. Add appropriate checkboxes to the consent form.

OR

You will be identified as a participant in this research only with your specific consent, once you have read your interview transcript.

OR

Your comments and responses may be identifiable in this research. Add this statement to the consent form.

If the research project is funded by an external third party you will need to inform participants of this – e.g. by updating the text immediately below. No statement is required if the research project is self-funded:

The research project is funded by xxx and they will / will not have access to the data [indicate what you will do with the data re identifiability] obtained during the project.

### How do I give my consent to participate?

We would like to ask you to sign a written consent form (enclosed) to confirm your agreement to participate.

### What if I have questions about the research project?

If you have any questions or require further information please contact one of the listed researchers:

|  |  |  |
| --- | --- | --- |
| xNAME | xEMAILx | xPHONEx |
|  |  |  |
| xNAME | xEMAILx | xPHONEx |

### What if I have a concern or complaint regarding the conduct of the research project?

The University of Chichester is committed to research integrity and the ethical conduct of research projects. Please contact the University’s Data Protection Officer [dpofficer@chi.ac.uk](mailto:dpofficer@chi.ac.uk) if you have any queries relating to Data Protection. If you wish to discuss the study with someone not directly involved, particularly in relation to matters concerning policies, information or complaints about the conduct of the study or your rights as a participant, you may contact the Head of Research at the Research Office on 01243 816000 or email [research@chi.ac.uk](mailto:research@chi.ac.uk).

**Thank you for helping with this research project.**

**Please keep this sheet for your information.**

### THIS TEMPLATE PROVIDES THE BASIC INFORMATION TO BE PROVIDED TO PARTICIPANTS TO ASSIST IN THE PROCESS OF ACHIEVING INFORMED CONSENT.

**DELETE THE RED HIGHLIGHTED INSTRUCTIONAL TEXT AND REPLACE / DELETE THE YELLOW HIGHLIGHTED TEXT AS REQUIRED.**

|  |  |
| --- | --- |
| new logo | **CONSENT FORM FOR UNIVERSITY OF CHICHESTER RESEARCH PROJECT**  **– Interview / Focus group –** |
| **Title of research project**  **UoC Research Ethics Approval Number xxx** | |

**Research team** Please list all members contact details in this section.

|  |  |  |
| --- | --- | --- |
| xNAME | xEMAILx | xPHONEx |
| xNAME | xEMAILx | xPHONEx |

### Statement of consent By signing below, you are indicating that you:

* Have read and understood the information document regarding this research project.
* Have had any questions answered to your satisfaction.
* Understand that if you have any additional questions you can contact the research team.
* Understand that participation is entirely voluntary and that you are free to withdraw without comment or penalty.
* That you are aware of the timescales and that if you wish to exercise your right to request erasure of your personal data following collection and analysis [ie post date] this may not be possible having regard to permitted exemptions for research under data protection legislation i.e. where it would seriously impair the achievement of the research objectives and that you have the right to object (as indicated on the Information Sheet)
* Understand that all information will be stored securely and used in line with data protection legislation and no personal information will be shared with third parties.
* (If relevant) Agree to the research output being publicly available, subject to any embargo period established by the publisher.
* (If relevant)Agree to the potential future submission of the anonymised research data to an Open Data repository to support future research projects.
* Understand that if you have concerns about the ethical conduct of the research project you can contact the Research Office on 01243 816000 or email [research@chi.ac.uk](mailto:research@chi.ac.uk).
* **FOR PROJECTS INVOLVING AUDIO /VIDEO RECORDING**Understand that the research project will include an audio and/or video recording.
* Agree to participate in the research project.

[Note that if audio/video recording is **optional** the **bullet point above** should be **removed** and the text below

### included – otherwise remove the checkboxes below:]

**Please tick the relevant box below:**

I **agree** for the interview / focus group to be audio / video recorded.

I **do not agree** for the interview / focus group to be audio / video recorded.

|  |  |
| --- | --- |
| **Name** |  |
| **Signature** |  |
| **Date** |  |

### PLEASE RETURN THE SIGNED CONSENT FORM TO THE RESEARCHER.

**Document version […]**

**Example Assent form (for younger children - written and oral)**

ASSENT FORM

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |

**Subject Number**



What is research?



Research is finding out the answer to an important question, by doing a careful experiment. This research is being done to see

……………etc…….



You are being asked if you want to join in this research because we want to find out …………………………………………………..

Please read this information carefully, or ask someone to read it aloud. You will be given a copy to keep. If you have any questions, you should ask your family and teachers.



**Do I have to take part?**

No! Being in the research is up to you. No one will be upset if you say “no”. You can stop being in the research any time after it has started – just tell Mummy, Daddy or your teacher.



**What will happen to me if I take part?**

My name is XXX and I will explain about the research.

…………………………etc You can ask lots of questions

then write your name at the end of this form if you want to join in.



**Will anything about the research upset me?**

If you become unhappy when you are taking part in the research we will ask you to stop and we will not ask you any more questions.

**ASSENT FORM**

Circle Yes or No

* Have you read (or had read to you) about this research? Yes/No
* Has somebody else explained this research to you? Yes/No
* Do you understand what the research is about? Yes/No
* Have you asked any questions you want to? Yes/No
* Have you had time to think about taking part? Yes/No
* Are you happy to take part? Yes/No

If you ***don’t*** want to take part, please tell XX. (Suggest using the name of the person given above)

If you don’t enjoy writing yet, but **do** want to take part, please draw a smiley face:



If you enjoy writing and want to take part, please fill in the boxes below:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Your Name |  | **Your Signature** |  | Date |

Thank you very much for your help with this research.

**Researcher in charge of this research –complete Section 1 Section 1: Written Assent**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Name |  | Signature |  | Date |

(1 copy for child/parent, 1 copy for research records)

# Appendix 5: Further Information and Sources of Supplementary Guidance

Staff and students may find useful the following sources of supplementary information. Some links will lead to guidance and information and/or conferences and events.

#### Applied Ethics Resources on [WWW...](http://WWW./)

<http://www.ethicsweb.eu/node/1>

#### The Association of Research Ethics Committees

<http://www.alltrials.net/supporter-orgs/the-association-of-research-ethics-committees/>

AREC is an independent, self-governing body of Research Ethics Committees, local and multi-centre, including their members and administrators.

#### Association of Social Anthropologists of the UK and Commonwealth

[http://www.theasa.org](http://www.theasa.org/)

#### Bribery Act 2010

<http://www.legislation.gov.uk/ukpga/2010/23/contents>

#### British Educational Research Association

[www.bera.ac.uk](http://www.bera.ac.uk/)

#### British Pregnancy Advisory Service

<https://www.bpas.org/>

BPAS is at the forefront of innovation in abortion in the UK. Its research programme is monitored by the Research and Ethics Committee.

#### British Sociological Association

<https://www.britsoc.co.uk/>

#### British Psychological Society

[www.bps.org.uk](http://www.bps.org.uk/)

#### Cardiff Centre of Law and Society

<https://www.cardiff.ac.uk/research/explore/research-units/centre-of-law-and-society>

Led by Cardiff Law School and based at Cardiff University, this virtual centre connects researchers and practitioners in medicine, science, information technology, the social sciences and humanities.

#### Global Forum on Bioethics in Research

<http://www.gfbr.global/>

An informal partnership established by a number of organizations with a shared interest in the ethics of conducting research involving human beings in developing countries.

#### Independent Safe Guarding Authority

<http://www.isa-gov.org.uk/>

#### Informed consent and the research process

<http://www.sociology.soton.ac.uk/Proj/Informed_Consent/index.htm>

#### International Network for Philosophy and Bioethics (INPAB)

<http://www.netvibes.com/philosophyandbioethics#Welcome>

This Site compiles and collates the journal table of contents for most major bioethics, ethics, political philosophy and general philosophy journals.

#### The Institutional Review Board - Discussion and News Forum

<http://www.irbforum.com/>

Promotes the discussion of ethical, regulatory and policy concerns with human subjects research.

#### The Medicines for Human Use (Clinical Trials) Regulations 2004

<http://www.legislation.gov.uk/uksi/2004/1031/contents/made>

#### National Reference Centre for Bioethics Literature

<http://bioethics.georgetown.edu/>

Journal articles, book chapters, bills, laws, court decisions, reports, books, audio-visuals, and news articles relating to bioethics and professional ethics.

#### National Research Ethics Service

<http://www.nres.nhs.uk/>

#### [NHS specific ethical review](http://www.corec.org.uk/)

<http://www.corec.org.uk/>

#### Philosophy and Bioethics

<http://philosophyandbioethics.blogspot.com/index.html>

This is the Blog of the International Network for Philosophy and Bioethics and aims to provide a focus point to discuss both philosophy and bioethics and their inter-relation.

#### Privacy in Research Ethics and Law

<http://www.privireal.org/index.php>

PRIVIREAL is a EUROPEAN COMMISSION Framework 5 funded project examining the implementation of the Data Protection Directive 95/46/EC in relation to medical research and the role of ethics committees.

#### Professional Ethics at Keele

<http://www.keele.ac.uk/ethics>

Keele’s Centre for Professional Ethics (also known as PEAK – Professional Ethics at Keele) is the largest and most successful provider of postgraduate ethics courses in Europe, with over 200 postgraduate students, nine permanent academic staff, and a portfolio of six distinctive MA / PgDip programmes as well as the UK’s first Professional Doctorate in Medical Ethics.

#### Social Research Association

<http://the-sra.org.uk/sra_resources/research-ethics/ethics-guidelines/>

#### UK University Research Ethics Committees Forum

<http://www.kcl.ac.uk/research/ethics/training/ukurecforum.html>

The UK University Research Ethics Committees Forum is an informal group which provides a forum for those involved in Research Ethics within universities to meet and share experience.

# Appendix 6: Health and Safety Guidance for Research 2013

* 1. Introduction

This guide aims to help anyone who needs to ensure good health and safety performance in a research environment. This guide should be read in conjunction with The Research Ethics Policy and The Health and Safety Policy. This guide provides heads of department, principal investigators and researchers with:

* + - examples of responsibilities and management approaches
    - advice on safety culture and risk assessment
    - case studies showing key issues that need to be considered.

It is important to set out the responsibilities for health and safety in the university. Health and safety law in the UK places responsibilities on employers, employees and third parties, and everyone in the university needs to know who is responsible for what in order that students, staff and members of the public are not put at risk of harm.

See the Health and Safety pages on the intranet for more information about all aspects of Health and Safety.

* 1. Responsibilities of Academic staff and research staff

All researchers and employees in a research establishment must:

* + - take responsibility for their own health and safety and ensure that they don’t compromise the health and safety of others by the things they do or fail to do
    - work safely and efficiently
    - follow the University’s policy, guidance and safe systems of work
    - attend training and put it into practice in the workplace
    - risk-assess, or assist with the risk assessment of their work
    - use protective equipment as recommended
    - not change research or other work protocols without first discussing the change with their manager and specialist safety advisers as appropriate
    - report incidents that have resulted in, or could have resulted in, injury or damage
    - assist in the investigation of accidents with the aim of introducing preventative measures
    - report unsafe conditions or actions **-** work co-operatively to improve health and safety standards and performance.
  1. Responsibilities of the Vice Chancellor (VC), The Vice Chancellor is ultimately responsible for:
     + the health, safety and welfare of all those involved in research or providing research support
     + the health and safety of visitors to establishments under their control or anyone who may be affected by the University’s activities
     + setting the University’s health and safety policy, which:
       - identify the university’s intentions, responsibilities and arrangements for managing and monitoring health and safety
       - identify how competent health and safety advice will be obtained and show that health and safety will be adequately resourced
       - state how effective methods of consultation, co-operation and assurance of competence will be achieved for researchers, visiting workers, students etc.
  2. Responsibilities of Heads of Department Heads should ensure that:
     + health and safety policies, guidance and arrangements relevant to the expected risks in the research or work area are in place
     + their departments health and safety objectives are planned and managed
     + individual responsibilities for health and safety are allocated appropriately and performance is reviewed as part of the annual appraisal
  3. Responsibilities of the Health and Safety Committee

The Health and Safety Committee consists of various members of the university including trade union representatives and are consulted on health and safety matters, including:

* + - systems are in place for identifying training needs and providing appropriate training and Supervision for research staff and others in the workplace
    - the general and specific health and safety arrangements for contractors, visiting workers and visitors are explicit and communicated effectively
    - appropriate permits and licences are obtained before the research, and records of authorisation, training, incidents and maintenance are kept
    - appropriate planned, preventative maintenance regimes are in place
    - policy and guidance details how health and safety management will be monitored using appraisal, reporting arrangements, inspection, health surveillance, incident and work- related ill health reports, incident type analysis and audit
    - the sanctions for not following university policy or codes of practice are made clear to all

See the Health and Safety pages on the intranet (Portia, Uni Services tab) for more information about the Health and Safety Committee

* 1. Responsibilities of those leading research projects/activities

The individual leading and/or coordinating the research project or activity (sometimes referred to as is responsible to the Head of Department for the safe and legal conduct of research under their remit. This responsibility cannot be delegated. As with all people working in the research environment, the research leader is responsible for their own safety and the safety of others who may be affected by their unsafe acts or omissions. Those leading research projects should ensure that:

* + - be aware of the legal requirements for their area of research and be able to identify and manage the risks in their field of work
    - ensure that all people under their direction have adequate information about the risks and risk controls that apply to their work, and that relevant training and supervision arrangements are in place
    - ensure their research supervisors and post-doctoral researchers are trained in risk assessment techniques and are competent to supervise others in their research activity
    - monitor workplace safety compliance and draw their manager’s attention to deficiencies in health and safety management, such as unsafe acts or conditions, failure to follow safe systems of work, a lack of planned maintenance or inadequate facilities
    - enforce health and safety standards and codes of practice and set a good example to their research staff and others in the workplace.
    - they employ competent researchers, training needs are assessed and training is available, both in general health and safety issues (such as risk assessment) and specific techniques or situations where there is significant risk (such as the use of lasers or conducting research in the community)
    - special permission or licensing arrangements required for the work are in place
    - appropriate supervision is available for researchers and research support workers, depending on the risk of the activity and the age and experience of the individual
    - programmes of work have been risk-assessed and the health and safety of researchers and others will not adversely be affected by known or emerging risks
    - individual responsibilities for health and safety are allocated appropriately and performance is reviewed as part of the annual appraisal.
    - consideration is given to the health and safety management, training and communication arrangements for researchers with disabilities or for those whose first language isn’t English
    - robust emergency plans are in place for the workplace and research activities which pose high safety risks
    - they are made aware of reported incidents and near misses and will ensure that appropriate actions are taken to prevent a recurrence
    - they are informed about the outcome of safety performance measures such as inspections, Safety tours, health surveillance, compliance with risk control systems and safe systems of work, training events attended, work related injury and ill-health figures
    - they take the appropriate actions recommended by audit findings of non-conformance
    - they set an example by their own behaviour and are prepared to take action if health and safety is compromised by the things their researchers do or fail to do.
  1. Post-doctoral Researchers/Research Supervisors

Post-doctoral researchers and research supervisors should be competent in the research area and aware of the risks inherent in the techniques, equipment and methods they use. They should be trained to:

* + - carry out risk assessments and communicate information on risks and control measures to their researchers and others affected by the research
    - understand the institution’s policies, procedures and committee structures
    - be effective supervisors – supportive, good at coaching and mentoring, excellent role Models and take appropriate actions when made aware of health and safety management failures
    - contribute to the investigation of accidents and near misses that have affected their research Teams **-** use safe laboratory and work practices and safe systems of work and reinforce the importance of good housekeeping and occupational hygiene.
  1. Research students and other trainee researchers

Research students and other trainee researchers can’t be assumed to be aware of the health and safety risks of the research or workplace and must be trained and supervised until they are competent to work without direct supervision.

* 1. Research Support Workers

It’s important to establish the risks the research poses to the health and safety of research support staff and others who may be affected in the university. As with researchers, responsibility for the health and safety of employees flows up the line management chain to the Vice Chancellor. The risks the research activity could present to cleaners, maintenance staff, engineers, technicians and so on must be assessed and adequate risk control measures put in place before the research project starts. Research support workers must be informed about relevant risks, associated risk control measures and their personal responsibility for health and safety. They should also be competent to discharge their duties without causing harm to themselves or others.

* 1. Culture

The safety culture of any university depends on the collective output of the health and safety related beliefs, attitudes and behaviours of the people within it. In the university, the attitudes and behaviours of senior managers are particularly influential. A positive safety culture expects and allows people to behave safely because it is the correct thing to do; it is the normal way of operating within the university. Safe behaviour is one visible output of such a culture. This is important in a research environment, since a lot of research is done outside normal working hours when daytime levels of supervision and support are unlikely to be available. Research supervisors need to be able to rely on their researchers to be mindful of their own safety, for example by following research protocols and safe systems of work, wearing personal protective equipment and using safety equipment properly, whether or not their supervisor is present. In a positive culture, guidance and work systems set out how the research should be carried out and how to act in emergencies. In particular:

* + - researchers are made aware of the importance of reporting accidents, near misses and dangerous occurrences
    - reporting systems are easy to use and those reporting incidents are not punished for occasional slips and lapses
    - it is recognised that accidents and near misses can be used as learning opportunities and can signpost that more training is required or that systems of work should be modified.
  1. Managing Health and Safety in Research

All research tasks and projects should be evaluated for foreseeable health and safety risks before the work starts. The employer must then ensure that significant risks are recorded and that reasonably practicable risk control measures have been put in place. These control measures should be built into systems of work and research protocols.

Risk assessments should be carried out by competent people. The process of risk assessment is no different in research than in any other job. For many social sciences research projects, the risks will not be specialist in nature and general guidance on risk assessment, which can be found on Portia or in HSE publications, will help identify sensible precautions. However, in the case of practical research which might involve hazardous substances, equipment or processes, you might need to consider less well-known hazards, especially where new materials and processes are being used. Research Leader, Principal Investigators, research supervisors and their teams might be the only people who know the work well enough to make valid judgments about risk, and should be prepared to justify their conclusions. Where risk in a research project is unavoidable, a hierarchy of risk control solutions should be considered:

* + - Can less hazardous materials, equipment or processes be used?
    - Can risks be mitigated at source using engineering controls such as equipment guards and emergency stop buttons? What collective protective measures can be put inplace?
    - Can suitable systems of work be designed, specifying what is required in terms of training, rules, procedures and supervision?
    - What individual protective measures are required, such as personal protective equipment, or health surveillance?

Risk assessments should consider the skills and experience of project team members. If some team members are yet to be recruited, the desired skills and competences will help inform the recruitment process and any training needs. The risk assessment will also inform the development of research guidance and safe systems of work, and the risks and controls identified should be incorporated into research work protocols.

PIs and supervisors need to take responsibility for all assessments associated with their projects, but they may occasionally need to ask research workers to risk-assess some aspects of the work. The research supervisor or PI should check that the researchers doing this have been trained in risk assessment practice and that the assessments have been done to a satisfactory standard. In some fast-changing research environments, dynamic risk assessment and risk control solutions may be required. Dynamic risk assessment is a continuous process of identifying hazards and evaluating risks as they come up, taking appropriate actions to eliminate or reduce the risk. The researcher continually monitors and reviews the changing circumstances in the research environment. The actions taken should be documented to improve overall knowledge of risk and risk controls in similar projects.

The risk assessment will also help establish what sort of personal protective equipment is required, and whether specific occupational health arrangements should be in place, for example interventions such as vaccination, or health monitoring and surveillance, such as regular respiratory function tests. An important part of risk control in research is that buildings, rooms, equipment etc. used during the research should be designed and maintained to ensure they don’t compromise health and safety. The planned, preventive maintenance of general plant and specialist equipment is an essential feature of a safe research environment and should be considered at the design and procurement stage of research planning and resourcing. Further information regarding risk assessments can be found on the University intranet.

* 1. Evaluate the Risks

When completing the research risk assessment, the following factors must be considered:

* Consider which people could be harmed by the hazards, how they could be harmed and how likely it is that harm could occur. You will have to think about the risks to trainees, new or expectant mothers, cleaners, contractors, visitors etc, as well as to staff and colleagues.
* The magnitude of the risk (eg low, moderate or high) is determined by how likely it is that harm could occur and how serious the resulting harm would be (eg type of injury or ill health, numbers affected, likelihood of spread)
* Control the risks: What is already in place to control the risks identified? Are these measures sufficient or does more need to be done? It is likely that there will be some risk controls in place: the building should be fit for purpose and will probably have engineering risk controls such as fume hoods in place.
* Health and safety information and training programmes should already be available. However, you may have to develop training and safe systems of work or buy in specialised equipment or expertise to help control specific risks.
* Record and implement Record your significant findings and implement your control measures. The research should not start until risks to health and safety are controlled so far as is reasonably practicable. Recording the significant findings helps to identify areas where precautions are needed and determine relevant information that needs to be provided to the workers involved. The findings of the risk assessment should be used to inform research protocols and/or safe systems of work. You should be able to show that people involved in the assessed activity are aware of the risks and are able to work safely

#### Case study 1

**A Risk Assessment of a Social Science Research Project**

*Travel risk controls*

Transport is arranged from the research unit but in the event of transport or other problems, assistants must be able to contact the day’s team leader and must have a list of telephone numbers and their mobile phone.

*Location risk controls*

Fieldwork will be conducted in secondary departments during department hours. Out of hours the team members should wait in pairs at designated meeting points. Researchers are identified by uniforms and ID badges.

*Study subject risk controls*

The questionnaire asks questions about drinking and smoking among an under-age population. These are emotive topics and researchers must refer extremely emotional interviewees to the team leader. Interviewers should not visit departments attended by any subject known to them. Neither can they interview, nor access any information revealed by, such subjects. Researchers working with children and vulnerable adults have been trained in child protection issues and are CRB or equivalent checked.

*Trauma risk controls*

Instances or threats of violence and aggression will be reported to the team leader and to the head of the department. Survey assistants are issued with lone worker alarms. Planned, rehearsed response measures are in place. If any survey assistant has concerns about the child or their handling of the situation then it is their responsibility to discuss this with their team leader. The research group leader runs debrief sessions where researchers who have been exposed to traumatic or upsetting situations or information can discuss these issues with colleagues and the team leader.

*Other identified risks*

Manual handling risks – researchers are trained and use trolleys for shifting loads. Researchers with musculoskeletal problems are not allowed to lift or shift loads.

*Residual risk*

With these controls in place the project is assessed as low risk and no further risk controls are required for the research to proceed.

*Record and implement controls*

The risk assessment is recorded and the researchers are informed of the findings of the assessment. The training needs of the researchers are checked and relevant training is offered before the research study takes place. Lone worker alarms are issued and researchers are reminded of the procedure for their use and the measures in place for responding to them. Researchers are given the opportunity to clarify any of the issues raised by the risk assessment and the control measures associated with the research.

*Risk assessment review*

The risk assessment will be reviewed and revised:

* if the research project changes significantly
* following the occurrence of an unplanned incident during the project
* following the first set of data collection to ensure it has captured and mitigated all the significant risks
* attached to this project. If there were any incidents, note what corrective actions were taken – if necessary, amend research protocols accordingly. Planned review date:

#### Case Study 2

**Research Involving Taking Finger Prick Blood Samples Research Activity:**

A PhD student, who is researching blood lactate levels during exercise, wants to take finger prick blood samples every 3 minutes for the duration of a sub-maximal exercise test.

#### Plan:

* To read relevant scientific journals of similar studies to determine an appropriate exercise and sampling regime.
* Undertake a risk assessment of the laboratory and equipment that will be used.
* Seek occupational health advice before commencing the study and taking any blood samples (e.g. Hepatitis B/Tetanus vaccination may be required by the PhD student).
* Get appropriate training to take finger prick blood samples (see the Senior Technician).
* Ensure that each participant has completed a health questionnaire and consent form and is aware that the procedure involves blood samples to be taken.
* Ensure that the appropriate protective equipment is in the lab prior to testing (e.g. Lab coat, gloves, Sharps bins etc.) to prevent the transfer of blood-borne diseases (e.g. Aids).
* Ensure that equipment is protected from blood (e.g. putting cling film on the treadmill handles).
* In the event of a sharps injury, the correct protocol is followed and the researcher is aware of it.

#### Do:

Ensure that:

* the controls identified by the risk assessment are in place before the research project starts
* adequate training and supervision is provided from the Technician team
* clear protocols and/or operating procedures are followed and that the researcher knows how to work safely
* blood samples are taken in the appropriate way, ensuring the safety of the participant and researcher
* blood samples and needles are disposed of in the sharps bins and soft contaminated items in the hazardous waste bags
* LabGuard is used to wash hands thoroughly (following the instructions on the pump) after each participant.
* any incidents are reported through the appropriate internal means.
* Ethics approval has been obtained.

#### Check:

* the sharps injury protocol
* the laboratory and equipment is set up correctly and is safe to use, before commencing testing
* the hazardous waste has been disposed of correctly
* the subject is well, and that bleeding has stopped and the cut is covered with a plaster post- test
* that the surfaces are clean after testing and that they have been wiped down thoroughly with Virkon.
* any spills of blood are reported and dealt with appropriately

#### Review:

* Review all risk assessments and codes of practice periodically, before any changes are made to experimental technique or following and unplanned event.
* Were there any incidents? If so, what actions were implemented and will these be required in the future? If this is the case, they should be written into the research protocols and standard operating procedures.

#### Case Study 3 Research Abroad

When research is conducted in another country, you must always meet the health and safety standards of that country. Refer to the International Labour Organization’s guidance – see [www.ilo.org/public/english/protection/safework/cis/index.htm](http://www.ilo.org/public/english/protection/safework/cis/index.htm) and the University’s policy regarding Travel Abroad; a request for authorisation of overseas travel is available on the HR pages of the University’s intranet. A full risk assessment for overseas field work must be completed and sent to [healthandsafety@chi.ac.uk](mailto:healthandsafety@chi.ac.uk) no less than 7 days before the field trip. See Field Trips Guidance (Appendix 3) also available on the HR pages of the University’s intranet.

# Appendix 7: Application Process Flowcharts

Not recommended for approval

Recommended for approval

Application reviewed by Ethics Subgroup

#### For postgraduate students (Research Masters, PhD students and staff)

It is the responsibility of the Applicant to inform the relevant person (e.g. Line Manager or Supervisor) of any changes or deviations from the original research project which has ethical implications.

Consent forms and information sheets are required when working with participants of a study.

Evidence of organisation’s ethical review process is required when collaborating with an external organisation

Application completed by staff or Research Masters/ PhD student

Review with Supervisor/Line Manager and agree categorisation

Category A or A+

Application noted by Clerk of the Research Ethics Committee, and details noted and recorded in Research Ethics Committee minutes

Approved

A random sample of A and A+ applications will be requested and reviewed by the Research Ethics Committee annually for quality assurance purposes.

Applicant informed of approval by authoriser. Documentation forwarded to [research@chi.ac.uk](mailto:research@chi.ac.uk)

Category B

Not approved

More information may be sought from the applicant, and/or the applicant may be invited to attend the next Research Ethics Committee meeting.

Application reviewed by the Chair of the Ethics Committee in light of the Subgroup recommendation

Application reviewed at Research Ethics Committee and applicant approved of outcome by the Clerk of the Committee

#### For all undergraduate (UG) and postgraduate taught Masters Students

Category A or A+

Application completed by Undergraduate or Taught Masters student

Review with

Supervisor/ Tutor and agree categorisation

Consent forms and information sheets are required when working with participants of a study.

Evidence of organisation’s ethical review process is required when collaborating with an external organisation

Application details noted on Departmental Spreadsheet

Category B

Not recommended for approval

Application sent to [research@chi.ac.uk](mailto:research@chi.ac.uk) and reviewed by Ethics Subgroup

More information may be sought from the applicant, and/or the applicant may be invited to attend the next Research Ethics Committee meeting.

Approved

A random sample of A and A+ applications will be requested and reviewed by the Research Ethics Committee annually for quality assurance purposes.

Recommended for approval

Not approved

Application reviewed by the Chair of the Ethics Committee in light of the Subgroup recommendation

Applicant informed. Application noted by Clerk of the Research Ethics Committee, and details noted and recorded in Research Ethics Committee minutes

Application reviewed at Research Ethics Committee and applicant approved of outcome by the Clerk of the Committee

# Appendix 8: Application for Ethical Approval

This form should be used by ALL members of the University including undergraduate students, postgraduate research and postgraduate taught students, staff and those in visiting or emeritus roles who wish to undertake research involving human participants under the name of the University of Chichester. You do not need to complete this form if your research does not involve human participants directly or indirectly (e.g. observation studies) (see section 4.1 of the Research Ethics Policy (REP) for more information), however, you are expected to work within the Research Ethics Policy and Researcher Code of Conduct. The University does not conduct research on animals. If your proposed project involves animals in any way please seek advice from the Research Office before proceeding. Researchers wishing to use tissue cultures in their research should contact the Research Office in the first instance. Researchers should consider the provenance of tissue samples/cultures/cell-lines and associated growth media (or similar) and whether immortalised and/or animal-free alternatives are available.

**THIS FORM MUST BE COMPLETED AND APPROVED** by the relevant person(s) and if categorised as Category B it must be approved by the Research Ethics Committee (REC) prior to commencement of research. Full guidance on the Application process can be found in the body and appendices of the Research Ethics Policy.

**REQUIRED DOCUMENTATION** Each Application must be submitted alongside relevant consent forms, information letters/sheets, and debriefing sheets. This documentation should be version numbered and dated.

**Categorisation of applications for ethical approval**

**Category A** projects are less likely to involve participants from vulnerable groups (e.g. children, or persons with disabilities) and/or involve sensitive issues or areas/activities that entail a level of risk of distress or harm to participants or researchers. They only need to be approved by your supervisor and do not need to be considered by the Research Ethics Committee. The Research Ethics Policy provides further guidance on categorisation and areas of risk.

**Category A+** for specific cases of withholding information / intentional deceit as occurs in single blind or double blind trials (as described above), where the only reason for identifying the project as a Category B is the withholding of information / intentional deceit. If there is any other aspect of the study that would lead to a Category B categorisation (e.g. the study involves a vulnerable group such as children, people with a disability, or those with a mental health problem, who are not persons with whom the applicant normally works: see clause

* + 1. of Research Ethics Policy) then the exception does not apply and the application for ethical approval is classified as Category B and treated accordingly. The application would be approved by the line manager/supervisor (as with Category A applications) and also by an independent scrutiniser drawn from a pool of experienced researchers within the Institute/Department approved by its Head/Director. They do not need to be considered by the Research Ethics Committee. This would apply to category A+ applications from undergraduate students as well as staff and postgraduates.

**Category B** projects need to be considered by the Research Ethics Committee. The process of approval can take several weeks or longer depending on the number of applications being considered at any one time and the resolution of any issues that are raised by the Committee. It is fairly common for applications to be returned for further amendments prior to approval. The Committee expects applications from students to be of the same quality as those from staff. A helpful way to consider this position is to consider the research project from the point of view of the research participant.

**Undergraduate or taught postgraduate student applicants:** Your tutors and programme team will be able to advise you on how and when to complete this form. Your project

supervisor is responsible for categorising your application as Category A, A+ or Category B and for authorising it. **Communications relating to Category B applications should be between the supervisor and the clerk to the Research Ethics Committee. The student should not contact the clerk directly.**

### The completed form will be kept for a period of five years after approval.

**Postgraduate research students:** Your PhD supervisor is responsible for categorising your application as Category A, A+ or Category B and for authorising it.

**Academic Staff:** Your line manager is responsible for categorising your application as Category A, A+ or Category B and for authorising it.

**Emeritus or Visiting roles:** The Head of Department of the area to which you are linked is responsible for categorising your application as Category A, A+ or Category B and for authorising it.

**[*this is a detachable front sheet, the form begins on the next page*]**

**Section A: Basic Information**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **A1: Title of study:** |  | | | |
| **A2: Name of Applicant:** (in  collaborative projects, just name the lead applicant) |  | | | |
| **A3: Position of Applicant** (e.g. UG/Masters/PGR student,  academic) |  | | | |
| **A4: Programme of study:** (for UG or taught Masters students only) |  | | | |
| **A5: Department of Applicant:** |  | | | |
| **A6: Checklist to ensure application is complete.** Have you prepared the following documents to accompany your application for ethical approval, please tick the appropriate column for each of the  following: | | | | |
| **Document** | | **Yes** | **No** | **N/A** |
| Confirmation of Ethical Approval of any other organisation (e.g. NHS, MoD, National Offender Management Service) | |  |  |  |
| Recruitment information / advertisement (e.g. draft text for email/ poster/social media/letter) | |  |  |  |
| Information sheet for participants | |  |  |  |
| Information sheet for carers/guardians | |  |  |  |
| Information sheet/letter for gatekeepers e.g. Head teacher, teacher, coach | |  |  |  |
| Consent form for participants | |  |  |  |
| Assent form for younger children | |  |  |  |
| Documentation relating to the permission of third parties other than the participant, guardian, carer or gatekeeper (e.g. external body whose permission is required) | |  |  |  |
| Medical questionnaire / Health screening questionnaire | |  |  |  |
| Secondary information sheet for projects involving intentional deceit/withholding information | |  |  |  |
| Secondary consent form for projects involving intentional deceit/withholding information | |  |  |  |
| Debrief sheet to give to participants after they have participated | |  |  |  |
| **Statements about completeness of the application** | | **Yes** | **No** | **N/A** |
| For research involving under 18s or vulnerable groups, where necessary, a statement has been included on all information sheets that the investigators have passed appropriate  ***Disclosure and Barring Service***[1](#_bookmark0) checks | |  |  |  |
| I can confirm that the relevant documents listed above make use of document references  including date and version number | |  |  |  |
| I can confirm that I have proof read my application for ethical approval and associated documents to minimise typographical and grammatical errors | |  |  |  |

### Declaration of the applicant:

I confirm my responsibility to deliver the research project in accordance with the University of Chichester’s policies and procedures, which include the University’s ‘*Financial Regulations*’, ‘*Research Ethics Policy’, ‘Electronic Information Security Policy’* and *‘Privacy Standard’* and, where externally funded, with the terms and conditions of the research funder.

#### In signing this research ethics application form I am also confirming that:

* The research study must not begin until ethical approval has been granted.
* The form is accurate to the best of my knowledge and belief.
* There is no potential material interest that may, or may appear to, impair the independence and objectivity of researchers conducting this project.

*1 Working with under 18’s or other vulnerable groups may require a Disclosure and Barring Service Check. Contact* [*HR@chi.ac.uk*](mailto:HR@chi.ac.uk) *if you are not sure whether you have an up to date and relevant DBS check or if you require more information. Do note that a DBS check may take several weeks to obtain.*

* Subject to the research being approved, I undertake to adhere to the project protocol without deviation (unless by specific and prior agreement) and to comply with any conditions set out in the letter from the University ethics reviewers notifying me of this.
* I undertake to inform the ethics reviewers of significant changes to the protocol (by contacting the clerk to the Research Ethics Committee ([research@chi.ac.uk](mailto:research@chi.ac.uk)) in the first instance).
* I understand that the project, including research records and data, may be subject to inspection for audit purposes, if required in future, in keeping with the University’s Privacy Standard.
* I understand that personal data about me as a researcher in this form will be held by those involved in the ethics review procedure (e.g. the Research Ethics Committee and its officers and/or ethics reviewers) for five years after approval and that this will be managed according to Data Protection Act principles.
* I understand that all conditions apply to any co-applicants and researchers involved in the study, and that it is my responsibility to ensure that they abide by them.
* For the Student Investigator: I understand my responsibilities to work within a set of safety, ethical and other guidelines as agreed in advance with my supervisor and understand that I must comply with the University’s regulations and any other applicable code of ethics at all times.

Title of study……………………………………………………………………………………………………..

…………………………………………………………………………………………………….. Name of applicant……………………………………………………………………………………………… Signature of Applicant: ………………………………………………. Date:

………………………………..

### Section B: Authoriser assessment and approval

Where Applicants are students (undergraduate or postgraduate) supervisors should authorise this form; where applicants are staff members their line manager (or nominated signatory) should authorise this form.

|  |  |  |
| --- | --- | --- |
| **B1: Name of Authoriser:** |  | |
| **B2: Position of Authoriser:**  (e.g. supervisor, line manager) |  | |
| **AUTHORISER:**  Please categorise the application (A, A+ or B) ensure that the application form and all of the required documentation are complete before signing this application.  **Authoriser assessment:** (**tick as appropriate** – *see Section 10 of the* [*Research Ethics Policy*](http://www.chi.ac.uk/about-us/how-we-work/policies)*)* | | |
| **Category A:**  Proceed with the research project.  ***Undergraduate and Postgraduate Taught Masters applications***: Form and documentation retained at Department level. ***Research Masters, PhD and staff applications***: Form and documentation forwarded to the Research Office [*research@chi.ac.uk*](mailto:research@chi.ac.uk) | |  |
| **Category A+:**  (for studies where information is withheld/there is an element of deceit or  similar see Appendix 13) Proceed with the research project.  ***Undergraduate and Postgraduate Taught Masters applications***: Form and documentation retained at Department level. ***Research Masters, PhD and staff applications***: Form and  documentation forwarded to the Research Office [*research@chi.ac.uk*](mailto:research@chi.ac.uk) | |  |
| **Category B:**  Submit to the Ethical Approval Sub-group for consideration.  [*research@chi.ac.uk*](mailto:research@chi.ac.uk)  Proceed only when approval granted by the Chair of the Research Ethics Committee | |  |
| **Authoriser, please provide a comment on your assessment of the research project and for those projects involving vulnerable groups that you are authorising as Category A please justify this classification in the box below. As a further point, do make appropriate reference to any other codes of practice in your discipline particularly if you think that the proposed research may be in tension with those codes.**  For Category A+: the application would be approved by the line manager/supervisor (as with Category A applications)  and also by an independent scrutiniser drawn from a pool of experienced researchers within the Institute/Department approved by its Head/Director | | |
| *Comment:* | | |

### Authoriser’s declaration:

* + I have read the Research Ethics Policy and this has informed my judgement as to the category of assessment of this application.
  + I understand that the applicant has taken account of the Research Ethics Policy and other relevant University policies in preparing this application.
  + For Supervisors: I understand my responsibilities as supervisor, and will ensure, to the best of my abilities, that the student investigator abides by the University’s Research Ethics Policy at all times.

### Authoriser, please complete this table making it clear which version of the application form you are approving:

|  |  |  |
| --- | --- | --- |
| **Version of the form** (e.g. original version/ amended  version following REC sub-group comments) | **Signature of authoriser** | **Date** |
|  |  |  |
|  |  |  |

**For Category A+ independent scrutiniser must also sign as authoriser.**

**For RO use: IF CATEGORY B:** Signature of the Chair of the Research Ethics Committee.

Signature: …………………………………………………… Date:

…………………………………

*Please note that the Research Office will retain all applications for ethical approval for 5 years after the research project has ended as stated in the University’s Privacy Standard*

*.*

|  |
| --- |
| **SECTION C: Ethical Review Questions** |
| **C1. Does the study involve human participants?** |
| Yes/No  *Participants in research are taken to include all those involved in the research activity either directly or indirectly and either passively, such as when being observed part of an educational context, or actively, such as when taking part in an interview procedure.*  *NB: the University does not conduct research on animals. If your proposed project involves animals in any way (including animal tissue) please seek advice from the Research Office before proceeding.* |

|  |
| --- |
| **C2. Why should this research study be undertaken?**  *Brief description of purpose of study/rationale* |
|  |
| **C3a. What are you planning to do?** *Provide a description of the methodology for the proposed research, including proposed method and duration of data collection, tasks assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, e.g. established laboratory protocols, validated questionnaires, please refer to this in your answer to this question. (Do not exceed 500 words). If it is helpful for the panel to receive further documentation describing the methodology then please append this to your*  *application and make specific reference to it in box 3a below. For category B applications please include the data collection sheet as an appendix* |
|  |
| **C3b. When are you planning to do it?** *Please enter the anticipated start and end dates of your study (Consider at which point you will be involving human participants, this would typically be in the data collection/information gathering phase of the project but may be earlier):* |

### C3c. Is this research externally funded?

Yes/No

*If, the answer yes, please name the research funder(s) here:*

**C4. Where will the research be undertaken?** *Briefly describe the location of the study, provide details of any special facilities to be used and any factors relating to the study site/location that might give rise to additional risk of harm or distress to participants or members of the research team together with measures taken to minimise and manage such risks:*

|  |
| --- |
|  |

**C5. Who are the participants?** *Please indicate the number of participants in each of the groups in the table below. If the precise number of participants is not known then please make an estimate. Please enter ‘0’ in the ‘Numbers in study’ column for those groups that are not included in your study. Please note that the examples provided of different sorts of vulnerability are not an exhaustive list.*

|  |  |
| --- | --- |
| **Participant** | **Numbers in study** |
| **Adults with no known**[**2**](#_bookmark1) **health or social problems i.e. not in a vulnerable**  **group:** |  |
| **Children aged 16-17**[**3**](#_bookmark2) **with no known3 health or social problems:** |  |
| **Children under 16 years of age with no known3 health or social problems:** |  |
| **Adults who would be considered as vulnerable e.g. those in care, with learning difficulties, a disability, homeless, English as a second language, service users of mental health services, with reduced mental capacity**[**4**](#_bookmark3)  Identify reason for being classed as vulnerable group and indicate ‘numbers in study’ in next column adjacent to each reason (expand the form as necessary):  **………………………………………………..**  **………………………………………………..** |  |
| **Children (aged <18) who would be considered as particularly vulnerable**  **e.g. those in care, with learning difficulties, disability, English as a second**  **language**  Identify reason for being classed as vulnerable group and indicate ‘numbers in study’ in next column adjacent to each reason (expand the form as necessary):  ………………………………………………..  ……………………………………………….. |  |
| **Other participants not covered by the categories listed above (please list):**  ***List other categories here:*** …………………………………………….. |  |

**C6a. Is there something about the context and/or setting which means that the potential risk of harm/distress to participants or research is lower than might be expected?**

### Answer: Yes/No

*Consider if the study is part of routine activity which involves persons with whom you normally work in a typical work context e.g. Teachers working with children in a classroom setting, researchers in the performing arts working with performers, sports coaches working with athletes/players or research involving students in an academic setting.*

*Optional: Further information to justify answer to 6a*

|  |
| --- |
|  |

2 Known to the researcher

3 A summary of UK definition of ‘Child’ : <http://www.nspcc.org.uk/Inform/research/briefings/definition_of_a_child_wda59396.html>

4 https://[www.gov.uk/government/uploads/system/uploads/attachment\_data/file/224660/Mental\_Capac](http://www.gov.uk/government/uploads/system/uploads/attachment_data/file/224660/Mental_Capac) ity\_Act\_code\_of\_practice.pdf

|  |
| --- |
| **C6b. Are there any conflicts of interests which need to be considered and addressed?**  (For example, does the research involve students whom you teach, colleagues, fellow students, family members? Do the funders, researchers, participants or others involved in the research have any vested interest in achieving a particular outcome? *See section 9 of the Research Ethics Policy*  *(REP)*) |
| **Answer: Yes/No**  *If conflicts of interest are envisaged, indicate how they have been addressed:* |
|  |
| **C7. How will potential participants in the study be identified, approached and recruited?** |
| *Please include details of:*   * *Basis for selection of participants in the study:* ***e.g. participants must be clinically obese adults; participants must be social workers over the age of 50; participants must have achieved Grade 5 in an appropriate musical instrument*** * *Any criteria for exclusions (e.g.* ***participants declaring a heart problem will be excluded****)* * *How the selection criteria will be applied* ***e.g. Health questionnaire completed prior to joining the study***   *The means by which the participants will be recruited* ***(e.g. through an advert, through a school, through a sports club)****, please be specific about the medium of the advertisement/recruitment information* ***(e.g. poster, email, website, social media, word of mouth)*** *and mention any third*  *parties who may be involved in supporting the recruitment.* |
|  |
|  |
| **C8. Will any payment, gifts, rewards or inducements be offered to participants to take part**  **in the study?** *See section 11 of the REP.* |
| **Answer: Yes/No**  *Please provide brief details and a justification:* |
|  |
|  |
| **C9a. Is the process of the study and/or its results likely to produce distress, anxiety or harm in the participants even if this would be what they would normally experience in your work with them?**  *See section 5 of the REP.* |
| **Answer: Yes/No**  *If you answered Yes to 9a, please answer 9b below:* |
| **C9b. Is the process of the study and/or its results likely to produce distress or anxiety in the participants *beyond* what they would normally experience in your work with them?** |

|  |
| --- |
| **Answer: Yes/No**  *If yes this Application must be categorised as ‘B’ Please provide details:* |
|  |
| **C9c. What steps will you take to deal with any distress or anxiety produced?**  *E.g. have a relevant professional on-hand to support distressed/anxious participants. Careful signposting to counselling or other relevant professional services. Other follow-up support.* |
|  |
| **C9d. What is the potential for benefit to research participants, if any?** |
| *E.g. Participants may gain an increased awareness of some issue or some aspect of themselves.* |

|  |
| --- |
|  |

|  |
| --- |
| **C10a. Will the study involve withholding information or misleading participants as part of its methodology?** *(Please refer to sections 6.2 and 10 of the REP for further guidance)* |
| **Answer: Yes/No**  *Please provide details if this has not already been explained in section 3a:* |
|  |
|  |
| **C10b. Do you envisage that withholding information or misleading participants in this way will lead to any anxiety, distress or harm?**  **Answer: Yes/No**  *Please justify your answer to 10b:* |
|  |
| *It is the University Research Ethics Policy that all projects with the exception of double blind*  *placebo trials (or similar) will be categorise as Category B. Double blind placebo trails (or similar) may be categorised as Category A+.* |
| **C11a. Does your proposal raise other ethical issues apart from the potential for distress, anxiety, or harm?** |
| **Answer: Yes/No** |
| **C11b. If your answer to C11a. was ‘yes’, please briefly describe those ethical issues and how you intend to mitigate them and/or manage them in the proposed study, otherwise jump to**  **C11c.** |
|  |
|  |
|  |
| **C11c Does your proposed study give rise to any potential risk of harm or distress to yourself or other members of the research team? OR is there any risk that you could find yourself in**  **a vulnerable position as you carry out your study.** |
| **Answer: Yes/No**  *If you answer ‘yes’ to either of these points please explain briefly what the risks are and what steps you are taking in order to minimise and manage those risks.*  *For example does your study involve you in 1-1 interviews in a private setting that might suggest precautions need to be taken relating to lone-working (See section 9 of the REP), Have you considered the likelihood of a participant(s) disclosing sensitive information to you about illegal or harmful behaviour and what actions you would take in such circumstances?* |

|  |
| --- |
| **C12. Will informed consent of the participants be obtained and if so, how?** |
| **Answer: Yes/No**  *See section 6 of the REP to help you answer this question. Section 6.3.1 covers research that involves observing behaviour in a public place where gaining informed consent may not be practical or feasible.*  *When and how will informed consent be obtained? Will it be written or oral consent bearing mind that oral consent will not be considered adequate other than in exceptional circumstances and must be appropriately justified in your application?*  *NB: Ethical approval should, as a principle, be sought before research participants are approached.* |
|  |
|  |
| **C13. Is there anyone whose permission should be sought in order to conduct your study?**  E.g. Head teacher of a school, parents/guardians of child participants. |
| **Answer: Yes/No**  *When and how will informed consent be obtained and from whom? Will it be written or oral consent bearing mind that oral consent will not be considered adequate other than in exceptional circumstances and must be appropriately justified in your application? If you are seeking to gain ‘loco parentis’ consent from a school rather than seeking individual parental consent please*  *describe your reasoning.* |
|  |
|  |
| **C14. Do you need to seek the permission of any other organisations, individuals or groups other than outlined in section 13?** E.g. the Research Ethics Committee of partner or participating organisations. Organisations like the NHS and the Prison Service have specific systems for  granting ethical approval for research. |
| **Answer: Yes/No** |
| *Please note that all applications must go through the University of Chichester Application for Ethical Approval process and that they must meet the Research Ethics Policy (REP) requirements. Other prior approval will be taken into account but will not in itself be sufficient to gain University Research Ethics Approval. Each application must normally be accompanied by evidence (e.g. formal statement from the appropriate Ethics Committee) confirming approval by the external body (and any concerns/issues identified). In cases where an external body requires prior approval from the University Research Ethics Policy (such as some NHS work) the Research Ethics Committee (REC) may grant in principle approval pending written confirmation of ethical approval by the external body.* |
| *Please describe the permission that is required and how you will be seeking that permission: Please attach any relevant documentation e.g. letter, that relates to the seeking of the relevant permissions.* |

|  |
| --- |
| **C15. It is normally required that a participant’s data is treated confidentiality and stored securely at the outset of, during and after the research study. Will this be the case?**  How long will data be stored before being destroyed? |
| **Answer: Yes/No**  *If the answer is ‘yes’ please describe how you will be maintaining the confidentiality of participants’ data. If the answer is ‘no’ please justify the exceptional circumstances that mean that confidentiality will not be guaranteed. See section 7 of the REP.*  *Please make reference to measures you are taking to ensure security of data from the point of data collection, transfer from notebooks/voice recorders etc., onto secure devices, to the point of analysis, sharing and final storage. If you are planning to store sensitive data on portable devices or media, you should only store such data if there is an immediate need and should remove these data when this immediate need no longer exists. All sensitive data stored on portable devices or media must be strongly encrypted greatly reducing the risk of the data falling into the wrong hands if the device or media is stolen. Actions should be in accordance with the University’s Electronic Information Security Policy and Privacy Standard (please also refer to Section 9 of the University of Chichester’s Data Protection Guidance for Staff). Signed consent forms should be stored in a locked cabinet for a period of 5 years.*  Please provide details: |
|  |
|  |
| **C16. It is normally required that the anonymity of participants is maintained and/or that an individual’s responses are not linked with their identity. Will this be the case?** |
| **Answer: Yes/No**  *If the answer is ‘yes’ please describe how you will be maintaining the anonymity of participants. If the answer is ‘no’ please justify the circumstances that mean that anonymity will not be guaranteed. See section 7 of the REP. NB: in group studies it is likely that each individual in the group will be aware that others in the group are participating in the study – they are therefore not anonymous to each other. However, their identity should not normally be associated with their individual responses. In some studies individual participants may not want their identify known to other participants and the study must be designed and undertaken accordingly.*  Please provide details: |
|  |
| **C17. Will participants have a right to comment or veto material you produce about them?** |
| **Answer: Yes/No**  *Please give details and if your answer is ‘no’ then please provide a justification.* |
|  |
|  |
| **C18. Does the project involve the use of or generation/creation of audio, audio visual or**  **electronic material (e.g. Dictaphone recording, video recording) directly relating to the participants?** |

|  |
| --- |
| **Answer: Yes/No**  *If yes, please describe how the collection and storage of this will be managed bearing in mind data protection, confidentiality and anonymity issues (see section 7 of the REP). If you are planning to store sensitive data on portable devices or media, you should only store such data if there is an immediate need and should remove these data when this immediate need no longer exists. All*  *sensitive data stored on portable devices or media must be strongly encrypted greatly reducing the risk of the data falling into the wrong hands if the device or media is stolen* |
|  |
| **C19. How will the participants be debriefed?** |
| *It is expected that wherever possible all participants will receive some form of debriefing. This might be a verbal debriefing or a written debriefing depending on the context of the study. Debriefing provides an opportunity to remind participants of the procedures and outcomes of the research, and to provide further assurances on areas such as confidentiality, anonymity, and retention of data.*  *Projects that intentionally withhold information or deceive as part of their methodology must include a written debrief sheet. (Please refer to sections 6.1 and 6.2 of the REP for further guidance)* |
|  |
|  |
| **C20a. Might the research entail a higher than normal risk of damage to the reputation of the University, since it will be undertaken under its auspices?** *(e.g. research with a country with questionable human rights, research with a tobacco company. See section 9.3 of the REP). If a research partnership has been established with an industry partner please ensure that the University is not linked to claims made by that company regarding benefits of their products unless*  *substantiated evidence of beneficial effects is available.* |
| **Answer: Yes/No** |
| **C20b. If your answer to 20a was yes, please describe the potential risk to the University’s reputation and how this risk will be mitigated. If no, please jump to C20c.** |
|  |
|  |
|  |
| **C20c. Does the research concern groups or materials that might be construed as extremist, security sensitive or terrorist?**  **Answer: Yes/No**  *If ‘Yes’ please describe how you will manage the research so that it is not in breach of the Terrorism Act (2006) which outlaws the dissemination of records, statements and other documents that can be interpreted as promoting or endorsing terrorist acts. For example, relevant documents, records, information and data pertaining to the research can be stored on a secure University server. Contact the Head of Research in the first instance if you are unsure as to how to proceed.* |

|  |
| --- |
| *If you answered* ***Yes*** *to question C20c then please complete the additional pro-forma available from the Research Ethics Moodle:* ***Approval to undertake research concerning groups or materials that might be construed as extremist, security sensitive or terrorist****. Please append the completed form to this application.*  **C20d. Does your research fit into any of the following security-sensitive categories? If so, please indicate which:**   1. Commissioned by the military: Yes/No 2. Commissioned under an EU security call: Yes/No 3. Involve the acquisition of security clearances: Yes/No   **If you answered yes to any of the above please provide further information** |
|  |
|  |
| **C21a. Will your results be available in the public arena?** (e.g. publication in journals, books, shown or performed in a public space, presented at a conference, internet publication and placing a  dissertation in the library) s*ee section 8 of the REP*. |
| **Answer: Yes/No**  If yes, please provide brief details: |
| *NB: Please note that if participants wish to exercise their right to withdraw or request erasure of their personal data following collection and analysis this may not be possible having regard to permitted exemptions for research under data protection legislation i.e. where it would seriously impair the achievement of the research objectives. Notwithstanding the above, data subjects must still be advised of their rights to object in the information sheet, which can only be overridden if the*  *"research is necessary for a task carried out for reasons of public interest.* |
|  |
| **C21b. Will your research data be made available in the public arena?**  *Certain research funding bodies require that research data is made Open Access i.e. freely available to the public. The University has a* [*Research Data Policy*](http://moodle.chi.ac.uk/pluginfile.php/317207/course/section/53669/Research%20Data%20Management%20Policy%2028April2016.pdf) *that outlines the expectations and requirements for researchers at the University. Contact the Director of Research in the first instance if you are unsure as to how to proceed.*  **Answer: Yes/No**  *If yes, please provide brief details as to how the data will be prepared for public access including an overview of the meta-data that will accompany published data sets. Please also confirm that your intentions with respect to making data open access are clearly communicated to participants so that they can provide informed consent:* |
|  |
|  |
| **C22. Are there any additional comments or information you consider relevant, or any additional information that you require from the Committee?** |

|  |
| --- |
|  |

*[end of form]*

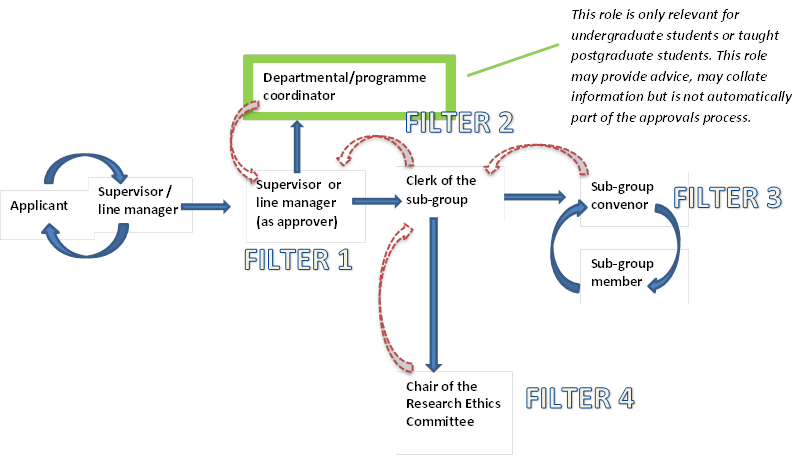
# Appendix 9: Guidance on roles and responsibilities within the Research Ethics approvals process

This guidance has been developed to help all applicants and their supervisors or line managers produce concise, good quality applications. The guidance is drawn from the experience of supervisors and the Research Ethics Committee Sub-Group in dealing with real applications and should help supervisors advise on common errors at an early stage.

A schematic of all of the roles in the ethics approval process is provided below (Figure A1). The schematic identifies the points in the process where an individual (gatekeeper) will review the quality of the application and make a decision accordingly; these have been described as ‘filters’. There are four gatekeepers in the process:

* + - 1. Supervisor / Line manager
      2. Clerk of sub-group
      3. Sub-Group/ Sub-Group Convenor
      4. Chair of the Research Ethics Committee.

*Figure A1: Schematic of approvals process for approval of student projects showing different points at which applications are considered and ‘filtered’ (or approved)*



#### Quality criteria within the ethical review process

At each ‘filter’ point, there are three criteria against which the authoriser will evaluate the quality of an application for ethical approval:

1. **Is the documentation complete?** (are all the appropriate fields and tick boxes, signatures etc. complete? Are there the required attachments – information sheet(s), consent forms, debrief sheets, health questionnaires etc.)
2. **Is it clearly written with no mistakes?** (grammar, spelling, types, sense and accessibility) (is the application clear, free of typos, and intelligible to the lay reader?)
3. **Has the applicant engaged sufficiently with the Research Ethics Policy and is this evidenced in the application?** (has the applicant given enough thought about ethical issues related to their research? Does the application suggest that the applicant is taking personal responsibility for ensuring that the research activity occurs in an ethical manner?)

#### How those involved in the process apply the criteria

Taking the principle of the ethical review process being subject to ‘filters’, each with a responsibility for aspects of quality within the application, the following table (A1) describes who is responsible for each aspect of the process and that for which they are responsible.

*Table A1: Roles and their application in the Ethical Review process*

|  |  |  |  |
| --- | --- | --- | --- |
| **Stage** | **Role** | **Role in process** | **Application of role** |
| **Filter 1** | Supervisor (or line manager) | * To support the student in ensuring that the research project is of a suitably high standard and that the research methodology has been appropriately selected.   To support the student in preparing a good quality application   * To apply their own specialist expertise in assessing first stage [filter5](#_bookmark4) | Strong filter. Only applications which meet the standards required for quality criteria 1 and 2 (see above) should pass. There should be good evidence of engagement with the REP (criteria 3), however, there may be some areas for enhancement/development that would benefit from sub-group input.  All others that do not address criteria 1-3 should be returned to student. |
| **Filter 2** | Clerk of the sub- group | - To efficiently manage and track applications as they proceed through the approvals process  - | Strong filter. Normally the filtering should have been done at Filter 1. Exceptionally, applications with issues relating to completeness (criteria 1) may get through the first filter and these should be returned to the supervisor. |
| **Filter 3** | Sub-group | * To efficiently review and feedback on applications * To provide expert comment and feedback in terms of their understanding of research ethics and the REP, but not necessarily detailed subject knowledge[6](#_bookmark5) | Strong filter. Normally the filtering should have been done at stage 1 and 2. If bids to come to this group it should only normally be because of a question around criteria 3. Only bids which meet the standards required for criteria 1,2 and 3 should pass.  All others should be returned to stage 2 (and then onwards to 1). |
| **Filter 4 (final approval)** | Chair of REC | - To give final approval of applications on behalf of the REC (and the University) | Only bids which meet the standards required for criteria 1, 2 and 3 should pass. Only by exception should bids be returned to earlier stages for further consideration. |

5 They can draw on departmental level expertise e.g. Research Ethics coordinator at programme or department level

6 On occasion detailed subject knowledge, over and above that applied at the first filter stage, may be required to understand and consider the ethical issues. In such cases the clerk may co-opt appropriate academics to join the sub-group for the relevant application

As a supervisor of students preparing to carry out an independent research project, the University requires you ensure that all students under your supervision reflect on the ethical dimensions of the work that they plan to undertake. The Ethical Approval process is evidenced by the completion of form and categorisation as either A or B with the supervisor’s guidance and support in understanding the *Research Ethics Policy*.

As undergraduates, students are effectively ‘researchers in training’ potentially working with vulnerable individuals and groups (e.g. school-age children). The research may place the student in circumstances that require tact and awareness of complex situations that may (if not sensibly managed) lead to significant difficulties or cause distress or harm for the participants or researcher. This could also invalidate the findings of the work undertaken. The role of supervisors is to act as a gatekeeper directed by the interests of the student researcher, the potential subjects of research and the reputation of the University.

In all instances, the Research Ethics Policy will guide applicant and supervisor/authoriser in fulfilling the information requirements for effective completion of form and additional documents.

The Research Ethics Policy*,* additional guidance and templates for information sheets and consent forms are available on the Research Ethics Moodle.

# Research Projects with Performance-based Outcomes

The following guidelines have been drafted as a response to two issues that arise from the *Research Ethics Policy* when applied to research projects in Dance and Performing Arts that involve performers and artists who are working towards performance-based outcomes (e.g. through work submitted as Practice as research). These are:

* + The question of the status of artists and performers in relation to the research project
  + The principle of anonymity.

This note accompanies the University’s *Research Ethics Policy* and does not in any way replace the over- arching principles within it.

Firstly, the nature of the relationship of the artistic director or choreographer with the performer is seen to be very different to that of a scientist with a subject of, or participant *in* research. In the latter, a category B Application for Ethical Approval (and accompanying forms) is obligatory. In the former, performers play a highly significant role in both the creative process and final outcome of the activity. Such participants can, it may be argued, be seen to be investigative collaborators rather than participants or subjects of the research project. If this is recognised, a strong case can be made that, subject to certain caveats below, a ‘category A’ Application for Ethical Approval would be more appropriate than an Application for Ethical Approval with a ‘category B’ status.

Secondly, the principle of anonymity of the research participant or subject of research found in the standard Application for Ethical Approval is felt strongly to be at odds with the accepted recognition of the performer (both in the final performance and in its preparation). By the same measure where artists are professionally contracted to perform it is recognised that the right to withdraw participation from the research project without good reason would not be appropriate if contractual obligations were in place that govern their involvement in the project.

The principles set out above should, however, not be taken as a formal recognition that ethical approval is not required for projects with performance-based outcomes. Ethical issues should be reviewed on a case by case basis in accordance with the *Research Ethics Policy.*

In some cases research projects may involve both performance and ‘traditional’ research involving the study of performers. In these instances, the re-categorisation of artists *as* investigative collaborators will not apply and it would be expected that the lead researcher submit an application using the appropriate classification.

Exclusions from the above

Applications will be deemed to have a Category B status should any of the following be characteristics of the project. (Numbers in brackets refer to relevant sections of the *Research Ethics Policy)*. This is a non-exhaustive list and is provided for general guidance only.

* + Performances with vulnerable groups or individuals as a consequence of age (under 18 and older people), physical and mental health or disability.
  + Research that involves withholding information or misleading participants.

It would be expected that an evaluation of the planned performance occurs in respect of Health and Safety (9.1), contracts and indemnity (9.2) and the University’s general policy in relation to the use of photography and video. Any queries about any aspect of the above should be directed either to a member of the Ethics Committee in the first instance or in writing to the Committee as a whole via the clerk to the Ethics Committee.

# Applications for Ethical Approval

#### Background

The *Research Ethics Policy* stipulates that a record of Undergraduate and Postgraduate taught Masters projects needs to be made. Departments are not required to keep a list of staff and PhD student research projects as these are all sent to the Research Office. However, the Research Office would recommend that departments keep a record of staff research projects for their own reference.

#### Recommendation

The recommendation is that the Research Ethics Committee provides a template to each department for a central departmental record to be kept of all Applications for Ethical Approval. Additionally, a concise system for the Research Ethics Committee to carry out random sample testing should be introduced.

#### Record Keeping

A spread sheet will be circulated to each department in order to keep a record of applications (both Category A and B). Each application will be given a unique identification number in the format outlined below. This spread sheet will be maintained by the departmental administrator or nominated academic e.g. programme coordinator. The Research Office can then collect all records at the end of each Academic year for reference and any further scrutiny.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **AEA**  **Reference** | **Project Title** | **Staff/PGR/ Student** | **Category (A/B)** | **Date of Supervisor Approval** | **Date Approved (if Cat. B)** |
| MU\_12/13\_00 | If I didn't have ethics I don't know how I would get through the day. | Staff | A | 01/01/2001 |  |
| MU\_12/13\_01 |  |  |  |  |  |
| MU\_12/13\_02 |  |  |  |  |  |
| MU\_12/13\_03 |  |  |  |  |  |
| MU\_12/13\_04 |  |  |  |  |  |
| MU\_12/13\_05 |  |  |  |  |  |
| MU\_12/13\_06 |  |  |  |  |  |
| MU\_12/13\_07 |  |  |  |  |  |

An example spread sheet to be provided in Excel format (reference number specific to Music dept.)

#### Random Sample Testing

A sample of Undergraduate and Postgraduate taught Masters Category ‘A’ and A+ Applications for Ethical Approval will be requested by the Research Office on an annual basis. This is by no means to scrutinise the quality of work, but simply to ensure that due processes are understood and followed consistently across departments.

# studies where information is withheld/there is an element of deceit or similar

#### Background

In some disciplines, for example, Sport and Exercise Sciences, the inclusion of a placebo in studies that seek to determine the effect of a treatment, e.g. a nutritional supplement, an environmental condition, or a garment on performance is common. The placebo is administered in either a single- or double-blind manner, with conditions usually randomised (e.g. a randomised, double-blind, placebo- controlled study representing the *gold standard* research design). For studies following a single- or double-blind design at the time of testing, the participant is not told whether they are receiving the placebo or the treatment as this may influence their psychological and physiological response to the exercise. In addition for a double-blind design, the researcher is not aware of the testing conditions to avoid experimenter bias. However, at the outset of the placebo controlled study, prior to volunteering and giving their written informed consent, potential participants are made aware that they will be tested under different conditions. This being either for each visit or to other participants, and that they will not be told at the time of testing, but will be informed on completion of their involvement in the study.

The Research Ethics Committee have **agreed an exception to the criteria for Category B applications** for ethical approval (10.1.5) for specific cases of withholding information / intentional deceit as occurs in single blind or double blind trials (as described above), **where the only reason for identifying the project as a Category B is the withholding of information / intentional deceit**. If there is any other aspect of the study that would lead to a Category B categorisation (e.g. the study involves a vulnerable group such as children, people with a disability, or those with a mental health problem, who are not persons with whom the applicant normally works: see clause 10.1.5 of Research Ethics Policy) then the exception does not apply and the application for ethical approval is classified as Category B and treated accordingly.

For cases where the exception applies the application for ethical approval will be categorised as ‘Category A+’. The application would be approved by the line manager/supervisor (as with Category A applications) and also by an independent scrutiniser drawn from a pool of experienced researchers within the Institute/Department approved by its Head/Director. Applications will submitted to the Research Ethics Committee ([research@chi.ac.uk](mailto:research@chi.ac.uk)) for note, but not for review by an ethical review

sub-group. This would apply to category A+ applications from staff and postgraduates research students including Research Masters and PhD students. Undergraduate and Postgraduate Taught Masters Category A+ applications (Form and documentation) should be retained at Department level. The Research Ethics Committee will monitor the use of Category A+ applications and review a percentage each year as part of that process.

#### Requirements for Category A+ clearance

All studies classified as Category A+ must adhere to the following guidance, whereby at the outset in their information form the participants must be clearly informed:

1. That there will be a placebo and a supplement condition.
2. If it is single- or double-blind design with an accompanying lay explanation of these terms
3. If it is a repeated measures design for the conditions\* they will be:
   1. Receiving the placebo for one and the supplement for the other.
4. If it is an independent groups design, participants must be informed that they will be receiving either a placebo or a supplement.

\* The phrases condition, receiving and supplement can be modified as necessary to reflect the experimental condition.

#### Authorisation of a study for Category A+ clearance

The Line Manager/Supervisor is responsible for classifying applications as Category A+ in accordance with the guidance provided above and the Research Ethics Policy; an independent scrutiniser from within the Institute or Department will endorse this decision.

In considering whether to classify an application as Category A+ the Line Manager/Supervisor and scrutinisers should pay particular attention to the level of experience of the researcher and whether this increases the level of risk for participants. It is expected that applications led by inexperienced researchers are unlikely to meet the requirements for Category A+ unless there are particular arrangements in place to mitigate this risk (e.g. close supervision by a more experienced researcher); the application for ethical approval should be clear about these arrangements and the authorisers (Line Manager/Supervisor and Independent Scrutiniser) should comment upon them in the ‘comments’ box of the authorisation section and sign the application form.

# Appendix 14: Guidance Notes on Ethical Matters Arising from the Open Research Data Agenda

The Open Research Data Agenda is based on the principle that research data should be accessible by anyone who wishes to view or use the data for further research. The University has established a Research Data Policy (see Research Moodle) which outlines the steps being taken to fully align with the Concordat.

#### Definition of Data

The RCUK Concordat on Open Research Data defines data as:

quantitative information or qualitative statements collected by researchers in the course of their work by experimentation, observation, interview or other methods. Data may be raw or primary (e.g. direct from measurement or collection) or derived from primary data for subsequent analysis or interpretation (e.g. cleaned up or as an extract from a larger data set). […] Data may include, for example, statistics, collections of digital images, sound recordings, transcripts of interviews, survey data and fieldwork observations with appropriate annotations[.7](#_bookmark6)

#### Ethical Recommendations for Open Research Data

1. It is the researcher’s responsibility to ensure that their study has an appropriate data management strategy in place, including consideration of when and how data will be made available, as well as due consideration of ethical issues that arise from this strategy. Furthermore, consideration must be given to the possibility that open data may be used by third parties for unforeseen purposes or agendas. It is not always possible to predict how data may be used or manipulated in the future, but reasonable steps must always be taken to protect research participants from the risk of harm that may arise from the future use of their data.
2. While it is not always possible to predict how open data may be used by a third party**, reasonable steps must be taken by the researcher to ensure that third parties may not be able to use data to identify participants from the study, including, but not limited to, the removal of identifiers such as names, gender, ethnicity, address, sexual orientation, trade union membership and political affiliations.**
3. Reasonable and robust steps must be taken to anonymise data and metadata before making such data open. It is important to remember that large sets of seemingly anonymous raw data can be aggregated and used to identify individuals or otherwise put participants at risk of harm. **While there is an expectation that ideally all research data should be openly available, it is not always possible to fully anonymise data. Accordingly, participants should be given the option to opt out of their data to be made open.**
4. There is an acknowledgement that it may not always be possible to fully anonymise identifiers while preserving the integrity of the data; for example, a study on gender and educational attainment will necessarily have to discuss both the gender and education of participants. However, this should not undermine the core principle that open research data should not put participants at risk of harm. Considerations will inevitably differ on a case by case basis, and should be discussed with the researcher’s supervisor. Unresolved queries should be directed at the Research Office [research@chi.ac.uk .](mailto:research@chi.ac.uk)

7 RCUK, *Concordat on Open Research Data* (Available at: https://[www.ukri.org/files/legacy/documents/concordatonopenresearchdata-](http://www.ukri.org/files/legacy/documents/concordatonopenresearchdata-) pdf/ )

1. Where participant consent is required to gather data, researchers should, wherever possible, anticipate the need to archive data. This should be made clear to participants before they give their consent to the study. Furthermore, in those cases where it is relevant, and in accordance with the University’s policy on research data, it should be made clear to participants that the study data will be openly available for access and use by the public and researchers at other institutions.

# Appendix 15: Guidance Notes on Research Using the Internet and Social Media

The internet and social media in particular are useful and innovative resources for research, but also are fraught with ethical implications, many of which, due to social media’s recent emergence, are not yet fully understood.

There are two primary issues regarding researchers and social media: 1) The use of social media by researchers as personal and professional networking resources, and 2) the use of the internet and social media to conduct research. For further information, see the government’s guidelines on using social media for research: [https://www.gov.uk/government/uploads/system/uploads/attachment\_data/file/524750/GSR\_Social\_M](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/524750/GSR_Social_Media_Research_Guidance_-_Using_social_media_for_social_research.pdf) [edia\_Research\_Guidance\_-\_Using\_social\_media\_for\_social\_research.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/524750/GSR_Social_Media_Research_Guidance_-_Using_social_media_for_social_research.pdf)

#### Using Social Media as a networking tool

The extent to which social media is used as a networking tool should be left to the researcher’s discretion, though there are several points of guidance that researchers may wish to follow:

1. Social media accounts, especially Facebook, should be kept private, and friend requests should only be requested from people whom the account holder already knows. It is not advisable to accept friend requests from colleagues or other professional acquaintances. If necessary, it is possible to set up an alternative Facebook profile for professional contacts.
2. Even though social media accounts can be set to ‘private’, there are many ways that information about users and their posts can become public, for example, if someone with an open Facebook profile shares a post, that post will be easily accessible, even if the original poster has strict privacy settings on their account. Accordingly, no content should be shared on social media accounts that users would be uncomfortable sharing publically, or that has the potential to damage your reputation as a professional or bring your employer, professional organisation or other associates into disrepute.
3. Social media websites routinely update their privacy settings, and it is the user’s responsibility to ensure that they are aware of current privacy settings.
4. Social media should not be used for whistle-blowing, defamatory comments, confidential discussions or data sharing or other conduct that may be considered professionally inappropriate.

This is not an exhaustive list and social media users should be mindful of other potential ethical issues that may arise from the use of social media.

#### Using Social Media to gather data

The second ethical point around social media is its use as a tool to gather data. **The use, storage and dissemination of data gathered from social media should meet the same ethical standards met by other forms of data, especially around the anonymisation of data and protection of individual’s identities.**

While a great deal of personal data about individuals is available online, and technically in the public domain, researchers must still abide by the University’s policies on the use of personal data, individual consent and data storage. Data gathered from social media throws up a raft of potential ethical issues that have yet to be fully explored, and so data should only be gathered from these sources if there is no other practicable way of doing so, or that using data from social media is intrinsic to the study.

Additionally, data gathered from such resources should wherever possible be used only with the consent of participants, and **its use and storage should be ethically treated no differently from data gathered by conventional means and the collection of personal data should in all cases be minimised.** Guidance on the collection and storage of data can be found in the University’s Ethical Policy.

#### If data cannot be accessed without the implicit consent of the social media user, ie, if data is only accessible to Facebook friends, or members of a closed or private group, then the researcher must seek explicit informed consent from the social media user before using that data.

Where it is not possible to obtain contain from participants, such as metadata gathered from large datasets or secondary data that has already been gathered and / or anonymised by an intermediary party, then due consideration and justification for the use of this data must be submitted in the ethical review process.

The terms and conditions of certain social media sites may include clauses that legally allow users’ data to be used for research without their knowledge. However, even though the use of such data may fall within legality, due consideration should be paid to whether it is ethical to use social media users’ data for purposes to which they might not otherwise have consented. Where possible, researchers should consider seeking informed consent from users. Balancing the benefits of the study against the risk of harm to participants should also form part of the justification for using such data.

It is possible that social media users may delete posts that have been used as part of the researcher’s dataset. Researchers must consider and set out in their application for ethical approval what kinds of data should or should not be disregarded following deletion by the social media user. Decisions to delete or retain gathered data will depend on the sensitivity of the data.