# Appendix (A)

Human Participants Research Protocol

(Non-funded AND at Minimal Risk)

(Revised on November 20, 2012)

#### **Human Participants Research Protocol**

(Not Funded AND at Minimal Risk)

Students who conduct a research study using human participants must complete the Tri-Council Policy Statement (TCPS) tutorial, available online at <a href="www.pre.ethics.gc.ca/eng/education/tutorial-didacticiel">www.pre.ethics.gc.ca/eng/education/tutorial-didacticiel</a>, and obtain a research ethics clearance <a href="prior-to-the-conduct-of-research">prior to the conduct of research</a>. If the research is not approved prior to the start of research, the research will not have received research ethics clearance and will be deemed unacceptable for submission as a component of this course. Information regarding the use of human participants in research studies may be found on the Faculty of Graduate Studies webpage at <a href="https://www.yorku.ca/grads/policies-procedures/research">www.yorku.ca/grads/policies-procedures/research</a> ethics.html

Students are advised that all human participants in the research must have either signed a written consent form or have provided oral consent for their participation in the research. Students also are advised that the consent forms will be retained by the Principal Investigator (i.e. the student) for 2 years following the completion of the research.

If the research is not funded <u>and</u> at minimal risk \*, submit the following documentations to the Graduate Program Office:

- 1. MRP Proposal;
- 2. Ethics Approval Form (in the MRP guidelines);
- 3. TCPS tutorial completion certificate dated within the past 2 years prior to the submission of MRP Proposal; (Note that the certificate is issued on-line upon the completion of tutorial.)
- 4. York University Graduate Student Human Participants Research Protocol Form (Form TD2 in this Appendix);
- 5. Informed Consent Document Checklist for Researchers (Form TD3 in this Appendix);
- 6. Informed Consent Statement (written or verbal script); (refer to p. 8 in this Appendix for a sample)
- 7. Sample questionnaire and guiding interview questions, if needed.

This material will be reviewed by the Graduate Program's Ethics Review Committee. Reviews will take no more than 2 weeks from the date of submission.

\* The **definition of minimal risk** being used is the one given in the SSHRC/NSERC/MRC *Tri-Council Policy Statement "Ethical Conduct for Research involving Humans"* (August, 1998):

"If potential subjects can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those encountered by the subject in those aspects of his or her everyday life that relate to the research, then the research can be regarded as within the range of minimal risk." (p. 15)

Graduate students doing Major Research Papers, Theses, or Dissertations in which research involving human participants occurs are required to be familiar with York University's policies about the use of human participants and should be familiar with the SSHRC/NSERC/MRC *Tri-Council Policy Statement "Ethical Conduct for Research involving Humans"* (August, 1998). These can be found at the Office of Research Ethics, 5<sup>th</sup> Floor of York Research Tower or on the web at

www.pre.ethics.qc.ca/eng/policy-politique/initiatives/tcps2-eptc2/Default/



Tower) upon request.

#### FORM TD2



### YORK UNIVERSITY GRADUATE STUDENT HUMAN PARTICIPANTS RESEARCH PROTOCOL (Please print)

	Student Name:	Date:			
	E-mail:	Phone Number:			
	Program:	Degree:			
	Title of Thesis, Dissertation, Major Research Paper, or Course:				
	Name of Supervisor (Thesis, Dissertation or MRP) or Course Director:				
_					
Α.	Is the research you are conducting	funded?			
	NoY	es			
The definition of "funded" does not include funding in the form of student OGS scholarships, SSHRC fellowships, NSERC scholarships, or CIHR studentships. These awards are intended to support students through their studies and do not require reports from students on the specific research activities conducted. The definition of "funded" does apply to grants awarded for specific research projects, whether those projects be the student's own research projects or research being conducted as part of a faculty member's funded research project. Typically, for funded research, granting agencies require reports of the research conducted.					
В.	Are the risks to participants more th	nan minimum risk?			
	NoY	es			
The Human Participants Research Committee uses the definition of minimal risk as outlined in the SSHRC/NSERC/CIHR <i>Tri-Council Policy Statement "Ethical Conduct for Research involving Humans"</i> (August 1998): "If potential subjects can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those					

encountered by the subject in those aspects of his or her everyday life that relate to the research then the research can be regarded as within the range of minimal risk" (p. 1.5). An expanded version of this definition is available from the Office of Research Ethics (5<sup>th</sup> Floor of York Research

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If you	answered	"Yes" to	either	question A	A or B,	please	note th	e following

Students are required to follow an alternate ethics approval process to be carried by the Human Participants Review Sub-Committee (HRPC) through the Office of Research Ethics (ORE),5<sup>th</sup> Floor of York Research Tower. MRP Supervisor is required to first contact the Chair of the Graduate Program/Department Ethics Review Committee to establish and follow through the approval process.

	9					iniough the approv	a. p. 00000
Ι.	Please	e answer the	following questions	regarding	Research Info	rmation:	
	very t etc.)	orief descript	ion and Rationale tion of the research EASE DO NOT SU CS (ORE).	and rationa	le (e.g., hypoth	eses, goals and ob	jectives
	<b>(2)Parti</b> o a.		the participants will	be:			
	b.	How will th	ne participants be re	cruited?			
	C.	Will induce	ments be offered?				
	d.	What will b	pe required of the pa	articipants?			
	(3)Risks	and Benef	<b>its:</b> What risks to, a	and benefits	for, if any, are	there for the partic	cipants?
П.		you provid	e following questions e a full explanatio			•	
	Ye	es	No		(If <b>no</b> , please	elaborate below.)	

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	adults)?
	Yes (If <b>yes</b> , please elaborate below.) No
(3)1	Is deception involved?
(0).	
	Yes No (If <b>yes</b> , please elaborate below. Please comment on debriefing, if applicable.)
(4)\	Will individuals remain anonymous?
	Yes No (If <b>no</b> , please elaborate below. Please note that it is expected that participants remain anonymous unless they have given their prior written consent.)
(5)	Will the data be kept confidential?
	Yes No
	(If <b>no</b> , please elaborate below. Please note that it is expected that the data will be kept confidential unless the participants have given their prior written consent. Please also note that if you advise participants that the data will be confidential, you should state that confidentiality will be ensured, within the limits of the law.)
(6)	How will informed consent be obtained? (Check one)
	Written Informed Consent Document (Attach copy)
	Oral Informed Consent Document (Permissible only in extenuating circumstances, where written communication is not feasible; script of oral informed consent must be provided)
	The Form TDO to the control of the c
NC	The Form TD3 in this package provides a checklist for the content of the Informed Consent Document.

STUDENT DECLARATIO	N
I hereby certify that all information on this form and all stat documentation are correct and complete. I understand that research must have signed a written consent form or have participation in the research. I understand that should there methodology or any increased anticipated risks to human participated Studies; if these changes are not minor, my resundergo a further ethics review. I understand that any miss attached documentation may lead to a charge of breach of a that I must retain Consent Forms for two years following the	all human participants in the provided oral consent for their e be any change in the research articipants, I will advise the Faculty search proposal may be required to representation in the proposal or academic honesty. I also understand
Student's Signature	Date
SUPERVISOR DECLARAT	ION
I hereby certify that all information on this form and all state documentation are correct and complete. I have advised the above and in attached documentation, all human participant a written consent form or have provided oral consent for the have advised the student that the Faculty of Graduate Studing research methodology or any increased anticipated risks to further ethics review may be required as a result of such chartant Consent Forms must be retained for two years following	ements in the attached estudent that, as specified in Item 6 as in the research must have signed eir participation in the research. I es will be advised of any changes in human participants and that a langes. I have advised the student
I hereby certify that all information on this form and all state documentation are correct and complete. I have advised the above and in attached documentation, all human participant a written consent form or have provided oral consent for the have advised the student that the Faculty of Graduate Studi research methodology or any increased anticipated risks to further ethics review may be required as a result of such characteristics.	ements in the attached estudent that, as specified in Item 6 as in the research must have signed being participation in the research. It is will be advised of any changes in thuman participants and that a langes. I have advised the student of the completion of the research.

## Form TD3 INFORMED CONSENT DOCUMENT CHECKLIST FOR RESEARCHERS

YES	NO	N/A	DESCRIPTION
			Have you included a brief description of the purpose/rationale of the study?
			Have your included a brief description of the study design?
			If the research involves a questionnaire or a survey, have you provided the questionnaire or survey?
			Have you indicated the time commitment required of participants?
			Have you indicated whether and what incentives are offered to participants and why?
			Have you included a brief description of risks/benefits and mitigation methods?
			If the study involves any type of physiological assessment or procedure (such as those studies undertaken by Kinesiology and/or psychology researchers), have you provided the following information in the Informed Consent Document?  i. Information about the expertise of the researchers conducting the study (i.e., if it involves giving an
			injection, that the researcher is competent to do so)
			ii. Notification to participants that are being taken to safeguard their person
			<ul> <li>iii. Notification to participants of any potential risks and/or impacts to their person due to their participation</li> <li>iv. Information for participants on any anticipated circumstances arising from their participation in the study</li> <li>v. Notification to participants of any benefits</li> </ul>
			vi. Contact information for participants regarding resources available to them should any concerns arise at a later date
			Have your described the methods by which confidentiality and anonymity will be attained and maintained?
			Have you included statements of the following (as applicable)?
			i. Participants have the right not to answer questions
			ii. Participants have the right to withdraw at any time
			iii. Should a participant withdraw from the study, all data generated as a consequence of their participation
			shall be destroyed iv. Participants shall address any ethical concerns regarding the research to the Health Graduate Program
			Office
			v. How the research will be presented or reported
			Have you described the storage method, length of retention and disposal method of all data gathered during the
			study?
			Have you included a statement indicating that the research proposal has been reviewed and approved by
			the Health Graduate Program's Ethics Review Committee in compliance with the standards of the
			Canadian Tri-Council Research Ethics guidelines?
			Have you provided contact information for participants should they have questions (including a contact phone number and email address for <i>your Principal Supervisor and Graduate Program Office</i> )?
			Have you provided contact information for yourself as the Principal Investigator (your name, your campus
			address, your statusi.e., Graduate Student)
			If the study involves the use of a minor, have you included:
			i. A separate information letter to the parents of the minor
			ii. A separate parental permission letter which is to be attached to the minor's letter of "assent"
			iii. A line for the Parent or Guardian to indicate their relationship to the minor
			iv. A signature line for the parent/guardian of the minor.
	1		Have you included a signature line and a date line for participants?
	1		Have you included a signature and a date line for yourself as Principal Investigator?
			If you intend to publish or present your findings, include a relevant statement. i.e. It is possible that the results of this study will be disseminated through publication and/or presentation. Anonymity will be maintained.
	1		Have you requested participants to provide a "fake name" in the informed consent letter/form?
Stud	lent's	Name	and Signature:  (Print Name) (Signature)

Student's Name and Signature:	(Print Name)	(Signature)
	(Fillt Name)	(Signature)
Supervisor's Name and Signature:		
·	(Print Name)	(Signature)
Ethics Committee Member's Approval:		
Ethics Committee Member's Approval		

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SAMPLE IN	IFORMED CONSENT FORM
Date:	
Study Name:	
Researcher:	
Sponsor(s): York University and	
Purpose of the Research:	
What You Will Be Asked to Do in the Research: [Include a statement regarding the estimated time comm	mitment for the participant].
<b>Risks and Discomforts</b> : We do not foresee any risks or discomfort from your par be described]	ticipation in the research. [If there is a possibility of harm, it needs to
Benefits of the Research and Benefits to You:	
	nd you may choose to stop participating at any time. Your decision ay be receiving] [nature of the ongoing relationship you may have onship with York University either now, or in the future.
will still be eligible to receive the promised pay for agree refuse to answer particular questions, will not affect you	any reason, if you so decide. If you decide to stop participating, you eing to be in the project. Your decision to stop participating, or to ir relationship with the researchers, York University, or any other addraw from the study, all associated data collected will be immediately
information] All information you supply during the resea consent, your name will not appear in any report or pub handwritten notes, video/audio tapes, digital device.] You data will be securely stored] and only research staff will	ing or recording of the participant will be associated with identifying rch will be held in confidence and unless you specifically indicate your lication of the research. [Indicate how the data will be collected, e.g. our data will be safely stored in a locked facility [or indicate how the have access to this information. [Indicate how long the data will be and how) or will the data will be archived (and if so, where). iible by law.
(telephone and/or email address) or my Principal Superv proposal of this research has been reviewed and approve conforms to the standards of the Canadian Tri-Council R	bout your role in the study, please feel free to contact myself visor, Professor XXXXXX (telephone and/or e-mail address). The ed by the Ethics Review Committee of Health Graduate Program and esearch Ethics guidelines. If you have any questions about this ly, please contact the Health Graduate Program Office (Tel: 416-736).
Legal Rights and Signatures:	
have understood the nature of this project and wish to p	rt study name here) conducted by (insert investigator name here). I participate. I am not waiving any of my legal rights by signing this ke name" as below, I am waiving the right to be anonymous in any ow indicates my consent.
To be filled out by the Participant:	To be filled out by the Principal Investigator:
Name of Participant	Name of Principal Investigator

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Date

Signature of Principal Investigator

Signature of Participant

Date

Participant's "fake name" (please print)