

Report Supplementary Material # 2: WP2a - Outcomes evaluation: service user recruitment materials

1.1 Study Information Sheet

Evaluating Models of REablement Services (The MoRE project)

Participant Information Sheet

You are being invited to take part in a research study. The study is being organised by the Social Policy Research Unit (SPRU), University of York and is funded by the National Institute of Health Research (NIHR). It is independent from the reablement service you are receiving. Before you decide, it is important for you to understand why the research is being done and what it will involve. Please take time to read the following information carefully before you decide if you wish to take part, and talk to others about it if you wish to. Please ask us if there is anything that is not clear or if you would like more information.

What is the purpose of the study?

Reablement support aims to:

- Help people regain their independence and help them do as much for themselves as they can when they return home from hospital.
- Help people maintain their independence so they can remain living at home when they have a long-term health condition or find it hard to carry out everyday tasks.

In England, different local areas have different ways that reablement services are organised and provided. Existing research is not able to tell us which type of reablement service provides the best way of helping people who receive it. This research study will help to find out how different types of reablement services work and how different services can help improve people's lives.

Why have I been invited to take part?

You are being invited to take part in this study because you have been offered reablement support by [insert name of LA]. We are inviting around 200 people who are receiving this type of support from the [name of reablement service] to take part.

What will taking part involve?

If you would like to take part, the reablement worker will help you complete a form with your contact details on it. A member of our local research team, [insert LSI name] will then contact you by telephone and arrange to visit you at your home at a time and date that suits you.

When [insert LSI name] visits you, they will go through this information sheet with you and answer any questions you have about the study. If you decide to take part, you will need to read and sign a consent form to take part in the study - one copy of the form will be given to you.

[insert LSI name] will help you to complete a questionnaire about your health and well-being, and the type of health and social care services you use. The questionnaire will take about 30 minutes to complete.

You will also be asked to complete the questionnaire after you are discharged from your reablement support and again six months later. [insert LSI name] will contact you and arrange to visit you at your home and help you complete the questionnaire. You will be given a £10 gift voucher at these two visits to thank you for taking part.

[insert LSI name] may need to look at your reablement records to help us understand the reablement support you receive, how many sessions of reablement you have, how long the sessions take, what activities you do and how it is helping you.

We will ask your reablement worker to complete a form about your physical health at the beginning and the end of your reablement. We will also ask your reablement worker to complete a questionnaire about their experience of helping you during your reablement.

Do I have to take part in the study?

Taking part is entirely voluntary, so it is up to you to decide if you want to take part in the research. [insert LSI name] will describe the study and go through this information sheet with you. If you agree to take part, we will need you to sign a consent form. If you do take part you are free to withdraw at any time without giving a reason.

If you choose not to take part you do not have to provide a reason, but it will help us understand why people do not want to take part in this research and this may help us plan future studies. If you do not take part it will not affect the reablement support you receive.

Some people who complete the questionnaire will also be invited to take part in a face-to-face interview to tell us about their experience of the reablement support they received. If this happens [insert LSI name] will give you an invitation letter. You do not have to take part in an interview if do not want to.

Are there any benefits or disadvantages to taking part?

There are no direct benefits or disadvantages for you if you take part in this research. However, taking part will help us to understand how different ways of providing reablement support may help people. This will provide useful information about the best way to organise and provide reablement support to people.

Will my taking part in this study be kept confidential?

The information you provide is confidential and treated in accordance with the Data Protection Act. Information collected from the study will only be accessed and processed by people working on the study, who have been trained in confidentiality procedures. If you agree to take part, a personal identification number will be used throughout the research for each participant. All data will be anonymised and the information you provide will be recorded on encrypted devices and will be stored for 10 years as per the University of York regulations for data storage. Your involvement in the study, and the information that you provide will be kept confidential unless you tell us something that indicates that you or someone else is at risk of harm. We would discuss this with you before telling anyone else.

What will happen if I don't want to carry on with the study?

You can change your mind and withdraw from the study at any time without giving a reason. The information you have provided up to that point will be retained, unless you request otherwise. Any personal information you have given us will be securely destroyed. Whatever your decision, it will not affect the standard of the reablement support you receive. If you choose not to carry on with the study please contact [insert name of LSI] so that we do not contact you again.

What will happen to the results of the study?

When the study has finished we will write to you and tell you our research findings. We will also present the findings at conferences and write reports and articles for different audiences during and after the project. No person taking part in the project will be identifiable in the project report or any other publication.

Who has reviewed the study?

The study has been reviewed by [insert REC name] and by a panel of members of the general public that help advise the Social Policy Research Unit on its research work.

What should I do now?

Please provide your contact details and signature on the contact consent form provided by your reablement worker. A member of our local research team [insert name] will contact you by telephone within three days and arrange to visit you at your home at a time and date that suits you.

What do I do if I have a concern or complaint?

In the first instance you can contact the project manager, **Dr Fiona Aspinal** (details below). If you would prefer to speak to someone outside of the project team, please contact the Research Director in SPRU, **Professor Yvonne Birks** on 01904 321328 or email her at yvonne.birks@york.ac.uk

Contacts for further information

If you have any questions or would like more information, please contact the project manager Fiona Aspinal on 01904 321985 or email fiona.aspinal@york.ac.uk

You can also find out more about the study on the project website - bit.ly/modre

There is an organisation called INVOLVE which promotes public involvement in research and has information about taking part in research on the following website <http://www.invo.org.uk/>

[insert LSI name] will show you an identification card like the one below when they visit you so you know who they are. It will have [insert his/her] name and photograph on it. If you are unsure about the person visiting you, please ask to see their identification card.

<p>This is to certify that Insert name</p> <p>is carrying out research interviews for the Social Policy Research Unit, and that this photograph is a true likeness.</p> <p>Professor Bryony Beresford & Professor Yvonne Birks (Co-Directors)</p> <p>Signed:.....</p> <p>Month/Year</p>		<p>THE UNIVERSITY <i>of York</i>  Social Policy Research Unit</p> <p>Social Policy Research Unit University of York Heslington York YO10 5DD</p> <p>Tel. 01904 321950</p> <p>Research Interviewer Identity Card</p>
--	--	--

**Thank you for taking time to read this information
and considering taking part.**

1.2 Study Entrance Form

Study Entry Form

Permission for a member of the research team to contact me about the MoRE study

I have been given the Participant Information Sheet (version; date) to read and I **give/do not give** (*delete as appropriate*) permission for a member of the research team to contact me about taking part in this study using the information provided. If you do give this permission, please complete the rest of this form.

Client Name (block capitals)	
Client Address (block capitals)	
Client Date:	Signature:

Contact details (please complete preferred contact number and times)

Home telephone number	
Mobile telephone number	
The researcher [add in name of researcher] will contact you by telephone in the next few days. What are the best times of day for them to contact you?	
Is there any important information, such as any health problems or impairments that we need to take account of before we contact you?	

Please turn over.....

To be completed by reablement assessor

Reablement assessor's name:.....

Reason for referral (tick one box only)

Remain at home

Return home

Reablement plan

Number of weeks allocated for reablement.....

Number of planned reablement sessions each week.....

Reablement goals

Goal 1	
Goal 2	
Goal 3	

Other goals (please state)

.....
.....

For administrator's use only

Details of client's primary reablement support worker

Name:

Job title:

Address:

Postcode:.....

Telephone number:

Office:

Mobile:

Email:.....

1.3 Decline Form

Models of REablement Services (The MoRE project)

Study Decline Form

We would find it really helpful to have a wide range of people take part in this study, however we understand if you do not wish to. If this is the case, we would be grateful if you could tell us the reason(s) why **by placing a cross in as many boxes as apply to you** from the list below. You do not have to complete this form if you do not wish to.

I am not interested in taking part in this study

I do not think that research about reablement services is important

I did not receive enough information to help me decide

I do not feel well enough to take part in this study

I do not have time to take part in this study

Other reason

Please give more details here if you would like to:

It would be very helpful if you would be willing to give us some brief details about yourself. **We will not be able to identify you from this form, and we will not contact you again.** We will use the anonymous information you give us to see if there are any differences between those who agree to take part and those who don't. You do not have to complete the following questions about yourself if you do not wish to. Thank you.

Please turn over.....

Please answer the following questions:

What is your date of birth?

				1	9		
--	--	--	--	---	---	--	--

Day

Month

Year

Prefer not to say

Are you?

Male

Female

Prefer not to say

To which ethnic group do you consider you belong? (tick one box only)

Asian/Asian British

Black/Black British

Mixed

White British

White

Other

(please

specify

Any

other

ethnic

background

(please

specify)

Prefer not to say

Thank you for taking the time to complete these questions.

Please return to the following FREEPOST address:
Social Policy Research Unit, University of York, **FREEPOST YO378,**
Heslington, York YO10 1GY

1.4 Consent Form

Evaluating Models of REablement Services (The MoRE project)

Consent Form for Clients of Reablement Services

This form is for you to state whether or not you agree to take part in the study. Please read and answer every question. If there is anything you do not understand or if you would like further information please ask the researcher. **One copy of the form is for you to keep.**

Please tick if you agree

	Yes	No
I have read and understood the study information sheet ([insert date and version]). I have had the opportunity to consider the information, ask questions and have had these answered	<input type="checkbox"/>	<input type="checkbox"/>
I understand that relevant sections of my reablement records may be looked at by individuals from the research team. I give permission for these individuals to have access to my records where relevant to my taking part in this research.	<input type="checkbox"/>	<input type="checkbox"/>
I understand that relevant sections of my medical notes and data collected during the study may be looked at by individuals from the University of York, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in this research. I give permission for these individuals to have access to my	<input type="checkbox"/>	<input type="checkbox"/>
I am happy to be contacted by the research team about taking part in an interview at a later date.	<input type="checkbox"/>	<input type="checkbox"/>
I agree to anonymised information being used in reports, publications	<input type="checkbox"/>	<input type="checkbox"/>
I understand that my participation is voluntary. I also understand that I am free to withdraw at any time, without giving a reason, and with my reablement support and legal rights being affected.	<input type="checkbox"/>	<input type="checkbox"/>
I agree to take part in the study.	<input type="checkbox"/>	<input type="checkbox"/>

All data is held by SPRU in accordance with the Data Protection Act.

Your name (in BLOCK letters):

Your signature:

Researcher's signature:

Date:
