



INTERVIEW – HEALTH PROFESSIONALS CONSENT FORM

Title of Project:The 3D Study: Improving whole person carePrincipal Investigator:Prof Chris Salisbury, University of Bristol

Please read the following statements carefully and initial each item. Please complete all sections, and give to <researcher name> at your interview.

- 1. I confirm that I have read and understood the information sheet (version 1.1, dated 25/02/2015). I have had the opportunity to consider the information and ask questions.
- 2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason and without consequences.
- 3. I understand that you will record the interview using an encrypted audio digital recorder. Sound files will be transcribed by a transcription company approved by the University of Bristol. Files and transcripts will be stored securely at the University of Bristol. My agreement will be confirmed again by the researcher prior to the interview.
- 4. I understand that my responses will be kept strictly confidential. I give permission for members of the research team, the regulatory authorities, or the NHS Trust to have access to my anonymised responses. I understand that my name will not be linked with the research materials, and I will not be identified or identifiable in the reports that result from the research.
- 5. I give permission for anonymised quotes taken from my interview to be used in reports, publications and presentations.
- 6. I agree to take part in the above research project.

Name of Participant

Date

Date

Practice Name:

Name of Researcher

To be signed and dated in presence of the participant

Signature

Signature

Please Initial EACH box



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Position:

Interview – Health Professionals consent form v1.0 (16/12/13)