



INTERVIEW / FOCUS GROUP - PARTICIPANT CONSENT FORM

Title of Project: The 3D Study: Improving whole person care

Principal 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/focus> group.**

Please Initial
EACH box

- 1. I confirm that I have read (had read to me) the information sheet <version no> dated <date>. I have had the opportunity to consider the information, ask questions and (if applicable) have had these answered satisfactorily.
(Your Initials)
- 2. I understand that my participation is voluntary and that I am free to withdraw at any time without giving any reason and without there being any negative consequences (Information collected about you up to the point that you withdraw will still be used unless you request that it is excluded).
(Your Initials)
- 3. I understand that you will record the <interview/focus group> 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.
(Your Initials)
- 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.
(Your Initials)
- 5. I give permission for anonymised quotes taken from my <interview/focus group> to be used in reports, publications and presentations.
(Your Initials)
- 6. I agree to take part in the above research project.
(Your Initials)

Name of Patient
(or legal representative)

Date

Signature

Name of Researcher
To be signed and dated in presence of the participant

Date

Signature