It is **strongly recommended** that you use the Handbook for Ethical Review and Approval to assist you in completing this form <u>Handbook-</u> <u>for-Ethical-Review-&-Approval-2022-23.pdf (wlv.ac.uk)</u>

Ethics Submission Form Faculty of Education, Health and Well-being

Received by:

Date:

Incomplete forms **WILL** be returned for amendment, thus creating delay before your research can begin.

Please note this time frame and avoid sending 'chasing' emails.

Your research approach must enable you to choose the 'yes' option for each question.

• You must complete all sections of this form in as much detail as possible (word counts are given if necessary.) If your form is incomplete, it will be returned to you to resubmit.

- You must be given approval for your research project from the University before you can begin.
- Applications should be submitted by 1st of each month to <u>fehwethics@wlv.ac.uk</u>
- Applications will be reviewed and a response given by 30th/31st of the same month unless you are notified otherwise.

In light of the Covid-19 global crisis, you need to confirm the following:

1. I confirm that the research will fully comply with current government guidance on social distancing, hygiene, travel, etc.

Choose an item.

- I confirm that the research will fully comply with any relevant current statutory body guidelines on conducting research online or in the context of Covid-19 (e.g. BPS, DFE, etc.)
 Choose an item.
- 3. I understand that it is my responsibility to update this submission and I will obtain further approval if there are any changes required to the activities within the project at the time of data collection. Choose an item.

Section One

First Name:	Enter First Name here	University Student Number:	Enter your student number here if applicable	Students- enter your details, and your primary/main supervisor's name.
Surname: University Email Address:	Enter Surname here Enter your University email address only	Daytime Contact Number: (in case we need to contact you)	Enter a contact number here	Staff- enter the principal investigator's details only, in
Name of Project Su Principal Investigat		<mark>dies or</mark> Enter n	ames here	All- ensure you select the

Is this study Choose an item.

Subject area your research/p	project is lo	cated <mark>(Please check all that apply)</mark>
FEHW		FSE
Education		FABSS
Health		COLT
Sport		Cross University Project
Psychology		Other (Please give details below)
Social Care or Social Work		

Please ensure you tick **all** applicable boxes.

this study'.

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Please indicate the category of project that you are applying for? See RPU website here Choose an item.

Give details of service user involvement in the development and/or completion of the research.

Students- discuss with your supervisor which category you believe your research will be. Checking the category is correct is part of the review of all submissions.

Click here to enter text. This box will expand as required.

Please provide a start and end date for your project.

Start Date: Click or tap to enter a date. End Date: Click or tap to enter a date. Providing full details of **if and how** service users will be involved is essential to enable correct determination of the category of the project.

Section Two

2.1 Project title:

Click here to enter text. This box will expand as required.

2.2 Give details of proposed research questions/hypothes Click here to enter text. This box will expand as require

2.3 Briefly outline your project, stating the rationale, amwords) Click here to enter text. This box will expand as required.

2.4 How will your research be conducted? (750 words max) Describe the methods so that it can be easily understood by the Ethics subject specific terminology are clearly explained. Click here to enter text. This box will expand as required. The **focus** of this review is ethical research principles, such as Risks and benefits; Harm- likelihood of occurrence and severity; Informed Consent; Confidentiality. However, as part of the review process, reviewers will consider Scientific /Academic Merit; Research competency; Social value of the proposed research. Please therefore make sure you clearly state what you intend to do, how you intend to do it, and why you intend to conduct this research, in this way. **Please remember**, making any changes <u>after</u> gaining ethical approval will require submission of an updated form, and pausing your research to await further approval.

The start date **must not** be stated as being before you have received ethical

submission- e.g. if you submit by 1st March, the soonest possible date you

may receive approval will be 31st March, to commence research in April.

approval. When choosing a date, allow 2 months from your original

2.5a Does your research involve children under 18 years of age? Choose an item.

2.5b If yes, do you have an Enhanced Disclosure Certificate from the Criminal Records Bureau/Disclosure and Barring Service Choose an item. If your research involves anyone under 18, you **must** have an Enhanced DBS.

2.6 Are participants in your study going to be recruited from a potentially vulnerable

2.0 / i c participarits in your study going	5 to be recruited	nom a potentia	ily vaniciasic				
group? See RPU website <u>here</u>	Please r	eview the RPU v	vebsite in order to accurately answer 2.6.				
Choose an item. If you have answered 'Yes' above, click	here to enter te		ou provide full and clear details of how your data alysed. Think about what data you propose to				
2.7 How will your data be analysed? = Click here to enter text. This box will e	expand as require		obtain, and remember all data obtained during your research has to have a legitimate purpose.				
2.8 Is ethical approval required by an e organisation) Choose an item.	external agency?	If you a	are conducting research e.g. with NHS patients- I need NHS Ethics approval? (hra-				
Enter contact details here of person w		contact	ntools.org.uk), you must provide applicable t details here.				
2.9 What, in your view, are the ethical considerations involved in this project? (e.g. confidentiality, consent, risk, physical or psychological harm, etc.) Please explain in full sentences. Do not simply list the issues. Please make it clear how you are going to deal with issues with regard to your own welfare and safety.							
Confidentiality Consent	Interve Interve Interve	ention	This section must be completed fully, including consideration of the researcher's				
Participants under 18	Interve	intion 🔨					

Click here to enter another area. Click here to enter another area. Intervention Intervention S Intervention Intervention

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consideration of the researcher's welfare/safety- for example if interviewing individuals alone, on a 1-1 basis. It is **not** sufficient to simply 'x' in the boxes- forms without adequate details **will** be returned for amendments.

(Ethics Form v5, Mar 22)

2.10 Have participants been/will be fully informed of the risks and benefits of participating and of their right to refuse participation or withdraw from the research at any time?

Choose an item. Click here to enter text if required.

2.11 How will you ensure that the identity of your participants is <u>here</u> Click here to enter text. This box will expand as required.

2.12 How will you ensure that the data remains confidential? see Click here to enter text. This box will expand as required.

2.13 How will you store your data during and after the project. Click here to enter text. This box will expand as required.

2.14 Please list references.

Click here to enter text. This box will expand as required.

A participant information sheet (PIS) and consent form need to be submitted as part of the application. **Make sure** the content of the PIS and consent form **matches** what is said in this form.

Include details of who will have access to research data, and why. Remember that **confidentiality can only be assured within the boundaries of the law**. Absolute confidentiality cannot be guaranteed- ensure you include reference in this form and the consent form to situations e.g. safeguarding, where confidentiality may need to be breached.

Data must be stored securely in UoW cloud storage. Think about all research data- e.g. including interview recordings /transcriptions. Explain how long data will be kept, and the rationale for keeping it for that length of time.

Ensure references are correctly cited, giving the full details.

Section Three

3.1 Is this data set of potentially illicit origin?* Choose an item. *We may need to consider requests for ethical approval from researchers using data that was obtain without the consent of the original data owners or data subjects.

3.2 Does your research fit into any of the following security-sensitive categories? See RPU website <u>here</u>

Security Sensitive Category Commissioned by the military Commissioned under an EU security call Involve the acquisition of security clearances Concerns terrorist or extreme groups Choose an item. Choose an item. Choose an item. Choose an item. Choose an item.

If you have answered yes to any part of question 3.2 please ensure that you complete questions 3.3 – 3.8

3.3 Does your research involve the storage on a computer of any records, statements or other documents that can be interpreted as promoting or endorsing terrorist acts? Choose an item.

3.4 Will your research involved the electronic transmission (e.g. as an email attachment) of any records or statements that can be interpreted as promoting or endorsing terrorist acts? Choose an item.

3.5 Do you agree to store electronically on a secure University file store any records or statements that can be interpreted as promoting or enduring terrorist acts? Do you also agree to scan and upload any paper documents with the same sort of content? Access to the file store will be protected by a password unique to you. Choose an item.

If you have chosen 'No' click here to enter text.

3.6 Do you agree NOT to transmit electronically to any third party documents in the University secure document store? Choose an item.

Where you intend to analyse data already obtained by previous researchers, you must consider whether **that research** received ethical approval. If it did not, such research may require <u>HRA</u> <u>Approval - Health Research</u> <u>Authority</u> 3.7 Will your research involve visits to websites that might be associated with extreme or terrorist organisations? See RPU website here Choose an item. If you have chosen 'Yes' click here to enter text.

3.8 You are advised that visits to websites that might be associated with extreme or terrorist organisations may be subject to surveillance by the police. Accessing those sites from University IP addresses might lead to police enquiries. Do you understand this risk? Choose an item.

Section Four

4.1 Appendices (All submissions) Please list the items that you are submitting with this document. (These will need to be submitted to FEHWEthics@wlv.ac.uk) You may want to include additional information that will help the panel with their decision such as your proposal. You need to provide examples of research instruments, recruitment posters and leaflets, information sheets (age appropriate) assent forms (for children), consent forms, risk assessment if research is carried out abroad. Click here to enter text. This box will expand as required. Please ensure **all supporting documents** are listed here. Remember that the clearer and more coherent an application is, the more likely approval will be able to granted on first submission.

Section Five Confirmation of Ethical Approval and Feedback on Submission TO BE COMPLETED AS INDICATED, BY MODULE LEADER, SUPERVISOR AND/OR HEAD OF ETHICS PANEL

Submission Number: Enter submission number Date of Review: Click here to enter a date.

Identified Category

On behalf of members of staff and students, I can confirm that the proposal for research being made by the above student/member of staff is Choose an item.

Checklist required for Category B Proposals: Outline summary: rationale and expected benefits from the study, with a statement of what the researcher is Yes/No proposing to do and how Explanation of the methodology to be used Yes/No An information sheet and copy of a consent form to be used with subjects Yes/No Details of how information will be kept Yes/No Details of how results will be fed back to participants Yes/No Letter of consent from any collaborating institutions Yes/No Letter of consent from head of institution wherein any research activity will take place Yes/No

Decision

I confirm that the proposal for research being made by the above student/member of staff is

Choose an item.

Comments and Feedback: Click here to enter text. This box will expand as required.

Proposed Actions: Click here to enter text. This box will expand as required

For a student's proposal: Name of module leader or supervisor giving approval: Click here to enter name.

For a member of staff's proposal: Name of Head of Ethics Panel giving approval: Click here to enter name.

Signed (This form must have a valid signature): Click here to paste signature. Date: Click here to enter a date.

This section is to be completed by the supervisor for student applications. In all cases, this section will be reviewed and signed off by the Chair of the Health Professions Ethics panel at the point of approval being granted.