[This form can be adapted for your project]

[Title of study] Information Sheet

Introduction
The aim of the study is to [give participants an idea of what the study is about]. The study is being conducted by [name of chief investigator] at Glasgow Caledonian University and [name and affiliation of any other investigators]. The study is being carried out by [name of student] as a part of an educational course for the award of [name of qualification].

Before you decide whether or not to take part, it is important for you to understand what participation in the study will involve. Please take time to read the following information carefully and discuss it with others if you wish. Please contact us at the address below if you would like more information.

Why is this study important?
This is an important study because [briefly explain why this study is important and what you hope to achieve].

What will I have to do if I take part?
If you are interested in taking part, you will be invited to give consent. Giving consent will involve [explain how, when, where, and by whom]. You will receive a copy of the signed consent form.

Once consent has been completed you will be invited to [explain what the study will involve, making sure you give full details of what will happen, when it will occur, where it will take place, and who will be involved]. Explain the steps taken to reduce the burden of participating in the study [e.g. convenient appointments].

Do I have to take part?
No. You decide whether or not you want to take part. You can stop taking part in the study at any time, without giving a reason. Withdrawing from the study will not affect your medical care or legal rights. [explain what will happen to data if they withdraw].

What are the possible risks with taking part?
All studies involve some level of risk and inconvenience. The possible risks involved with this study are [e.g. data breach or being asked personal questions].

What are the possible benefits of taking part?
We can't promise the study will help you personally. However, the results should help our understanding of the experience of [...]. This, in turn, is expected to be beneficial to [...].

What happens when the study stops?
Written reports of the study findings will be available from [...]. However, a copy of the report can be requested from [name].

What if there is a problem?

If you are concerned about your participation in the study and would like to speak with someone out with the study team, please contact [name, address, phone number, email of independent person].How will we use information about you?

We will need to use information from [you] [from your medical records] [your GP] [**OTHER**] for this research project.
This information will include your [initials/ NHS number/ name/ contact details/ **provide a bullet list of identifiers held by site and/or sponsor for the research**]. People will use this information to do the research or to check your records to make sure that the research is being done properly.
OPTION where applicable: People who do not need to know who you are will not be able to see your name or contact details. Your data will have a code number instead.
We will keep all information about you safe and secure.
OPTION where applicable: Some of your information will be sent to [**country X**]. They must follow our rules about keeping your information safe.
Once we have finished the study, we will keep some of the data so we can check the results. We will write our reports in a way that no-one can work out that you took part in the study.

What are your choices about how your information is used?

You can stop being part of the study at any time, without giving a reason, but we will keep information about you that we already have.
OPTION if follow up data will be collected after withdrawal: If you choose to stop taking part in the study, we would like to continue collecting information about your health from [central NHS records/ your hospital/ your GP]. If you do not want this to happen, tell us and we will stop.
We need to manage your records in specific ways for the research to be reliable. This means that we won't be able to let you see or change the data we hold about you.
OPTION if data will be used for future research: If you agree to take part in this study, you will have the option to take part in future research using your data saved from this study. [**Insert details of any specific bank/ repository**]

Where can you find out more about how your information is used?

You can find out more about how we use your information
at www.hra.nhs.uk/information-about-patients/
our leaflet available from [**X**]
by asking one of the research team
by sending an email to [**email**], or
by ringing us on [**phone number**].

The data controller is Glasgow Caledonian University. Enquiries specifically relating to data protection should be made to the University's Data Protection Officer (DPO). The DPO can be contacted by email: dataprotection@gcu.ac.uk. If you are unhappy with the response from the University, you have the right to lodge a complaint with the Information Commissioner's Office (ICO). The ICO can be contacted by email: casework@ico.org.uk.

Who is organising and funding the study?
This study is being organised by [name] and funded by [name].

What will happen to the results of the study?
The study results will be available to a range of people including e.g. health professionals, researchers, and the public. It will not be possible to identify any individual participant from these reports or publications. Some studies may seek permission to share anonymous data with researchers conducting separate ethically approved studies, but this will need to be added to the consent form and included in the consent process for this study.

Who has reviewed the study?
All studies involving human participants carried out at Glasgow Caledonian University are reviewed by an ethics committee. The role of the ethics committee is the protect the safety, rights, wellbeing, and dignity of study participants. This study was reviewed by the School of Health and Life Sciences [e.g. nursing] departmental committee and given ethical approval on [date] under the following approval code: [approval code].

Research undertaken in the National Health Service (NHS) requires additional ethical and/or Research and Development approval. This study was reviewed by [name of NHS REC and/or Research and Development department] and given approval on [date] under the following approval code: [approval code].

What happens next?
If you are interested in participating and would like to know more then please contact [insert name and contact details].

How do I make contact with the study team?
[Provide contact details for study team]

Thank you for taking the time to read this information.