REQUEST FOR ETHICAL REVIEW

3700 Willingdon Avenue, Burnaby, BC, Canada V5G 3H2

CLEAR FORM

The information collected on this form will be used to assess your request for ethical review in compliance with the Tri-Council Policy Statement on Ethical Conduct for Research Involving Humans (TCPS2) and will be shared with the BCIT Research Ethics Board and its administrative support staff as described in BCIT Policy 6500 and procedures.

Please contact the chair of the REB at **research_ethics@bcit.ca** for instructions on how to submit this form.

The detailed instructions for this form, additional contact information, and forms are available at **bcit.ca/appliedresearch/ethics**

	FOR OFFICE USE ONLY	
	REB Number	Date Received
1. Principal Investigator	2. Direct Supervisor	3. BCIT Contact (if investigator external to BCIT)
Position	Position	Position
Institution (if not BCIT)	Institution (if not BCIT)	Institution (if not BCIT)
Faculty/Department	Faculty/Department	Faculty/Department
Mailing Address	Mailing Address	Mailing Address
Phone	Phone	Phone
Fax	Fax	Fax
Email	Email	Email
4. Research is: ☐ Behavioural ☐ Clinical	5. Source of Funds (Attach budget in Appendix A)	6. Is there an Industry Service Agreement (ISA) in place? Attach ISA in Appendix B ☐ Yes ☐ No ☐ Not applicable
7. Project Period (yyyy/mm/dd) From To	8. Indicate the institutions where the research will be carried out ☐ BCIT campus ☐ Other	
9. Title of project		
10. Summary of purpose and objectives of project		

11. Research for graduate or undergraduate degree?

☐ Yes ☐ No If yes, submit dissertation or thesis acceptance letter in Appendix D.

12. Principal Investigator	13. Direct Supervisor	14. BCIT contact (if investigator external to BCIT)
Signature	Signature	Signature
Date	Date	Date

15. SUMMARY OF METHODOLOGY AND PROCEDURES.

If your study involves deception, you must also complete the page in this application titled 'Deception Form'. ALL SUBMISSIONS MUST INCLUDE a copy of the research plan or protocol for the research to be conducted in Appendix E.

Does the study involve the withdrawal of blood or other bodily fluids?	Will you be using radiation?
☐ Yes ☐ No	☐ Yes ☐ No

16. CO-INVESTIGATORS AND STUDENTS (If more than three, please include these details for each in Box 23)

Surname	Given Name(s)	Academic Rank
Institution	Faculty / Department	Division
Hospital Department		

Surname	Given Name(s)	Academic Rank
Institution	Faculty / Department	Division
Hospital Department		

Surname	Given Name(s)	Academic Rank
Institution	Faculty / Department	Division
Hospital Department		

DESCRIPTION OF POPULATION

17. How many participants will be used?	How many in the control group (if applicable)?	Minimum number of participants required for the study?
18. Who is being recruited, and what are the criteria for their selection?		

19. Who will be excluded from participation?

20. How are the participants being recruited? If the initial contact is by letter email, or posted recruitment notice, attach a copy in Appendix C. Note that the REB discourages initial contact by telephone. However, surveys which use random digit dialling may be allowed. If your study involves such contact, you must also complete the 'Telephone Contact' form.

21. If a control group is involved, and their selection and/or recruitment differs from the above, provide details

PROJECT DETAILS

22. Where will the project be conducted (room or area)?

23. What are the qualifications of all those conducting the study?

24. Will participants have any problems giving informed consent on their own behalf? Consider physical or mental condition, age, language, and other barriers.

25. If the participants are not competent to give fully informed consent, who will consent on their behalf?

26. What is known about the risks and benefits of the proposed research, including any discomfort or incapacity the participants are likely to experience?

27. How much time will participants dedicate to the project?

28. Provide details of any known side effects which may result from the experimental treatment (if applicable).

29. For clinical research only: What procedures in this project (e.g. diagnostic procedures or other treatment) involve an experimental approach differing from standard patient care? Are any of the procedures, devices or diagnostic tests used in this study still in the experimental stage? If yes, please specify and identify the known or anticipated risks.

30. For research involving a double-blind code, what provisions are made to break the code when needed? Who has the code?

31. For clinical research involving the administration of drugs, the applicant must demonstrate that approval for the research has been sought from the Therapeutic Products Directorate of Health Canada.

- ☐ N/A
- ☐ Approval has been sought
- ☐ Approval has not been sought

32. If monetary compensation is to be offered to the participants, provide details of amounts and payment schedules. Include a description of how the payments will be pro-rated if the participant withdraws from the study.

DATA

34. Who will have access to the data (please list their names)? If you are using an online survey, where will the data collected by the survey be stored (e.g., Canada or U.S.)?

35. How will the confidentiality of the data be maintained?

36. What are the plans for future use of the raw data beyond that described in this protocol? How and when will the data be destroyed?

37. Will any data which identifies individuals be available to persons or agencies outside the Institute? If yes, who and for what purpose will the data be released? Describe any steps you will take to ensure that data released will be maintained in the same level of confidentiality.

38. What are the plans for feedback to the participant? Please describe your communication plan. If clinical, please also include in your research plan (Appendix E) procedures for disclosing material incidental findings.

39. Will your project use (please attach in Appendix F):

☐ Questionnaires (submit a copy) ☐ Interviews (submit a copy of questions)

☐ Observations (submit a brief description) ☐ Tests (submit a brief description) ☐ Other (please submit a brief description)

40. FUNDING INFORMATION

Agency / Source of Funds:	Funds Administered By:	BCIT Research Budget Account Number:
☐ Internal ☐ External ☐ Self-funded	☐ BCIT ☐ Other:	Status ☐ Awarded ☐ Pending
Was funding peer reviewed: ☐ Yes ☐ No If no, please explain		
Copy of funding application included in Appendix H ☐ Yes ☐ No	Funding Start Date (YYYY-MM-DD)	Funding Finish Date (yyyy-mm-dd):

41. CONFLICT OF INTEREST DECLARATION

Are there any aspects of this proposal, such as financial gain or commercialization, which raise concern about a conflict of interest? ☐ Yes ☐ No
If yes, explain.

INFORMED CONSENT

42. Who will consent?

☐ Participant

☐ Parent or guardian. (Written parental consent is always required for research in schools and an opportunity must be presented either verbally or in writing to the students to refuse to participate or withdraw. Submit a copy of what will be written or said to the students.)

☐ Agency officials

43. In the case of projects carried out at other institutions, the REB requires written proof that agency consent has been received. Please specify below:

☐ Research carried out at a hospital – approval of hospital REB.

☐ Research carried out at a school – approval of school board and/or principal. Exact requirements depend on individual school boards. Check with school boards for details.

☐ Research carried out in a provincial health agency – approval of Deputy Minister.

☐ Other – specify:

QUESTIONNAIRES TO BE COMPLETED BY PARTICIPANTS

44. Questionnaires should contain an introductory paragraph or covering letter which includes the same information as a consent form (below) with the addition of:

Please check each item in the following list before submission of this form to insure that your questionnaire contains all the required elements.

- ☐ Not applicable.
- ☐ The statement that if the questionnaire is completed it will be assumed that consent has been given. This is sufficient if the research is limited to questionnaires; any other procedures or interviews require a consent form signed by the participant.
- ☐ An explanation of how to return the questionnaire (if printed).
- ☐ For surveys circulated by mail, a copy of the explanatory letter as well as a copy of the questionnaire.

CONSENT FORMS

45. The REB requires written consent in all cases other than those limited to questionnaires which are completed by the participant. Please check each item in the following list before submission of the consent form in Appendix G to ensure that the written consent form that you attach to your application contains all necessary items.

- ☐ BCIT letterhead.
- ☐ Title of the project.
- ☐ Identification of investigators, including a telephone number. Research for an applied project for program requirements or graduate thesis should be identified as such and the name and telephone number of the faculty advisor included.
- ☐ Brief but complete description of the purpose of the project and of all procedures to be carried out in which the participants are involved. Indicate if the project involves a new or non-traditional procedure whose efficacy has not been proven in controlled studies. Your description should be written at a level of language and detail that someone with a Grade 8 education and no prior knowledge of your project could understand.
- ☐ A description of the risks and benefits of participation in the project.
- ☐ Assurance that the identity of the participant will be kept confidential and description of how this will be accomplished, i.e. describe how records in the principal investigator's possession will be coded, kept in a locked filing cabinet, or under password if kept on a computer hard drive. In the case of printed questionnaires, a statement discouraging participants from writing their name or other identifying information.
- ☐ Statement of the total amount of time that will be required of a participant.
- ☐ Details of monetary compensation, if any, to be offered to participants.
- ☐ An offer to answer any inquiries concerning the procedures to ensure that they are fully understood by the participant and to provide debriefing, if appropriate.
- ☐ A statement that if they have any concerns about their rights or treatment as research participants, they may contact the REB Chair, (insert name), at (insert phone number) or **research_ethics@bcit.ca**.
- ☐ A statement of the participant's right to refuse to participate or withdraw at any time (e.g., "It is up to you to decide whether or not to take part. If you do decide to take part, you will be asked to sign this consent form. After signing the consent form and after starting participation you are still free to leave the study at any time without any consequences and without giving any reason.").
- ☐ A statement that withdrawal or refusal to participate will not jeopardize further treatment, medical care or influence class standing, as applicable. **Note:** This statement must also appear on letters of initial contact. For research done in the schools, indicate what happens to children whose parents do not consent.
- ☐ A statement acknowledging that the participant has received a copy of the consent form including all attachments for the participant's own records.
- ☐ A statement that the participant is consenting to participate (by signing).
- ☐ A place for signature of participant consenting to participate in the research project, investigation, or study and a place for the date of the signature.
- ☐ A place for the signature, printed name and date for each of these people; the participant, the witness and the person who explained or obtained the consent.
- ☐ Parental consent forms must contain a statement of choice providing an option for refusal to participate, e.g. "I consent / I do not consent to my child's participation in this study." Also, verbal consent must be obtained from the child, onc)e the parent has consented.

ATTACHMENTS

46. Check items attached to this submission, if applicable. Incomplete submissions will not be reviewed.

- ☐ Budget (Appendix A)
- ☐ Industry Service Agreement (Appendix B)
- ☐ Letter of initial contact (Appendix C)
- ☐ Advertisement for volunteer participants (Appendix C)
- ☐ Recruiting letters from third parties (Appendix C)
- ☐ Dissertation or thesis board acceptance letter (Appendix D)
- ☐ Research plan (Appendix E)
- ☐ Plan for disclosing incidental or secondary findings (Appendix E)
- ☐ Questionnaires, tests, interviews, etc. (Appendix F)
- ☐ Explanatory letter with questionnaire (Appendix F)
- ☐ Participant consent form (Appendix G)
- ☐ Control group consent form (Appendix G)
- ☐ Parent / guardian consent form (Appendix G)
- ☐ Agency consent (Appendix G)
- ☐ Confidentiality agreement for research assistants (Appendix G)
- ☐ Application for funding of funded research (Appendix H)
- ☐ Deception form, including a copy of transcript of written or verbal debriefing (see below, attach as Appendix I)
- ☐ Telephone contact form (see below, attach as Appendix J)
- ☐ Copy of TCPS tutorial certificate for principle investigator (Appendix K)
- ☐ Other – Specify:

ADDITIONAL INFORMATION

47. Use this space to provide information which you feel will be helpful to the REB or to continue any item for which sufficient space was not available.

48. Proposed continuing review process for projects longer than one year. How will you update the REB for the purposes of continuing review of the study?

DECEPTION FORM

If your study involves deception, complete items 1 to 3. If not, skip to the next page.

1. Deception undermines informed consent. Indicate (a) why you believe deception is necessary to achieve your research objectives; (b) whether you think the research can be done any other way; and (c) why you believe that the benefits of the research outweigh the cost to the participants.

2. Outline the anticipated impacts of your deception on the participants once they have learned of it.

3. Describe how you will debrief participants at the end of the study.

TELEPHONE CONTACT FORM

If your study involves telephone contact, complete items 1 to 4. If not, you are at the end of the forms.

1. Telephone contact makes it impossible for a signed record of consent to be kept. Indicate why you believe that such contact is necessary to achieve your research objectives:

2. Include a copy of the proposed 'front end' script of your telephone interview in Appendix J. Please check each item on the following list before submission of request for review to ensure that the front end covers as much as possible of the normal consent procedures:

- ☐ Identification of fieldwork agency, if applicable.
- ☐ Identification of researcher.
- ☐ Basic purpose of project.
- ☐ Nature of questions to be asked, especially if sensitive questions are to be asked.
- ☐ Guarantee of anonymity and confidentiality.
- ☐ Indication of right of refusal to answer any question.
- ☐ An offer to answer any questions before proceeding. (see below, item 3)
- ☐ A specific inquiry about willingness to proceed.

3. Indicate how interviewers will be trained to answer respondents' questions. Investigators should prepare and submit in Appendix J 'scripted replies', which may cover, but are not necessarily limited to:

(a) The means by which respondent was selected.

(b) An indication of the estimated time required for the interview.

(c) The means by which guarantees of anonymity and confidentiality will be achieved.

(d) An offer to provide the name and telephone number of a person who can verify the authenticity of the research project. This person shall not be a principal investigator nor shall it be a co-investigator. (**Note:** Investigators should be prepared, should potential respondents request it, to provide the name of a person outside the research group, as required of the Social Sciences Humanities Research Council guidelines.)

4. Sensitive Participant Matter: Respondents should be forewarned of questions they may find private, stressful or sacred. It is not always practical to do so as part of the interview's front end. Warnings can be placed later in the interview and can take a naturalistic form as long as their content specifically refers to the sensitive matter. Indicate how you propose to deal with sensitive items, if any, in your interview.