

Appendix H - INTEGRATED PARTICIPANT INFORMATION SHEET AND CONSENT FORM

Full title of Project: Rapidly formed COVID-19 teams in the NHS: implications for leadership, team-working, career intentions and individual mental health.

The integrated PI sheet and consent form is fully online on Google forms,
[https://docs.google.com/forms/d/e/1FAIpQLSdTGxT2QL0Vczalep4TMH_TcjuzeGou40oOkzvWENXm1ZpZog/viewform?usp=sf link](https://docs.google.com/forms/d/e/1FAIpQLSdTGxT2QL0Vczalep4TMH_TcjuzeGou40oOkzvWENXm1ZpZog/viewform?usp=sf_link)

And is accessible through our website:
<https://www.brookes.ac.uk/research/units/hls/projects/rapidly-formed-covid-19-teams-in-the-nhs/participant-information>

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Participation and Consent form for Study Participants

Thank you for considering to participate in our study on NHS COVID-19 teams in the NHS.

Before filling in the following form, which will ask for your consent and personal details in order to contact you, please read the participant information on our website:

<https://www.brookes.ac.uk/research/units/hls/projects/rapidly-formed-covid-19-teams-in-the-nhs/participant-information/>

After completion of the consent form we will contact you to invite you to the study and to arrange a convenient time for an approximately one hour interview (using Google Meet, Zoom, MS teams, Phone).

If you have any further queries about participation, don't hesitate to contact the research team directly (at the email addresses below) or send us an email at covid19teams@brookes.ac.uk.

Professor Vince Connelly (Principal Investigator)
Department of Psychology, Health and Professional Development, Oxford Brookes University
Email: vconnelly@brookes.ac.uk

Dr Stefan Schilling (Research Fellow)
Department of Psychology, Health and Professional Development, Oxford Brookes University
Email: sschilling@brookes.ac.uk

For further information visit:

<https://www.brookes.ac.uk/research/units/hls/projects/rapidly-formed-covid-19-teams-in-the-nhs>

Your email address will be recorded when you submit this form.

Consent Form

Before you decide whether or not to take part, it is important for you to understand why the research is being done and what it will involve. Please take time to read the participant information on our website at: [LINK TO PARTICIPANT SUBPAGE ON OUR WEBSITE WILL BE INCLUDED ONCE RECRUITMENT WILL START AND THE WEBSITE IS LIVE]

I confirm that I have read and understood the participant information and have had the chance to ask questions. *

- ☐ Yes
- ☐ No

I understand that my participation is voluntary and that I am free to withdraw at any time, without giving reason. *

- ☐ Yes
- ☐ No

I agree to take part in the above study. *

- ☐ Yes
- ☐ No

I want to be contacted with details about the results of the study. *

- ☐ Yes
- ☐ No

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I understand that while the interview will be conducted via video chat only the audio-recording will be stored and video will be deleted. *

☐ Yes

☐ No

I agree to be contacted for the follow up survey (ca. 20min). *

☐ Yes

☐ No

I agree to be contacted for the follow up interview (ca. 1hr) *

☐ Yes

☐ No

I agree to the use of anonymised quotes in publications. *

☐ Yes

☐ No

I agree that an anonymised data set, gathered for this study may be stored in a specialist data repository relevant to this subject area for future research. *

☐ Yes

☐ No

This section will ask you for some personal details used only to contact you for the dissemination of the incentive and research findings and potential recruitment for the follow up study.

This information will only be used to check your eligibility for the study and to contact you with regards to the research study and to provide you with your voucher or donation of £15 for your participation after the interview. Your data (including these personal details and the consent form below) will be stored securely and confidentially in accordance with Oxford Brookes University data protection guidelines, GDPR and the Data Protection Act of 2018. For future data analysis, every Participant will be issued a respondent code (e.g., RES0123).

Your first and last name *

Your answer



Your Email Address to contact you with the voucher *

Your answer

Participant's Phone Number

Your answer

Are you currently working on a COVID-19 ward, or have you been working on a COVID-19 ward in the past? *

- ☐ I am currently working on a COVID-19 team/ ward.
- ☐ I have been working on a COVID-19 team/ ward in the past.
- ☐ I was responsible for managing a COVID-19 team/ ward.
- ☐ I have never worked on a COVID-19 team/ward.

Could you tell us what your occupational role is/ was? *

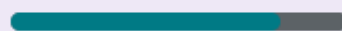
- ☐ Patient facing medical personnel (e.g., Nurse, Doctor, Respiratory Therapist, Physiotherapist, Speech Therapist)
- ☐ Directors and Management Staff (e.g., Clinical Director, Senior Manager, Director of Nursing)
- ☐ Other: _____

Your Employer (e.g., NHS Trust, Hospital)

Your answer _____

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Confirmation of responses

Date signed *

Date

dd/mm/yyyy 

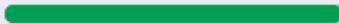
Please write your full name, if you are happy with your provided answers. *

Your answer

☐ Send me a copy of my responses.

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Your response has been recorded. For further information visit:

<https://www.brookes.ac.uk/research/units/hls/projects/rapidly-formed-covid-19-teams-in-the-nhs>

or contact us at covid19teams@brookes.ac.uk