

CONSENT FORM FOR PARTICIPANTS IN RESEARCH PROJECTS



Please complete this form after you have read the Information Sheet and/or listened to an explanation about the research.

Title of project: Healthier Working Lives and Ageing for Workers in the Care Sector: Developing Careers, Enhancing Continuity, Promoting Wellbeing (HWL)	
Ethical review reference number: HR/DP-21/22-28599	Version number: 2. 31/03/2022
	Tick or initial
1. I confirm that I have read and understood the information sheet dated 31/03/2022, v2 , for the above project. I have had the opportunity to consider the information and asked questions which have been answered to my satisfaction.	
2. I consent voluntarily to be a participant in this project and understand that I can refuse to take part and can withdraw from the project at any time, without having to give a reason, up until 29/02/2024 or if my data is rendered unidentifiable.	
3. I consent to the processing of my personal information for the purposes explained to me in the Information Sheet. I understand that such information will be handled under the terms of UK data protection law, including the UK General Data Protection Regulation (UK GDPR) and the Data Protection Act 2018.	
4. I understand that my information may be subject to review by responsible individuals from the College for monitoring and audit purposes.	
5. I understand that confidentiality and anonymity will be maintained, and it will not be possible to identify me in any research outputs. I understand that I can waive my right to anonymity if I wish to be associated with the research.	
6. I agree to my data being shared with a third-party transcriber who will have signed a confidentiality agreement.	
7. I agree that the research team may use my data for future research and understand that any such use of identifiable data would be reviewed and approved by a research ethics committee. (In such cases, as with this project, data would not be identifiable in any report).	
8. I consent to my participation in the research being audio recorded.	
9. I consent to my participation in the research being photographed or video recorded.	
a) I consent to being identifiable in photographs	
b) I do not wish to be identified (e.g. photos of hands only or not photographed)	

10. I understand that I must not take part if I fall under the exclusion criteria as detailed in the information sheet and explained to me by the researcher.	
11. I agree to maintain the confidentiality of co-design activities. <ul style="list-style-type: none">I also understand that due to the nature of such activities, confidentiality cannot be 100% guaranteed.	
12. I understand that the information I have submitted will be published as a report.	
13. In relation to the co-design activities, I am happy for my creative outputs and design artefacts (sketches, models, notes) to be visually documented/collected.	
14. OPTIONAL I agree to be re-contacted in the future by King's College London researchers regarding this project. a) I agree that the researcher may retain my contact details so that I may be contacted in the future by King's College London researchers who would like to invite me to participate in future studies of a similar nature. These details will be stored securely until 28/02/2027 after which time they will be destroyed.	

_____	_____	_____
Name of Participant	Date	Signature

_____	_____	_____
Name of Researcher	Date	Signature