



Consent Form (London/Bath) [*delete as appropriate*]

Study title: STOP - Successful Treatment of Paranoia: Replacing harmful paranoid thoughts with better alternatives

Funder: Medical Research Council (MRC)

Study site: Institute of Psychiatry, Psychology & Neuroscience (IoPPN) [*delete as appropriate*]

King's College London
De Crespigny Park
Denmark Hill
London SE5 8AF

Study site : Department of Psychology [*delete as appropriate*]

University of Bath
Claverton Down
Bath BA2 7AY

Site investigator: Professor Jenny Yiend / Dr Pamela Jacobsen [*delete as appropriate*]

Lead researcher (main study contact): **To be appointed**
<insert researcher contact details>

REC reference: 21/LO/0896

If you have come to the decision to enter the study after carefully considering the information provided, please read, initial the boxes and sign this form. You will receive a copy of this form for your records.

1. I confirm that I have read the information sheet dated **XX/XX/XXXX (version XX)** for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily. ☐
2. I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, without my medical care or legal rights being affected. ☐



3. I consent to members of KCL having access to my data. ☐
4. I understand that relevant sections of my medical notes and data collected during the study, may be looked at by individuals from King's College London, from regulatory authorities or from the NHS Trust, where it is relevant to my taking part in this research (e.g., to investigate any adverse events). I give permission for these individuals to have access to my records.
5. I agree to the research team retrieving any data relating to any treatment as usual I receive from local services from my patient file. ☐
6. I agree to the research team keeping any data already collected if I withdraw early from the study. These data will be stored on a secure network drive.
7. I agree that a short questionnaire can be sent to me if I leave the trial early, asking about my reasons for doing so, including any adverse effects of participation. I understand that completing this questionnaire is voluntary. ☐
8. I agree that the fully anonymised data collected from me during the study will be deposited in the UK Data Archive. These data will not include any information that could directly or indirectly identify me. ☐
9. I give permission for key members of my care team to be told that I am taking part in this study (this will include, if relevant, my community consultant, care co-ordinator, GP and any therapists working with me). ☐
10. Everything you share with us will remain completely confidential, within the limits of the law. This means that if you tell us about any criminal activity or anything that puts yourself or someone else at risk of serious harm, then we must break confidentiality and to try and prevent the harm from occurring. Please rest assured that we will discuss this with you first. ☐



11. I agree to take part in the above study.

_____ Name of participant (print)	_____ Date	_____ Signature of participant
_____ Name of person obtaining consent (print)	_____ Date	_____ Signature of person obtaining consent

When completed: 1 copy for participant, 1 copy for research site file, 1 copy for care record (if relevant)

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