Discovering Open Practices
Anatomy Museum, King's College London

LSE, King's College London and Queen Mary University of London Libraries
04/09/2014

A one day conference and workshop for Postgraduate Research Students and Early Career Researchers introducing best practice in open research. The day will introduce concepts and themes around open research and the open agenda, provide practical help in engaging with open access to research information, and investigate some of the broader topics relating to open access that researchers need to consider.
EXERCISE: LEGAL AND ETHICAL ISSUES

This exercise is intended to draw out issues related to research ethics and informed consent. Two example consent forms are presented, both drawn from real cases. Take a look at the forms and critique them. What do they do well? What do they not do well?

SCENARIO ONE: ADOLESCENT PATIENT

Study Number:

Patient Identification Number for this study:

Ethical application number:

CONSENT FORM (over 16)

Title of Project:

Name of Researcher:

Please initial box

1. I confirm that I have read and understand the information sheet dated (version ....................) for the above study and have had the opportunity to ask questions

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 understand that sections of any of my medical notes may be looked at by the researchers involved in the study. I give permission for these individuals to have access to my records.

4. I agree to take part in the scanning study.

5. I agree that the information from social services about me can be accessed by the researcher.

6. I agree that my GP will be contacted if any abnormalities are detected in my brain.

7. I agree that my GP will be contacted regarding participation in this study.

8. I would like to have written feedback on the study findings.

Name of Adolescent          Date          Signature

Name of Person taking consent Date          Signature

(if different from researcher)

I confirm that I have explained the study to the participants in all relevant details and have answered any questions honestly and fully

Researcher          Date          Signature

1 for patient; 1 for researcher; 1 to be kept with hospital notes
SCENARIO TWO: EXPERIMENTAL DATA

University of Place,

Department of Subject

Name of Principal Investigator

Informed consent is routinely required from participants in psychological studies. Please read the following information and decide whether or not to participate in this study.

Study description:

The study is investigating issues surrounding eyewitness memory. The experiment consists of two main stages.

In Part 1, you will witness a videotaped, simulated, crime event. In Part 2, you will be asked questions about the event that you witnessed in Part 1.

The study will take approximately 60 minutes to complete across both stages of the experiment.

Further important details:

This research is carried out in accordance with the ethical guidelines of the British Psychological Association and the University of [Place]. This entails that:

- Your participation is entirely voluntary. You may withdraw it without any negative consequences, at any time during the study, and still receive payment. You may also withdraw your data within a period of 24 hours, should you regret your participation.
- Your data will be held confidentially and only the researcher and research assistants will have access to them. Your data will be securely stored for a period of seven years after the appearance of any associated scientific publications. Your name will not be attached to any of the stored data.
- You will be able to obtain general feedback about the results of this research (although it is not the departmental policy to give individual feedback) at the end of the project (September 2010) via the email address that will be provided on the debriefing form.

There are no reasonable physical or psychological risks of participating in this study.

If you have any further questions about this study, please ask for clarification before you sign.

Sign:

Date:
SCENARIO THREE: FOCUS GROUP DATA

University of Cutting Edge Research

Department of Really Smart Thinkers

- I have read and understood the project information sheet on attitudes towards immigration.
- I have been given the opportunity to ask questions about the project. I understand I may ask further questions about this research at any time.
- I agree to take part in the project. Taking part in the project will include being interviewed and recorded on video.
- I understand that my taking part is voluntary. I can withdraw from the project at any time and I will not be asked any questions about why I no longer want to take part. The focus group discussions I have participated in until my withdrawal may still be used.
- I agree for the data I provide to be archived at [NAME OF ARCHIVE] and I understand that other researchers will have access to this data only if they agree to preserve my anonymity and confidentiality as specified in this form.
- I understand my words may be quoted in publications, reports, WebPages, and other research outputs but my name or other identifying details will not be used.
- I hereby assign copyright of my contribution to [NAME OF PRINCIPAL INVESTIGATOR] so that my word may be quoted in publications, reports, WebPages, and other research outputs but my name or other identifying details will not be used.
- I would/would not (delete as appropriate) like to be notified of any publications which are produced from this research. I would like to be notified by email/text/phone call (delete as appropriate) and have provided relevant contact information to [NAME OF PRINCIPAL INVESTIGATOR].
- I understand my personal details such as phone number and address will not be revealed to anyone except [PRINCIPAL INVESTIGATOR] and their research assistants.
- I confirm that I have freely agreed to participate in this research project. I have been briefed on what this involves and I agree to the use of the findings as described above. I understand that the material is protected by a code of professional ethics.

Name of participant:

Signature:

Date:

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