**Participant Consent**

Research ethics approval number: Health 0377

Title: **Bio**mechanical assessment of bed-**B**ody **I**nterface p**R**essure during lying bir**TH**ing positions (Bio-BIRTH-I)

Research Team: Anastasia Topalidou, Lauren Haworth, Rebekah McCrimmon, Ambreen Chohan

Please initial in the box to confirm your agreement with each statement

|  |  |  |
| --- | --- | --- |
| **Consent statement** | | **Signature** |
| 1. I confirm that I have read and have understood the information sheet dated 08.02.2023 for the above study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily | |  |
| 1. I understand that taking part in the study involves the recording of the interface pressure while I am lying in different positions. The data from these recordings are pressure data (e.g., mean, peak values), through which I cannot be identified in any way. | |  |
| 1. I understand that my participation is voluntary and that I am free to withdraw from the study at any time up until data collection is complete, without giving any reason and without my legal rights being affected. After this point the data will no longer be identifiable and therefore unable to be withdrawn. | |  |
| 1. I understand that the personal information I provide will be held securely and in line with data protection requirements at the University of Central Lancashire. | |  |
| 1. I understand that there is still a potential increased risk of exposure to COVID-19 by attending face-to-face, despite the mitigating actions detailed in the information sheet dated 08.02.23 to reduce the risk. | |  |
| 1. I confirm that I am over the age of 18 years and meet the inclusion criteria stipulated in the participant information sheet. | |  |
| 1. I understand that signed consent forms, questionnaires, other forms and data collected from the recordings will be stored in a secure drive within UCLan’s Network. The consent forms, questionnaires, other forms and the recorded data will be stored for 7 years. | |  |
| 1. I am aware of and consent to use of the pressure recordings for the following purposes: presentations (public, research, teaching) dissemination activities, reports, publications, and other research outputs. | |  |
| 1. I understand that in line with Open Data and Data Sharing principles, my anonymous/non-identifying data will be deposited in the UCLanData repository (under restricted access) for sharing and use by other authorised researchers to support other research in the future. I understand that the deposit of all the raw data will be performed in line with UCLan’s Data Protection requirements and UCLan’s guidelines on data sharing and that safeguards, and restrictions will be applied. | |  |
| 1. I agree to take part in the above study. | |  |
| **Participant Name** | **Participant Signature** | |
|  |  | |
| **Researcher Name** | **Researcher Signature** | |
|  |  | |
| **Date:** |

*(If the researcher read aloud the consent form to the participants, the researcher has to add their initials next to the following statement)*

*I have accurately read out the information sheet to the potential participant and, to the best of my ability, ensured that the participant understands to what they are freely consenting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (add initials)*

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Name of person taking consent Signature Date

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