**VERBAL CONSENT TO PARTICIPATE IN A RESEARCH STUDY**

**Participant Information Sheet**

**Title** interRAI ED Screener Exploratory Study

**Investigator** Dr. N

St. Mary’s General Hospital

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**Co-Investigators** Dr. A  
Assistant Professor, Dept. of Clinical Epidemiology & Biostatistics

McMaster University

**Sponsor** No sponsor.

**Introduction**

You are being asked to take part in a research study. An investigator will explanation the study to you, including its risks and benefits before you decide if you would like to take part. You should take as much time as you need to make your decision. You should ask the study investigators to explain anything that you do not understand and make sure that all of your questions have been answered before giving your consent to participate. Before you make your decision, feel free to talk about this study with anyone you wish. Participation in this study is voluntary.

##### Background and Purpose

You have been asked to take part in this research study because you are age 65 or older and registered in the St. Mary’s General Hospital Emergency Department. This study will use a risk assessment tool called the interRAI Emergency Department Screener to examine the delivery of care in St. Mary’s General Hospital Emergency Department. All persons age 65 or older and registered in the St. Mary’s General Hospital Emergency Department are being asked to participate.

Study Design & Procedures

The tool asks a series of questions and calculates a risk score. The score will be reviewed by a team of investigators and used to understand care delivery for patients of St. Mary’s General Hospital Energency Department. Forty (40) days from your emergency department visit, your patient number will be used to track the delivery of your care using St. Mary’s patient records.

The screening tool will take less than 5 minutes and you will be asked two (2) to eleven (11) questions. These questions may ask about your symptoms, function, mood, and care support. You can refuse to answer any question. You will not be contacted for any reason after the screening tool is completed.

### Risks and benfits Related to Being in the Study

Your answers will not be used to make decisions on your care. All care delivered on this visit will be in keeping with the care normally provided in the Emergency Department. There are no anticipated risks or benefits to you as a participant.

### Voluntary Participation

Your participation in this study is voluntary. You may decide not to be in this study, or to be in the study now and then change your mind later. You may leave the study at any time without affecting your care. You may refuse to answer any question you do not want to answer, or not answer an interview question by saying “pass”.

**Confidentiality**

If you agree to join this study, the study doctors and their study team will look at your personal health information and collect only the information they need for the study. Personal health information is any information that could be used to identify you and includes your:

• initials,

• new or existing medical records, that includes types, dates and results of medical tests or procedures.

The information that is collected for the study will be kept in a locked and secure area by the study doctor for 7 years. Only the study team will be allowed to look at your records. Your participation in this study may also be recorded in your medical record at the hospital.

Representatives of the Research Ethics Board for St. Mary’s General Hospital may look at the study records and at your personal health information to check that the information collected for the study is correct and to make sure the study followed proper laws and guidelines.

All information collected during this study, including your personal health information, will be kept confidential and will not be shared with anyone outside the study unless required by law. You will not be named in any reports, publications, or presentations that may come from this study.

If you decide to leave the study, you may also request that the information about you that was collected not be used. Withdrawl from this study will have no impact on the care you receive at St. Mary’s General Hospital. If you choose to withdraw, no new information will be collected without your permission. Please contact student investigator Alyson Osborne by e-mail at [X](mailto:alyson.osborne@medportal.ca) or student investigator Paul Magennis by e-mail at [X](mailto:pjmagenn@uwaterloo.ca) if you wish to be removed from the study.

# **Questions About the Study**

# If you have any questions, concerns or would like to speak to the study team for any reason, please call:.

If you have concerns or questions about your rights as a research participant in this study, you may contact the Chair of the Tri-Hospital Research Ethics Board, Dr. Michael Coughlin at 510-749-4300 ext. 5367