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# PARTICIPANT INFORMATION SHEET and CONSENT FORM [PICF]

#### Care worker/Care worker managers

Title: Development and Evaluation of an Aged Care Worker App: The Care Worker App Project

Chief Investigator:	Co-investigators	
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# **Description of the study:**

This study is part of an aged care project looking to help staff provide care to older Australians who may have palliative care needs or are coming to the end of their life. We are keen to understand the scope and patterns of practice, potential for support, and self-care needs of (Home Care) care workers in relation to end of life and palliative care. This study's findings will inform the development of a careworker app aimed to assist (Home care) careworkers providing care to older people in the last months/year of their life. You are being invited to participate in this study because you are a (Home Care) care worker or a care worker manager. Participation is entirely voluntary, so if you do not wish to take part you do not have to.

# Purpose of the study:

To understand (Home care) careworkers' scope and patterns of practice in relation to end of life and palliative care, and identify potentially useful aspects for inclusion in the proposed Careworker app.

# What will I be asked to do?

You will be asked to take part in a short semi-structured interview via telephone or online (i.e. via Zoom/Teams). In this interview you will be asked questions relating to your role, and some questions on what items would be useful include in a careworker app that aims to facilitate palliative and end of life caregiving. The interview will take 20-30 minutes. Participation in this study is entirely voluntary, and you are under no obligation to participate in this study. The interview session will be audio recorded and you will be given the opportunity to review and edit the transcript your interview.

Once the Careworker App has been developed there will be an opportunity for you to take part in a *Usability Testing* activity of the new app. You can indicate (via a tick box in the consent form) if you would like to know more about the usability testing activity when the app is ready. You will be asked to provide your email address, so the study team can get in touch with you when the app is ready for testing; and to provide you with a separate set of information sheet and consent form that you can consider before deciding whether you want to take part in the usability testing activity.

# Will I be identifiable by being involved in this study?

The researchers will know your identity, however all information provided will be treated with the strictest confidentiality and no identifying information (e.g., demographic data) will be published or included in any presentations/publications about the research project.

# What benefit will I gain from being involved in this study?

If you decide to take part in this study, it will help us explore the app related needs of Australian care workers in the context of palliative and end of life care; develop and evaluate a co-designed care worker app in the Australian aged care setting. While we intend that this research furthers knowledge in the area of health technology implementation in the aged care sector in the future, it may not be of direct benefit to you.

# Are there any risks or discomforts if I am involved?

The risk associated with participation in this study is very low. There may be a level of inconvenience associated with allocating the time to take part in an interview. Please be reminded that participation in this study is voluntary and you are free to withdraw at any time without consequence. To minimise this inconvenience we will schedule the interview date/time as per your convenience. Further, the interview will be conducted virtually (Telephone/Online), minimising the inconveniences related to travelling to a venue for the interview.

However, if for any reason you feel emotional discomfort as a result of participation, you can contact free telephone counselling services such as Beyond Blue (1300 22 46 36) or Lifeline (13 11 14). If you have any concerns regarding anticipated or actual risks or discomforts, please raise them with the research team.

# **Recognition for Contribution**

If you choose to participate in the interview, we will offer you a \$25 gift voucher, in recognition for your time, effort and contribution to the study. The gift voucher will be emailed/posted to you after the interview session.

# **Data Storage**

Data collected from you will be securely stored in password protected Flinders University server for at least 5-years after the end of the study. Only members of the research team and the ELDAC external evaluators will have access to this data. After the 5-year period any identifying information will be destroyed including data linking codes.

# How do I agree to participate?

If you would like to participate in in this study (interview), simply sign the consent form below and return it to the study coordinator <u>Dr Priyanka Vandersman</u>. If you do not wish to be involved, please disregard this invitation. Please note that even if you agree to participate, you are free to withdraw your participation at any time by just letting the research team know (email and telephone details provided below).

# How will I receive feedback?

The findings of this study will be shared on the ELDAC website (www.eldac.com.au) upon study completion. If you would like further information concerning this project or if you have any problems which may be related to your participation in the project, you can contact Dr Priyanka Vandersman on (08) 8201-3234 or priyanka.vandersman@flinders.edu.au.

# Thank you for taking the time to read this Information Sheet and we hope that you will accept our invitation to be involved.

This research project has been approved by the Flinders University Human Research Ethics Committee (Flinders HREC) (Project number **2907)**. If you have a query about the ethics approval, or complaint about the study, please contact the Executive Officer of the Committee by telephone on +61 8 8201 2543 or email: human.researchethics@flinders.edu.au



# CONSENT FORM FOR PARTICIPATION IN AN INTERVIEW

# Development and Evaluation of an Aged Care Worker App: The Care Worker App Project (Study 1)

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being over the age of 18 years hereby consent to participate as requested in an *interview* for the abovementioned study.

- 1. I have read the Participant Information Sheet provided.
- 2. Details of what the study involves, and any potential risks, have been explained to my satisfaction.
- 3. I confirm that I can speak and read English.
- 4. I agree to audio recording of my information and *interview* participation.
- 5. I am aware that I should retain a copy of the Information Sheet and Consent Form for future reference.
- 6. I understand that:
  - I may not directly benefit from taking part in this research.
  - I am free to withdraw my participation without the need for any explanation.
  - If I choose to withdraw during an *interview*, I can ask that the audio recording to be stopped.
  - No identifying information will be published, and my participation will be anonymous and confidential.
- 7. I understand that only the researchers on this project, and the ELDAC external evaluators, will have access to my research data and raw results; unless I explicitly provide consent for it to be shared with other parties. If the need to seek my consent to share my research data with other parties does arise, I will be contacted by the researchers via email.

#### App testing exercise

When the careworker app is developed, I would like to take part in the app's usability testing activity

Yes 🗆 🛛 No 🗆

If you selected 'Yes', please provide your email address below, so the study team can email you with relevant information when the app is ready for testing.

Email address: .....

I certify I have read and understood this form and consent to participate in the interview as explained on the Information Sheet.

Participant's signature...... Date ......

Investigator - I certify I have explained the study to the volunteer and consider that she/he understands what is involved and freely consents to participation.

Researcher's	s name
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Researcher's signature...... Date ......

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