Participant Consent Form – (Health Care Providers)

You are invited to participate in a research study entitled: *Living with Chronic Back Pain: A patient-led investigation of health care access challenges for back pain care across the rural-urban continuum in Saskatchewan*

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Purpose and Objective of the Research:

The purpose of this study is to apply experiences of rural, urban and remote dwellers with chronic low back pain (CBP) and the healthcare providers who serve them, to inform and develop a deeper understanding of health care access barriers and facilitators in Saskatchewan.

Procedures:

- Your participation in this study will include an interview with one of our researchers with questions focused on your experience providing care for patients with low back pain. You will also be asked to complete a brief questionnaire on your practice history and demographic information.
- The questionnaire will be completed online via a secure personal link that will be e-mailed to you using REDcap software. For more information on the security and privacy of REDcap, please visit the following link: https://projectredcap.org/software/ If you prefer to complete the questionnaire on paper, the questionnaire can be provided to you as a hardcopy. Alternatively, you can complete the questionnaire over the phone, if needed.

- The interviewer(s) will ask for your consent for audio recording of the interview. The audio recording helps us keep an accurate record of what you said. We will not use the recording for any other purpose. You may ask to have the recording device turned off at any time, without giving a reason. You will provide consent for audio recording at the bottom of this form.
- Interviews will take place in person, or over the phone or video conference, depending on your preference as the participant. In person interviews will take place at the University of Saskatchewan, CCHSA, or at the provider's practice location.
- Interviews are estimated to take approximately 30 minutes to one hour.
- Interviews will take place using Zoom (pro version). The privacy policy for Zoom can be found here: https://zoom.us/privacy
- After your interview, and prior to the data being included in the final report, you will be given the opportunity to review the transcript of your interview, and to add, alter, or delete information from the transcript as you see fit. You will be given one week to provide changes to the transcript, otherwise it will be used in the form that it was sent to you. A transcript release form will be provided.
- Recordings will be sent to the Social Sciences Research Laboratory (SSRL) at the University of Saskatchewan for transcription and analysis. Recordings will only be identified by first name and an ID number to maintain confidentiality.
- Please feel free to ask any questions regarding the procedures and goals of the study or your role.

Funded by:

- This study has been funded by the Saskatchewan Center for Patient Oriented Research, the College of Medicine, and the Canadian Institutes of Health Research (CIHR). There are no conflicts of interest to be declared.

Potential Risks:

- There are no anticipated risks to participating in this study as a health care provider.

Potential Benefits:

- There will be no direct personal benefits for participating. However, we anticipate impacts on future patient-oriented research and patient-centered care by sharing the findings of this research.

Compensation :

- Your participation is voluntary. There is no compensation for your participation in this research.

Confidentiality:

- The information we collect in this study will be shared through community and stakeholder presentations, academic conferences, and peer-reviewed publications.

- In all publications or presentations, your identity will be kept confidential. Data will be presented in an aggregated or summarized form. Direct quotations may be reported from the interview, but you will be given a pseudonym, and all identifying information will be removed from the report.
- By signing this consent form, you are granting your permission to be audio recorded.

Storage of Data:

- Paper copies of data (questionnaires and consent forms) will be stored in a locked cabinet, in a locked office at the University of Saskatchewan. Electronic data will be stored on a password-protected computer during data collection, and immediately transferred to a secure online data storage platform at the University of Saskatchewan.
- Data will be stored for the minimum required storage period of five years post-publication. The master-list that connects your name to your participant identification code will be retained for a 6 month period. This list will be stored separate from all other data in a secure electronic folder. It will be permanently deleted after a 6-month period.
- Once the data are no longer required and following the required storage period, the data will be destroyed beyond recovery.
- Identifying information, (e.g., Consent Forms) will be stored separately from the data collected.

Right to Withdraw:

- Your participation is voluntary and you can choose to answer only those questions that you are comfortable with. You may withdraw from the research project for any reason, at any time without explanation or penalty of any sort.
- Should you wish to withdraw, please contact our research team using the contact information provided, and your data will be deleted from the research project and destroyed.
- Your right to withdraw data from the study will apply until one month following your interview. After this, it is possible that some form of research dissemination will have already occurred and it may not be possible to withdraw your data.

Follow up:

- We will share findings from the study will all participants through e-mail or mail (as per your preference.
- Research findings will also be posted on the CCHSA website: https://cchsa-ccssma.usask.ca/research.php

Questions or Concerns:

- Contact the researcher(s) using the information at the top of page 1.
- This research project has been approved on ethical grounds by the University of Saskatchewan Behavioural Research Ethics Board. Any questions regarding your rights as a participant may be addressed to that committee through the Research Ethics

Office: ethics.office@usask.ca; 306-966-2975; out of town participants may call toll free 1-888-966-2975.

Preferred method of receiving documents (research findings, copy of signed consent form):

E-mail: Please provide your e-mail address :_____
OR
Mail: Please provide your mailing address : _____

Preferred method of providing consent :

- ☐ **Signed Consent**
- ☐ **Oral Consent**

Signed Consent:

Your signature below indicates that you have read and understand the description provided. I have had an opportunity to ask questions and my questions have been answered. I consent to participate in the research project, including being audio recorded. A copy of this consent form has been given to me for my records.

_____	_____	_____
Name of Participant	*Signature*	*Date*

_____	_____
Researcher's Signature	*Date*

A copy of this consent will be left with you or sent to you via email or mail (as you have indicated your preference above), and a copy will be taken by the researcher.

_____

To be completed by the researcher(s):

Oral Consent:

- For participants who are taking part remotely (ie – via telephone or videoconference) or who do not feel comfortable providing a signature, consent will be obtained orally, and the following section will be completed by our researcher.

I read and explained this consent form to the participant before receiving the participant's consent, and the participant had knowledge of its contents and appeared to understand it.

_____	_____	_____
Name of Participant	*Researcher's Signature*	*Date*