Timmins and District Hospital
700 Ross Avenue East Timmins, Ontario P4N 8P2
ethics@tadh.com

Instructions;

- **All sections of the application must be completed for consideration**
- **Research must be compliant with:**
  The Tri-council Policy Statement
  The Ontario Personal Health Information Protection Act (2004)
  Any other relevant regulations or guidelines

Section 1: General Information

***1.1** Title of Research Investigation:* Click or tap here to enter text.

***1.2** Proposed Commencement date:* Click or tap to enter a date.

***1.3** Principal Investigator (PI) at this site:*

Name: Click or tap here to enter text.

Email: Click or tap here to enter text.

***1.4** Co-Investigator(s) name and email:* Click or tap here to enter text.

***1.5** On-Site Research Assistant(s) name and email:* Click or tap here to enter text.

Section 2: Funding

***2.1** Status of Funding:* Click or tap here to enter text.

***2.2** Amount of Funding:* Click or tap here to enter text.

***2.3** Name of Research Sponsor/Funding Agency:* Click or tap here to enter text.

***2.4** Is there a contract with the sponsor/funding agency that limits publication rights of the investigator(S)?* Click or tap here to enter text.

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2.5 *How will the funding be dispersed?* Click or tap here to enter text.

Section 3: Investigation

3.1Please provide a brief summary of the proposed research and purpose of the investigation

Click or tap here to enter text.

3.2 Specify the nature of the study**:**

☐Chart Review
☐Retrospective
☐Prospective
☐Clinical Research Click or tap here to enter text.
☐Qualitative Click or tap here to enter text.
☐ICES Institute for Clinical Evaluative Sciences data
☐Sub Study, Indicate Project/related study Click or tap here to enter text.

Section 4: Potential Risks/Benefits of the Investigation

4.1 Are there any novel procedures involved in the investigation?

Click or tap here to enter text.

4.2 List the potential benefits to the participant(s), if any
List the potential benefits to society and the research community, if any

Click or tap here to enter text.

4.3 Are research participants exposed to any possibility of physical or psychosocial risk or discomfort? If yes, describe how subjects are exposed, the methods to be used to protect subjects, and what will be done to limit risk or discomfort.

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4.4 Are research participants placed in any additional risk/harm because of the study? If yes, what medical treatments are available should injury occur and what do the treatments consist of?

Click or tap here to enter text.

4.5 Will research participants be compensated for their participation in the investigation and any expenses incurred? If yes, please indicate how; Click or tap here to enter text.

4.6 What are the number of participants you plan to enroll or records you plan to review?

Click or tap here to enter text.

4.7 Based on the description in the research summary, are there any age, ethnicity, language, gender or race-related inclusion or exclusion criteria?

Click or tap here to enter text.

Section 5: Obtaining Consent

5.1 What is the relationship between the Investigator(s) and the participant(s)?

Click or tap here to enter text.

5.2 Does any aspect of this research project present a conflict of interest for the Principal Investigator or Co-Investigator(s)?

Click or tap here to enter text.

5.3 How will participants be recruited?

Click or tap here to enter text.

NOTE: Attach your recruitment letter if using

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5.4 How will participants' voluntary consent be obtained and documented? Specify any changes to the consent form or process for special populations.

Click or tap here to enter text.

5.5 What process is followed for participants who wish to withdraw at any point during or after the study?

Click or tap here to enter text.

5.6 Does this research involve Indigenous Peoples of Canada, including First Nations, Inuit, and Metis peoples?

The framework for ethical conduct of research involving Indigenous Peoples, (ethics.gc.ca – TCPS 2 (2022) Chapter 9) and Ownership, control, access, possession (OCAP, fnigc.ca) will serve as guidance for researchers collaborating with Indigenous Peoples communities respecting their cultural traditions, customs, and codes of practice.

Section 6: Data Management/Privacy/Confidentiality

6.1 Management

☐Encrypted Data

☐Master list linking data with identifiers stored separately from data

☐All identifiers are removed once data is collected/verified

☐Records will be stored in a locked cabinet in a secure location

☐Access to records and data is limited to authorized persons

☐Data will be stored on a hospital or other institutional network drive that has firewalls in place

☐The First Nations Principles of OCAP – Ownership, Control, Access, Possession
www.fnigc.ca

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6.2 How long will data be stored?

Click or tap here to enter text.

6.3 Indicate the methods used to destroy the data:

☐Paper records will be disposed in confidential bins for cross cut shredding

☐Electronic records destroyed by contacting TADH IT help desk

☐Old CDs, DVDs, videos, USB keys, external hard drives and other technologies destroyed by degaussing

☐PHIPPA/OCAP compliant storage of data not destroyed

6.4 Provide details about the planned dissemination of research results (i.e. publications, posters, presentations, reports, intellectual property etc.).

Research on Indigenous Peoples of Canada - community representatives engaged in the collaborative research will review data and research findings before the completion of the final report. (OCAP)

Click or tap here to enter text.

Section 7: Programs required for this research – check all required and obtain signatures of the directors prior to submission.

☐Hospice
☐Acute Medical
☐Oncology
☐Maternity
☐Pediatrics
☐Surgical
☐CCU
☐Emergency Department

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☐Mental Health
☐Rehab/Complex Continuing Care
☐Human Resources
☐IT
☐Health Records
☐Medical Imaging
☐Pharmacy
☐Laboratory
☐Medical Staff Peer Review
☐Addictions program
☐Integrated Stroke Unit
☐Dialysis
☐Other Click or tap here to enter text.

Onsite principal investigator signature: Click or tap here to enter text.

Onsite program director signature: Click or tap here to enter text.