**PARTICIPANT INFORMATION SHEET AND CONSENT FORM**

**Title:** Harnessing the power of co-design to develop a website and improve health self-efficacy after stroke after stroke

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| **Chief Investigator** | **Co-investigators** |
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**Description of the study**

We have co-designed a website to help improve health self-efficacy (feeling confidence in your abilities) after stroke. Stroke survivors will be invited to take part in one online “take charge” session (60 minutes) to discuss what matters most to them. After this session, they will have access to the co-designed website for 4 weeks. We will measure self-efficacy, health related quality of life and participation before and after the 4 weeks.

We would like to test the website on different groups of survivors to see who the solution looks likely to help. This will guide future research.

**Purpose of the study**

This project aims to find out which groups of survivors of stroke and carers are likely to benefit from a website to enhance self-efficacy (their confidence in their ability to look after their health and wellbeing).

**Benefits of the study**

**Participant involvement and potential risks**

If you agree to participate in the research study, you will be asked to complete 4 questionnaires (anticipated time requirements 20-30 minutes). You will then participate in one online 30–80-minute *Take Charge* session to discuss your goals via Zoom. You will have access to use the website for four weeks.

At the end of the 4-week period and again at 12 weeks, you will be asked to complete 4 questionnaires (anticipated time requirements 20-30 minutes) and participate in an online interview for 30 minutes about your experience (at 4 weeks only). The interview will be conducted over Zoom and will be video recorded. Participation is entirely voluntary.

The researchers do not expect the questions to cause any harm or discomfort to you. There is a risk that some information you learn through the website might cause distress. If you experience feelings of distress because of participation in this study, please let the research team know immediately. You can also contact the following services for support:

* Lifeline – 13 11 14, [www.lifeline.org.au](http://www.lifeline.org.au)
* Beyond Blue – 1300 22 4636, [www.beyondblue.org.au](http://www.beyondblue.org.au)

**Withdrawal Rights**

You may decline to take part in this research study. If you decide to take part and later change your mind, you may withdraw at any time without providing an explanation. To withdraw, please contact the Chief Investigator or you may just refuse to answer questions or leave the session or interview. You may choose whether any data collected up to the point of your withdrawal is securely destroyed or is included in the study.

**Confidentiality and Privacy**

Only researchers listed on this form have access to the individual information provided by you. Privacy and confidentiality will be always assured. The research outcomes may be presented at conferences, written up for publication or used for other research purposes as described in this information form. However, the privacy and confidentiality of individuals will be always protected. You will not be named, and your individual information will not be identifiable in any research products without your explicit consent.

No data, including identifiable, non-identifiable and de-identified datasets, will be shared, or used in future research projects without your explicit consent.

**Data Storage**

The information collected may be stored securely on a password protected computer and/or Flinders University server throughout the study. Any identifiable data will be de-identified for data storage purposes unless indicated otherwise. All data will be securely transferred to and stored at Flinders University for five years after publication of the results. Following the required data storage period, all data will be securely destroyed according to university protocols.

**Recognition of Contribution / Time / Travel costs**  
There are no requirements to travel to participate in the research (Take charge sessions, website access, survey and interviews will be conducted online). If you would like to participate, in recognition of your contribution and participation time, you will be provided with a $50 voucher. This voucher will be sent to you once you have completed the interview at the end of the study period.

**How will I receive feedback?**

On project completion, a short summary of the outcomes will be provided to all participants via email.

**Ethics Committee Approval**

The project has been approved by Flinders University’s Human Research Ethics Committee (5886).

**Queries and Concerns**

Queries or concerns regarding the research can be directed to the research team. If you have any complaints or reservations about the ethical conduct of this study, you may contact the Flinders University’s Research Ethics & Compliance Office team via telephone 08 8201 2543 or email [human.researchethics@flinders.edu.au](mailto:human.researchethics@flinders.edu.au).

Thank you for taking the time to read this information sheet which is yours to keep. If you accept our invitation to be involved, please sign the enclosed Consent Form.

**CONSENT FORM**

**Consent Statement**

I have read and understood the information about the research, and I understand I am being asked to provide informed consent to participate in this research study. I understand that I can contact the research team if I have further questions about this research study.

I am not aware of any condition that would prevent my participation, and I agree to participate in this project.

I understand that I am free to withdraw at any time during the study.

I understand that I can contact Flinders University’s Research Ethics & Compliance Office if I have any complaints or reservations about the ethical conduct of this study.

I understand that my involvement is confidential, and that the information collected may be published. I understand that I will not be identified in any research products.

I further consent to:

completing a questionnaire

having my information video recorded

being contacted about other research projects

**Signed:**

**Name:**

**Date:**