**ETHICAL CLEARANCE FORM FOR RESEARCH**

**Topic registration form**

**Any research must be conducted ethically in order for research to result in benefit and minimise risk of harm.**

**A researcher is not covered by B-TIC’s insurance unless obtained special approval otherwise.**

Every research is subject to regulation of “B-TIC research policy”

“Principal Researcher” is the individual who undertakes the research activity.

Ethical approval is not required for routine studies, performance reviews, quality assurance studies, testing within normal educational requirements, and literary or artistic criticism.

**This form must be completed and Submitted on the LMS**

**This form should be approved prior to undertaking any research activity**

**Please read the B-TIC “Research Ethics Policy” before completing ALL sections of the form.**

**SECTION A: About Researcher**

|  |  |
| --- | --- |
| Full Name of the Research |  |
| Student Number (If Applied) |  |
| E-mail address |  |
| Contact Number |  |
| Course |  |
| Module Name |  |
| Tick all boxes that apply: |
| Undergraduate Student |  | Postgraduate Student |  | Member of Staff |   |
| Institute / Centre |  |
| Campus: |  |
| Supervisor |  |
|  |  |

**SECTION B: Details of Research Activity**

|  |  |
| --- | --- |
| Indicative title: |  |
| Proposed start date: |  | Proposed end date: |  |
| **Introduction to the Research (maximum 300 words per section)****Ensure that you write for a Non-Specialist Audience when outlining your response to the points below:*** *Purpose of Research Activity*
* *Proposed Research Question*
* *Aims of Research Activity*
* *Objectives of Research Activity*

Demonstrate, briefly, how **Existing Research** has informed the proposed activity and explain* *What the research activity will add to the body of knowledge*
* *How it addresses an area of importance.*
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| **Purpose of Research Activity** |
|  |
| **Research Question** |
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| **Aims of Research Activity** |
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| **Objectives of Research Activity** |
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| **Proposed Research methods (maximum 600 words)** |
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| **Location of research activity**Identify all locations where research activity will take place. |
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| **Research activity outside of the UK**If research activity will take place overseas, you are responsible for ensuring that local ethical considerations are complied with and that the relevant permissions are sought.  |
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| Are you using any documents which are **NOT** publicly available in public domain? | **NO** |   |
| **YES** |  |
| If Yes, please provide details here of how you will gain access to: |
|  |
| Is this access in compliance with the current data protection law of England and Wales? (Explain) |
|  |
| Is the access in compliance with the current data protection law of the country in question? (Explain) |
|  |

**SECTION C: Scope of Research Activity**

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| **Will the research activity include:** | **YES** | **NO** |
| Use of a questionnaire or similar research instrument? |  |  |
| Use of interviews? |  |  |
| Use of focus groups? |  |  |
| Use of participant diaries? |  |  |
| Use of video or audio recording? |  |  |
| Use of computer-generated log files? |  |  |
| Participant observation with their knowledge? |  |  |
| Participant observation without their knowledge? |  |  |
| Access to personal or confidential information without the participants’ specific consent? |  |  |
| Administration of any questions, test stimuli, presentation that may be experienced as physically, mentally or emotionally harmful / offensive? |  |  |
| Performance of any acts which may cause embarrassment or affect self-esteem? |  |  |
| Investigation of participants involved in illegal activities? |  |  |
| Use of procedures that involve deception? |  |  |
| Administration of any substance, agent or placebo? |  |  |
| Working with live vertebrate animals? |  |  |
| Procedures that may have a negative impact on the environment? |  |  |
| Other primary data collection methods. Please indicate the type of data collection method(s) below. |  |  |
| Details of any other primary data collection method: |

The research activity is ethically less risky if you have answered NO to every question thus this research **may** be exempted from ethical clearance. However If you have answered YES to any question, then no research activity should be undertaken until full ethical clearance has been obtained.

**SECTION D: Intended Participants**

This applies If there are participants in the research only.

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| **Who are the intended participants:** | **YES** | **NO** |
| Students or staff at the University? |  |   |
| Adults (over the age of 18 and competent to give consent)? |   |  |
| Vulnerable adults? |  |   |
| Children and Young People under the age of 18?( Consent from Parent, Carer or Guardian will be required) |  |   |
| Prisoners? |  |   |
| Young offenders? |  |   |
| Those who could be considered to have a particularly dependent relationship with the investigator or a gatekeeper? |  |   |
| People engaged in illegal activities? |  |   |
| Others. Please indicate the participants below, and specifically any group who may be unable to give consent. |  |   |
| Details of any other participant groups: |

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| **Participant numbers and sources** |
| How many participants are expected? |  |
| Who will the participants be? |  |
| How will you identify the participants? |  |
| How will they be recruited? |  |

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| **Information for participants:** | **YES** | **NO** | **N/A** |
| Will you describe the main research procedures to participants in advance, so that they are informed about what to expect? |   |  |  |
| Will you tell participants that their participation is voluntary? |   |  |  |
| Will you obtain written consent for participation? |   |  |  |
| Will you explain to participants that refusal to participate in the research will not affect their treatment or education (if relevant)? |   |  |  |
| If the research is observational, will you ask participants for their consent to being observed? |   |  |  |
| Will you tell participants that they may withdraw from the research at any time and for any reason? |   |  |  |
| With questionnaires, will you give participants the option of omitting questions they do not want to answer? |   |  |  |
| Will you tell participants that their data will be treated with full confidentiality and that, if published, it will not be identifiable as theirs? |   |  |  |
| Will you debrief participants at the end of their participation, in a way appropriate to the type of research undertaken? |   |  |  |
| If NO to any of above questions, please give an explanation  |
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| **Information for participants:** | **YES** | **NO** | **N/A** |
| Will participants be paid? |  |   |  |
| Is specialist electrical or other equipment to be used with participants? |  |   |  |
| Are there any financial or other interests to the investigator or University arising from this study? |  |   |  |
| Will the research activity involve deliberately misleading participants in any way, or the partial or full concealment of the specific study aims? |  |   |  |
| If YES to any question, please provide full details  |
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**SECTION E: Anticipated Risks**

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| Outline any anticipated risks that may adversely affect any of the participants, the researchers and/or B-TIC, and the steps that will be taken to address them.  |
| Full risk assessment completed and appended?  | Yes  |  |
| No |   |
| **Risks to participants**For example: sector-specific health & safety, emotional distress, financial disclosure, physical harm, transfer of personal data, sensitive organisational information |
| Risk to participants:N/A*(this box should expand as you type)* | *How you will mitigate the risk to participants:*N/A*(this box should expand as you type)* |
| If research activity may include sensitive, embarrassing or upsetting topics (e.g. sexual activity, drug use) or issues likely to disclose information requiring further action (e.g. criminal activity), give details of the procedures to deal with these issues, including any support/advice (e.g. helpline numbers) to be offered to participants. Note that where applicable, consent procedures should make it clear that if something potentially or actually illegal is discovered in the course of a project, it may need to be disclosed to the proper authorities |
|  |
| **Risks to the investigator**For example: personal health &safety, physical harm, emotional distress, risk of accusation of harm/impropriety, conflict of interest |
| Risk to the investigator: | *How you will mitigate the risk to the investigator:* |
| **B-TIC /institutional risks**For example: adverse publicity, financial loss, data protection |
| Risk to the University: | *How you will mitigate the risk to the University:* |
| **Environmental risks**For example: accidental spillage of pollutants, damage to local ecosystems |
| Risk to the environment: | *How you will mitigate the risk to environment:* |

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| **Disclosure and Barring Service** |
| If the research activity involves children or vulnerable adults, a Disclosure and Barring Service (DBS) certificate must be obtained before any contact with such participants. | **YES** | **NO** | **N/A** |
| Does your research require you to hold a current DBS Certificate? |  |  |   |
| If YES, please give the certificate number. If the certificate number is not available please write “Pending”; in this case any ethical approval will be subject to providing the appropriate certificate number. |  |

**SECTION F: Feedback, Consent and Confidentiality**

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| **Feedback**What de-briefing and feedback will be provided to participants, how will this be done and when?  |
| Before giving the questionnaire, will explained to them about the security of data which they provided and feedback will given via email as well as. |
| **Informed consent**Describe the arrangements to inform potential participants, before providing consent, of what is involved in participating. Describe the arrangements for participants to provide full consent before data collection begins. If gaining consent in this way is inappropriate, explain how consent will be obtained and recorded in accordance with prevailing data protection legislation. |
| Before collect the data, will explained and informed to the participants that, this research is for educational purposes only and this data will not be used for any other purpose and that the data provided is of the utmost security.  |
| **Confidentiality / Anonymity** Set out how anonymity of participants and confidentiality will be ensured in any outputs. If anonymity is not being offered, explain why this is the case.  |
| Questionnaire used to collect the data, will be use only for the analysis the data only and it’s confirmed that the personal data such as name, age & gender will not be mentioned anywhere in this research and no one will recognized or understand who you are. That means all the data is anonymous and strictly confidential.  |

**SECTION G: Data Protection and Storage**

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| Does the research activity involve personal data (as defined by the General Data Protection Regulation 2016 “GDPR” and the Data Protection Act 2018 “DPA”)? | **YES** | **NO** |
| ***“Personal data”****means any information relating to an identified or identifiable natural person (‘data subject’). An identifiable natural person is one who can be identified, directly or indirectly, in particular by reference to an identifier such as a name, an identification number, location data, an online identifier or to one or more factors specific to the physical, physiological, genetic, mental, economic, cultural or social identity of that natural person. Any video or audio recordings of participants is considered to be personal data.* |  |  |
| If YES, provide a description of the data and explain why this data needs to be collected: |
|  |
| Does it involve special category data (as defined by the GDPR)? | **YES** | **NO** |
| ***“Special category data”****means sensitive personal data consisting of information as to the data subjects’ –**(a) racial or ethnic origin,**(b) political opinions,**(c ) religious beliefs or other beliefs of a similar nature,**(d) membership of a trade union (within the meaning of the Trade Union and Labour Relations (Consolidation) Act 1992),**(e) physical or mental health or condition,**(f) sexual life,**(g) genetics,**(h) biometric data (as used for ID purposes),* |  |  |
| If YES, provide a description of the special category data and explain why this data needs to be collected: |
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| **Do you store research data or any sensitive information related to research activity in any of the following ways?** | **YES** | **NO** |
| Manual files (i.e. in paper form)? |  |   |
| University computers? |  |   |
| Private company computers? |  |   |
| Home or other personal computers? |  |   |
| Laptop computers/ CDs/ Portable disk-drives/ memory sticks? |   |  |
| “Cloud” storage or websites? |  |   |
| Other – specify where do you store: |  |   |
| (Security, data confidentiality, backup, password protection, encryption, anonymity measurers) |
| To protect the security & confidentiality of all data, a separate folder will be created and password is used for it and folders will be hidden. Laptop also will be with password. If necessary, to complete the research data access will be given to Research supervisor only. |

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| **Data Protection** |
| Will the research activity involve any of the following activities: | **YES** | **NO** |
| Electronic transfer of data in any form? |   |  |
| Sharing of data with others at Centre | B-TIC outside of the immediate research team and supervisor? |   |   |
| Sharing of data with other organisations? |  |   |
| Export of data outside the UK or importing of data from outside the UK? |  |   |
| Use of personal addresses, postcodes, faxes, emails or telephone numbers? |  |   |
| Publication of data that might allow identification of individuals? |  |   |
| Use of data management system? |  |   |
| Data archiving? |  |   |
| If YES to any question, please provide full details, explaining how this will be conducted in accordance with the GDPR and Data Protection Act (2018) (and any international equivalents, where appropriate): |
|  |
| Who will have access to the data generated by the research activity: |
|  |
| Who will have control of, and act as custodian(s) for, data generated by the research activity: |
|  |
| Give details of data storage arrangements, including security measures in place to protect the data, where data will be stored, how long for, and in what form. Will data be archived – if so how and if not why not.  |
| The collected data will be stored securely until the final submission of the research in separate hidden folders using password on the personal laptop. |
| Please confirm that you have read and understood the B-TIC “Research Ethics Policy “ |  |  |
| Confirm that you are aware that you need to keep all data until after your research has completed or the end of your funding |  |  |

**SECTION H : Declaration**

**Checklist:** Please complete the checklist below to ensure that you have completed the form according to the guidelines and attached any required documentation:

|  |  |
| --- | --- |
| I have read the guidance notes supplied before completing the form. |  |
| I have completed **ALL RELEVANT** sections of the form in full. |  |
| I confirm that the research activity has received approval in principle |  |
| I have attached a copy of final/interim approval from external organisation (**where appropriate**) |  |
| I have attached a full risk assessment (where appropriate)*ONLY TICK IF YOU HAVE****ATTACHED A FULL RISK ASSESSMENT*** |  |
| I understand that it is my responsibility to ensure that the above named research activity will meet the University’s Research Ethics and Integrity Code of Practice |  |
| I understand that before commencing data collection all documents aimed at respondents (including information sheets, consent forms, questionnaires, interview schedules etc.) must be confirmed by the DoS / Supervisor, module tutor or Academic Director. |  |

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| The information which I have provided is correct and complete to the best of my knowledge. I have attempted to identify any risks and issues related to the research activity and acknowledge my obligations and the rights of the participants**.**In submitting this application I hereby confirm that I undertake to ensure that the above named research activity will meet the B-TIC “Research Ethics Policy” :  |
| **Signature of applicant:** |  | **Date:**  |
|  |