

Information statement and consent form

A national study of the Parent Engagement Resource (PER)

Centre for Community Child Health

HREC Project Number: 33002

Research Project Title: Identifying family factors that impact on child health and well-being: a

national study of the Parent Engagement Resource

Principal Researcher: Dr Tim Moore, Senior Research Fellow

Version Number: 8 Version Number: 23.04.2013

Thank you for taking the time to read this **Participant Information Statement and Consent Form**. We would like to invite you to participate in a research project that is explained below. This document is 7 pages long. Please make sure you have all the pages.

What is an information statement?

These pages tell you about the research project. It explains to you clearly and openly all the steps and procedures of the project. The information is to help you to decide whether or not you would like to take part in the research. Please read this Information Statement carefully.

Before you decide to take part or not, you can ask us any questions you have about the project. You may want to talk about the project with your supervisor or other colleagues. If you would like to take part in the research project, please sign the consent form at the end of this information statement. By signing the consent form you are telling us that you:

- understand what you have read
- had a chance to ask questions and received satisfactory answers
- consent to taking part in the project.

We will give you a copy of this information statement and consent form to keep.

What is the research project about?

The Royal Children's Hospital Centre for Community Child Health developed The Parent Engagement Resource (PER) for use by practitioners working across a range of early childhood settings providing services to families. The PER is intended to assist practitioners raise with parents a range of sensitive psychosocial issues and to identify those families who are experiencing issues that affect child development. It is expected that as a result of the engagement process, families will be assisted to resolve the issue or, where necessary, a





referral will be made. The PER is relatively simple and brief to use, comprising of deathier Fotore. succinct, child-centered questions that cover a range of psychosocial issues including: social support, finances, housing, employment, family physical health, parent mental health, parenting, child neglect, family relationships, alcohol and substance abuse, family violence, and child abuse.

The PER is designed to encourage the parent to share strengths and aspirations as well as concerns. It seeks to promote the positive aspects of parenting and family circumstances and to help parents clarify concerns and define the nature of their concerns.

The PER has been tested with Maternal and Child Health Nurses in Victoria and we are now undertaking a randomised control trial to learn how the PER may help other practitioners in different settings across Australia.

The purpose of this larger study is to test whether the PER increases the detection of psychosocial concerns held by families compared to usual practice. We will also investigate the acceptability of the PER to different practitioners and clients. We hope to conduct this research project across all 10 Communities for Children (CfC) sites around Australia. The study will involve the participation of practitioners and the families they work with.

Who is funding this research project?

This study has been funded by the Australian Government Department of Families, Housing, Community Services and Indigenous Affairs (FaHCSIA).

Why am I being asked to be in this research project?

We are asking because you are a practitioner within one of the 10 CfC sites who works closely with families with children aged 0-8 years. The Facilitating Partner at your CfC site received a description of key practitioner characteristics that were required for participants in this trial, and the Facilitating Partner identified you as someone with the necessary education, knowledge and skills to participate.

What does participation in this research involve?

Participation in this research will involve:

- Random assignment to either Group 1 (usual practice) or Group 2 (PER intervention). Sites
 will be allocated to Group 1 or Group 2 after practitioners have consented to take part in
 the study.
- Identifying suitable parents for the study. That is, parents or caregivers who have sufficient English skills to participate in phone interviews and appropriate level of maturity and capacity to decide to participate in the study. Parents or caregivers who have been mandated to attend an appointment with you will also be excluded.
- Completing an online survey on two occasions that will take about 20 minutes each time.

Group 1: Usual practice control group

- During the intervention phase, we will ask you to provide an information pack to all suitable families and to seek their permission for you to pass on their contact details to the research team. The research team will then contact families to:
 - explain the study in detail and answer any questions the parent may have, and consent families into the trial.
- The research team will notify you if a family agrees to participate in the trial at their next





visit. At this visit, we will ask you to continue your usual practice with the fathfiles and complete a brief consultation record (five minutes will be allocated to your visit to undertake this task). Therefore, an additional five minutes per client will be required for each client who participates in the study. We will organise with your manager that you are given an extra five minutes per appointment to complete the consultation record.

• We will ask you to forward the consultation record to us within one week of the parent's appointment with you.

Group 2: PER intervention group

- We will provide a two day workshop which will be scheduled in your local area with
 other participating practitioners in July, 2013. This free professional development includes
 training on using the PER and family partnership training from experienced practitioners and
 developers of the PER. You will need to complete approximately two hours of reading in
 preparation for the workshop.
- During the intervention phase (the following 6 months after training), we will ask you to provide an information pack to all suitable families and to seek their permission for you to pass on their contact details to the research team. The research team will then contact families to:
 - explain the study in detail, including the content of the PER questionnaire and additional appointment time required,
 - answer any questions the parent may have, and
 - consent families into the trial.
- The research team will notify you if a family agrees to participate in the trial at their next visit. We will ask you or your administrative support staff to contact the family to book an extended session where you will administer the PER in addition to your usual practice and to complete a brief consultation record. An additional 30 minutes will be required to administer the PER and complete the consultation record.
- We will organise with your practice manager that you are given an extra 30 minutes per appointment to administer the PER and complete the consultation record. The research team understand that the sensitive nature of the PER questions may be difficult to discuss in the presence of children. The research team will discuss this with families during the consent process. Therefore, parents may prefer that their child is not present for the administration of the PER. In this case, the person booking the PER appointment with the family will need to need to negotiate a time where the parent can arrange for supervision for their child or when the practitioner's workplace can provide a supervised activity for the child while the PER is administered.
- We will ask you to forward the consultation record to us within one week of the parent's appointment with you.
- We will invite you to provide feedback on using the PER via a one hour focus group with
 other practitioners to share your experiences of using the PER. The focus group will be
 audio-taped with your permission to ensure that we capture all of your comments. After the
 focus group we will make a full written transcription of the recording and delete any audio
 files.







What are my alternatives to taking part?

Participation in a research project is voluntary. You do not have to take part in this project if you do not want to.

You can change your mind and withdraw from the study at any time without giving a reason. If you withdraw from the study we will not be able to destroy your online survey information because it is anonymous.

Your decision will not affect your position in your organisation, and your job will not be altered by choosing not to participate.

What are the possible benefits for me and other people in the future?

We cannot promise you will get any direct benefit, however, if you are allocated to the PER group you may benefit from the PER training and support workshop.

The findings of the use of PER by different practitioners will be summarised in a report to FaHCSIA. We anticipate the major benefits will be for other families in the future if the PER is an acceptable and useful tool.

What are the possible risks, side-effects, discomforts and/or inconveniences?

The topics covered in the PER are sensitive and may raise some challenging issues for practitioners who work with high needs families. The nature of the PER may have implications for practitioners allocated to the intervention group (group 2) in the areas of mandatory reporting and supervision.

Mandatory reporting

The research team are aware that state laws and professional codes vary significantly in relation to a practitioner's duty of care to their clients. However, there is an expectation that all practitioners who agree to take part in the study will be prepared to notify appropriate services (including child protection) if parents disclose a high risk situation during a consultation. Practitioners are advised not to take part in the study if they feel this falls outside their scope of practice.

PER training will review the processes and relevant strategies practitioners might use should a safety concern arise as part of the PER interview. Practitioners would follow the PER algorithms, and inform the family what steps they are required to take before making a notification – an action of last resort. As part of the consent process, the research team will ensure that families are fully aware of practitioners' responsibilities, particularly in regards to child safety, before the family consent to the PER interview or taking part in the study.

Supervision and duty of care to the practitioner

Access to regular supervision with an experienced practitioner from similar professional background is an essential requirement for practitioners taking part in the PER study. While the psychosocial concerns discussed as part of the PER are areas in which practitioners have

been trained to deal with, the research team recognise that practitioners in the intervention group (group 2) may require additional supervision during the trial period, primarily to debrief about psychosocial issues that families raise during the administration of PER. Practitioners are advised not to participate if they believe that they cannot access appropriate supervision during the trial period.

We recognise that the practitioners' supervisors are not trained in PER, and therefore, supervision for matters directly related to the PER will be available from the research team. The research team will also be in regular contact with the practitioners during the trial period, to find out if they are having any challenges implementing the PER in practice.





Inconveniences

The main inconvenience is time to prepare for the workshop (if applicable), and complete the practitioner surveys. We will complete a Memorandum of Understanding (MOU) with your practice manager to state that you will:

- have access to appropriate supervision and professional support in addition to your usual organizational supervision process
- be given time-release to attend training and to implement the study.

What will be done to make sure my information is confidential?

Any information we collect for this research project that can identify you will be treated as confidential. We can disclose the information only with your permission, except as required by law.

All information will be stored securely in the Community Child Health research group at the Murdoch Childrens Research Institute.

The following people may access information collected as part of this research project:

- the research team involved with this project
- The Royal Children's Hospital Human Research Ethics Committee

The information will be re-identifiable. This means that we will remove your name and give the information a special code number. Only the research team can match your name to your code number, if it is necessary to do so. We will keep the information for 7 years. After this time, it will be destroyed.

In accordance with relevant Australian and/or Victorian privacy and other relevant laws, you have the right to access and correct the information we collect and store about you. Please contact us if you would like to access your information. When we write or talk about the results of this project, information will be provided in such a way that you cannot be identified.

Will I be informed of the results when the research project is finished?

We will send you a summary of findings following the completion of the study. Site-specific data collected as part of the project will also be shared with sites. A final report will be produced and made publicly available, pending approval from FaHCSIA.

If you would like more information about the project or if you need to speak to a member of the research team please contact:

Name: Ms Sarah Kearney
Contact telephone: 03 9936 6750
Email: perstudy@mcri.edu.au

Website: http://www.rch.org.au/ccch/per/

If you have any concerns and/or complaints about the project, the way it is being conducted or your rights as a research participant, and would like to speak to someone independent of the project, please contact: Director, Research Development & Ethics, The Royal Children's Hospital Melbourne on telephone: (03) 9345 5044.





CONSENT FORM

HREC Project Number:	33002				
Research Project Title:	Identifying family factors that impact on child health and well-being: a national study of the Parent Engagement Resource				
Version Number:	8	Version Date:	21.03.2013	}	
 I believe I understand the pur I voluntarily consent to take p I have had an opportunity to I understand that this project Research Ethics Committee a Conduct in Human Research 	pose, extent art in this res ask question has been ap nd will be co (2007).	sion listed above and I understand possible risks of my involutional possible risks of my involutional project. It is and I am satisfied with the corroved by The Royal Children parried out in line with the National programment and Corrowal possible programment.	vement in this project answers I have receiv on's Hospital Melbourr onal Statement on Eth	red. ne Human	
Participant Name		Participant Signature		Date	
Role/Profession:					
Practice Site and Address:					
Practice Manager Name and co	ntact:		_		
Usual Days/Hours of Work:					
Email address (personal or work):					
Phone number/s:					
Preferred contact method:		Email Phone	Post		
Declaration by researcher: I have believe that they understand the p	•		· ·		
Research Team Member Name		Research Team Member	· Signature	Date	



Note: All parties signing the Consent Form must date their own signature