 

IRAS ID: 294654

Centre Number:

Study Number:

Participant Identification Number for this trial:

**CONSENT FORM**

Title of Project: ELSA-1 Co-design and co-production work

Name of Researcher:

Please initial box

1. I confirm that I have read the information sheet May 2021 (version 1.0) for the above study. I have

had the opportunity to consider the information, ask questions and have had these answered

satisfactorily.

1. I understand that my participation is voluntary and that I am free to withdraw at any time  
   without giving any reason, without my medical care or legal rights being affected.
2. I understand that relevant sections of data collected during the study, may be

looked at by individuals from the University of Birmingham, from regulatory authorities or from the

NHS Trust, where it is relevant to my taking part in this research. I give permission for these

individuals to have access to my data.

4. I understand that the interview will be audio recorded and the recording will be stored by the

research team. I give permission for this.

5. I understand that my personal details including my name and contact details will be stored by the

researchers for this study and that my personal information will not be shared with anyone outside

of the study. I give permission for the research team to access and store my personal details for

the purpose of this study.

6. I understand that the information collected about me will be used to support other research

in the future, and may be shared anonymously with other researchers.

7. I agree to take part in the above study.

Name of Participant Date Signature

Name of Person Date Signature

taking consent

Please provide your contact email address and phone number (this will be used by the study team to make contact with you).

Email:

Phone number:

Thank you for completing this study consent form. The study team will be in touch with you, using the contact details provided above.