**The COACH Trial:** **Co**mp**a**ring **c**ochlear implants with **h**earing aids in adults with severe hearing loss

**Informed Consent Form - Interviews**

**Version 2.1 14Jan2022**

**Name of Principal Investigator**:

**IRAS Project ID: 297574**

**Participant Trial ID:**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | **Please initial box** | | | |
|  | | I confirm that I have read and understood the <Participant/Healthcare Staff> Information Sheet for Interviews, <current version number and date > for the COACH trial interviews. I have had the opportunity to consider the information, ask questions and have had these answered satisfactorily. | |  | | | |
|  | | I understand that the Nottingham Clinical Trials Unit and the trial research group will be provided with my personal details to contact me in order to carry out the interview. I give my permission for this information to be kept and for individuals from these groups to contact me. | |  | | | |
|  | | I understand that relevant sections of my data collected in the study may be looked at by authorised individuals from the University of Nottingham, the research group and regulatory authorities where it is relevant to my taking part in this study. I give permission for these individuals to have access to these records and to collect, store, analyse and publish information obtained from my participation in this study. I understand that my personal details will be kept confidential. | |  | | | |
|  | | I understand that my participation is voluntary and that I am free to withdraw at any time, without giving any reason, and without my medical care or legal rights being affected. I understand that should I withdraw then the information collected so far cannot be erased and that this information may still be used in the project analysis. | |  | | | |
|  | | I understand that anonymous direct quotes from the interview may be used in the study reports. | |  | | | |
|  | | 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. | |  | | | |
|  | | I agree to anonymised data being made available to researchers outside of the COACH Trial who secure the necessary approvals and that data may be used for purposes not related to this trial. | |  | | | |
|  | | I agree to take part in the above trial by taking part in the interview. | |  | | | |
|  | | | | | |  | |
|  | | | **Please initial either box** | | | | | |
|  | **Optional**  **(The below statement can be opted out of and will not affect your participation in the interview).** | | **Yes** | | | **No** | | |
|  | I confirm that I am willing to allow the interview to be audio recorded. | |  | | |  | | |

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Name of Participant Date Signature

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Name of person receiving consent Date Signature

*1 copy for participant, 1 for the University of Nottingham.*