

Pacific Coast University for Workplace Health Sciences

Informed Research Consent Form

Title of Research Project:	Health and Wellness Research Study Exploring Evidence Based Prevention Strategies Through Workplace Wellness Programs
Principle Researcher:	Nancy Sehn
Contact Details:	hwresearch27@gmail.com , (403) 651-6108
Research Supervisor:	Dr. Tyler Amell
Contact Details:	dr.tyler.amell@gmail.com
Hosting Institution:	Pacific Coast University for Workplace Health Sciences

Introduction:

You are being asked to participate in this research study if you so choose. The overall aim of the research is to explore and compare comprehensive wellness program offerings implemented amongst various organizations. The results from the study will benefit and serve to inform best practices and recommendations for organizations to consider when looking to implement a more comprehensive health and wellness program and to help assess the extent to which they have implemented evidence-based interventions or strategies at their worksites to improve the health and well-being of employees.

Participating in the study is completely voluntary and consent may be revoked at any time during the research process. A brief summary of the research methodology is presented below.

In order to decide whether or not you want to be a part of this research study, you should understand enough about any risks and benefits to make an informed judgment; this process is known as informed consent. This consent form gives information about the research study. If you need additional clarification, you can contact the principal researcher. Once you understand the study and its methodology, you must sign this form to indicate that you wish to participate.

Description of Study Methodology:

The research approach will be conducted including supportive literature reviews on evidence-based workplace health, and a quantitative, cross sectional, self-reported questionnaire- will be utilized and adapted based on The National Centre for Chronic Disease Prevention and Health Promotion (CDC) Worksite Health Score Card. This includes questions on many of the key evidence-based and best practice strategies and interventions that are part of a comprehensive workplace health approach that address the leading health conditions driving health care and productivity costs in workplace health & wellness. The CDC Worksite Health ScoreCard is a standardized tool designed to help organizations assess whether they have implemented evidence-based health promotion strategies to improve the health and well-being of their employees.

Objectives:

- 1.To examine existing workplace wellness programs, tools, and resources available to employee's health and well-being.
- 2.To assess workplace health promotion efforts supporting the health and well-being of employees.

The CDC survey contains 154 questions that assess how evidence-based health promotion strategies are implemented in the workplace. These strategies include health promoting counseling services, environmental supports, policies, health plan benefits, and other

workplace programs shown to be effective in preventing heart disease, stroke, and related health conditions.

The survey will take approximately 15 minutes to complete. The principal researcher will disseminate the findings of the survey to each participant including their overall scorecard pertaining to their organization. Additionally, a high-level summary report of findings will be posted on the CSPDM website. The summary report will highlight a brief overview of the survey results, data collection, and analysis methods; and identify opportunities for improvement for employers and practitioners.

The information you provide will be treated confidentially, including any personal identifiers. A password protected excel file will be created linking your name to a numeric code which will be utilized as the personal identifier in the analysis process. The excel file containing your information from the survey results will be kept on a USB stick for the purposes of privacy and security, and only the principal researcher will have access to it. The file will be destroyed upon completion of the research project in order to minimize risk of exposing any identifiable information. Confidentiality of information will be maintained to protect the privacy and trust of participants, and to the integrity of the research project.

The information you provide will be combined with other people's responses to produce summary and comparative results.

There are no major risks to taking part in the study. If at any time during the research, you wish to withdraw, you are entitled to do so.

You are free to decide not to take part in the study, and if you decide this, then there will be no negative consequences for you.

Please indicate whether you agree with the following statements.

	I Agree	I Disagree
The purpose of the research was explained to me		
The extent of my commitment was clearly explained to me		
I had the opportunity to ask questions and any questions were satisfactorily addressed		
I understand that participation, non-participation, or withdrawal from the study are voluntary and will have no adverse consequences for me		
I agree to audio recording, video recording, or photography, if relevant		
I understand that my personal information will be kept confidential and that all reports will present data which has been anonymized.		
I understand that my consent relates only to the use of the data as described to me and that I will be asked to consent if any additional use is to be made of the information collected		

I, the undersigned, hereby consent to participate as a subject in the above-described project conducted by Nancy Sehn, Principal Researcher, Bachelor of Disability Management, Pacific Coast University for Workplace Health Sciences.

I have received a copy of this consent form for my records. I understand that if I have any questions concerning this research, I can contact the principal researcher. If I have further queries concerning my rights in connection with the research, I can contact the PCU-WHS

Research Ethics Committee through PCU-WHS Instructional Designer: aaron.panych@pcu-whs.ca.

Any other queries can be directed to the principal researcher via the secure and encrypted email address: hwresearch27@gmail.com. This email address was created specifically for the purposes of this research project to provide a secure and private means for communication and correspondence between participants and will be deleted upon completion of the research project in order to protect your information, privacy and confidentiality.

After reading the entire consent form, if you have no further questions about giving consent, please sign where indicated below, and forward to: hwresearch27@gmail.com. **Alternatively, you can provide a written consent via the above email address.**

Signature of Participant: _____

Date: _____