

UnitingCare Queensland Human Research Ethics Committee

Research Report Form - Progress or Final



UCQ
HREC

The UnitingCare Queensland Human Research Ethics Committee (HREC) exists to meet the ethics approval needs of research undertaken in the service groups within UnitingCare Queensland (UnitingCare Community, Blue Care and UnitingCare Health) and Wesley Mission Brisbane.

The UnitingCare Queensland Human Research Ethics Committee (HREC) will undertake regular monitoring of all approved research projects. This monitoring will occur on a six-monthly basis in May and November each year.

SECTION ONE: PROJECT DETAILS

Title of project:

Research team:

Aim of project:

STATUS OF RESEARCH PROJECT:

In PROGRESS:
Anticipated completion date:

Completed:
Date COMPLETED:

Final Report attached:
If not, date when final report will be received:

Have you sent a copy of the Final Report to the Service Group where you did this research?

Blue Care: b.fox@bluecare.org.au

UCC: chez.leggattcook@uccommunity.org.au

PROGRESS & OUTCOMES TO DATE: (Please provide sufficient detail)
Please complete under the following headings:

1. **Research questions**

2. **Research Plan**

(Any amendments to the original plan)

3. **Research results (to date)**

4. **Outcomes of research (to date)**

5. **Implications for future policy/practice (to date)**

SECTION TWO: ETHICAL ISSUES

1. In the conduct of this project have there been any variations to the approved protocol/project in respect to:

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| a) Investigators | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| b) Duration of project | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| c) Research procedures
(such as design, sample size, recruitment, etc) | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |
| d) Participant feedback | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> |

2. Has the HREC been notified of these variations?

Yes

No

Please provide a list of each project variation and details of the reasons for variation, how these variations will impact your project, and how these variations have been managed.

3. Are any new variations to the approved protocol/project being proposed?

Yes

No

Please provide details of the proposed variations. These variations must be approved by the HREC.

4. Have there been any instances of participants encountering adverse effects or unexpected outcomes while participating in the research project?

Yes

No

If yes, please describe these adverse effects or unexpected outcomes.

What action has been taken in response to these adverse effects or unexpected outcomes?

5. Have there been any unforeseen incidents or complaints about the research project that might affect continued ethical acceptability of the project?

Yes

No

If yes, please describe these incidents or complaints.

What action has been taken in response to these incidents or complaints?

Other Comments:

Please comment on any other ethical matter you believe should be raised.

Declaration:

By returning this Project Form electronically, I certify that the information provided by me in this report is an accurate account of the conduct of the above-named research project.

Name: _____ (Chief Investigator)

Date: _____