



# Human Research Ethics Committee (HREC) – Consent Form (for Third Parties)

1. I give consent to \_\_\_\_\_ 's involvement in the following research project:

Title:	The Need for New Solutions? Establishing a Legal Framework for Supported Decision-Making to Empower Individuals with Impaired Decision-Making
Ethics Approval Number:	H-2024-090

2. I have read the attached Information Sheet and had the project, so far as it affects him/her, and the potential risks and burdens fully explained to my satisfaction by the research worker. I have had the opportunity to ask any questions I may have about the project and his/her participation. My consent is given freely.
3. I have been given the opportunity to have a member of my family or a friend present while the project was explained to me.
4. Although I understand the purpose of the research project, it has also been explained that involvement may not be of any benefit to him/her.
5. I agree for him/her to participate in the activities outlined in the Participant Information Sheet:
- a. Online Survey  Yes  No
- b. Focus Group Discussion  Yes  No
6. I acknowledge and understand that some or all of my views shared during research project may be used through way of manual notation but that any views provided will be de-identified to the greatest extent possible. I accept that the research team cannot, in all cases, guarantee complete anonymity given individuals and organisations may be identifiable based on the work they perform or where this work occurs
7. I understand that I am free to withdraw from the research project at any time prior to or during consultations. I also understand that I may, up until 14 days following the completion of my consultation with the research team (inclusive of the consultation day), request that any views or information provided not be included among the datasets.
8. I acknowledge that the de-identified data collected may be published in various forms, including SALRI's final report into the research project topic, journal articles, books, presentations, and the like. I understand that the data may also be utilised in future research projects by University of Adelaide researchers that are an extension of, or closely related to, the original project.



9. I understand that my information will only be disclosed according to the consent provided through this consent form, except where disclosure is required by law.
10. I am aware that I should keep a copy of this Consent Form, when completed, and the attached Participant Information Sheet.

**Third Party to Participant to complete:**

Name: \_\_\_\_\_ Signature: \_\_\_\_\_

Relationship to participant: \_\_\_\_\_ Date: \_\_\_\_\_

Name and age of participant: \_\_\_\_\_