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| **SCHOOL OF PSYCHOLOGY ETHICAL REVIEW: Self-Assessment form** |

Attach a completed version of this form to your worktribe ethics application, signed by all researchers. Your application will not be sent out for review without this form attached.

**Checklist: have you prepared all the necessary documents for submission?**

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|  | **yes** | **no** | **N/A** |
| **This form fully completed (including last page) and signed by all researchers(?)** |  |  |  |
| **Consent form / Consent page** |  |  |  |
| **Debrief form / Debrief page** |  |  |  |
| **Recruitment poster** |  |  |  |
| **Information sheet(s) / Information page(s)** |  |  |  |
| **SONA forms** |  |  |  |
| **Instructions for participants** |  |  |  |

**If you have ticked ‘no’ in any of the boxes, it is very likely that your application is not yet complete so you should not submit it until all the relevant documentation is prepared and all boxes are ticked as either ‘yes’ or ‘not applicable’ (N/A).**

**Please upload documents as PDFs where possible.**

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| **Part One** | | Yes | No | N/A |
| 1.1 | Will you describe the main experimental procedures to participants in advance, so that they are informed about what to expect? |  |  |  |
| 1.2 | Will you tell participants that their participation is voluntary and that they may withdraw from the research at any time and for any reason? |  |  |  |
| 1.3 | Will you obtain written consent for participation (this includes consent to be observed in observational studies)? |  |  |  |
| 1.4 | With questionnaires and interviews, will you give participants the option of omitting questions they do not want to answer? |  |  |  |
| 1.5 | Will you tell participants that their data will be treated with full confidentiality and that, if published, it will not be identifiable as theirs? |  |  |  |
| 1.6 | Are the data to be stored anonymously (i.e. the identity of the person IS NOT linked directly or indirectly with their data)? |  |  |  |
| 1.7 | Will you debrief participants at the end of their participation (i.e. give them a brief explanation of the study and an opportunity to ask questions)? |  |  |  |

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| If you have responded **No** to any of Part One please give an explanation here |
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| **Part Two** | | Yes | No | N/A |
| 2.1 | Does the research involve observational and/or involve any covert recording? |  |  |  |
| 2.2 | Will the research involve deliberately misleading participants (deception) in any way? |  |  |  |
| 2.3 | Is there any realistic risk of any participants experiencing either physical or psychological distress or discomfort? If **Yes,** give details on a separate sheet and state what you will tell them to do if they should experience any problems (e.g. who they can contact for help). |  |  |  |
| 2.4 | Is the nature of the research such that sensitive, personal, or contentious issues might be involved? |  |  |  |

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| If you have ticked **Yes** to any of Part Two you should normally **tick box B** below; if not, please give a full explanation in this box. |
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| **Part Three** | | | Yes | No | N/A |
| 3.1 | Do participants fall into any of the following special groups? If they do, please refer to BPS guidelines, and **tick box B** below.  **Note that you may also need to obtain satisfactory *Disclosure Scotland* or PVG clearance (or equivalent for overseas students).** | Will you be recruiting or conducting in-person research on premises outside the School of Psychology? (if yes, please include letter from the relevant authority indicating permission, where applicable) |  |  |  |
| People under 16 years of age |  |  |  |
| People with learning or communication difficulties |  |  |  |
| People who could be regarded as vulnerable or are unable to give their informed consent |  |  |  |
| Patients and hospital staff (NoSRES approval required) |  |  |  |
| People in custody |  |  |  |
| People engaged in illegal activities (see notes) |  |  |  |
| 3.2 | Does the project involve external funding or external collaboration where the funding body or external collaborative partner requires the University to provide evidence that the project has undergone ethical review? | |  |  |  |
|  | Specify funding body | |  | | |
| If you have ticked **Yes** to any of Part Two you should normally **tick box B**  below; if not, please give a full explanation in this box. | | | | |
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PLEASE TICK **EITHER** BOX A OR BOX B BELOW AND **PROVIDE THE REQUIRED** **DETAILS** IN SUPPORT OF YOUR APPLICATION THEN SIGN THE FORM.

**Please tick**

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| 1. I consider that this project has **no** significant ethical implications to be brought before the School Ethics Committee. |  |
| **Give a brief description of the experiment (approximately 200 words). Include study rationale and theoretical constructs as well as brief information about: participants (e.g. number, age, sex, recruitment method, group assignment), apparatus and materials (e.g. stimuli, name(s) or copy of questionnaire) and procedure (e.g. what will happen to participants, duration, unit allocation). If your experiment is internet-based, provide a link to the platform where it is hosted. Any exclusions must be scientifically justified. You must provide sufficient information for the reviewer(s) to understand the study and be able to assess it.** | |
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| 1. I consider that this project may or does have ethical implications that should be considered by the School Ethics Committee, and/or it will be carried out with children or other vulnerable populations. |  |
| **Please provide responses to the points listed below in a separate document.**   1. Project title. 2. Purpose of project and its academic rationale. 3. Brief description of methods and measurement procedure(s). 4. Participants: recruitment methods, number, age, gender, exclusion/inclusion criteria. 5. Recruitment, information, consent arrangements, debriefing. 6. A clear and concise statement of the ethical considerations raised by the project and how you intend to deal with them. | |

Application Type:

**A.** Low risk: I consider that this project has NO significant ethical implications to be brought before the School Ethics Committee

**B.** Medium or High risk: I consider that this project may or does have ethical implications that should be considered by the School Ethics Committee.

By signing the form the researchers below are agreeing to follow the protocol described in this document and the BPS Guidelines for ethical practices in psychological research.

Signed …………………………………… Print Name ……………………………… Date ……………

*(UG or PG Student(s), if applicable; duplicate entries as necessary)*

*I have read and confirm that this proposal is suitable for ethical review.*

Signed …………………………………… Print Name ……………………………… Date ……………

*(Lead Researcher(s) or Supervisor; duplicate entries as necessary)*

*I have read and confirm that this proposal is suitable for ethical review.*

Signed …………………………………… Print Name ……………………………… Date ……………

*(Permanent member of staff associated with project)*