

Measures of Effectiveness of the Home Visitation Visits by Members of the Society of Saint Vincent DePaul on the Financial, Spiritual, and Emotional Health of Those in Need

Informed Consent

You are invited to participate in a research study about the effectiveness of the interaction you requested from the Society of Saint Vincent DePaul, Saint Maria Goretti Conference, in Hatfield, PA (the Society). There are two goals of this research study: first, to determine if those assisted by the Society perceive that the services provided were helpful; and second, to determine if there are any long-term benefits of the services.

Many individuals in the Montgomery and Bucks County areas contact the Society for assistance. We have been helping families for almost six years. What this study will hopefully tell us is if the individuals we assist feel we that our interaction has provided an improvement in the quality of their lives and if so, does that feeling continue for at least six months.

This study is being conducted by the members of the Society. The principal investigator is Stephen Carp, PhD, a member of the Society. The National Council of the United States of the Society of Saint Vincent DePaul has provided funding for this study.

There are two qualifications to participate in this study: (1) that study participants can read and write English at an 8th grade level; (2) that the participants are at least 18 years of age.

Participation in this study is voluntary. If you agree to participate in this study, you would be required to complete a survey of 36 questions today, and repeat the survey in one week and in six weeks.

Description of Procedures. If you agree to participate in this study we will need you to complete a 36 question survey three times: today, one week from today, and six weeks from today. The survey will be the same survey with the same questions; we are looking for changes in your answers over time. We will sit with you and answer any questions you may have. The survey should take no longer than fifteen minutes to complete. You will use a pen or pencil to complete the survey.

Initialed by Subject: _____

Risks and Discomforts: The only risk to the subject is the potential loss of confidentiality. However we feel we have significant safeguards enacted to prevent this from occurring. These include once your survey is received it will be locked in the researcher's desk; only the members of the Society visiting you and the primary investigator will ever see the data; only your case number will be placed on the survey; and all data will be destroyed once we have completed the research project.

Participating in this study may not benefit you directly, but it will help us learn. You may find answering some of the questions upsetting, but we expect that this would not be different from the kinds of things you discuss with family or friends or the members of the Society that you invited to your home. You may skip any questions you don't want to answer and you may freely end your participation at any time. Ending your participation or choosing to not participate in your study will in no way impact the quantity or quality of potential assistance provided to you from the Society.

You will not receive any direct compensation for participation in this study. No compensation for participation will be given. You are free to withdraw your consent at any time without prejudice from your health care practitioners. You are free to seek care from any physician at any time. If you do not take part, or withdraw from this study at any time, you will continue to receive care.

The information you will share with us if you participate in this study will be kept completely confidential to the full extent of the law. Your information will be assigned a code number that is unique to this study. The list connecting your name to this number will be kept in a locked file in the primary investigator's office at Temple University and in encrypted files on his computer. No identifying demographic or personal data will be placed on the survey save for your standard Society case reference number which will be utilized as an identifier on all your records associated with the Society. Only the Principal Investigator and other researchers (members of the Society assigned to your case and a statistician) will be able to see the survey. No one at the Society, other than the members assigned to your case, will be able to see your surveys or even know whether you participated in this study. When the study is completed and the data have been analyzed, the list linking participant's names to study numbers will be destroyed. Study findings will be presented only in summary form and your name would not be used in any report.

Initialed by Subject: _____

This consent has been reviewed and approved by the Institutional Board (IRB) of Chestnut Hill Hospital. The purpose of an IRB is to maximize the safety of study participants and to limit the risk of any data collected from participants from exposure to persons not permitted to view the data. I have been advised that there is no direct or indirect compensation for my participation in this study. If I believe I have been injured by this study I will contact the Chestnut Hill Hospital Institutional Review Board at 215.248.8047.

If you have any questions about this study, please contact the principal investigator:

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215.707.8913
Stephen.carp@temple.edu

YOU WILL BE GIVEN A COPY OF THIS FORM WHETHER OR NOT YOU AGREE TO PARTICIPATE.

Signature of Subject and Date

Signature of Member Obtaining Consent and Date