

Thank you for taking part in research.

Please tell us about your experience.

We are asking you to complete this survey because you have previously or are currently taking part in research supported by the National Institute for Health and Care Research (NIHR). We fund and support research in the NHS as well as public health and social care research.

We want to make research better so that people like you have the best experience possible. We would value your feedback to help us do this.

Taking part in the survey is voluntary. The survey usually takes up to five minutes to complete. There are no right or wrong answers to any of the questions. It will not affect the care or treatment you receive, whether or not you choose to leave feedback.

Privacy and Data Protection

This anonymous survey is being undertaken on behalf of the NIHR and as such, any information collected will be subject to the terms of use and protections as outlined in the NIHR Privacy Policy (www.nihr.ac.uk/documents/nihr-privacy-policy/12242).

Your responses and comments will be shared anonymously with the NIHR and any healthcare providers (e.g. GP practice/hospital) involved in the research study you are/have been part of. No identifiable data will be shared with any third party.

When you have completed the form, please return it to your study team.

You can also complete this survey online at: bit.ly/KSSPRES2223

Follow us on Twitter: @NIHRCRN_kss

w: local.nihr.ac.uk/lcrn/kent-surrey-andsussex/

e: crnkss.studysupport@nihr.ac.uk



FOR STAFF USE:

Study name/acronym: _____

NIHR research site ID code (required): _____

Study IRAS/CPMS number (required): _____

Please rate how strongly you disagree or agree with the following statements about your research experience. Tick inside the face or circle that matches your answer best. Please think about the research you are currently participating in, or have most recently taken part in.

The information that I received before taking part prepared me for my experience on the study

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	I don't remember

I feel I have been kept updated about this research study

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree	It is too early to tell

I know how I will receive the results of this research study

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
No	Yes, to some extent	Yes

I know how to contact someone from the research team if I have any questions or concerns

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree

I feel research staff have valued my taking part in this research study

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree

Research staff have always treated me with courtesy and respect

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree

I would consider taking part in research again

<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Strongly disagree	Disagree	Neither agree nor disagree	Agree	Strongly agree

Please use the boxes below to explain your answers to the previous questions or provide any other feedback on your experience in this research.

To maintain your anonymity, please do not share any information in these boxes that could identify you e.g. name, specific conditions/rare conditions.

We may use your comments in reports about research and for promotional activities, but we will remove any information that does/could identify you before publishing any of your feedback.

What was positive about your research experience?

What would have made your research experience better?

How long have you been taking part in this research study?

- Less than three months
- At least three months but less than one year
- At least one year but less than three years
- Three years or longer
- Not sure

Is this the first research study you have taken part in?

- Yes
- No

Who completed this survey?

- The person taking part in the research
- The person taking part in the research with help from someone else
- Someone else on behalf of the person taking part in the research

More about you.

The following questions help us to understand if any groups of people are having better or worse experiences of research than others. Knowing this helps us take action to make sure everyone has the same quality of experience when they take part in research. You do not have to answer these questions. The answers you give will be stored anonymously and separately from any personal details you may choose to share and your answers will not be shared identifiably with any third party.

What is year of birth?

Please write in – eg 1964

_____ Prefer not to say

What sex were you registered at birth?

Female

Male

Prefer not to say

Is your gender the same as the sex you were registered at birth?

Yes

No

Prefer not to say

What is your ethnic group?

Choose one section from A to E, then tick the appropriate circle to indicate your ethnic group.

A. Asian / Asian British

Indian

Pakistani

Bangladeshi

Chinese

Any other Asian background

B. Black / African / Caribbean / Black British

African

Caribbean

Any other Black / African / Caribbean background

C. Mixed / Multiple ethnic groups

White and Black Caribbean

White and Black African

White and Asian

Any other Mixed / Multiple ethnic backgrounds

D. White

English / Welsh / Scottish / Northern Irish / British

Irish

Gypsy or Irish Traveller

Any other White background

E. Other Ethnic Groups

Arab

Any other, please write in: _____

Prefer not to say

Would you like to hear more?

Should you choose to provide your contact details as you want to receive the survey results or want to find out more about participating in research, these details will be stored separately from your survey responses before any analysis of responses is undertaken, thereby maintaining the anonymity of the survey. If you complete a paper version of this survey, your contact details and survey responses will be stored separately in an electronic format and your paper survey will be securely destroyed.

Please tick the option(s) as appropriate:

I would like to receive the results of this survey

I would like to receive updates about research opportunities e.g. newsletter

You can unsubscribe at any time

Name:

Email address:

If you do not have an active email address or prefer to be contacted via post please provide your home address:

Home address:
