



Research Report Form (Progress or Final)

UnitingCare Human Research Ethics Committee (HREC)

The UnitingCare HREC exists to meet the ethics approval needs of research undertaken within the service groups and corporate functions of UnitingCare. In accordance with NHMRC guidelines, the UnitingCare HREC will undertake regular monitoring of all approved research projects. A progress report (or final report, if the research is completed) will be required on an annual basis. Reminder emails will be sent in November each year.

SECTION A: PROJECT DETAILS

A1: Project title

		Approv	al number:
A2: Investigators			
Role	Name		Organisational affiliation
Chief Investigator			
Associate Investigators			
A3: Aim of research			







A4: Status of research project

In progress	☐ Yes	Anticipated completion date:		
Completed	☐ Yes	Date completed:		
If completed, please describe how the deliverables outlined in your original research application have been provided to UnitingCare, explaining any changes to the approved plan.				

If your project has been completed, please attach a copy of your Findings Report to this report. Ensure that this report has been provided to the relevant research representative below:

- Family & Disability Services: Dr Chez Leggatt-Cook (Research & Knowledge Translation Manager, Family & Disability Services) Ph: 0408 780 620 E: chez.leggattcook@uccommunity.org.au
- Blue Care (and non-medical health research): Liza Edwards (Group General Manager Clinical Governance) Ph: 0428 995 107 E: liza.edwards@uchealth.com.au
- UnitingCare Health (medical research): Shannon Lytras (Ethics Coordinator, UnitingCare Health Human Research Ethics Committee) Ph: 07 3232 7500 E: ethics@uchealth.com.au
- Mission: Rev Dr Peter Armstrong (Associate Director of Mission Community Partnerships) Ph: 0418 433 193 E: peter.armstrong@ucaregld.com.au
- If unsure, general enquiries can be made to: hrec@ucareqld.com.au







Research questions:	
Research plan (provide an overview of progress to date):	
, recognition plant (provide all every left)	
Research results (provide an overview to date, if relevant):	
W	
Outcomes of research (provide an overview to date if relevant):	
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Implications for future policy or practice (provide an overview to date, if relevant):				
SECTION B: ETHICAL CONSI	DERAT	IONS		
B1: In the conduct of this project	t have t	here been <u>any</u> variations to	the appr	oved
protocol/project with respect to	:			
Investigators			☐ Yes	□ No
Duration of the project			☐ Yes	□ No
Research procedures (such as design	gn, sampl	e size, recruitment etc)	☐ Yes	□ No
Participant involvement			☐ Yes	□ No
Staff support for research procedure	S.		☐ Yes	□ No
B2: Variation approval/s:				
If you selected yes to any question	☐ Yes	If yes, provide the date of vari	iation appro	val/s:
in B1, was the UnitingCare HREC				
notified of the variation/s?	□ No	If no, please contact the HRE	C to somm	anaa tha
	LI INO	process for seeking approval		
		hrec@ucareqld.com.au	ioi liie vaiie	111011/3
		media da regia.com.aa		
B3: Are any new variations to th	ne annro	ved protocol/project being	nronose	42
If yes, please provide details of the p				
process for seeking approval.	лорооса	variations and contact the thice	.0 10 00111111	crioc tric
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B4: Have there been any instances of participants encountering adverse effects or unexpected outcomes while participating in the research project?

If yes, please describe these advers response.	se effects or unexpected outcomes and any actions taken in
	seen incidents or complaints about the research ued ethical acceptability of the project?
	nts or complaints and any actions taken in response.
P6: Places comment on any oth	ner ethical matter you believe should be raised:
bo. Flease comment on any our	iei etilicai iliattei you believe siloulu be laiseu.
SECTION C: DECLARATION	
	ovided in this Research Report Form is an accurate
account of the conduct of the a Name (Chief Investigator):	bove-named research project. Signature:
Traine (Onlor invodigator).	- Signature
Date:	