**Observational Research Required Document Checklist**

All items must be made available to Waikato Research Office prior to commencing any research involving patients, patient information, staff or sites of Waikato hospitals. Documents can be made available via EthicsRM online application system (where appropriate) by authorising Waikato to view your project file.

**Waikato Registration#** RD

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| --- | --- | --- |
| **Documentation** | **Comments** | **Date** |
| Project Registration | Email [research@waikatodhb.health.nz](mailto:research@waikatodhb.health.nz) and request registration form. Waikato researchers can access form from [Research Hub](https://intranet.sharepoint.waikato.health.govt.nz/Pages/Quality%20and%20Patient%20Safety/Research%20hub.aspx) |  |
| Project Proposal/Protocol | Email to [research@waikatodhb.health.nz](mailto:research@waikatodhb.health.nz) |  |
| Waikato Approval of Research Form | Form will be emailed to researcher following registration and allocation of RD number. Researcher to seek sign-off of the form, as indicated (relevant Clinical Director, Operations Director and Executive Director/COO. |  |
| Waikato Clinical Support Services Sign-off (if any) e.g. Clinical Records, Pharmacy, Labs, Radiology, Chief Data Officer, etc. | Approval of Research form indicates which sign-offs required. Emails from approvers are acceptable as is electronic sign-off. Once signed, return signed form to research office to seek organisational approval. |  |
| Ethics Application Form & Approval letter if required  (HDEC or Institution) | Copy of the ethics application and ethics approval letter is required (electronic is fine).  For HDEC: Locality Authorisation must be requested in the online EthicsRM system : **Research@Waikatodhb.health.nz**. |  |
| Finance | * Research involving costs to Waikato and/or income/funding/grant: requires a Trial budget excel form to be completed. * Other trials – registration indicates the cost to Waikato of undertaking the research (researcher time, extra clinic appointments, consumables….) |  |
| Procurement | For any study involving equipment or consumables not already approved by Waikato, log a portal request #521. Include copy of approval email with Approval of Research form. Guidance available from Research Office. |  |
| Privacy Impact Assessment and/or Cloud Assessment | If identifiable data is being collected and shared with other institutions, either within New Zealand or internationally, one or both of these documents may be required. Research Office can advise. |  |
| Participant Information Sheet, Consent form, Questionnaire, letters of invitation, advertisements (if any) | Final **Waikato** version required. |  |
| Funding Contract, Indemnity (if any) | These are to be reviewed by Legal Services, following which the Chief Medical Officer (CMO) or authorised delegate must sign all research contracts on behalf of Waikato. Principal investigator to sign **before** CMO |  |
| Evidence of cultural consultation | Complete Māori Consultation Form (available from Research Office or Research Hub) plus the Tissue form (if applicable) and return to Research Office. Any queries, please contact Research Office ([research@waikatodhb.health.nz](mailto:research@waikatodhb.health.nz)) |  |
| Waikato Access to Information Declaration | Required for any non-Waikato staff accessing Waikato patients, patient information or premises. |  |

Any queries should be directed to Waikato Research Office by email **research@waikatodhb.health.nz**