

## DEER LODGE CENTRE RESEARCH APPLICANT INFORMATION SHEET

Prior to approval for conducting research at Deer Lodge Centre, the following must be submitted to the Research Committee, 2109 Portage Avenue, Winnipeg, MB, R3J 0L3, [research@deerlodge.mb.ca](mailto:research@deerlodge.mb.ca) for review with the Research Committee:

1. DEER LODGE CENTRE Research Request and Impact Approval Form.
2. Copy of the final Research Ethics Board (REB) Approval letter (Note: This does not indicate the authorization to conduct study at Deer Lodge Centre).
3. Budget information, if applicable.
4. Electronic copy of all information to be provided to Study Participants including consent forms, information sheets and measures.
5. WRHA or University Photo ID will be required.

### Notes:

- A. Incomplete submissions will cause a delay in receiving Deer Lodge Centre Approval.
- B. Research requests may be considered based on how they align with the following area(s) of the Deer Lodge Centre Strategic Plan:
  - a. Enhance the client /family experience
  - b. Assist in improving the quality of client services that are being provided
  - c. Nurture the potential and explore possibilities for clients/family/staff
  - d. Help improve patient flow
  - e. Enhance partnerships with clients/families/health providers and the community
  - f. Promote Dignity and Respect
- C. Research can be undertaken once Request for Access has been approved.
- D. Investigators and all study personnel are required:
  - To have attended a WRHA PHIA orientation in the last three years
  - Sign the WRHA Pledge of Confidentiality
  - If required contact Deer Lodge Centre Privacy Officer at 204-831-2164
- E. Extension of studies must resubmit the Access Process (Committee Approval).
- F. Upon completion of the study, please forward a completed copy of the “FINAL STUDY STATUS REPORT” to [research@deerlodge.mb.ca](mailto:research@deerlodge.mb.ca).
- G. All those who carry out research at the Centre must provide the Deer Lodge Centre Research Program Committee and the host department/unit with a written copy of the research results and must credit the Centre in all publications and presentations unless this is mutually agreed to be inappropriate.



# DEER LODGE CENTRE – RESEARCH APPLICATION FORM

## Section A: PRINCIPAL INVESTIGATOR INFORMATION

Title of the Project:		Project #: <i>(DLC Research Committee Use Only)</i>
Name:		DLC Contact:
Address:		
Phone:	Fax:	Mobile:
Email:		
Faculty/Department:		
Name of Co-Investigator(s)		
Name:		Phone:
1.		
2.		
3.		
4.		

## Section B: STUDENT INFORMATION

Name:	
Email:	Phone:
Advisor:	Institution:
Email:	Phone:
Faculty/Department:	
Course for which required:	

## Section C: OTHER

Name:
Position:
Organization:
Supervisor/Manager:
Phone:
Email:

**1. TIMELINES:**

Duration of Project:	Anticipated Start Date:	Anticipated End Date:
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**2. PURPOSE OF STUDY:**

*If approved, the information in Section 2 may be used to inform the public as well as clients and staff*

**2.1 Significance of study and benefit to Deer Lodge Centre and/or clients.**

**2.2 How will the research align with the following area(s) of the WRHA/DLC Strategic Plan?**

*Please check all areas that apply and provide a brief explanation*

Enhance the client/family experience

Assist in improving the quality of client services that are being provided

Nurture potential and explore the possibilities for clients/family/staff

Help improve patient flow

Enhance partnerships with clients/families/health providers and the community

Promote Dignity and Respect

**3. RESOURCE REQUIREMENTS:**

<b>3.1.</b> Will the following services be required? Please include requests for recruitment, clinical services, staff participation, etc.    Yes    No    If Yes, please check <input checked="" type="checkbox"/> affected areas:		
Biomedical Engineering (e.g. medical device implants)	Central Processing	Facility Management
Communication Disorders (speech language pathology, audiology)	Green Team	Infusion Pumps
Home Care General	Housekeeping	Occupational Therapy
Physiotherapy	Library Services	Printing
Protection Services	Respiratory Therapy	Social Work
Purchasing	Supply & Distribution	Therapeutic Recreation
Spiritual Health Services	Clinical Nutrition	Clinical Nurse Specialist
Nursing Staff	Pharmacy	Clinical Project Manager
Diagnostic/Laboratory Services (If Yes, contact site Diagnostic Services Manitoba)		
Other (please describe)		

3.2 Time requirements for staff listed above. (Please describe in detail)

3.3 List Deer Lodge Centre supplies and equipment that may be required. (Describe cost/budget information)

3.4 List space requirements: (Where will the research take place?)

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**4. HEALTH INFORMATION AND SERVICES REQUIREMENTS:**

<b>4.1. Have you attended a PHIA session in the past 3 years?</b>		Yes	No	
If so where:				
<b>4.2. Is chart review required?</b>		Yes	No	
Will you require assistance from Health Information Services (HIS) to produce a chart list?		Yes	No	
Date Range of Data Required (calendar year or fiscal year):				
Select the type of data/charts you require:				
PCH	Chronic Care	Geri Rehab	Dementia Care	Outpatient/Clinic
Indicate the type of data you require:				
Admission Date	Gender / Age	Patient Days / Occupancy Rates		
Discharge Date	Unit	Postal Code		
Length of Stay / Average Length of Stay	Diagnosis			
OTHER INFORMATION:				

## AGREEMENT FOR ACCESS TO PERSONAL HEALTH INFORMATION ACT FOR RESEARCH PURPOSES

*The Personal Health Information Act of Manitoba*  
AGREEMENT FOR  
ACCESS TO PERSONAL HEALTH INFORMATION  
FOR RESEARCH PURPOSES  
BETWEEN  
WINNIPEG REGIONAL HEALTH AUTHORITY – Deer Lodge Centre  
And

(Hereinafter referred to as the “Principal Investigator”)

This agreement is used once a proposal to access personal health information for research purposes has been approved by the Deer Lodge Centre. Once the person conducting a health research project (“Principal Investigator”) has signed this form and the terms and conditions of access have been approved by the Deer Lodge Centre, it becomes a legal agreement between the Principal Investigator and Deer Lodge Centre. The Deer Lodge Centre Research Impact Approval Application and the University of Manitoba Research Ethics Board approval letters must be appended to this agreement and form part of the legal agreement.

The collection of the information referenced on this Application is authorized by *The Personal Health Information Act (PHIA)* and will be used only to administer the research project. Questions regarding PHIA can be directed to the DLC Privacy Officer at 204-831-2164.

## AGREEMENT FOR ACCESS TO PERSONAL HEALTH INFORMATION ACT FOR RESEARCH PURPOSES CONTINUED

1. The Principal Investigator has requested access to the following records that contain personal health information which are in the custody or under the control of Deer Lodge Centre for the proposal as identified below:

Describe the Records that will be used in this research proposal:

2. The Principal Investigator agrees to the following terms and conditions:
  - a. Not to publish the personal health information requested in a manner that may identify the individuals concerned.
  - b. To use the personal health information requested solely for the purposes of the above-named research project.
  - c. To destroy the information or remove all identifying information at the earliest opportunity consistent with the purpose of the project.
    - Indicate when identifying information will be destroyed:
    - Specify procedures to destroy identifying information:
  - d. To use reasonable safeguards to protect the confidentiality and security of the personal health information:
    - Specify safeguards:
    - Attach the Research Ethics Board submission form and specify area where this is stated.
3. The Deer Lodge Centre agrees to grant access to the records on the terms and conditions set out in Section 2, above.

Deer Lodge Centre Research Committee approval is dependent upon the Principal Investigator providing a copy of the Research Ethics Board final approval letter to the Deer Lodge Centre Research Program

Signed at: \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_,

Signature ( Principal Investigator)

Signature (Deer Lodge Centre Committee Chair)

- ORIGINAL AGREEMENT TO BE RETAINED IN DEER LODGE CENTRE RESEARCH PROGRAM.
- SIGNED COPY TO BE FORWARDED TO PRINCIPAL INVESTIGATOR.