Privacy Declaration for External Researchers

This form is to be signed by ALL external researchers undertaking research at a SJGHC site and/or accessing SJGHC health records for research purposes.

Study Title:

External Researcher Name:

Institution:

DECLARATION

I agree to keep strictly and absolutely confidential any information concerning persons and events that come to my attention on St John of God Health Care (SJGHC) sites. This includes information relating to internal SJGHC operations and/or information from individual patient health records. All SJGHC information collected, used or disclosed for the purpose of the abovementioned study will only be dealt with in accordance with the conditions specified in the approved protocol for the project.

Signature:
(click box to insert image of signature)

Date:

Please ensure any person who has electronically signed this document is copied in on the submission to the Ethics Office.