



Mental Health Program/Department of Psychiatry Operational Approval for Research

Before using a Providence Health Care site for research, you must secure approval from operational/program leaders. Please complete this form and email it to Angela Russolillo, Director, Mental Health Clinical Research, at arussolillo1@providencehealth.bc.ca. Please also attach:

- any certificates of ethical approval already obtained
- all recruitment materials—for example, recruitment posters, web content for recruitment, letters of initial contact, etc.

A decision on operational approval will be provided within 2–4 weeks of submission.

This form will take approximately 9 minutes to complete. An asterisk (*) indicates a required field.

Summary of proposed research

1. Principal investigator (PI)*

2. Study title*

3. Name and email of primary contact person for the research*

4. PI's affiliations (check all that apply)*

- | | |
|---|---|
| <input type="checkbox"/> BC Centre on Substance Use | <input type="checkbox"/> Simon Fraser University |
| <input type="checkbox"/> Centre for Advancing Health Outcomes | <input type="checkbox"/> University of British Columbia |
| <input type="checkbox"/> Fraser Health | <input type="checkbox"/> Vancouver Coastal Health |
| <input type="checkbox"/> Providence Health Care | <input type="checkbox"/> Other (please specify): |

5. Summary of research (max 250 words)*

6. Proposed process for obtaining consent*

7. Expected start date (YYYY-MM-DD)*:

8. Expected end date (YYYY-MM-DD):

9. Areas of the Mental Health Program where the study will be carried out (check all that apply):*

- | | |
|--|--|
| <input type="checkbox"/> St Paul's Hospital Inpatient Unit 2N | <input type="checkbox"/> Mount Saint Joseph's Geriatric Psychiatry—1 South |
| <input type="checkbox"/> St Paul's Hospital PASU (2E) | <input type="checkbox"/> St. Vincent Langara—Alder |
| <input type="checkbox"/> St Paul's Hospital Inpatient Unit 8C | <input type="checkbox"/> Parkview |
| <input type="checkbox"/> St Paul's Hospital Inpatient Unit 9A | <input type="checkbox"/> Foundry Vancouver Granville |
| <input type="checkbox"/> Brief Intervention Clinic | <input type="checkbox"/> Other (please specify): |
| <input type="checkbox"/> Reproductive Psychiatry Clinic | |



Staff Impact

10. Will mental health program employees be required to collect any data beyond what is collected for routine clinical care?*

Yes

No

11. If YES to Q.10, please describe:

12. Are any of the study procedures planned for times outside of daytime hours (0700–1600, Monday to Friday)?*

Yes

No

13. If YES to Q.12, indicate days of week, times, and expected frequency:

14. Will mental health program employees be required to enter data into study databases?*

Yes

No

15. If YES to Q.14, indicate amount of time estimated to complete:

16. Are nurses, physicians, or other mental health program employees participants in the study?*

Yes

No

17. Does the research protocol require any nursing or allied health services (vitals, specimen collection, assessments, etc.)?*

Yes

No

18. If YES to Q.17, list all tasks required:

19. If applicable, outline how you will provide information to nursing or other unit staff about their role in the study. Consulting the clinical area leader is recommended for more complex protocols.

Impact on Resources

The program will determine if the required services necessitate recovery from the study budget to offset costs. The program leader will provide investigators with the cost of these services.

20. Is the study funded?*

- Yes
- No

21. If YES to Q.20, indicate source of funds:

22. Will the study result in additional costs to the program/unit—e.g. equipment, supplies, personnel?*

- Yes
- No

23. If YES to Q.22, please describe:

24. Will additional costs be covered by the study?

- Yes
- No

25. Your research plan must include at least one knowledge translation (KT) activity for Mental Health Program staff and leadership—e.g., presentation for the Research Education Series, report, workshop, educational material, etc. Describe the KT activities planned for staff and leaders in the Mental Health Program:

Agreement

If the study timeframe, budget, or related activities impact the program/department beyond what is outlined in this application, we reserve the right to review our continued involvement in your study and the need for the study budget to provide resources to the program/department.

Your research plan must include at least one KT activity (e.g., presentation for the quarterly Research Education Series, report, workshop, educational material, etc.) for Mental Health Program staff and leadership.

The PI is responsible for providing the Director, Mental Health Clinical Research, with copies of the following documents when they become available:

- Certificate of Ethical Approval
- PHC Institutional Certificate of Final Approval