

## Parent/Guardian Information Statement and Consent Form

<b>Yarra Junior Football League Injury Surveillance Program</b>		
The research is being carried out by the following researchers:		
<b>Role</b>	<b>Name</b>	<b>Organisation</b>
Principal Investigator	Dr Matthew King	La Trobe University
Co-investigator	Prof Kay Crossley	La Trobe University
Co-investigator	Dr Brooke Patterson	La Trobe University
Co-investigator	Dr Andrea Mosler	La Trobe University
Co-investigator	Libby Gracias	La Trobe University
Co-investigator	Dr Patrick Clifton	Yarra Junior Football League
Co-investigator	Dr Michael Makdissi	AFL
Co-investigator	Dr Anik Shawdon	AFL
Co-investigator	Assoc Prof Cathy Willmott	AFL
Co-investigator	Dr Jonathon Reyes	AFL
<b>Research funder</b>	This research has received funding support from the Australian Football League and in-kind support from the Yarra Junior Football League.	

### 1. What is the study about?

This is an invitation for your child to take part in a study. The Yarra Junior Football League's Injury Surveillance Program aims to understand injuries in community junior football, when they occur during the game, what happened during the game, and whether players continue to play after the injury. As a part of this study, we hope to use this information to inform injury prevention programs and education for community junior football. The program receives support from La Trobe University and the Australian Football League.

### 2. Does my child have to participate?

Being part of this study is voluntary. We ask that you discuss the study with your child when deciding if you and your child want to participate. If you decide together to be part of the study, we ask that you read this information carefully and ask us any questions. If you decide together that you do not want to take part, this won't affect your relationship with La Trobe University or the Yarra Junior Football League. You can read the information below and decide if you do not want your child to participate.

### 3. Who is being asked to participate?

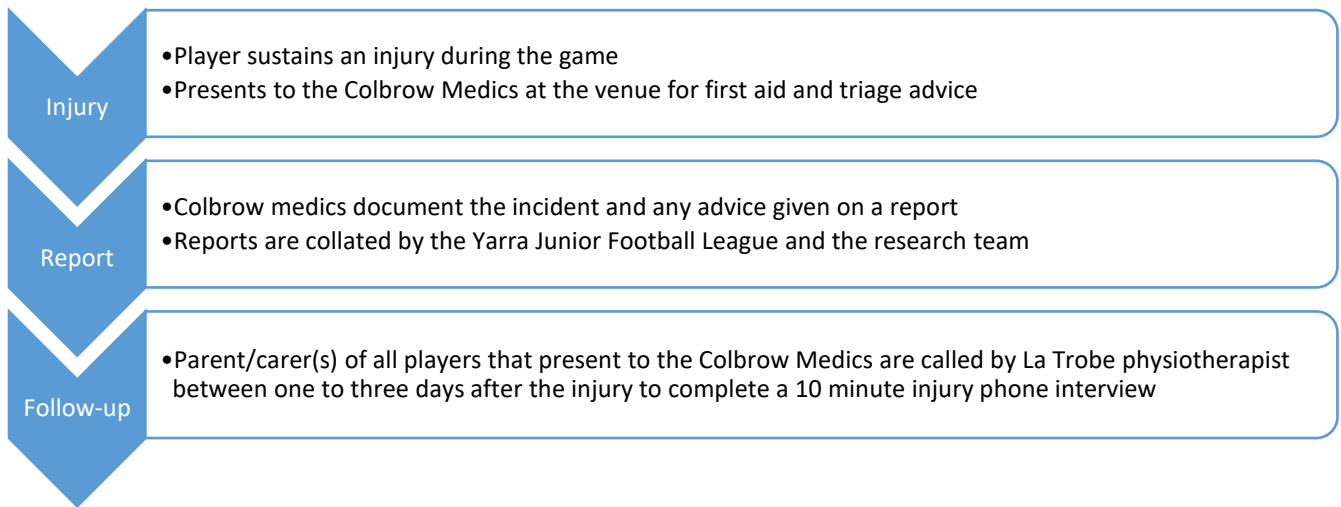
You and your child have been asked to be part of the study because:

- They are a registered football player in the Yarra Junior Football League

### 4. What will my child be asked to do?

You and your child are asked to participate only if they receive an injury during a Yarra Junior Football League game and present to the first aid provider (Colbrow medics) on the day of the game. If you choose to participate, a physiotherapist will call you (the parent/care(s)) between one to three days after the game for a 10-minute phone interview where they will ask you questions about what region of the body your child's injury was, what was happening in the game (e.g. tackling, taking a mark), whether they continued to play or came off, and if they have seen any healthcare professionals (e.g. ED). A schematic of the process is outlined below.

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When taking part in this study, the following people will be present:

Name/Organisation	Position
Libby Gracias	Research Officer and physiotherapist will conduct the injury phone call

### 5. What are the benefits?

There is no immediate direct benefit to participating in the study for you and your child. The proposed research will benefit community football players, clubs, and leagues by determining the burden of sports-related injuries in community junior football players. This information can then be used to guide the development of education materials for players and parents as well as ascertain what additional support services may be required for junior community football clubs/leagues.

### 6. What are the risks?

With any study there are (1) risks we know about, (2) risks we don't know about, and (3) risks we don't expect. If you or your child experience something that you aren't sure about, please contact us immediately so we can discuss the best way to manage your concerns.

Name/Organisation	Position	Email
Libby Gracias	Research Officer	l.gracias@latrobe.edu.au

We have listed the risks we know about below. This will help you decide if you want to be part of the study.

- Risk of identification associated with research published as a result of the information provided during the phone interview.
  - Risk Mitigation: We will publish information about your child in ways that cannot be identified in any type of publication from this study. Individual injury circumstances will not be reported and/or presented in any report/presentation/paper. Data will be reported at group level (meaning we will report data as a summary of all players).

### 7. What will happen to information about my child

We will **collect** information from you/your child in ways that will reveal who they are.

We will **store** information about your child in ways that will reveal who they are.

We will **publish** information about your child in ways that cannot be identified in any type of publication from this study.

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We will **keep** your child's information for 15 years after the project is published or when the last participant turns 25 years (whichever occurs first). After this time, we will destroy all of your child's data.

The storage, transfer and destruction of your child's data will be undertaken in accordance with the [Research Data Management Policy](https://policies.latrobe.edu.au/document/view.php?id=106/) <https://policies.latrobe.edu.au/document/view.php?id=106/>.

The personal information provided will be handled in accordance with applicable privacy laws, any health information collected will be handled in accordance with the Health Records Act 2001 (Vic). Subject to any exceptions in relevant laws, you have the right to access and correct your child's personal information by contacting the research team.

### 8. Will we hear about the results of the study?

We will let you know about the results of the study by a variety of ways. During the injury phone interview, the physiotherapist will ask you if you would like to be emailed a copy of your responses and if you would like a summary of the project at the end of the football season. Even if you did not indicate you wanted a copy of any of the above at the time, and you change your mind, you can request any of the above information by emailing the following person

Name/Organisation	Position	Email
Libby Gracias	Research Officer	<a href="mailto:l.gracias@latrobe.edu.au">l.gracias@latrobe.edu.au</a>

### 9. What if we change our minds?

You or your child can choose to no longer be part of the study at any time until four weeks following the collection of your data. You can let us know by:

1. Completing the 'Withdrawal of Consent Form' (provided at the end of this document);
2. Phoning us; or
3. Emailing us

Your or your child's decision to withdraw at any point will **not** affect your relationship with La Trobe University or the Yarra Junior Football League.

When you withdraw your child from the study, we will stop asking for information. Any identifiable information about your child will be withdrawn from the research study. However, once the results have been analysed (four weeks following the collection of your data) we can only withdraw personal information, such as your child's name and contact details. If the results haven't been analysed, you can choose if we use those results or not.

### 10. Who can we contact for questions or want more information?

If you or your child would like to speak to us, please use the contact details below:

Name/Organisation	Position	Email
Libby Gracias	Research Officer	<a href="mailto:l.gracias@latrobe.edu.au">l.gracias@latrobe.edu.au</a>

### 11. What if we have a complaint?

If you or your child would like to make a complaint about any part of this study, please contact:

Ethics Reference Number	Position	Telephone	Email
HEC23011	Senior Research Ethics Officer	+61 3 9479 1443	<a href="mailto:humanethics@latrobe.edu.au">humanethics@latrobe.edu.au</a>

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### Withdrawal of Consent

I wish to withdraw my consent for myself/child to participate in this study. I understand withdrawal will not affect my or my child's relationship with La Trobe University of any other organisation or professionals listed in the Participant Information Statement. I understand my child's information will be withdrawn as outlined below:

- ✓ My child will not be asked to provide any more information
- ✓ Any identifiable information will be withdrawn from the study
- ✓ The researchers cannot withdraw my child's information once it has been analysed (four weeks following the collection of your data)

I would like my child's already collected and unanalysed data

- Destroyed and not used for any analysis  
 Used for analysis

### Parent/Guardian Signature

Parent/Guardian's printed name	
Parent/Guardian's signature	
Date	

### Please forward this form to:

CI Name	Dr Matthew King
Email	m.king@latrobe.edu.au
Phone	03 94793531
Postal Address	Discipline of Physiotherapy, La Trobe University Level 5, Room 531 Health science Building 3 La Trobe University Bundoora, Vic 3086