# Research Checklist

This document must be completed in full, and all checkpoints must be signed off before an any research can commence.

**The BrisDoc Lead is responsible for completing this brief in a timely manner.**

If at any point a decision is made not to continue with the research project, this brief will record the rationale to support that decision.

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| **Proposal Information** |
| Research Name |
|  |
| Lead Researcher | Researcher’s Host Organisation |
|  |  |
| Research Reference *(from the research log)* | BrisDoc Governance Lead |
|  |  |
| Research Proposal saved in folder | Date received |
| **Y / N** |  |
| Does the research align with BrisDoc’s Values? | Does the research relate to BrisDoc Business? |
| **Y / N** | **Y / N** |
| **If all answers are ‘Yes’ - proceed to next section** |

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| **Initial Review by BrisDoc Lead** |
| Include a headline summary of the proposed research and who BrisDoc would participate. |  |
| What support and data are required?*This will need to be specific and include details of any data requests, time in the service, access to information, and expertise.* |  |
| Is there funding available to compensate BrisDoc resource? *If yes, what is the maximum amount?* |  |
| Ethical/Other Research body approval processes the proposal will comply with |  |
| Is there any operational impact of conducting the research? |  |
| Other considerations of note |  |

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| **Agreement in Principle** |
| Director | Date |
| Medical Director |  |
| Director of Nursing, AHPs and Governance |  |
| Programme and Service Director |  |
| Letter of Support Sent *(see template)* |  |
| **If supported by 2 or more directors – proceed to next section** |
| **Rationale if not supported** |
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| **Governance & Approval Processes** |
| **Board Approvals** | **Information Governance** |
| Board | Date Complete | Action | Date Complete |
| Quality Board*(Mandatory)* |  | Data Sharing Agreement Drafted*(See template)* |  |
| Information Governance Board*(Mandatory)* |  | Data Sharing Agreement Signed |  |
| Practice Service LOB*(Optional)* |  | Confidentiality Agreement Signed |  |
| IUC LOB*(Optional)* |  | *(DSA must include BrisDoc’s right to review any documents before publication)* |
| Outcome (approval or non-approval) and any concerns raised, or actions required. *If not approved the rationale must be recorded* |
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| **Funding** |
|  | Evidence provided & Date |
| Costs provided to Researcher for resource required *(Gov/Digital/Data)* |  |
| Funding approved/Waiver Agreed |  |

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| **Final Approval** |
| Approving Director | Signature & Date |
| Medical Director |  |
| Director of Nursing, AHPs and Governance |  |
| Programme and Service Director |  |

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| **Final Steps Before Research** |
| **Risk Assessment** |  **Communications** |
| Any Risk assessment needed? | **Y / N** | Will Comms with BrisDoc co-owners be needed? | **Y / N** |
| If Yes, Date completed |  | If Yes, Date completed |  |
| **Data** | **Contract/Rota** |
| Data Provided | **Y / N** | Honorary contract/observation required? | **Y / N** |
| If Yes, Date completed |  | If Yes, Date completed |  |

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| **Post Research** |
| **Final Report** |  **Learning** |
| Date received |  | Is there any learning for BrisDoc to Action | **Y / N** |
| Reviewed and approved by |  | Lead to action the learning |  |
| Board Presented To |  | Target Date |  |
| Date of Approval |  | Date Completed |  |