



Government of **Western Australia**
WA Country Health Service

WA Country Health Service

Research Submission Guidelines for Investigators

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1 Introduction

The WA Health Research Governance Framework ([policy](#) and [standard operating procedures](#)) outlines how single and multi-centre research at WA Health sites is to be conducted. All human research conducted in WA Health must undergo ethical and scientific review by a human research ethics committee (HREC) registered with the National Health and Medical Research Council (NHMRC) and operating in accordance with the NHMRC [National Statement on Ethical Conduct in Human Research 2007 \(Updated 2018\)](#) (National Statement). In addition, all research projects must undergo institutional review by each WA Health Service and obtain site authorisation at each WA Health site at which it is to be conducted. Both ethics approval and site authorisation are required before a project can commence.

These guidelines have been prepared to assist individuals through the process of submitting a research project to the WA Country Health Service (WACHS) for ethics review and approval, and institutional review and site authorisation. These guidelines should be read in conjunction with the [WA Health Research Governance Framework](#). Please note that all research must be submitted using the online [Research Governance Service](#) (RGS).

2 Research or Quality Improvement

Prior to making a submission through RGS, it is important to distinguish quality improvement (QI) activities from research, as this will determine the avenue of review and approval required. If a project is classified as research it must be reviewed by a HREC.

- Research is about creating new knowledge about what works and what doesn't. It provides the foundations for national and/or local agreement about the kind of clinical treatment and care we should be providing, i.e. helps to answer the question "what is best practice?"
- Quality Improvement asks whether we are doing the things we have agreed we should be doing or achieving the outcomes we have agreed we should be achieving, i.e. it answers the question "are we following agreed best practice?"

To determine whether a project is research or quality improvement, answer the following questions. If the answer to all the questions is "no", your project is regarded as a quality improvement project. Does your project:

1. Aim to generate new knowledge for WACHS and the wider community (rather than improving an internal program or service within WACHS only)?
2. Involve a new process/practice that has not been tested and deemed normal practice in another health service?
3. Test a hypothesis?
4. Involve any clinically significant departure from the routine clinical care provided to patients?
5. Include randomisation of subjects, comparison of cohorts, the use of a control group or placebos?
6. Test non-standard protocols, drugs or equipment/devices?
7. Involve publication or presentation of the project findings?

WACHS is currently working on a process for ethical review of QI projects. If a project is QI then it may be exempt from ethical review or be permitted to undergo a different ethical review stream. Please contact the WACHS Ethics and Quality Improvement Coordinator at WACHS.HREC@health.wa.gov.au for further information, particularly if you are unsure whether your project is QI or research.

3 Human Research Ethics Committees

WA Health has a system of single ethical review meaning that research reviewed by an accredited HREC at any WA Health site will be recognised by other sites without an additional review. Additionally, WACHS also recognises the ethical approval of other HREC's certified under the National Mutual Acceptance Scheme (NMA) – please see next section for further details.

Your choice of which HREC to apply to will depend on what health services your project will be accessing, if it is single-centre or multi-centre and whether it is within WA Health or involving external sites.

- If your project involves only WACHS sites – submit to the WACHS HREC.
- If your project involves WACHS and other WA Health sites – select the WA Health Lead HREC based on their area of expertise, the affiliation of investigators involved in the project and where most participants, data or tissue will be sourced from.
- If your project involves WACHS, other WA Health sites and/or sites external to WA Health – this will depend on the requirements of the external sites; however consider selecting a HREC certified under the NMA Scheme in order to facilitate single ethical review. Otherwise, you may require ethical approval from a WA Health Lead HREC and an external HREC.

When submitting a project to the WACHS HREC it is important to be familiar with its [Terms of Reference and its meeting and submission dates](#).

Contact details for Research Ethics Offices at other WA Health sites can be found [here](#).

3.1 National Mutual Acceptance Scheme

The NHMRC has developed the National Mutual Acceptance Scheme (NMA) of ethical and scientific review for multi-centre human research projects conducted in public health organisations (PHO). The NMA enables a single review of projects across multiple PHO sites, and multiple Australian jurisdictions. WA Health (listed under the scheme as Western Australian public health organisations) (commenced participation in 2017).

Three WA HRECs, South Metropolitan Health Service, Sir Charles Gairdner Hospital and Osborne Park Health Care Group and Child and Adolescent Health Service (CAHS), are accredited to act as leads for national projects. A list of all NMA certified HRECs in Australia is available on the [NHMRC website](#).

The NMA aims to:

- enable PHOs of participating jurisdictions to accept a single ethical and scientific review of human research projects (these PHOs are known as Accepting Organisations)
- inform the ongoing development of the national system of single ethical and scientific review of multi-centre research.

All WA Health institutions are accepting sites under the NMA, meaning they all recognise the ethical review by an NMA accredited HREC and do not require further ethical review (subject to the exceptions in section 4.2).

If you wish to conduct a project under NMA at a WA Health site, whether as a lead site or as an accepting site, there are differences in the submission and review process for ethics and governance. For more information on NMA and how to apply please refer [to 'Ethics Application' subsection on the RGS website](#).

3.2 Specialist Ethics Committees

Some projects require approval from a specialised HREC as outlined below:

- the [Western Australian Aboriginal Health Ethics Committee](#) (WAAHEC) for health and medical research projects where Aboriginality is a key determinant, the research is explicitly directed at Aboriginal people, the research has a significant impact on Aboriginal people, Aboriginal people, as a group, will be examined in the results, and/or Aboriginal health funds are a source of funding for the research.
- the [Coronial Ethics Committee WA](#) for research projects that require access to coronial samples, data or information.
- the [Department of Health WA HREC](#) for all research projects that require the use and disclosure of personal information from the Department of Health data collections, or data linkage.

If you are unsure whether your project will require an approval from a specialised HREC, please contact the Ethics and Quality Improvement Coordinator.

4 Determining the Level of Risk

It is important to consider if the project activities have the potential to pose any risks, burdens, inconvenience or possible breaches of participant privacy, beyond those routinely experienced in the environment where the project is being conducted. Risks are not just physical, they also include psychological, spiritual and social harm and distress. Burdens may include intrusiveness, discomfort, inconvenience or embarrassment, such as persistent phone calls, additional hospital visits or lengthy questionnaires.

- Negligible risk is where there is no foreseeable risk of harm or discomfort; and any foreseeable risk is no more than inconvenience, such as filling in a form, participating in a de-identified survey and giving up time to participate in a research activity.
- Low risk is where the only foreseeable risk is one of discomfort. That discomfort may be physical, psychological, emotional, social or financial. Some examples include minor side-effects of medication, measuring blood pressure and anxiety induced by an interview.
- More than low risk is where the foreseeable risk, even if unlikely, is more than discomfort, such as participating in a clinical trial exploring the therapeutic effect of a new medication, or a survey that involves the discovery of criminal conduct and collects identifiable information about participants.

5 Low and Negligible Risk Research

WACHS has a low and negligible risk ethical review pathway to expedite the ethical review for eligible projects.

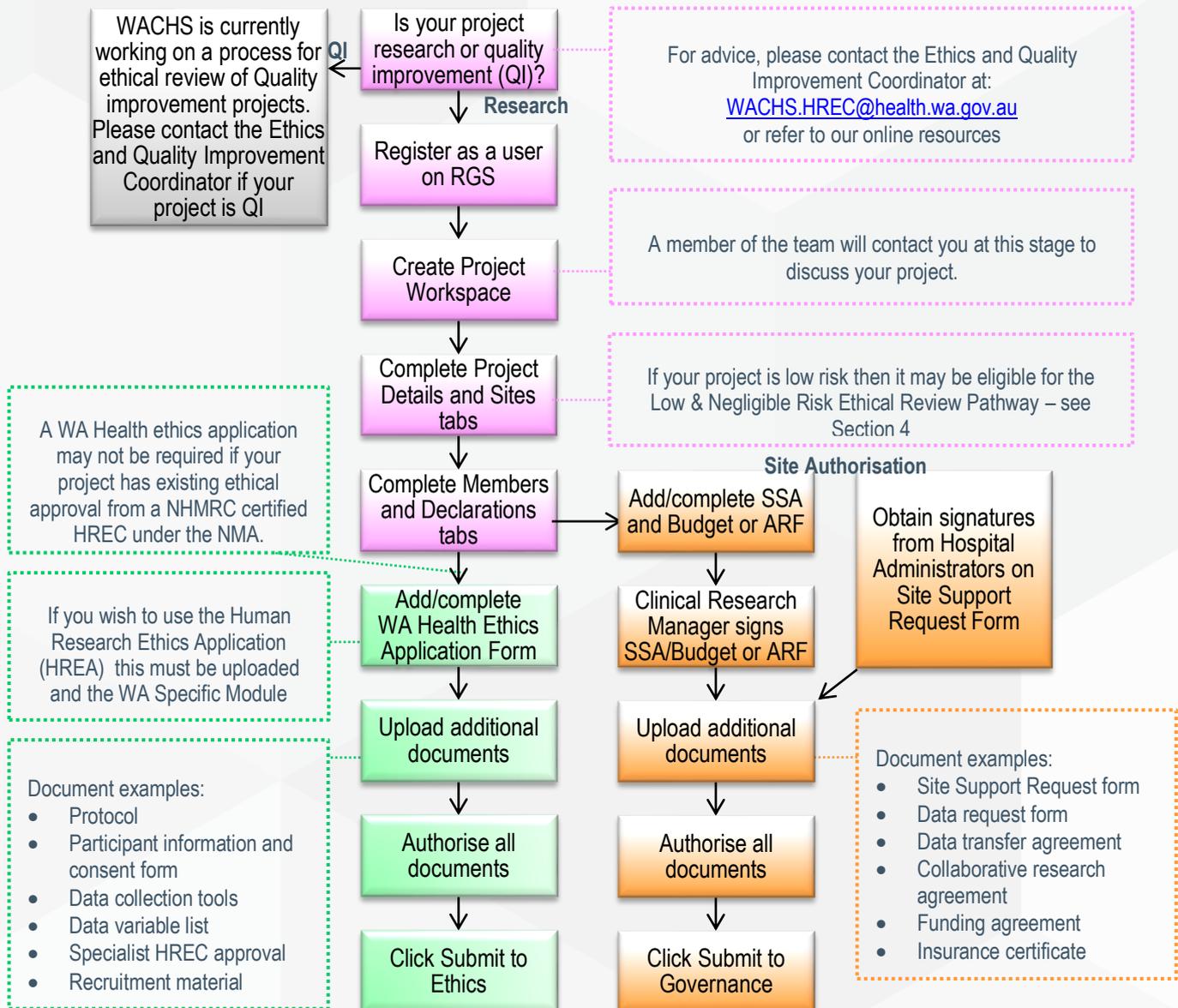
The submission process follows the standard process and RGS forms and documents that are used for a regular HREC review, including the WA Health Ethics Application Form (WAHEAF), research protocol and other documents specific to the project design (such as surveys, focus group questions and Participant Information and Consent forms).

When your application is submitted and marked as low or negligible risk in RGS, it will be reviewed against the eligibility criteria for the low and negligible risk ethical review pathway during the validation review. If it meets the eligibility criteria, it will be allocated to the low and negligible risk ethical review pathway and you will be notified that it will be reviewed by the low and negligible risk subcommittee.

Projects accepted into the low and negligible risk ethical review pathway will not be subject to submission deadlines and the low and negligible risk subcommittee will not have fixed meeting dates. Instead, projects will be allocated for review by the subcommittee as they are received, allowing an expedited ethical review timeline.

If approved, an ethics approval letter will be issued to you by the low and negligible risk subcommittee. Alternatively, further information may be required to assist in progression of the review.

6 Overview of Submission Process



7 Submission Process

7.1 RGS registration

To access the RGS you will be required to complete the online [New User Sign Up form](#) and submit it to the RGS Administrator for approval, which usually takes 1-2 working days. You'll be asked to provide a password, choose the access level you need and provide personal and contact details. The sign-up process is slightly different for WA Health employees compared to external users:

- [WA Health Employees](#) will need to provide their HE number.
- [External users](#) will need to provide a WA Health Employee as a referee who is able to confirm that the information they have provided is correct. Please contact the WACHS Research Governance Unit if you do not know a WA Health employee that can be a referee for your account registration.

7.2 Project Workspace

Once you have registered as a user on RGS the first step is for the Coordinating Principal Investigator (CPI) to create a project workspace. At this stage of the process you are asked to:

- nominate the WA Health sites at which the study will be conducted
- include basic information about the project including project type and title;
- select an Administering Research Governance Office (RGO)

You should select the office that corresponds to the WA Health HREC that will review your ethics application. If your project has had previous ethical review by an NMA accredited HREC outside of WA Health, you should select the RGO that corresponds to the sites your project will be accessing.

Within WACHS, a member of the Administering RGO will contact you once you create a project workspace to progress the workspace approval. To contact the Administering RGO during this stage of the process, please see the contact list on RGS [here](#). We encourage you to contact with WACHS Research Governance Unit prior to commencing the application process if your project involves WACHS sites.

After the project workspace is validated you will need to [update the project sites](#) under the 'Sites' tab. In addition, you will need to add and [invite project members](#) in the 'Members' tab and assign them their appropriate [roles](#). The table below summaries the form editing and sign-off permissions of each project role. For small projects, it is possible for an investigator to hold both the Coordinating Principal Investigator (CPI) and Principal Investigator (PI) roles.

| Form | Permissions to Edit Form | Permissions to Sign Form |
|----------------|---------------------------|---|
| WAHEAF | CPI or CPI Delegate | <ul style="list-style-type: none">• CPI |
| SSA | PI or PI Delegate | <ul style="list-style-type: none">• PI signs first• WACHS Delegate for All Hospital Administrators |
| Budget | PI or PI Delegate | <ul style="list-style-type: none">• WACHS Delegate for all Hospital Administrators |
| Access Request | CPI or PI (and delegates) | <ul style="list-style-type: none">• WACHS Delegate for all Hospital Administrators |

7.3 Project Details

Following the approval of the project workspace the [Project Details](#) section must be completed before the application can progress. The information collected in this section is populated through to all future forms, so it is important it is clear and accurately describes your project. In this section information must be provided regarding:

- Project Header (completed/authorised by CPI, CPI Delegate, PI or PI Delegate)
- Ethics Information (completed/authorised by CPI or CPI Delegate)
- Governance Information (completed/authorised by PI or PI Delegate)
 - Funders: for in-kind support please include the WACHS region providing the support and include WACHS Central Office as they will be the funder of all ethics review and site authorisation fees.
- Investigator Contact Information (completed/authorised by CPI, CPI Delegate, PI or PI Delegate)

The next stage is to complete the Ethics Application and the Site Authorisation Application. These applications can be submitted concurrently, however Site Authorisation cannot be finalized until ethical approval has been obtained.

7.4 Ethics Application

Step One: [Add and complete the required forms](#) (Forms and Documents tab)

Step Two: Upload the required documents

Step Three: Authorise all forms and documents

Step Four: Click Submit to Ethics

7.4.1 Forms

The application must be submitted prior to the submission deadline to be considered at the next meeting. The RGS Meeting Calendar can be found [here](#) for all WA Health HREC's. Contact with the [Administering RGO](#) prior to submitting the ethics application form and documents are strongly encouraged. By doing so, a preliminary review of the application can be undertaken allowing for an easier amendment process within RGS.

Which ethics form you choose to use will depend on whether your project is operating within WA only or if it is a multi-site and/or interstate project.

- The *WA Health Ethics Application Form* (WAHEAF) is embedded in RGS and must be completed online. This form can be added in the Forms and Documents section. This is the recommended form for projects in WA. A [sample of the WAHEAF can be viewed here](#), which may assist you to become familiar with the questions asked.
OR
- If the *Human Research Ethics Application* (HREA) has been completed for a national project this can be uploaded in the Documents section. This is required for all NMA projects. When using this form the *WA Specific Module* must be added and completed in the Forms section.
Please note: If your project has received ethical approval from a HREC certified under the NMA, please submit the complete ethics application, including the HREA and WA Specific Module, within the 'Forms and Documents' tab under 'Ethics Approval' and submit the application to the 'WACHS RG Office'. This will be reviewed by the Research Governance Coordinator.

The *WA Health Ethics Application Form* or the *HREA - WA Specific Module* may be completed by any project member. Once complete it must be authorised by the CPI.

7.4.2 Documents

All supporting documents must be uploaded and authorised prior to submission. Documents may be authorised by the CPI or the CPI Delegate. Many [document templates](#) can be found online on the RGS website. Please ensure that all documents include a version number and date in the footer and that this information is the same as what is provided when uploading the documents to RGS.

Supporting documents depend on the nature of the project, with the most commonly required documents listed in the table below.

| Documents | When required |
|--|--|
| Protocol | Required for all projects. |
| Participant Information Sheet and Consent Form | Required when explicit consent is being obtained from participants. |
| Questionnaires/interview questions/other instruments | Required when undertaking a questionnaire or conducting an interview or focus group session. |
| Data Collection Sheet / List of Data Variables | Required for all data requests. |
| Recruitment documents (including transcript for advertisement, invitation, letter or telephone script) | Required when a recruitment process is undertaken. |
| Ethics approval letter/s from other approving HREC | Required when other ethics committees are involved in the review of the project. |
| Scales/Assessment forms | Required when there is an evaluation of a patient/participant involved in the project. |

7.4.3 Validation and Review

Once the forms and documents have been received by the HREC office they will be validated. Validation is not an ethical review; it is recognition that the documents have been received and contain the necessary information to be accepted for review. Following validation the project will be assigned to the next available HREC meeting or to the low and negligible risk ethical review pathway.

The project will then be reviewed by the HREC, and if required, feedback will be provided in accordance with the [National Statement](#).

7.4.4 Investigator Attendance at WACHS HREC Meeting

Investigators are invited to attend the WACHS HREC meeting at which the project is being reviewed in order to clarify concerns or issues that were unclear in the submission documents. While not compulsory, investigators are encouraged to attend.

In general, investigators provide a brief description of their proposal at the meeting. The HREC members will ask the investigator for clarification as required. The HREC will not indicate at the meeting whether the project has been granted approval, this will be conveyed in a letter following the meeting.

7.5 Site Authorisation

In addition to receiving ethical approval from a lead HREC, all research in WACHS is required to obtain site authorisation. Site authorisation is granted following ethics approval and WACHS' institutional review by the Research Governance Coordinator. This review ensures WACHS' resources can support the research activities, and the legal and institutional risks the project might impose are adequately addressed and safeguarded against.

Step One: [Add and complete the required forms](#) (under the Forms and Documents tab)

Step Two: Upload required documents

Step Three: Authorise all forms and documents

Step Four: Click 'Submit to Governance'

7.5.1 Forms

The *Site Specific Assessment Form (SSA)* and *Budget Form*, or the *Access Request Form (ARF)*, must be completed, signed by the WACHS Delegate of all Hospital Administrators, and the PI must then sign the SSA or ARF and authorise all forms.

All forms are embedded in the system and must be generated and completed online. They can be added in the 'Forms and Documents' tab, under 'Site Authorisation'.

| Forms | When required |
|-------------------------------------|--|
| Site Specific Assessment Form (SSA) | The SSA is used when investigators are physically accessing the WACHS site, such as enrolling participants in research or carrying out procedures on participants. It is recommended that one SSA is created per WACHS region. However, because the SSA must consider the logistics of how the project will occur at each WACHS site, you must ensure that any differences at a site level are included in the one SSA. |
| Budget | The Budget form will automatically generate when an SSA is generated. It is completed by the PI or PI Delegate, and must record all project support including in-kind funding. This includes the support provided by the originating institution, in addition to the support provided by WACHS. Supporting activities can include recruitment activities, and will include ethics review (\$3,500) and governance review (\$3,500) in-kind costs. The WACHS Delegate for all Hospital Administrators is then 'Invited to Quote' the budget prior to authorising. A draft budget (either generated via RGS or completed separately) must also be attached and sent via email with the Site Support Request Form to relevant WACHS site staff. |
| Access Request Form (ARF) | The ARF is used only when accessing WACHS sites remotely, whereby the project |

requests access to data system/s or participants without physically visiting the WACHS site where the participant/s or data is located. Examples include participant recruitment through posters/leaflets/handouts/letters of invitation (not direct contact), and distribution of surveys through WACHS personnel.

7.5.2 WACHS Delegate for all Hospital Administrators

Within WACHS, there is different process followed on RGS to obtain site support and signature from Hospital Administrators on site authorisation forms compared to other WA Health providers. The SSA, Budget and ARF are submitted for signing to the *Clinical Research Manager*, who has delegated authority on behalf of all WACHS Hospital Administrators to sign forms on RGS. Please contact the WACHS Research Governance Coordinator on WACHS.ResearchGovernance@health.wa.gov.au to confirm who to invite within RGS.

In order to ensure each site has been consulted on the project, the project team must complete the [Site Support Request Form \(SSRF\)](#) and submit this form to the relevant WACHS site staff for their considerations to support the research. It is advised that the SSRF and a drafted Budget is completed first, prior to the submission of all other site authorisation forms. This ensures in-principle support for the research is obtained prior to completing and submitting other aspects of the application. Once the relevant signatories are obtained on the SSRF, it is uploaded under 'Site Authorisation' 'Documents'.

7.5.3 Documents

All supporting documents must be uploaded and authorised prior to submission. [Templates for many of the site authorisation documents](#) can be found on the RGS website. The required supporting documentation depends on the nature of the project, with the most commonly required documents listed in the table below.

| Documents | When required |
|---|--|
| Site Support Request Form | Required for all research projects. |
| Student Declaration | Required for all student research projects. |
| Data Request Form | Required when a project seeks to access WACHS held data systems, and WACHS Data Custodian review and approval is required. Please consult with the Research Governance Coordinator regarding the data request process. |
| Conflict of Interest | For use when there is potential, perceived or actual conflict of interests. A conflict of interest is declared under the 'Declarations' tab on a RGS Project Workspace |
| Research Agreements | Standard WA Health Agreements can be found on RGS. The relevant agreement will depend on nature of the project. Examples include: <ul style="list-style-type: none"> • Confidentiality Disclosure Agreements • Data Request Transfer Agreement • Service Agreements • Clinical Trial Research Agreements Please consult with the Research Governance Coordinator regarding relevant research agreements that may be required for your project. |
| Funding Agreement (grant) | A copy is required when the project obtained a grant or funding. |

| Documents | When required |
|--|---|
| Ethics approval letters from approving HREC and any Specialist HREC | Required when using a HREC certified under the NMA and when a specialist HREC is providing ethical approval. |
| Insurance Certificates | Generally not required for government institutions or universities. Required for projects involving clinical trials and projects involving external private organisations. Examples of common types of insurance certificates required include professional indemnity and general liability. |
| Site Specific Participant Information and Consent Sheet | Generally required for projects ethically approved by another WA Health HREC and HREC certified under the NMA, and where consent is being obtained. |
| Simple Budget Sheet | Required when using the ARF. |
| Indemnity Form | Generally only required for clinical trials. |
| Investigator Brochure/Drug Information or Device Manual Specifications | Required in clinical trials involving an intervention with a drug or medical device. |
| Clinical Trial Notification | Required for clinical trials. |
| Advertising Material | A copy is required for review if you have requested distribution of advertising material (e.g. posters) throughout WACHS sites. |

8. Important Considerations

The following section provides guidance on a number of specific considerations relating to the submission of research applications at WACHS.

8.1 Research Design

Establishing an effective research design and communicating this via your ethics application is crucial to obtaining ethical approval for your project. In particular, this helps address the requirement to demonstrate *research merit and integrity*, which is one of the core four values underpinning the National Statement. Unless the proposed research has merit, and the researchers who are to carry out the research have integrity, the involvement of human participants in the research cannot be ethically justifiable.

It is important that your ethics application demonstrates that the research design and proposed conduct of your project is:

- justifiable by its potential benefit, which may include its contribution to knowledge and understanding, to improved social welfare and individual wellbeing, and to the skill and expertise of researchers;
- designed or developed using methods appropriate for achieving the aims of the proposal;
- based on a thorough study of the current literature, as well as previous studies, and a summary of the literature and references are included in your ethics application;

- designed to ensure that respect for the participants is not compromised by the aims of the research, by the way it is carried out, or by the results;
- conducted or supervised by persons or teams with experience, qualifications and competence that are appropriate for the research;
- conducted using facilities and resources appropriate for the research;
- following recognised principles of research conduct; and
- will disseminate results, whether favourable or unfavourable, in ways that permit scrutiny and contribute to public knowledge and understanding.

8.2 Waiver of Consent

A waiver of consent can be sought in circumstances where it is impracticable to obtain an individual's explicit consent to use their personal information (data or tissue) and the project cannot be carried out without using identifiable information.

Only a HREC may grant a waiver of consent for research using personal information in medical research, or personal health information. Therefore, all applications seeking a waiver of consent must be reviewed by a HREC, meaning that the project will not be reviewed through the low risk review process.

To apply for a waiver of consent, you must complete Section 6 of the WAHEAF with a statement addressing all sub-sections of section 2.3.10 (a-i) of the [National Statement](#). This includes providing assurance that:

- a) involvement in the research carries no more than low risk to participants;
- b) the benefits from the research justify any risks of harm associated with not seeking consent;
- c) it is impracticable to obtain consent (for example, due to the quantity, age or accessibility of records);
- d) There is no known or likely reason for thinking that participants would not have consented if they had been asked;
- e) There is sufficient protection of their privacy;
- f) There is an adequate plan to protect the confidentiality of data;
- g) In case the results have significance for the participants' welfare there is, where practicable, a plan for making information arising from the research available to them (for example, via a disease-specific website or regional news media);
- h) The possibility of commercial exploitation of derivatives of the data or tissue will not deprive the participants of any financial benefits to which they would be entitled; and
- i) The waiver is not prohibited by State, federal, or international law.

The HREC can only grant a waiver of consent if it is satisfied that all of these criteria are met.

8.3 Impaired Capacity to Consent

In accordance with the current WA Guardianship and Administration Act 1990, if individuals have impaired capacity they may not be able to consent to participation in research. The next-of kin or person responsible is not able to provide consent to research on behalf of the individual with impaired capacity. This is common situation in research involving emergency, stroke, mental illness and intensive care, therefore research in these populations is limited.

If the project is low risk and involves standard care or data collection you may be able to apply for a waiver of consent. If the project involves any novel intervention it is unlikely that this research can be conducted in WA unless the patient has the ability to consent prior to the intervention taking place (consent cannot be obtained retrospectively i.e. after the intervention has taken place).

If your project involves participants with impaired capacity to consent, and you are unsure if your proposed consent process meets the requirements of the WA Guardianship and Administration Act 1990, please contact the WACHS Research Governance Coordinator on WACHS.ResearchGovernance@health.wa.gov.au for further information.

8.4 Aboriginal Participants

The health, wellbeing and experience of Aboriginal and Torres Strait Islander Peoples continue to be the focus of much research to promote positive outcomes. Over the years, research has contributed to positive outcomes and benefits; however, not all research has been of benefit for Aboriginal and Torres Strait Islander Peoples and communities. [The NHMRC Ethical conduct in research with Aboriginal and Torres Strait Islander Peoples and communities Guidelines for researchers and stakeholders](#) defines six core values — spirit and integrity, cultural continuity, equity, reciprocity, respect, and responsibility. Applying these values and other ethical principles will ensure that research conducted with or for Aboriginal and Torres Strait Islander people and communities, or their data or biological samples, is ethically conducted.

You must address how these six core values have been considered and incorporated into your research design when selecting 'Aboriginal and/or Torres Strait Islander' as a 'primary intent or research' in the WA Health Ethics Application Form (or WA Specific Module).

As mentioned earlier, ethical review and approval from the Western Australian Aboriginal Health Ethics Committee (WAAHEC) is required for health and medical research projects that target Aboriginal and/or Torres Strait Islander people. This includes projects where:

- Aboriginality is a key determinant;
- Data collection is explicitly directed at Aboriginal and/or Torres Strait Islander people;
- Aboriginal and/or Torres Strait Islander people, as a group, will be examined in the results;
- the information has an impact on one or more Aboriginal communities; or
- Aboriginal health funds are a source of funding.

Please refer to the [Western Australian Aboriginal Health Ethics Committee](#) website for more information on the ethics application process in the region(s) your project is accessing and contact details for the Ethics Officer.

8.5 Student Applications

Unless a university HREC is certified under the NMA and part of a Public Health Organisation (PHO), WACHS cannot currently accept the ethical approvals they grant. As such, students conducting research involving WACHS will need to undergo an ethics process as described under the earlier heading [Human Research Ethics Committees](#).

Student's Supervisors should be the primary source of guidance to students and have the overall responsible for the conduct, monitoring and reporting related to the research project. For this reason, Supervisors should be appointed as the CPI within the RGS. The students can be appointed to the role of CPI Delegate so they are able to fulfil most of the tasks in RGS – the CPI Delegate has the same access/security rights for the research project as the CPI within RGS, with the exception of authorising the ethics application form for submission.

It is strongly encouraged that research students reference the [Australian Code for Responsible Conduct of Research](#) as it provides a comprehensive framework of acceptable academic standards.

Please ensure the [Student Declaration of Confidentiality Form](#) is complete prior to submitting your ethics and site authorisation applications, as this must be signed and uploaded before your research project can be approved. This applies even if you are WA Health employee.

To provide feedback on this publication email wachs.researchgovernance@health.wa.gov.au.