



## **ATTEND Study Interview evaluation**

### **INFORMATION FOR PARTICIPANTS**

#### **Introduction**

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You are invited to take part in the interview evaluation of the ATTEND study, which is part of the process evaluation of the study. As a patient or carer involved in this study you would be aware that this is a research study which looks to compare an Early Supported Discharge with a trained family-led caregiver-delivered, home-based rehabilitation program with usual care. You are invited to take part in the study to share your views about your health care experience and also about the study.

We know that patients' rehabilitation is likely to be affected by things such as cultural issues, costs of medications and additional support, relationships with your health providers. This might be very important in whether family led rehabilitation is effective. We are therefore seeking to explore your views on the advantages and disadvantages of family led rehabilitation post stroke in India.

Your views on these issues will help us understand what role family led rehabilitation has in providing best practice care for post stroke patients. The findings will help us understand the research and how it could work in India.

#### **Who can participate in the interview?**

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Participants and their carers from both usual care and intervention arm in the ATTEND trial will be invited to participate in this interview evaluation from a sample of participating sites.

#### **What is required in the interview?**

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If you participate in this study you will be interviewed by a study team member. We would like to talk to you for around 30-60 minutes. The interview process is informal and flexible as our main aim is to hear your experiences and views. We will fit within your schedule and if necessary speak with you over more than one visit if that is more convenient. Please let us know what works well for you.

#### **What will happen once we have collected your information?**

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We would like to record your interview(s).

All information will remain confidential. Study information will be stored in a securely locked file and password assessed electronic folder at the George Institute for Global Health and will be accessed only by study team members. Nothing written in reports will link you personally to the study.

## Ethics Approval

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This study has been approved by the Human Research Ethics Committee (University of Sydney, Australia) and your local Ethics Committee.

### Contact Details

If you have any problems, concerns, questions or complaints about this study, you should preferably contact

<Investigator Name>

<Designation>

<Site Name>

<Site Address>

<Contact Number>

### OR

Name of the ethics committee member : \_\_\_\_\_

Designation : \_\_\_\_\_

Contact No : \_\_\_\_\_

### OR

The Manager

Human Ethics Administration

University of Sydney

NSW 2006, Australia

Telephone +61 2 8627 8176; Facsimile +61 2 8627 8177

Email: [ro.humanethics@sydney.edu.au](mailto:ro.humanethics@sydney.edu.au)

This information sheet is for you to keep.



**ATTEND Study Interview evaluation  
PARTICIPANT CONSENT FORM**

**Participant:**

Name: .....

Address: .....

- I have read the participant information sheet
- I feel free to accept or refuse to participate in the interview
- I have had a chance to ask questions and all of my questions have been answered to my satisfaction
- I have been given and I understand the information on the interview concerning its nature, purpose, and duration, including any known or expected inconvenience.
- I agree that some of my words (not my name) will be used in the study reports
- I agree that the interview will be taped
- I do not have any objections to the interview record being kept at the end of the study
- By signing this form, I give my free and informed consent to take part in this study as outlined in the information sheet and this consent form. I understand that I am free to withdraw from the study at any given time. I have been given a copy of this consent form. By signing this form I have not given up my legal rights.

**Name of participant:**.....

**Signature of participant:** ..... **Date:**.....

**Name of interviewer:** .....

**Signature of interviewer:** ..... **Date:** .....