**PEER REVIEW REPORT**

**PROJECT TITLE**

Click here to enter text.

Version and date of research protocol under review: Click here to enter text.

**PEER REVIEWER DETAILS**

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| Name: Click here to enter text.Job title:Click here to enter text.Organisation: Click here to enter text. | Expertise: Click here to enter text. |
| Declaration of conflict of interest:**I am independent of this project and the research team. I have no potential conflicts of interest in reviewing this research project.****Agree** [ ] **or declare potential conflicts of interest:** Click here to enter text.*Note: please disclose any actual or potential conflit of interest in research to be reviewed, including any:*1. *Personal involvement or participation in research;*
2. *Financial or other interest or affiliation; or*
3. *Involvement in competing research.*
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| **CRITERIA:** | **YES****NO****N/A** |
| **Project details:** Has all appropriate information been included?(Investigator details and project title, protocol version number and date) | Choose an item. |
| **Research question:** Is there a clearly and precisely defined, answerable question?Is there a clear aim or objective? | Choose an item. |
| **Background:** Is the research question an important one? Does the background information provided five a good rationale for why the project is being done? Is the study useful to clinical practice, health service deliver or health outcomes?Is there a real problem/ knowledge gap that needs filling? | Choose an item. |
| **Plan of investigation:** |
| **1** | **Design:** is the design appropriate to the aim? Will the study address the question being asked and is it likely to produce an answer? | Choose an item. |
| **2** | **Bias and confounding:** Has the study been designed to minimise the risk of bias? Have the investigators adequately accounted for the influence of potential confounders? | Choose an item. |
| **3** | **Sampling issues:** Will the proposed study group be large enough to provide sufficient statistical precision or power, where appropriate? Is there a reasonable justification for the proposed sample size? Will the sample collected be reasonable representative of the population in question? | Choose an item. |
| **4** | **Feasibility:** Is there sufficient evidence to indicate that it will be possible to obtain the numbers required for the study? Is the study feasible in terms of funding support, the research team’s capability and experience to conduct the research as proposed, time and other resources? | Choose an item. |
| **5** | **Participants:** Are the criteria for eligibility clear and justified? Have the methods used to identify, approach, recruit and consent participants been clearly and completely described? | Choose an item. |
| **6** | **Intervention or exposure:** Is the intervention or exposure factor clearly described in adequate detail, where appropriate? | Choose an item. |
| **7** | **Procedure plan:** Has an appropriate plan of the study been detailed? Is the estimated duration of the project stated and appropriate? Is it clear how a participant will progress through procedures, assessments and visits, where applicable? | Choose an item. |
| **8** | **Outcome measures:** are these appropriate and achievable? Are definitions sufficiently detailed? Is the relevant data being collected on the proposed outcomes? | Choose an item. |
| **9** | **Data collection:** are the proposed data collection tools and data management systems appropriate for the project? | Choose an item. |
| **10** | **Analysis:** Is there an adequate indication of what analysis will be done on outcome measure to answer the research question? Are the proposed analyses appropriate? | Choose an item. |

1. **The researcher(s) has the necessary expertise to conduct the research and perform the procedures/techniques required by the research.**

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1. **Have an potential ethical issues been addressed? Are risks to participants minimised?**

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1. **Are there any methodological matters the researcher(s) need to take into account?**

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**GENERAL COMMENTS**

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**SUGGESTED CHANGES**

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I confirm that the project has been reviewed in full by a researcher experienced in the field of study that are independent of the research and the research team:

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| **Signature (Peer reviewer):** Click here to enter text. | **Date**:Click here to enter a date. |

**Please contact the Executive Officer of the DHW HREC if you have any questions regarding the Peer review process – (08) 7117 6635 or** Health.HumanResearchEthicsCommittee@sa.gov.au