

- Only trained and delegated staff can obtain informed consent. *Please ensure your local Principal Investigator (PI) has provided sign-off for this delegated responsibility for staff on the* **SurfON Site Delegation Log**
- Once infants have been identified (see Guidance Sheet 1: Screening & Eligibility Assessment), the clinical team should approach parents to discuss the study and request consent. This should happen promptly, once a clinical decision to provide non-invasive respiratory support has been made
- Consent and randomisation should be carried out ≤ 24 hours of birth
- Parents should be given a copy of the Parent Information Leaflet (PIL) and given time to read this and discuss the study with the medical team. SurfON parent-friendly introduction podcast (<u>https://www.npeu.ox.ac.uk/surfon</u> (or) <u>https://youtu.be/y52cipynYiY</u>) can be utilised along with the PIL
- Written informed consent must be obtained before an infant can be randomised to SurfON
- Ensure that parents are aware that participation is voluntary and that consent may be withdrawn at any time without explanation, without this affecting the infant's quality of care. If they choose to withdraw, they will be asked if data collection can be completed
- The final assessment of eligibility of the infant for SurfON, must be confirmed by a **delegated medically trained doctor or ANNP** and documented in the medical records.

Who can take Consent?

Clinicians, ANNPs and nurses can obtain consent, however they **must** have GCP training, SurfON study training, and be delegated to take consent by the PI on the Delegation Log. This log is kept in the **Investigator Site File (ISF)**.

Who may give Consent?

Where possible, both parents should be involved in the consent process, however, the parent with legal parental responsibility for the infant must sign consent to the study.

Legal parental responsibility is defined as either:

- Birth mother
- Father/partner who meets one of the following criteria:
 - married or in a civil partnership with the child's birth mother
 - listed on the birth certificate, has a parental responsibility agreement with the mother, or has a parental responsibility order from a court

Where the mother is under 16 years of age, she may be approached for consent by the medical team, if she is determined to be competent according to the Fraser Guidelines.

If a parent's capacity to give informed, voluntary consent is in doubt, their infant should not be recruited. Where there is disagreement amongst parents regarding the infant's participation, the infant should not be recruited. Where parents do not have a good understanding of English, sites



may use the translation and interpreting services, which they routinely use in clinical practice to communicate the trial. However, study documents are only available in English language.

Key points to discuss with Parents:

- Ensure they are aware that participation is voluntary and that consent may be withdrawn at any time without explanation
- If they decide not to participate, it does not impact current or future NHS treatment and care
- We want to find out how best to treat breathing problems in babies born early
- If they agree to participate, their baby will have an equal chance of being in either study group:
 - 1) Receive a single dose of surfactant when they first start to need help breathing
 - 2) Expectant management, the doctor will see if their breathing improves with non-invasive support alone
- Regardless of which group their baby is in, they may still receive surfactant, if the doctor feels it becomes necessary
- Both groups are standard practice within the NHS, however practice varies across hospitals in the UK. We are conducting the study because we do not know which is most effective for babies in this particular age group
- Surfactant is routinely used in babies and there are **no additional risks** involved with taking part in the study. Whilst there may not be any direct benefit in taking part, participation may help improve future care for babies
- As part of data protection and confidentiality, it will not be possible to identify
 participants from any presentation, report or publication that may arise from this
 study. Data from medical records will be collected and kept securely as documented
 in the PIL
- Parents can choose to withdraw from the study at any point and do not have to give a reason
- Provide the opportunity for the parents to ask questions
- Document parental consent to take part in SurfON in the infant's medical notes



Completing the Consent Form

The consent form must be signed and dated by the parent(s) and the healthcare professional taking consent.

- Please complete the consent form in block capitals. Ensure all boxes are initialled/completed, the writing is clearly legible, and details have transferred through all copies of the form
- The professional taking consent should read through the consent form with the parent and the parent should initial (not tick) each box before signing and dating the form (do not complete in advance)
- Any healthcare professional signing this form **must** be delegated by the PI to take consent on the **SurfON Site Delegation Log**
- The dates for the parent and healthcare professional signatures must be the same. Parents must not be given a consent form to 'take away and sign'
- If a father signs, a counter-signature from the mother must be obtained, in the first section, as soon as practically possible
- The second section of the consent form labelled as MOTHER can only be completed and signed by the mother. It is important to note that if the mother is unable to provide consent in the second section, it <u>does not</u> preclude her infant from being included in the main study. Providing consent in the second section enables the mother to take part in completion of the study questionnaires provided once at randomisation and once at infant's discharge home
- The final point on the consent form, 'I agree to be contacted in the future about further research related to this study' is optional and therefore not mandatory for taking part in this study
- Separate consent forms will be required for twins, triplets, etc. Please make this clear on the consent form e.g. FIRST NAME (TWIN 1), LAST NAME as demonstrated in the example consent form
- Any corrections on the consent form must be made in a GCP-compliant manner (for egdo not back date any corrections)



1. After consent, obtain a study number

	from the Randomisation website and write study number here.
Surf ON Parent Consent Fo	alpoint pen
Surfactant Or Not Chief Investigator: Professor Elaine MI Multicenter, quentaide, randomsed controlled hief and performance in an elaine minimum et la activation management in a controlled hief and performance in an elaine minimum et la activation management in a controlled hief and performance in an elaine minimum et la activation management in a controlled hief and performance in an elaine minimum et la activation management in a controlled hief and performance in a controlled hier and performance in a control hier and performance in	2. Differentiate between multiples (for example, infants can be named as TWIN
Baby's first name (ILOCK CARTALS) PERCY (TWIN ONE) DTHER PLEASE INITIA	ONE, TWIN TWO). Where first name is
 I confirm that I have read the SurfON Parent Information Leaflet (Version 3.0, 27/05/2020) for this study. I have had the opportunity to consider the information, ask questions and have had these answered satisfactority. 	not yet commed, white down as baby.
 I understand that participation is voluntary and that I am free to withdraw my baby and myself from the study at any time without giving any reason, and that our present or future medical care or legal rights will not be affected. 	
3. I understand that relevant sections of medical records and data collected during the study relating to me or my baby may be looked at by staff from the research team, sponsor, funder, regulatory authorities and this NHS Trust. I give permission for these individuals to have access to these records where it is relevant to taking part in this research.	3. Initial the box, not tick.
4. I agree to personal identifiable information relating to myself and/or my baby being collected, stored and used by the coordinating centre (NPEU CTU) in the University of Oxford. This is on the understanding that any information will be treated confidentially. 5. I agree that personal identifiable information including name, address, date of birth, gender and	
healthcare number can be shared with national databases such as NHS Digital or equivalent, in order to collect information relating to survival and any hospital visits my baby has in their first year.	4. Both the parent providing consent
6. I agree to my baby taking part in this study.	and the health professional taking
MacContactor Signature R.Stove 11/02/20 DD / Milling //second development of the second development	consent must be on the same date.
MPORTANT: PLEASE OBTAIN THE MOTHER'S COUNTERSIONATURE AS SOON AS POSSIBLE IF OTHER PARENT HAS PROVIDED ORIGINAL CO	
MOTHER: PLEASE INTIA	
7. I agree to complete short study questionnaires.	even if the other parent provides consent initially, as soon as practically
8. I agree to take part in the study.	possible.
Name of mother (WIR) CCC CADITAL IS	
N ³ /LA STONE NStone UD/(mm)/	6. Consent to complete questionnaire by
ROSE GARR MOTHER CAN COMPLETE OUESTIONNARES ONLY IF CONSENT HAS BEEN PROVIDED IN THE SECTION ABOVE HEALTH PROFESSIONAL MUST ALSO SUIFON Study Team, NPEU CTU, National Perinatal Epidemiology Unit, Nuffield Department of Population Health, University of Oxford, Old Road Campus, Oxford, OX3 7LF. V 01865 289 437/738 @ 101855 289 740 @ ouh-rsurfor@nhs.net @ www.npeu.ox.ac.uk/surfon	mother does not affect her infant from being included in the main study.
	LATION A
SurfON Parent Consent Form V4.0, 31-Mar-2022 REC Ref: 20/EM0003 IRAS ID::	20
ORIGINAL TO BE KEPT IN THE SITE FILE, 1x copy to Parent, 1x copy to SurfON Study Team, 1x copy in Baby's medical notes This tody is hundred by the National instants for Health Research (NHR) (Nubath Technology Assessment (HIA) (argest enterence TR3607)). The views expressed are those of the subroly and or toxessary those of the NRO or the Dystment of Health and Social Care.	can be left blank if they do not wish to
	be contacted in the future

Allocation of Study Number

Following randomisation (see **Guidance Sheet 3: Randomisation**), the website-allocated Study number for the participant should be completed on the consent form.

Documentation

There are four copies of the consent form. Once complete, a clear scanned copy of the original should be uploaded using the NPEU CTU Document Upload Tool.

Please do not email consent forms as they contain identifiable data – please only send them via the NPEU CTU Document Upload Tool

The original consent form should be kept in the ISF, 1x copy to be given to the Parent and 1x copy to be stored in the infant's medical notes.



Administering Trial Entry Questionnaire

If the mother has provided consent to complete the questionnaire, please provide the Trial Entry Questionnaire as soon as informed consent is obtained and the baby has been randomised. The infant's study number should be entered on the Questionnaire after randomisation.

If the mother has delivered multiple infants, a questionnaire should be completed for each infant, for example, if the mother has delivered twins, she would complete 2x Trial Entry Questionnaires.

Once complete, this should be entered onto OpenClinica and the original filed in the Data Collection File.

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National Institute for Health Research



