

UNIVERSITY OF SOUTHERN MAINE  
Muskie School of Public Service  
Health Policy Institute

On-Site In-Person  
INTERVIEW CONSENT FORM

November 1, 2004

I have been asked to take part in a study about the recruitment and retention of direct care workers. I have been told that the purpose of this study is to examine job and workplace changes that will make direct care work more attractive and rewarding in order to keep direct care workers in their jobs and draw committed workers to the field of home health care.

I have been asked to take part in an interview where I will discuss my thoughts and experiences as a direct care worker/supervisor/owner with one of the researchers and my perspectives on what is good about direct care work and what might be done to improve the job for direct care workers.

This discussion is *voluntary*—I do not have to take part if I do not want to, and I can stop taking part at any time. Choosing not to participate will in no way affect my job or my relationship with my employer. If any questions make me feel uncomfortable, I do not have to answer them. My privacy will be protected and my name will not be used in any sort of report that is published. The interview information will be kept *strictly confidential*. The information I provide during the interview will not be linked to my name or any other personally identifying information. The information I provide during this interview will not be released to my employer. The information I provide will be added to the information collected through similar interviews with at least 100 other workers from many other agencies and a report describing the combined information is all that my employer will see. All information collected from me will be stored in a locked file cabinet and will be destroyed after the study is completed.

I have been given the opportunity to ask any questions I wish regarding this evaluation. If I have any additional questions about the evaluation, I may call Lisa Morris at (207) 780-5876. If I have any questions about my rights as a research subject, I may call the Office of research Compliance at the University of Southern Maine at (207) 780-4268. I have received (or will receive) a copy of this form.

*Please write your name below and check yes or no. Sign your name at the bottom.*

\_\_\_\_\_  
NAME

\_\_\_\_\_ Yes, I would like to take part in the interview.

\_\_\_\_\_ No, I would not like to participate in the interview.

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
DATE