



FAMILY PLANNING VICTORIA

FAMILY PLANNING VICTORIA HUMAN RESEARCH ETHICS COMMITTEE

FINAL REPORT

(Please include report cover sheet with this report)

FPV HREC Project No. & Title:

Date research completed:

1. Provide a brief summary of the findings and benefits of the research *(attach separate page if required)*.

2. If problems were encountered in a) ethical conduct, b) study design, c) recruitment, d) finance or equipment (since the last progress report, if applicable) please provide details.

3. Provide details, and attach a copy, of any publications accepted or in press. If no publications are planned, please provide reason.

4. Provide details of any presentations given.

5. Have research participants been notified of the study's findings? Please provide details, including (anticipated) dates and how they were/will be notified.

6. Have any further avenues of research opened up as a result of this project?

7. Your comments on ethical issues that might arise in future considerations would be appreciated.

DATA ARCHIVING

Period of archiving before destruction of project materials:.....years* Date materials will be destroyed:...../...../.....
For health research: Health information must be retained for a minimum of 7 years. Data relating to published **clinical research must be retained for a minimum of 15 years **from the date of publication**.
For non-clinical research: Research data must be retained for a minimum of 5 years from the date of publication (or from the completion date of the research project if there are no resulting publications).*

Has all project data been securely archived? Yes No → If not, when will this occur?

Describe the security arrangements for archiving of project materials. Who will have access to them? How will electronic data be securely archived?

Please provide details of the location at which all archived data will be stored (name of site, address, etc.)

Iagree to comply with the storage, archiving and disposal/destruction of project materials in line with *National Statement on Ethical Conduct in Research Involving Humans* and relevant federal and state legislation.

Signed:

Date:

DECLARATION

I confirm that this project was conducted as approved by FPV HREC (as per approved application and any subsequent approved changes) and in accordance with the National Statement on Ethical Conduct in Research Involving Humans, and any other relevant State or Commonwealth legislation/regulations.

I confirm that this research has now been completed.

Principal Researcher:

(please print name)

Signature:

Date: