Use of People as Teaching Resources Procedure

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Scope

These procedures apply organisation-wide to all programmes using people in roles other than student or teacher in teaching/learning situations. Refer to the policy for further information.

Responsibility

All teaching staff are responsible for the implementation of the policy and these procedures in their teaching.

All staff are expected to conform to the highest ethical standards in relationships with colleagues, professional associations, students, clients and community.

Programme leaders/equivalent have overall responsibility for ensuring the implementation of these procedures.

Procedure

The following criteria must be met prior to the involvement of people as teaching resources;

- informed consent of the participants
- confidentiality
- minimising harm
- the proposed activities will achieve worthwhile objectives in teaching
- these objectives could not be satisfactorily achieved without the use of human participants
- there are adequate resources for the safe and successful completion of the activities.

All teaching activities involving people as teaching resources are to be assessed using *The Use of People as Teaching Resources Risk Assessment Form* (see appendix 1).

This completed Risk Assessment Form **and** a plan (Risk Management Plan) listing strategies that will be implemented to manage each of the risks identified in the Risk Assessment Form are to be sent to the Programme Leader/equivalent.

Where no underlined items on the Risk Assessment Form have been ticked

The Programme Leader will review the nature of the risks identified in the Assessment Form and the adequacy of the management strategies documented in the Risk Management Plan.

Once the Programme Leader/equivalent has reviewed the provided information they will make a decision which may be to:

1. Agree to the specified activity being carried out (provided the proposed risk management strategies are complied with); or
2. Delay making a decision until further information is provided or expert opinion is obtained.

Where an underlined item on the Risk Assessment Form has been ticked

The Programme Leader/equivalent will work with programme staff to develop an Informed Consent Form to be used by people who are considering participating in the particular activity. For a definition of Informed Consent see below. Refer to Appendix 2 for an example of an Informed Consent Form for People Used as Teaching Resources.

The Programme Leader/equivalent will then forward to the Head of School/equivalent (HOS) a copy of:

- The completed Risk Assessment Form
- The completed Risk Management Plan and
- The proposed Informed Consent Form

Once the HOS has reviewed the provided information they will make a decision which may be to:

1. Agree to the specified activity being carried out provided informed consent is gained from all people participating as teaching resources in the procedure and the Risk Management Plan is complied with.
2. Delay making a decision until further information is provided or additional advice obtained.
3. Liaise with the Director, Academic Development to convene a group of experts (including experts from the programme field) to consider the procedure – this group may:
    a) Agree to the specified activity being carried out provided informed consent is gained from all people participating as teaching resources in the procedure and the Risk Management Plan is complied with;
    b) Agree to the specified activity being carried out with the provision that their additional recommendations are implemented;
    c) Refer the decision to the Central Regional Ethics Committee; or
    d) Make a recommendation to the Deputy Chief Executive, Academic that in their opinion the identified procedure poses too greater risk to people as teaching resources and therefore must not be part of the programme.

The HOS or their nominee will keep a copy of all discussions and correspondence related to the decision and also send a copy of this information to Curriculum and Academic Services to be filed with the relevant curriculum.

Informed Consent

Elements of informed consent include, but are not limited to, the following basic criteria:

1. The participant's legal competence and ability to understand;
2. Information about the proposed activity being comprehensively, properly and appropriately given, including any likely outcomes of participation in the activity;
3. The participant's consent must be voluntary and not influenced by financial reward or by duress in any manner, nor must dependent or vulnerable groups be used;
4. Participants must be able to withdraw from the activity at any time without waiver of any rights and without giving reasons;
5. In the case of participants who are under 18 years of age the signature of the parent or guardian should be obtained in addition to the participant's consent.

Relevant Legislation and/or Web Sites

- Health and Safety in Employment Act 1992
- Health and Safety in Employment Amendment Act 2002
- Employment Relations ACT 2000
- Human Rights Act 1993
- Privacy Act 1993

Related Documentation

- Use of People as Teaching Resources Policy
- Research Policy
- Code of Ethical conduct for Research and Teaching Involving Humans as Research Participants
- Activity Planning and Risk Assessment Management System (RAMS) Guidelines

Appendices

Appendix 1 Risk Assessment Form – The Use of People as Teaching Resources
Appendix 2 Informed Consent Form – People Used as Teaching Resources

APPENDIX 1

RISK ASSESSMENT FORM

THE USE OF PEOPLE AS TEACHING RESOURCES

Name of Procedure:	
Occurrence: **One off** ❒ **Recurring** ❒ **State frequency**	**Person conducting this assessment:** **Name** **Programme** **Location** **Contact details**

Please attach a copy of the procedure/activity

RISK FACTORS

The Procedure	**Yes**	**No**
The participant may intentionally or unintentionally come into contact with chemicals (e.g. hair care/ makeup products, antiseptic lotions, adhesives, plant extracts, essential oils)		
The participant will be subjected to an invasive procedure (e.g. injection)		
The participant will be required to undress down to their under wear and/or expose normally private parts of their body.		
The procedure requires a student or tutor to touch the participant above their knee and/or on the back or front of their torso		
The procedure is painful or may cause pain		
The procedure is experimental, controversial or outside the mainstream		
The procedure requires the participant to undertake strenuous physical exercise		
Additional risk factors (please specify)		
Characteristics of the participant	**Yes**	**No**
UCOL student within the programme or course		
UCOL staff member/contractor within the programme or course		
Other UCOL student		
Other UCOL employee		
Under 18 years (please specify age)		
Person with intellectual or mental disability (please specifiy disability)		
Adult volunteer		
Adult (being paid by UCOL)		
Adult other (please specify)		

Equipment used during the procedure	**Yes**	**No**
Electrical equipment		
Medical equipment		
Heat or hot equipment		
Ice, cryogenics or freezing agents		
Volatile and/or flammable gases or liquids		
Biohazards (e.g. blood, cultures)		
Other (please specify)		
Characteristics of those carrying out the procedure on the participant	**Yes**	**No**
Beginning (novice) practitioners		
Level of supervision of those carrying out the procedure on the person used as a teaching resource	**Yes**	**No**
Expert tutor/lecturer constantly in attendance and working one to one with the practitioner/student		
Expert tutor/lecturer constantly in attendance and supervising a group of students		
Expert tutor not in attendance but able to be accessed immediately		
Student will work independently without a tutor or other experienced person being present or immediately available		
Outside examiner constantly in attendance (please provide details		

Other relevant information:

NB: if any underlined items are ticked then an Informed Consent Form must be completed.

APPENDIX 2

INFORMED CONSENT FORM -
PEOPLE USED AS TEACHING RESOURCES

Please read this consent form carefully and ask as many questions as you like before you decide whether you want to participate as a resource in the teaching/learning activity. You are free to ask questions at any time before, during or after your participation in this activity.

Programme Information:	
Programme Title:	Programme Number:
Campus:	Faculty:
Programme Leader/equivalent:	Location:
Phone:	

PURPOSE OF THE TEACHING ACTIVITY

Include 3-5 sentences written in non-technical, 12 year old reading level language) *"You are being asked to be part of a teaching activity designed to…"*

PROCEDURES

- Describe procedures: *"You will be asked to do..."*
- Identify any procedures that are experimental or investigational
- Define expected duration of the person's participation.
- Indicate the type and frequency of monitoring during and after the participation

POSSIBLE RISKS OR DISCOMFORT

- Describe known or possible risks. If unknown, state this.
- Indicate if there are special risks to women of childbearing age (if relevant).
- If the person's participation will continue over time, state: "*any new information developed during the time of your participation that may affect your willingness to continue to participate will be communicated to you.*"

POSSIBLE BENEFITS

- Describe any benefits to the participant that may be reasonably expected. If the participation is not of direct benefit to the participant, explain possible benefits to others.

FINANCIAL CONSIDERATIONS

- Explain any financial compensation involved, or state: "*There is no financial compensation for your participation in this activity*."
- Describe any additional costs to the participant that might result from participation in this activity.

AVAILABLE ALTERNATIVES

- If the procedure involves an experimental treatment, indicate whether other non-experimental (conventional) treatments are available and compare the relative risks (if known) of each.

AVAILABLE TREATMENT FOR ADVERSE EXPERIENCES

- This study involves minimal risk/greater than minimal risk. In the event that greater than minimal risk is involved, provide the participant with the following information. "*If you are injured as a direct result of taking part in this activity, emergency medical care will be provided by [name or by transporting you to your personal doctor or medical centre. UCOL will not be able to provide you with long-term medical treatment or financial compensation except through whatever remedies are normally available at law."*

TERMINATION OF PARTICIPATION

- *"You are free to choose whether or not to participate.* ***Either there will be no penalty or loss of benefits to which you are otherwise entitled if you choose not to participate or these are the potential consequences that may result if you choose not to participate:*** *(list)"*
- *"You will be provided with any significant new findings that may relate to or influence your willingness to continue participation.*
- *"In addition, your participation in the study may be terminated by the Programme Leader or their nominee without your consent under the following circumstances.* (Describe)".

AVAILABLE SOURCES OF INFORMATION

- *"Any further questions you have about participating in the identified procedures will be answered by Name*:"

  Phone Number:

AUTHORISATION/INFORMED CONSENT

"*I have read and understand this consent form, and understand that I will receive a copy of this form. I voluntarily choose to participate, but I understand that my consent does not take away any legal rights in the case of negligence or other legal fault of anyone who is involved in this activity. I further understand that nothing in this consent form is intended to interfere with my existing legal rights. The nature and extent of my participation has been fully explained to me. I agree that the activity is sensitive to my cultural and individual needs. I understand that any records identifying me will be confidential."*

Participant Name:	Date:
Participant Signature:	Date:
Programme Leader **or their Nominee's Name:**	
Programme Leader **or their Nominee's Signature:**	Date:
Name of Person Obtaining Consent:	
Signature of Person Obtaining Consent:	Date: