**Appendix 8: Application to use the CPFT Research Database (Researcher)**

***Please return to Kristel.Klaus@mrc-cbu.cam.ac.uk***

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| **Section 1 – Details of Researcher** |
| a | Surname: | Prof[ ]  Dr[ ]  Mr[ ]  Mrs[ ] Miss [ ]  Ms[ ]  Other[ ]  |
| Forename(s):  |
| Work Tel: Email:  |
| Employer: or place of study:  |
| Work Address/Place of Study:  |
| Post or status held:  |
| b | Do you hold a contract with the CPFT?Substantive employee [ ]  Honorary Clinical Contract [ ]  Research Passport [ ] Honorary Research Contract [ ]  Letter of Access [ ] Date issued Date of expiry NHS Manager  |
| c | Name of project the researcher will work on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Research Database Project Approval Number \_\_\_\_\_\_\_\_\_\_\_\_\_ |
| d | Have you completed the Good Governance Module Have you completed a MCA module?  | Date Date: |

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| **Declaration *To be completed by the Researcher*** |
| As an approved researcher accessing the Affective Disorders Research Database (ADRD), I agree to adhere to the CPFT information governance regulations. Any data accessed from the ADRD will be stored, retained and disposed of in line with their data protection and confidentiality policies and will remain within the CPFT network. No data will be removed from a CPFT server (including printing, saving onto an external USB, emailed ect). If a breach of data protection is found to have occurred, it is the responsibility of the researcher to notify the ADRD Committee, who will ensure the data breach is reported appropriately and the necessary reporting requirements and timescales are adhered to. **ADRD Contacts:**

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| Dr Caitlin Hitchcock  | Caitlin.Hitchcock@mrc-cbu.cam.ac.uk |
| Dr Tim Dalgleish | Tim.Dalgleish@mrc-cbu.cam.ac.uk |
| Dr Rajini Ramana | rajini.ramana@cpft.nhs.uk |
| Rachel Elliott | Rachel.elliott@mrc-cbu.cam.ac.uk |

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| Signed by: | Dated:  |

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| **Section 2 – *To be completed by the Research Database Administrator*** |
| a | Accompanies a valid project application? | Yes [ ]  No [ ]   |
| b | Honorary contract in place? | Yes [ ]  No [ ]  N/A [ ]  |
| c | R&D holds contract | Yes [ ]  No [ ]   |
| d | Completed Good Governance Module? | Yes [ ]  No [ ]   |
| e | Completed MCA Module (if taking consent)? | Yes [ ]  No [ ]  N/A [ ]  |
| Completed by: | Dated:  |
| **Section 3 – *To be completed by the Research Database Oversight Committee*** |
| a | Researcher approved for use of Research DatabaseResearch Database Researcher Approval Number: | Yes [ ]  No [ ]  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Signed by: | Dated:  |