

Consent Form Requirements - MOH/DSC Attestation

These requirements must be met by Data Access Requests (DAR) requesting **linkages between data from consented participants and Ministry of Health administrative data**. All items must directly relate to this purpose. Compliance with the relevant privacy legislation and data steward requirements outlined below is the responsibility of the project Principal Investigator (PI).

Ministry of Health and Data Stewardship Committee Requirements: General	DAR page number
Administrative databases requested are clearly listed and associated with the correct agencies and data stewards	<input type="checkbox"/>
Field(s) intended for linkage are included	<input type="checkbox"/>
Date ranges for each database requested are provided	<input type="checkbox"/>
Reasons each database is requested are included	<input type="checkbox"/>
Description of the study data or other data that would be linked with the administrative data (including genetic and biosample data) is included	<input type="checkbox"/>
Identities of parties conducting the linkage with administrative data are provided	<input type="checkbox"/>
How administrative data and data linked with administrative data would be moved during and after linkage is described	<input type="checkbox"/>
All locations where administrative data and data linked with administrative data would be stored are listed	<input type="checkbox"/>
Security features of locations where administrative data and data linked with administrative data would be stored are listed	<input type="checkbox"/>
Confirmation that administrative data and data linked with administrative data will not be moved or shared outside of the MOH-approved analytical environment is included	<input type="checkbox"/>
Confirmation that administrative data and data linked with administrative data will not be shared with for-profit entities is clearly stated	<input type="checkbox"/>
Data destruction dates for administrative data and data linked with administrative data must be provided	<input type="checkbox"/>

**Ministry of Health and Data Stewardship Committee
Requirements: Consent Form**

**Consent
form
page
number**

All legislation covering the collection, use, and disclosure of data in the study, including the administrative data, and the legal rights of participants is listed	<input type="checkbox"/>	
Notice that a participant can request to have their data and information updated, and deleted from the study if they decide to withdraw is included	<input type="checkbox"/>	
The impact of a participant withdrawing from the study, including what would happen to their data linked with administrative data, is provided	<input type="checkbox"/>	
An explicit consent mechanism for opting-in to linkage of a participant's administrative data with other data sources is included	<input type="checkbox"/>	
An explicit statement as to whether or not individuals opting out of linkage can still participate in the study is included	<input type="checkbox"/>	

I attest that all of the above requirements are contained in the attached Consent Form DAR Package.

Name of PI:

_____ (Signature)

_____ (Date)