

APPENDIX B: Ethics Clearance Certificate

UNIVERSITY OF THE WITWATERSRAND, JOHANNESBURG

Division of the Deputy Registrar (Research)

HUMAN RESEARCH ETHICS COMMITTEE (MEDICAL)

R14/49 Mulenga

CLEARANCE CERTIFICATE

PROTOCOL NUMBER M081144

PROJECT

The Influence of Non-Financial Incentives
on the Retention of Nurses in Two Rural
Hospitals in the Copperbelt Province of...

INVESTIGATORS

Dr LK Mulenga

DEPARTMENT

School of Public Health

DATE CONSIDERED

08.11.28

DECISION OF THE COMMITTEE*

Approved unconditionally

Unless otherwise specified this ethical clearance is valid for 5 years and may be renewed upon application.

DATE 08.11.28

CHAIRPERSON



(Professor P E Cleaton Jones)

*Guidelines for written 'informed consent' attached where applicable

cc: Supervisor : Prof S Naidoo

DECLARATION OF INVESTIGATOR(S)

To be completed in duplicate and **ONE COPY** returned to the Secretary at Room 10004, 10th Floor, Senate House, University.

I/We fully understand the conditions under which I am/we are authorized to carry out the abovementioned research and I/we guarantee to ensure compliance with these conditions. Should any departure to be contemplated from the research procedure as approved I/we undertake to resubmit the protocol to the Committee. I agree to a completion of a yearly progress report.

PLEASE QUOTE THE PROTOCOL NUMBER IN ALL ENQUIRIES...

APPENDIX C: Informed Consent Form

By signing below, I agree to take part in a research study entitled *the influence of non-financial incentives on the retention of nurses in two rural hospitals in the Copper belt Province of Zambia*.

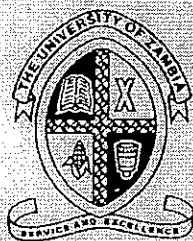
I declare that:

- I have read the introductory letter and this consent form and it is written in a language with which I am fluent and comfortable.
- I have had a chance to ask questions and all my questions have been adequately answered.
- I understand that taking part in this study is voluntary and I have not been pressurized to take part.
- I may choose to leave the study at any time and will not be penalized or prejudiced in any way.
- I may be asked to leave the study before it has finished, if the study researcher feels it is in my best interests, or if I do not follow the study plan, as agreed to.

Signed at (place)..... On (date)..... 2009.

Signature of participant.....Signature of witness.....

APPENDIX D: Permission Letter



THE UNIVERSITY OF ZAMBIA

BIOMEDICAL RESEARCH ETHICS COMMITTEE

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P.O. Box 50110
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Assurance No. FWA00000338
IRB00001131 of IORG0000774

23 June, 2009
Ref.: 014-04-09

Dr Lisa Mulenga
Postnet #106, Private Bag E891
LUSAKA, ZAMBIA

Dear Dr Mulenga,

RE: RESUBMITTED RESEARCH PROPOSAL. "THE INFLUENCE OF NON-FINANCIAL INCENTIVES ON THE RETENTION OF NURSES IN TWO RURAL HOSPITALS IN THE COPPERBELT PROVINCE OF ZAMBIA"

The above-mentioned research proposal was presented to the Biomedical Research Ethics Committee meeting held on 29 April, 2009 where changes were recommended. We would like to acknowledge receipt of the corrected version with clarifications. The proposal is now approved.

CONDITIONS:

- This approval is based strictly on your submitted proposal. Should there be need for you to modify or change the study design or methodology, you will need to seek clearance from the Research Ethics Committee.
- If you have need for further clarification please consult this office. Please note that it is mandatory that you submit a detailed progress report of your study to this Committee every six months and a final copy of your report at the end of the study.
- Any serious adverse events must be reported at once to this Committee.
- Please note that when your approval expires you may need to request for renewal. The request should be accompanied by a Progress Report (Progress Report Forms can be obtained from the Secretariat).
- Ensure that you submit the final report of the study to this Committee.

Yours sincerely,

Dr E. Munalula-Nkandu, BSc (Hons), MSc, PgD R/Ethics, PhD
CHAIRPERSON