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## CONSENT FORM FOR PARTICIPATION

I ..... (PBS practitioner/supervisor of PBS practises/services) being over the age of 18 years, hereby volunteer to participate in the research project titled “*Evaluating and monitoring the quality of Positive Behaviour Support (PBS) plans for individuals living with disabilities.*”

1. I have read the information provided
2. Details of procedures and any risks have been explained to my satisfaction
3. I agree to data collected from the Delphi method to be used in preparing the report, on condition that my name or identity is not revealed
4. I am aware that I should retain a copy of the information sheet and consent form for future reference
5. I understand that:
  - I may not directly benefit from taking part in this research
  - I am free to withdraw from this project at any time
  - While the information gained in this study will be published as explained, I will not be identified, and individual information will remain confidential
  - Whether I participate or not, or withdraw after participating, will have no effect on any service/support that is being provided to me
6. I agree to data collected being made available to other researchers who are not members of this research team, but who are judged by the research team to be doing related research, on condition that my identity is not revealed.

**PBS practitioner/supervisor signature:**.....

**Date:**.....