



## Application for Exempt Review of Human Participant Research

University of West Georgia Human Research Protection Program  
IRB # \_\_\_\_\_ (to be filled out by IRB Administration)

**Instructions:** Complete this form by checking all appropriate boxes, answering questions completely, attaching required documents and signing the Certification Statement.

**Submit application form electronically to [irb@westga.edu](mailto:irb@westga.edu).** (Incomplete applications will be returned unreviewed.)

### Section I: Study Description

1. Study Title: "Opportunities and Challenges for the Visually Impaired Patron in Academic Libraries"
2. Study Description: *Please describe briefly the objectives of the study with the purpose, research question, and any relevant background information.*

What opportunities and challenges do visually impaired patrons face in academic libraries? This question succinctly summarizes the purpose of this research study. Persons with disabilities are an ever-growing segment of any population. Nearly every (adult) global citizen has legitimate needs to access the Internet. Sadly, the disabled in general and the visually impaired in particular are often marginalized, and open access is not necessarily tantamount to equal access. The Americans with Disabilities Act (ADA) and subsequent Section 508 of the federal code have set the legal bar in an attempt to level the playing field and these statutes serve as an excellent framework from which to determine compliance.

While a renaissance of opportunity for the visually impaired patron is underway, significant challenges endure. For example, even though blatant discrimination is now illegal, latent discrimination persists. Another objective this research study intends to show is that emerging technology is not necessarily accessible technology. For example, a sighted library patron may petition the campus library to upgrade its computers to the latest version of Microsoft Windows but doing so might cause assistive technology to cease to work. The research plan will focus in on one particularly troublesome challenge visually impaired students are forced to contend with, and that is using proprietary database search engines for scholarly research.

Anonymous surveys of visually impaired students registered with the Disabled Student Services office on the campus of Middle Tennessee State University will be asked to share their positive and negative experiences in the James E. Walker Library and Adaptive Technology Center to add their perspectives to the body of knowledge. A target goal of 50 subjects will be surveyed, 20 subjects interviewed, and 10 subjects will be invited to participate in an observation test of conducting two academic database searches using adaptive technology.

The entire research project is projected to begin on October 2, 2012 and end on December 21, 2012.

3. Principal Investigator: David S. Robertson  
Responsible faculty member if student is the PI: Dr. Danilo Baylen  
Department(s): Department of Educational Innovation / COE
4. As Principal Investigator of this research (and responsible faculty member if PI is a student), I agree:

- To ensure all members of the research team complete the required CITI training and any other necessary training to fulfill their study responsibilities.
- To follow the study procedures as described in the IRB approved application letter and comply with the University of West Georgia's Guidelines for the Review of Research Involving Human Subjects and all IRB communication.
- To uphold the rights and welfare of all study participants.
- The information submitted within this application is true, complete, and accurate to the best of my knowledge.
- I understand that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil, or administrative penalties.
- If funded, I assure that this protocol accurately reflects all procedures involving human subjects described in the grant application to the funding agency.
- I will notify the IRB regarding any adverse events, unexpected problems or incidents that involve risks to participants or others, or any complaints.
- I will disclose any current or future conflict of interest, including financial, associated with the implementation of this study.
- No change(s) to the final approved protocol will be initiated, including the approved consent form(s) without prior IRB review and written approval, except where necessary to eliminate apparent immediate hazards to subjects.
- I understand I am responsible for monitoring the expiration of this study, and complying with the requirements for an annual continuing review for expedited and full board studies.
- To maintain accurate and complete research records, including all informed consent documents, for three years from the date of study completion or in compliance with sponsor guidelines.
- The IRB reserves the right to audit an ongoing study at any time.
- I will promptly submit a final report when the research has been completed or is being closed prior to completion.
- Research will only begin after I have received notification of final IRB approval.

The parties (i.e., the IRB and the Principal Investigator and responsible faculty member if PI is a student) have agreed to conduct this application process by electronic means, and this application is signed electronically by the Principal Investigator and by the responsible faculty member if a student is the PI.

**My name and email address together constitute the symbol and/or process I have adopted with the intent to sign this application, and my name and email address, set out below, thus constitute my electronic signature to this application.**

David. S. Robertson

PI Name

drobert9@my.westga.edu

PI Email address

*Application should be completed by student and sent to the Responsible Faculty member. To approve the research proposed, the responsible faculty member should type their name and email, and submit the application to the UWG IRB at [irb@westga.edu](mailto:irb@westga.edu).*

*By signing this application I acknowledge that I have reviewed and approved the protocol for scientific merit, rational, and significance. I further acknowledge that I approve the ethical basis for the study.*

Dr. Danilo Baylen  
Responsible Faculty Name if PI is a student

dbaylen@westga.edu  
Responsible Faculty Email address

5. Dissemination of Results:

- I plan to publish (thesis, dissertation, journal, book, etc.)
- I plan to present off campus (conferences, etc.)
- I plan to present on campus (Celebration of Student Research, Capstone, etc.)
- I will not publish or present outside of class assignment
- Other: [Click here to enter text.](#)

6. Type of Research, check all that apply:

- Faculty Research
- Dissertation/Thesis/Honor's Thesis
- Product of Learning/Capstone Research
- Class Project: Course number: MEDT 8484
- Other: [Click here to enter text.](#)

7. Source of funding:

- Not Funded
- Funds Awarded
- Funds Pending
- Federally Funded
- University Funded: [Click here to enter text.](#)

If funds awarded/pending, provide sponsor name, Sponsored Programs number:  
[Click here to enter text.](#)

*Attach a copy of the contract/grant/agreement.*

## Section II: Research Personnel

Enter each team member (including PI) in the table below. (A member of the research team is defined as one who will: 1) access participants' private identifiable information, 2) obtain informed consent, or 3) interact with participants.)

Name	Role (e.g., PI, co-I, Research Assistant, Research Coord., Faculty Advisor, etc.)	Responsibilities: Select all that apply from the list of Responsibilities below (e.g., "a, b, c")	Receive IRB Correspondence? (Y/N) if yes, provide preferred email address.	Completed CITI training? (Y/N)
David S. Robertson	PI	a,b,c,d,e,f,g,n (n=observe)	Drobert9@my.westga.edu	Y
Student Workers	Research Assistant	d,e,n (n=observe)	N/A	N
	<a href="#">Role</a>	<a href="#">Responsibilities</a>	<a href="#">Correspondence</a>	<a href="#">Y/N</a>

(Note: if you have additional research personnel, please attach a separate sheet with the above information. Personnel changes made after IRB approval can be submitted via email with the above information. Research personnel information must be received by the ORSO office before PARs will be approved for employee pay.)

**Responsibilities:**

a. Screens potential participants	h. Conducts physical exams
b. Obtains Informed Consent	i. Collects biological specimens (e.g., blood samples)
c. Has access to identifiable data	j. Conducts study procedures
d. Administers survey	k. Dispenses medications
e. Conducts interviews	l. Supervises exercise
f. Enters subject data into research records	m. Educates participants, families, or staff
g. Analyzes data with identifiable information	n. Other: describe

**Note:** In some cases, expertise to perform study procedures (e.g., blood draws, interviewing participants about sensitive topics) should be documented by the IRB to show that risks to participants is minimized.

**Section III: Conflict of Interest**

Are there any known or potential conflicts of interest related to this research?

*Conflict of interest relates to situations in which financial or other personal considerations may compromise or involve the potential/ have the appearance for compromising an employee's objectivity in meeting University responsibilities or research activities.*

Examples of conflicts of interest include but are not limited to: an investigator has equity in a business that conducts research in a related area; an investigator will receive an incentive/bonus based on the number or speed of enrollment or outcome of a study; or an investigator or family member is a consultant, holds an executive position or serves as a board member of the research sponsor or its holdings.

No     Yes    If yes, describe and explain how participants will be protected from the influence of competing interests.

[Click here to enter text.](#)

**Section IV: Participant Population and Recruitment**

1. Number of Participants sought: 50

2. Targeted Participant Population (check all that apply):

Adults ( $\geq$  18 yrs old)

College Students (only 18 or older)

Minors (< 18 yrs old) Age range [range](#)

College Student (under 18 my participate)

Minorities

Prisoners

Institutionalized Participants

Cognitively or emotionally impaired

Inpatient Participants

Non-English speaking

Outpatient Participants

Pregnant Participants

International research

Employees of a profit or non-profit organization

**Section V: Risk**

*Minimal risk* means that the probability and magnitude of harm or discomfort anticipated in the research are not greater in and of themselves than those ordinarily encountered in daily life or during the performance of routine physical or psychological examinations or tests.

Assessment of level of risk:

This study contains no more than minimal risk.

This study contains risks that are more than minimal.

## Section VI: Exempt Categories

1. Briefly describe research procedures as they relate to participants. *Include a summary of recruitment, type of data collected, how will data be stored and destroyed.*

The Principal Investigator will consult directly with the Disabled Student Services office on the campus of Middle Tennessee State University. This office will supply a list of visually impaired students who have self-reported and disclosed their disability. The students on this list will be emailed and invited to participate in a non-paid, voluntary, and anonymous survey and interview and/or an observation test (they may choose any or all options up to the research design limits.)

The type of data collected will be qualitative in nature, using open-ended questions and collecting some demographic data including the nature of their visual impairment. The survey and interview will seek to collect data from a visually impaired library patron's point of view to identify what they feel are the opportunities and challenges they face using the library hardware/software and user services. Participants will be asked to share their most helpful adaptive technology and well as disclose their most difficult challenges in a library environment.

The data will be completely anonymous with the exception of the informed consent form, which will have their names and signatures on the forms. These forms will be kept in an office that is locked at all times with access restricted to the Primary Investigator. Moreover, the forms will be kept in a locked filing cabinet at all times, where access is limited to the Primary Investigator. Consent forms will be destroyed (shredded) approximately three months after the conclusion of the research project.

Once the data are collected from the surveys, interviews, and observation test, data will be entered into an Excel spreadsheet and a research paper will be written to report the findings and then the original data instruments containing student data also be destroyed at the same time the consent forms are destroyed.

2. Please select the category or categories most applicable to your research and answer the question(s) associated with any selected categories:

**Normal Educational Practices and Settings (1)**

Research conducted in established or commonly accepted educational settings, involving normal education practices, such as (i) research on regular and special education instructional strategies, or (ii) research on the effectiveness of or the comparison among instructional techniques, curricula, or classroom management methods.

**1a.** Explain why the research procedures are normal educational practices in a commonly accepted educational setting: [Click here to enter text.](#)

## **X Educational Tests, Surveys, Interviews, or Observations (2)**

Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), surveys, interviews or observation of public behavior, unless: (i) information obtained is recorded in such a manner that participants can be identified, directly or through identifiers linked to the subjects; and (ii) any disclosure of an individual's response(s) outside of the research setting could reasonably place the subject at risk of criminal or civil liability or be damaging to the subjects' financial standing, employability, or reputation. (**Note:** Surveys or interviews which include minors as subjects are not included in this exempt category)

**2a.** Can the information collected be linked (directly or indirectly) to participants?  Yes  No

**2b.** If the answer to 2a is yes, would accidental disclosure of the information damage a participant's reputation, employability or financial standing?  Yes  No

## **Identifiable Subjects in Special Circumstances (Public Officials or Federal Statutes (3))**

Research involving the use of educational tests (cognitive, diagnostic, aptitude, achievement), surveys, interviews, or observations of public behavior that are not exempt under (2) of this section, if (i) the human subjects are elected or appointed public officials or candidates for public office; or (ii) federal statute(s) require(s) without exception that the confidentiality of the personal identifiable information will be maintained throughout the research and thereafter.

**3a.** Explain why the research applies to this category: [Click here to enter text.](#)

## **Collection or Study of Existing Data (4)**

Research involving the collection or analysis of existing data, documents, records, pathological specimens, or diagnostic specimens, if such sources are a matter of public record or if the information is recorded by the investigator in such a manner that subjects cannot be identified, directly or through identifiers linked to the subjects.

**4a.** All of the data/specimens involved in the study have already been collected:  Yes  No

**4b.** the investigators will not record any information that can be lined directly or indirectly to participants:  
 True  False

## **Public Benefit or Service Programs (5)**

Research and demonstration projects which are conducted by or subject to the approval of, department or agency heads, and which are designed to study, evaluate, or otherwise examine: (i) public benefit or service programs; (ii) procedures for obtaining benefits or services under such programs; (iii) possible changes in or alternatives to such programs or procedures; or (iv) possible changes in methods or levels of payment for benefits or services under such programs.

**5a.** Explain why the research applies to this category:  
[Click here to enter text.](#)

## **Taste and Food Evaluation and Acceptance Studies (6)**

Taste and food quality evaluation and consumer acceptance studies, (i) if wholesome foods without additives are consumed or (ii) if a food I consumed that contains a food ingredient at or below the level and for a use found to be safe, or agricultural chemical or environmental contaminate at or below the level found to be safe,

by the Food and Drug Administration or approved by the Environmental Protection Agency or the Food Safety and Inspection Service of the U.S. Department of Agriculture.

6a. Explain why the research applies to this category: [Click here to enter text.](#)

### **Section VIII: Informed Consent**

*Consent forms are not valid until they include the assigned UWG IRB number and IRB approval expiration date.*

1. Consent to participate in the research will be sought by providing (please check all that apply):
  - X A statement of the purpose of the research.
  - X An explanation of the procedures of the study.
  - X If there are foreseeable risks, benefits to the participant, or compensation, they are explained.
  - X An explanation that participation is voluntary and that there are no consequences if the subject refuses to participate or decide to discontinue participation (at any time).
  - X Contact information for the investigator and faculty advisor if the investigator is a student.

If any of the consent items above are not checked, please explain why it is impractical to explain this information to participants.

[Click here to enter text.](#)

2. Will participants sign a consent form?
  - X Yes  No

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*Please send an electronic attachment of this application and any accompanying materials to [irb@westga.edu](mailto:irb@westga.edu). Questions or comments, please contact Charla Campbell, 678/839-4749.*