## UNIVERSITY OF VICTORIA APPLICATION FOR ETHICAL REVIEW OF HUMAN RESEARCH

Submit **one original** and three **(3) copies** to the Office of the Vice President Research Handwritten applications will be returned immediately. *Use of the accompanying Ethics Application Guidelines is strongly encouraged in completing this form.* 

<b>A.</b> A	AP	PLICANT INFOR	RMATION					
Name of the Principal Investigator		Robin J. McMillan		Your Department <u>HSD</u>				
[	<b></b> ✓	Are you: Facu	lty	☐ Staff	Grad Student	Undergrad Student		
If you are a student, name of your supe			nt, name of your	supervisor: <u>Dr. Gwen</u>	<u>Hartrick</u>			
		E-mail of your su	pervisor:	ghartrick@uvic.ca	supervisor's pho	one: (250) 721 – 6191		
Your	· E-	mail Address:	rmcmillan@hom	ne.com_				
Your	Ph	one number(s): W	ork (250) 3	91-3995	Residence	(250) 477-5002		
Your	Your Mailing address: 4454 Greentree Terrace Victoria B.C. V8N 6A7							
<b>B.</b> 1	PR	OJECT INFORM	ATION					
Exac	t Ti	itle of the Project:	Interpe	rsonal Relationships: T	The Art of Being a Hon	ne Support Worker		
Keyv	vor	ds: 1. Relationship	os 2. Phenomeno	ology 3. Home Suppor	rt Worker 4.	<u> </u>		
Have you applied for funding for this project? No Yes (if "yes" complete the following):  Source(s) of funding:  Exact title of grant(s) (If known)								
Names and affiliations of other investigators on this project: None Their E-Mail  Note: if investigators change, provide this information to the Chair of the Human Research Ethics Committee.  Investigators are NOT employees (research assistants etc.)  1.								
Proposed Start Date (N.B.: 4-6 weeks required for review)  May 2001								
For	OF	FICE OF VICE PRE	ESIDENT RESEAR	CH USE ONLY:	VPR File Number:			
Date	rec	eived:	Sent to Rev1: Rev2:			Notice:		
Committee Chair Approval Signature					Date:			
Date annual review required:								
Special Review Information:								
Reference Information for funding source:								

## C. SIGNATURES

Your signature indicates that you agree to abide by all policies, procedures, regulations and laws governing the ethical conduct of research involving humans.
Principal Investigator: Robin McMillan Date: February 2,2001
The signature of the supervisor below indicates that the supervisory committee has approved the student's proposal and that the supervisor has assisted the student in the preparation of this application.
STUDENT'S SUPERVISOR: GWEN HARTRICK DATE:
The signature of the administer indicates that adequate research infrastructure is available to conduct this research
CHAIR/DIRECTOR OR DEAN: ANITA MOLZAHN DATE:  Please be sure to use the Guidelines in preparing your application. The application is designed so that you will be able to easily use cut and paste in preparing your informed consent materials.
If you downloaded this file, you can complete it on your computer. You will only have to print off your final version and manually complete the "tick-boxes".
D. LEVEL OF RISK AND SCHOLARLY REVIEW
The Tri-Council definition of "minimal risk" is the following:
The research can be regarded as within the range of minimal risk if potential participants can reasonably be expected to regard the probability and magnitude of possible harms implied by participation in the research to be no greater than those encountered by the participant in those aspects of his or her everyday life that relate to the research.
Based on this definition, do you believe your research qualifies as "minimal risk research"  NO Yes Please explain your answer below:
Participants will volunteer to be asked to describe circumstances where they felt "in harmony" or "in sync" with a client Under normal circumstances this activity should not cause any harm to them.
Please note, the designation of minimal or non-minimal levels of risk only affects the <u>way</u> the application is reviewed, <u>not</u> <u>the substance</u> of the review.
What type of scholarly review has this research undergone?
<ul> <li>None ☐ External Peer Review (e.g. granting agency) ☐ <u>Supervisory Committee</u></li> <li>☐ Special Review (explain below)</li> </ul>

### E. RESEARCH PROJECT INFORMATION

5.

The following information is required by both the Committee (to review the ethics of your research) and, where noted (\*), by participants (as part of the process of informed consent). Researchers are encouraged to adapt the information provided to the Committee for the consent from and process. The use of lay language is required. **Only use the space provided**.

1. \*What is (are) the purpose (s) and objective (s) of your research?

The purpose of the study is to converse with particular home support workers who are known to or who state that they develop thriving, supportive relationships with clients as they carry out their formal care plan duties, including intimate personal care tasks. The objective is to explore and describe fulfilling interpersonal relationships that occur between home support workers and particular clients to better understand the complex dynamics of these interactions.

2. \*WHY IS THIS RESEARCH IMPORTANT? WHAT CONTRIBUTIONS WILL IT MAKE?

The home support service is increasing in complexity, as more and more frail and acutely ill individuals are being cared for in the community at a time when home support resources are being restricted. The research will focus on describing and exploring the capacity building nature inherent in certain home support worker-client relationships. This study will explore new ways of thinking about how we can support individuals who wish to continue to live at home and how we can support home support workers to develop health-promoting relationships. It will expand the developing body of literature about "relational caring" and stimulate academic discussions about the potential of relational caring practices. The study will also assist policy makers and managers to better understand the elements of relationships that have potential to encourage healing and wellness.

•	
] ] [	by letter (enclose a copy) by telephone (enclose the script) by advertisement (enclose a copy) through another organization or a third party (e.g. school records) Enclose evidence of permission to use these organizations or third parties in recruitment Other (please describe below)
	*In the space below, provide the description you will use in the consent process to inform participants of why and how they were selected for inclusion in the study.
thriving, s Attendant	ats are female or male worker who are employed at a home support agency and state that they have experienced a supportive relationship with a health care client living at home. All participants have the Home Support or Continuing Care Aide certificate and have worked with clients in the community for over two years. All ats have a working knowledge of the English language.
[ [ ]	certificate which ensures grade 10 reading and writing competency  Currently employed by a Home Support agency as a Home Support Worker II  State that they develop thriving, supportive relationships with individuals

IF PARTICIPANTS WILL/MAY NOT BE ABLE TO PROVIDE CONSENT FOR THEMSELVES, HOW WILL YOU GAIN

CHILDREN MUST PROVIDE THEIR OWN CONSENT. SEE THE GUIDELINES FOR FURTHER DETAILS).

CONSENT? (PLEASE NOTE, IN ADDITION TO RECEIVING THE CONSENT OF THEIR PARENTS/GUARDIANS, COMPETENT

6. *WHAT PROCEDURES AND METHODS WILL YOU USE AND WHAT EXPECTATIONS DO YOU HAVE FOR PARTICIPANTS?
<ul> <li>*6a. How much time will be required to participate?</li> <li>Two semi-structured interviews of approximately 1 – 2 hours duration each.</li> </ul>
<ul> <li>*6b. Where will participation happen?</li> <li>The interviews will be conducted away from the work place at a time that does not conflict with their work schedule and at a mutually agreeable location.</li> </ul>
*6c What exactly will the participants be expected to do?    be interviewed individually     complete a questionnaire     participate in a group interview     be observed     provide human tissue (blood, hair, DNA, gametes etc.)     provide access to records or other personal materials     Other (specify)
Provide details to your answer in 6c below (e.g. name of questionnaire, source of documents)
The interviews will be open-ended and primarily lead by the participants' stories. I will however, develop some questions that I can keep at hand during the conversation for use as a cue to ask about important information that may not come up during the conversation.
6d What special training or qualifications are required for data gatherers? none
7. *WHAT ARE THE POTENTIAL OR KNOWN INCONVENIENCES ASSOCIATED WITH PARTICIPATION? none
8. *ARE THERE ANY OF THE FOLLOWING POTENTIAL RISKS TO PARTICIPANTS:  physical social psychological <u>emotional</u> economic <u>work related</u>
*Provide details to your answer in 8 below and describe how will explain the risks to participants
There are some potential risks to you by participating in this research and they include emotional stress such as describing your close relational experiences with clients that may have since died. You may also describe activities that you have

There are some potential risks to you by participating in this research and they include emotional stress such as describing your close relational experiences with clients that may have since died. You may also describe activities that you have done that are not authorized by your agency or on the clients formal care plan. In some cases your interview information could expose your strong emotional attachment to the client. These situations could cause you to be concerned about work related consequences such as being reprimanded, having the activity being barred, or being separated from the client.

9. \*IF THERE ARE ANY ANTICIPATED RISKS, HOW WILL THEY BE MINIMIZED AND DEALT WITH IF THEY OCCUR? (E.G. PROVIDE REFERRALS TO COUNSELING SERVICES)? INCLUDE A DESCRIPTION OF HOW YOU WILL DESCRIBE THIS MINIMIZATION TO PARTICIPANTS

To prevent or to deal with these risks the following steps will be taken. I will contact you after the interview to discuss any concerns you may have. If at any time you appear or admit to being distressed, I will provide you with a list of services or names of people who could assist you. The confidentiality measures that are in place will prevent you from being identified with any unauthorized activities or emotional involvement with a client. You will have the name and phone number of my research supervisor if you have any issues concerning the research process, its intent, or me. Please feel free to call either of us at any time.

10. *ARE THERE ANY POTENTIAL OR KNOWN BENEFITS ASSOCIATED WITH PARTICIPATION?
*10a. How will you describe these benefits to the participant?
There are potential benefits of your participation in this research. For example, sharing and describing your experience could clarify certain aspects of your client relationships and this new understanding could enhance your practice with other clients, giving you more control over your work environment. Information from the study may increase the general understanding about how agencies can facilitate and support home support workers to develop health-promoting relationships. Positive client relationships reduce work related stress for home support workers.
The research will focus on describing and understanding the capacity building nature inherent in certain relationships. Society in general could benefit because I intend to suggest new ways of thinking about how we can support individuals who wish to continue to live at home. The study will assist policy makers and managers to better understand the elements of relationships that have potential to encourage healing and wellness. The information may be useful in developing Collective Agreement language that supports client specific care while respecting seniority in client assignments.
This study will provide descriptive information about "relational caring" that could stimulate academic discussions and lead to new or clearer understandings about the potential of relational caring practices.
*10b If there are any inducements (gifts, compensation etc.) to participate, what are they and why are they necessary? none
11. *How will you describe in the consent the voluntary nature of participation in the study and the right to withdraw at anytime without consequences?
Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation.
11a. *What happens to a person's data if he/she withdraws part way through the study?
11b.* How will you explain this to the participants?
I will spend time with the participant reviewing the consent form and addressing any questions or concerns. If I discover that the consent form does not cover all concerns, I will revise the form to include information the potential participant needs to feel safe.
12. *Are you in any way in a position of authority or power over participants?   YES  No (If "YES", EXPLAIN YOUR RELATIONSHIP AND HOW COERCION WILL BE PREVENTED). EXAMPLES INCLUDE TEACHERS/STUDENTS, THERAPISTS/CLIENTS ETC.
I am a home support agency administrator and know the administrators from the agencies where the workers work. Home

I am a home support agency administrator and know the administrators from the agencies where the workers work. Home support workers could perceive that I have authority or power over them because I have close working and personal relationships with their superiors.

\*Provide a description of how this will be discussed in the consent process:

I manage a home support agency and may personally know your supervisor. To help prevent any chance of you deciding to not participate in this research because of this relationship, the following steps to prevent coercion have been taken: You will be able to review and comment on the notes from your interviews and the emerging themes that I have suggested. If you are uncomfortable with any of this information, it will be restated or excluded from the study. Your supervisors will not know whether or not you have volunteered to participate in this study unless you inform them. You do not need to reveal to me what agency you work for and you do will not need to share any identifiable client information.

13. \*HOW WILL YOU PROVIDE FOR ONGOING CONSENT BY PARTICIPANTS DURING THE DATA GATHERING PERIOD? (NOTE, THIS IS PRIMARILY AN ISSUE IN RESEARCH THAT OCCURS OVER AN EXTENDED PERIOD OF TIME) I intend to conduct the research over a period of no longer than one year. I will ask that participants contact me if they have a change in address, phone number, or personal circumstance that changes their original desire to participate in the study. I will call participants at least once during this time period to ascertain that they continue to be comfortable with participating in the study. This call will also enable me to record any change in their phone number or address. 14. \*DO YOU ANTICIPATE THAT THIS RESEARCH WILL BE USED FOR A COMMERCIAL PURPOSE? YES NO (IF "YES", EXPLAIN HOW YOU WILL DESCRIBE THIS TO THE PARTICIPANTS IN THE CONSENT PROCESS) Note: Questions 15 and 16 deal with anonymity and confidentiality. While these two concepts are related, they are NOT the same. Please refer to the Guidelines and the brief definitions below to assist you in answering these questions. 15. \*Anonymity refers to the protection of the identity of participants. Anonymity can be provided along A CONTINUUM, FROM "COMPLETE" TO "NO" PROTECTION (SEE THE GUIDELINES FOR A DISCUSSION OF THIS). WILL THE ANONYMITY OF PARTICIPANTS BE PROTECTED?  $\square$  YES (COMPLETELY)  $\square$  YES (PARTIALLY)  $\square$  NO 15a. \*If yes, how will anonymity be protected and how will this be explained in the consent process? Participant involvement in this study will be kept confidential by the researcher. The researcher will transcribe the tapes and during the transcription participant names will be replaced with code numbers. If it proves impossible for the researcher to do the transcription, the researcher will ask permission from the participants to use a professional transcriber. The transcriber will be required to sign a confidentiality agreement. The results of the study, published or unpublished, will in no way identify a participant. 15b. \*If no, justify why loss of anonymity is required and explain how this will be explained in the consent process. 16. \*CONFIDENTIALITY REFERS TO THE PROTECTION, ACCESS, CONTROL AND SECURITY OF THE DATA AND PERSONAL INFORMATION (SEE THE GUIDELINES FOR MORE INFORMATION). WILL YOU PROVIDE CONFIDENTIALITY TO THE PARTICIPANTS AND THEIR DATA? ☐ YES ☐ NO 16a. \* If Yes, how will confidentiality be protected and how will this be explained in the consent process? Other than the researcher, only the thesis supervisor will have access to the raw data. The code number that identifies participants will be kept in a separate filing cabinet from the audiotapes and transcripts. The code numbers will be used to label audiotapes and transcripts. The identifying information and information on the tapes will be destroyed after the research is complete. 16b. \* If No, justify the lack of confidentiality and explain how this will be explained in the consent process. 17. \*What other uses will be made of the data? I will utilize the data in writing professional articles and presenting at scholarly meetings and conferences after completing my thesis. 18. \*WHEN AND HOW WILL THE DATA BE DESTROYED? The data will be destroyed after 5 years. I will physically destroy the audiotapes. I will shred the paper data and burn the

paper. Computer discs will be destroyed and the computer hard drive will be cleared of any research data.

19. *How do you anticipate disseminating your results?    Directly to participants   Thesis/Dissertation/class presentation   published article     presentations at scholarly meetings   internet   Other (specify below)
*How will you describe the dissemination of results to participants during the consent process?
It is anticipated that the results of this study will be shared with others in the following ways. Information from the study may be used to develop and submit professional articles to be submitted for publication. I also anticipate that the data may be presented at scholarly meetings or conferences.
20. *How will participants be able to contact you (and/or your supervisor) if they have questions or concerns about the study?
Participants will be given my and my supervisors name, address, and phone number.
Special Questions related to additional review criteria:
<ul> <li>21.* OTHER THAN THE INVESTIGATORS, WHAT ARE THE NAMES OF INDIVIDUALS (EMPLOYEES OR VOLUNTEERS) WHO WILL BE INVOLVED IN DATA GATHERING OR MANAGEMENT? IF NOT KNOWN AT THE TIME OF SUBMISSION, PROVIDE THIS INFORMATION TO WHEN IT BECOMES AVAILABLE.</li> <li>1.Dr. Gwen Hartrick (Supervisor)</li> <li>2.Dr. Elizabeth Banister (Committee Member)</li> <li>3.Patricia MacKenzie Ph.D. (Oct. 99) (Committee Member)</li> </ul>
5. Patricia MacKenzie Ph.D. (Oct. 99) (Committee Member)
If these individuals require special training, skills, and/or qualifications, what are they and how will they be adequately prepared?  None will be needed
22. Does this study involve any form of deception?  Yes No (If "yes", complete a Deception Form)
23.WILL THIS STUDY BE CONDUCTED IN A COUNTRY OTHER THAN CANADA? $\square$ No $\square$ YES ( IF YES, PROVIDE DETAILS BELOW OF HOW THIS RESEARCH CONFORMS TO THE LAWS, CUSTOMS AND REGULATIONS OF THE FOREIGN COUNTRY)
24. If there is anything else you believe the Committee should know about this study, provide that information below: none
25. IF APPLICABLE, ATTACH THE FOLLOWING DOCUMENTS TO THIS APPLICATION (CHECK THOSE THAT ARE APPENDED):
Consent forms       ☐ Recruitment materials       ☐ Interview schedules       ☐ Questionnaires       ☐ Deception Form         ☐ Permission to gain access to confidential documents or materials       ☐ Human Tissues Form
Applicants are encouraged to use the consent form template provided in Appendix 1 and, if appropriate, the Deception form in Appendix 2

### Participant Consent Form

You are being invited to participate in a study entitled Interpersonal Relationships: The Art of Being a Home Support Worker that is being conducted by Robin McMillan. Robin McMillan is a Graduate Student in the Department of Human and Social Development at the University of Victoria and you may contact her if you have further questions by calling (250) 477 - 5002.

As a Graduate student, this research is part of the requirements for a degree in Nursing and it is being conducted under the supervision of Dr. Gwen Hartrick. You may contact the supervisor at 721 - 6191.

The purpose of the study is to converse with particular home support workers who are known to or who state that they develop thriving, supportive relationships with clients as they carry out their formal care plan duties, including intimate personal care tasks. The objective is to explore and describe fulfilling interpersonal relationships that occur between home support workers and particular clients to better understand the complex dynamics of these interactions.

The home support service is increasing in complexity, as more and more frail and acutely ill individuals are being cared for in the community at a time when home support resources are being restricted. The research will focus on describing and exploring the capacity building nature inherent in certain home support worker-client relationships. This study will explore new ways of thinking about how we can support individuals who wish to continue to live at home and how we can support home support workers to develop health-promoting relationships. It will expand the developing body of literature about "relational caring" and stimulate academic discussions about the potential of relational caring practices. The study will also assist policy makers and managers to better understand the elements of relationships that have potential to encourage healing and wellness.

You are being asked to participate in this study because you are a female or male worker who is employed as a Home Support Worker II at a home support agency and state that you have experienced a thriving, supportive relationship with a health care client living at home. All participants have the Home Support Attendant or Continuing Care Aide certificate and have worked with clients in the community for over two years. All participants have a working knowledge of the English language.

If you agree to voluntarily participate in this research, your participation will include two semi-structured personal interviews of approximately 1-2 hours duration each. The interviews will be conducted away from the work place at a time that does not conflict with your work schedule and at a mutually agreeable location. The interviews be open-ended and primarily lead by the your stories. I will however, develop some questions that I can keep at hand during the conversation for use as a cue to ask about important information that may not come up during the conversation.

Participation in this study will not cause any inconvenience to you.

There are some potential risks to you by participating in this research and they include emotional stress such as describing your close relational experiences with clients that may have since died. You may also describe activities that you have done that are not authorized by your agency or on the clients formal care plan. In some cases your interview information could expose your strong emotional attachment to the client. These situations could cause you to be concerned about work related consequences such as being reprimanded, having the activity being barred, or being separated from the client.

To prevent or to deal with these risks the following steps will be taken. I will contact you after the interview to discuss any concerns you may have. If at any time you appear or admit to being distressed, I will provide you with a list of services or names of people who could assist you. The confidentiality measures that are in place will prevent you from being identified with any unauthorized activities or emotional involvement with a client. You will have the name and phone number of my research supervisor if you have any issues concerning the research process, its intent, or me. Please feel free to call either of us at any time.

There are potential benefits of your participation in this research. For example, sharing and describing your experience could clarify certain aspects of your client relationships and this new understanding could enhance your practice with other clients, giving you more control over your work environment. Information from the study may increase the general understanding about how agencies can facilitate and support home support workers to develop health-promoting relationships. Positive client relationships reduce work related stress for home support workers.

The research will focus on describing and understanding the capacity building nature inherent in certain relationships. Society in general could benefit because I intend to suggest new ways of thinking about how we can support individuals who wish to continue to live at home. The study will assist policy makers and managers to better understand the elements of relationships that have potential to encourage healing and wellness. The information may be useful in developing Collective Agreement language that supports client specific care while respecting seniority in client assignments.

This study will provide descriptive information about "relational caring" that could stimulate academic discussions and lead to new or clearer understandings about the potential of relational caring practices.

Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study your data will be removed from the study unless removal of the data is logistically impossible.

I manage a home support agency and may personally know your supervisor. To help prevent any chance of you deciding to not participate in this research because of this relationship, the following steps to prevent coercion have been taken:

You will be able to review and comment on the notes from your interviews and the emerging themes that I have suggested. If you are uncomfortable with any of this information, it will be restated or excluded from the study. Your supervisors will not know whether or not you have volunteered to participate in this study unless you inform them. You do not need to reveal to me what agency you work for and you do will not need to share any identifiable client information.

I intend to conduct the research over a period of no longer than one year. To make sure that you continue to consent to participate in this research, I ask that you contact me if you have a change in address, phone number, or personal circumstance that changes your original desire to participate in the study. I will contact you at least once during this time period to ascertain that you continue to be comfortable with participating in the study.

I will keep your involvement in this study confidential. I will transcribe the tapes and during the transcription your name will be replaced with code numbers. If it proves impossible for me to do the transcription, I will seek permission from you before using a professional transcriber. The transcriber will be required to sign a confidentiality agreement. The results of the study, published or unpublished, will in no way identify you.

Your confidentiality and the confidentiality of the data will be protected. Other than myself, only my thesis supervisor will have access to the raw data. The code number that identifies you will be kept in a separate filing cabinet from the audiotapes and transcripts. The code numbers will be used to label audiotapes and transcripts. The identifying information and information on the tapes will be destroyed after the research is complete.

Other planned uses of this data include writing professional articles and presenting at scholarly meetings and conferences.

Data from this study will be disposed of after 5 years. I will physically destroy the audiotapes and I will shred the paper data and burn the paper. Computer discs will be destroyed and the computer hard drive will be cleared of any research data.

It is anticipated that the results of this study will be shared with others in the following ways. Information from the study may be used to develop and submit professional articles to be submitted for publication. I also anticipate that the data may be presented at scholarly meetings or conferences.

In addition to being able to contact the researcher and the supervisor at the above phone numbers, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Associate Vice President Research at the University of Victoria (250-721-7968).

Other individuals that may be contacting regarding this study include Dr. Elizabeth Banister (Committee Member) and Patricia MacKenzie Ph.D. (Oct. 99) (Committee Member.

Your signature below indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researchers.

PARTICIPANT SIGNATURE	Date	
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A COPY OF THIS CONSENT WILL BE LEFT WITH YOU, AND A COPY WILL BE TAKEN BY THE RESEARCHER

# Interpersonal Relationships: The Art of Being a Home Support Worker

## A Research Study

My name is Robin McMillan and I am completing thesis research as part of the requirements towards a Masters in Nursing degree at the University of Victoria. I have practiced in the community for many years, primarily working with the Home Support program. Research has pointed out that a close, caring relationship may be the most valuable part of a home support workers work with clients and that this relationship may have the potential to positively influence the wellness and healing of individuals.

For my research, I want to explore caring experiences where home support workers have developed a thriving, supportive interpersonal relationship with a client so that I can better understand what happens when these interactions take place. Would YOU be willing to share your experience? If so, I would be very interested in talking with you.

You may reach me by calling 477-5002. Please leave me a message so that I may return your call. Setting up interview times and location is flexible and can be arranged around your work schedule. The research will require two interviews of approximately 1 – 2 hours duration and participation is entirely voluntary. All information from the interview will be confidential. You may withdraw from the study at any time. If you withdraw, your information will be removed from the study. I look forward to hearing from you.

#### Letter to Administrators

### Dear Administrator,

As you may be aware, I am currently developing my research proposal for my Masters program at the University of Victoria. As we move through this era of health reform and shrinking health care resources, we are experiencing the fact that the home support service is increasing in complexity, as more and more frail and acutely ill individuals are being cared for in the community. Research that I have read has pointed out that a close, caring relationship with a client may be the most valuable aspect of a home support worker's care with clients and that this relationship may have the potential to positively influence the wellness and healing of individuals.

In my study, I want to explore work situations where home support workers have developed thriving, supportive interpersonal relationships with clients so that I can better understand what happens when this dynamic takes place. I intend to conduct two interviews of approximately 1-2 hours duration with home support workers who are interested in becoming participants. The interviews will be conducted away from the work place at a time that does not conflict with their work schedule. All information will be confidential and I do not anticipate any risk for the participants.

This study will expand the developing body of literature about "relational caring" and stimulate academic discussions about the potential of relational caring practices. I specially hope to suggest new ways of thinking about how we can support individuals who wish to continue to live at home and how we can support home support workers to develop health-promoting relationships. The study will assist policy makers and managers to better understand the elements of relationships that have potential to encourage healing and wellness.

I am writing to ask for your support in gaining access to home support workers. I would like your permission to place an information poster in your agency (see attached copy). If you are willing to have one placed in your agency, I will send additional copies for you to make available to interested individuals. I would also ask that you circulate the poster to schedulers and supervisors in case they know of workers who may be interested in talking to me about becoming a participant. If you are willing to assistance me in my research I would ask that you write a letter of support that includes written permission to advertise my study in your agency.

If you have any concerns about my work or its intent, please contact my Thesis Supervisor Dr. Gwen Hartrick. She can be reached at 721–6191. I look forward to haring from you.

Sincerely,

Robin McMillan