

## Appendix B

### Email Invitation

Dear Colleague:

Approximately 4.7 million veterans live rurally and face many challenges receiving support and care for complex service-connected healthcare needs. We are aware of the significant challenges people face in accessing health care in rural settings and for veterans with complex care needs often associated with their military service, these challenges may be compounded by where they live. The Department of Veterans Affairs has engaged community partners in a wide variety of programs to better support rural veterans. However, little is known about the effectiveness or use of this programs by nurses in rural home care, palliative, and hospice settings.

We are emailing you to request your participation in our study titled “Home care and palliative/hospice nurses’ experiences caring for veteran patients in rural settings.” Our intent is to gain insight as to what nurses know about veteran healthcare issues in rural settings, as well as challenges/barriers to care. We hope the data gathered from this study can inform evidence-based strategies to improve culturally congruent and quality of care provided to this population. You are being invited to participate as a practicing home care/palliative/hospice nurse that can provide information regarding this important topic from a rural nurse perspective.

Should you agree to participate, you will be asked to complete a 12 item demographic data collection tool, sign a consent form, and participate in an interview. We anticipate your time commitment to total about 90 minutes. In exchange for your participation, you will receive a \$20 amazon gift card. Upon completion of data collection you will be emailed the results as part of the validation process.

We are very appreciative of your time and perspective. If for some reason you are not able to participate we ask that you share this information with colleagues so we can reach as many nurses as possible. Should you have any questions, please feel free to contact us. We welcome your input!

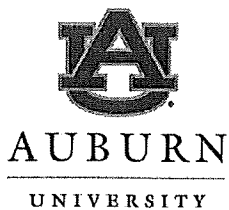
Respectfully,

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AUBURN UNIVERSITY

SCHOOL OF NURSING

**INFORMED CONSENT  
for a Research Study entitled**

**“Nurses’ experiences caring for veterans in rural home care and hospice settings”**

**You are invited to participate in a research study** to examine nurses’ experiences caring for veterans in rural home care and hospice settings. The study is being conducted by Dr Libba McMillan PhD, RN, Associate Professor, in the Auburn University Department of Nursing. You were selected as a possible participant because you are registered nurse working in a rural home care/palliative/hospice setting and are age 19 or older.

**What will be involved if you participate?** If you decide to participate in this research study, you will be asked to complete a 12 item demographic sheet and participate in an interview using university Zoom technology, with safety features built within. Your total time commitment will be approximately 90 minutes.

**Are there any risks or discomforts?** The risks associated with participating in this study are loss of time and confidentiality. To minimize these risks, we will not collect identifying information and signed consent forms will be stored in a separate location. Your information will only be known to us by number and the 3 researchers will be the only people to have access to password protected transcripts.

**Are there any benefits to yourself or others?** If you participate in this study, you can expect to contribute to the body of research evidence focused on the care of veterans in rural settings. We cannot promise you that you will receive any or all of the benefits described.

**Will you receive compensation for participating?** To thank you for your time you will be offered a \$20 Amazon gift card delivered to you electronically.

**Are there any costs?** If you decide to participate, you will not incur any costs.

**If you change your mind about participating,** you can withdraw at any time during the study. Your participation is completely voluntary. If you choose to withdraw, your data can be withdrawn as long as it is identifiable. Your decision about whether or not to participate or to stop participating will not jeopardize your future relations with Auburn University, or the Department of Nursing.

Page 1 of 2

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**Your privacy will be protected.** Any information obtained in connection with this study will remain confidential. Interview conducted by Zoom will be conducted in a private space to ensure conversations are not overhead. Investigators will share recordings in a safe, private area that only the research staff can access. Information obtained through your participation may be published in aggregate in a professional journal and presented at a profession meeting/conference. The interviews will be recorded and destroyed following checking of all transcription.

**If you have questions about this study, please ask them now or contact Libba McMillan at [reedreb@auburn.edu](mailto:reedreb@auburn.edu) or Brenda Elliott at [brendaelliott6@gmail.com](mailto:brendaelliott6@gmail.com).** A copy of this document will be given to you to keep.

**If you have questions about your rights as a research participant, you may contact the Auburn University Office of Research Compliance or the Institutional Review Board by phone (334)-844-5966 or e-mail at [IRBAdmin@auburn.edu](mailto:IRBAdmin@auburn.edu) or [IRBChair@auburn.edu](mailto:IRBChair@auburn.edu).**

**HAVING READ THE INFORMATION PROVIDED, YOU MUST DECIDE WHETHER OR NOT YOU WISH TO PARTICIPATE IN THIS RESEARCH STUDY. YOUR SIGNATURE INDICATES YOUR WILLINGNESS TO PARTICIPATE.**

\_\_\_\_\_  
Participant's signature                      Date

\_\_\_\_\_  
Investigator obtaining consent                      Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Co-Investigator    Date

\_\_\_\_\_  
Printed Name

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