

This is Online Appendix 2 of Thema, A.M., Mulaudzi, F.M., Lavhelani, N.R., Nyandeni, S. & Musie, M.R., 2026, 'Caught between rights and realities: Nurses' challenges with upholding patients' rights in selected health facilities of South Africa', *Health SA Gesondheid* 31(0), a3285. <https://doi.org/10.4102/hsag.v31i0.3285>

ANNEXURE 2

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| <p>ICD 5</p> <p>PARTICIPANT'S INFORMATION & INFORMED CONSENT DOCUMENT FOR AN</p> <p>INDIVIDUAL IN-DEPTH INTERVIEW RESEARCH STUDY</p> |
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Study title: STRATEGIES TO ENHANCE NURSES' COMPLIANCE TO PATIENTS' RIGHTS IN THE SELECTED HEALTH FACILITIES OF THE LIMPOPO PROVINCE, SOUTH AFRICA.

Principal Investigator: Thema AM.

Supervisor: Mulaudzi FM.

Institution:

DAYTIME AND AFTER HOURS TELEPHONE NUMBER(S):

Daytime number/s:

Afterhours number:

DATE AND TIME OF FIRST INFORMED CONSENT DISCUSSION:

| | | |
|-------------|--------------|-------------|
| | | |
| Date | Month | Year |

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|-------------|
| : |
| Time |

Dear Prospective Participant

Dear Mr. / Mrs.

1) INTRODUCTION

You are invited to volunteer for a research study. I am doing this research for PhD in nursing degree purposes at the University of Pretoria. This document gives information about the study to help you decide if you would like to participate. Before you agree to take part in this study, you should fully understand what is involved. If you have any questions, which are not fully explained in this document, do not hesitate to ask the investigator. You should not agree to take part unless you are completely happy about what we will be discussing during the interview.

2) THE NATURE AND PURPOSE OF THIS STUDY

The aim of this study is to explore and describe patients' rights compliance by nurses in the selected health facilities and the challenges nurses face regarding compliance to patients' rights.

By doing so I wish to learn more about patients' rights compliance by nurses in order to develop strategies to improve patients' rights compliance by nurses in the selected health facilities.

You will be interviewed by the researcher in a place that is private and easy for you to reach.

3) EXPLANATION OF PROCEDURES AND WHAT WILL BE EXPECTED FROM THE PARTICIPANTS

If you agree to participate, you will be asked to participate in an individual interview which will take about 15-45 minutes. The individual interview will be a one-on-one meeting between the two of us. I will ask you several questions about the research topic. This study involves

answering some questions such as “What role do you play in ensuring compliance with patients’ rights when nursing the patients?”

With your permission, the interview will be recorded on a recording device to ensure that no information is missed.

4) RISKS AND DISCOMFORTS INVOLVED?

We do not think that taking part in the study will cause any physical or emotional discomfort or risk.

During the interview you may find that some questions are sensitive; for instance, questions about

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.. ..

There are also some questions about things that have happened to you in the past and this may bring back sad or fearful memories. If questions feel too personal or make you uncomfortable, you do not have to answer them.

If you need psychological support or counselling during or after the interview, I will be able to refer you to a psychologist within the institution.

5) POSSIBLE BENEFITS OF THE STUDY

You will not benefit directly by being part of this study. But your participation is important for us to better understand your experiences and challenges regarding patients’ rights observance. The information you give may help the researcher improve the patients’ rights observance by nurses.

6) COMPENSATION

You will not be paid to take part in the study. There are no costs involved for you to be part of the study.

7) VOLUNTARY PARTICIPATION

The decision to take part in the study is yours and yours alone. You do not have to take part if you do not want to. You can also stop at any time during the interview without giving a reason.

If you refuse to take part in the study, this will not affect you in any way. You will still receive standard care and treatment for your illness.

8) ETHICAL APPROVAL

This study was submitted to the Research Ethics Committee of the Faculty of Health Sciences at the University of Pretoria, Medical Campus, Tswelopele Building, Level 4-59, telephone numbers 012 356 3084 / 012 356 3085 and written approval has been given by that committee. The study will follow the Declaration of Helsinki (last update: October 2013), which guides doctors on how to do research in people. The researcher can give you a copy of the Declaration if you wish to read it.

9) INFORMATION ON WHO TO CONTACT

If you have any questions about this study, you should contact:

Ms Thema AM

0766812277/ 0812608686

10) CONFIDENTIALITY

We will not record your name anywhere and no one will be able to connect you to the answers you give. Your answers will be linked to a fictitious code number or a pseudonym (another name) and we will refer to you in this way in the data, any publication, report or other research output. All records from this study will be regarded as confidential. Results will be published in medical journals or presented at conferences in such a way that it will not possible for people to know that you were part of the study.

The records from your participation may be reviewed by people responsible for making sure that research is done properly, including members of the Research Ethics Committee. All of these people are required to keep your identity confidential. Otherwise, records that identify you will be available only to people working on the study, unless you give permission for other people to see the records.

All hard copy information will be kept in a locked facility at at the University of Pretoria, for a minimum of 3 years and only the research team will have access to this information.

11) CONSENT TO PARTICIPATE IN THIS STUDY

- I confirm that the person requesting my consent to take part in this study has told me about the nature and process, any risks or discomforts, and the benefits of the study.
- I have also received, read and understood the above written information about the study.
- I have had adequate time to ask questions and I have no objections to participate in this study.
- I am aware that the information obtained in the study, including personal details, will be anonymously processed and presented in the reporting of results.
- I understand that I will not be penalised in any way should I wish to stop taking part in the study, and my withdrawal will not affect the treatment and care I receive in this facility.
- I am participating willingly.
- I have received a signed copy of this informed consent agreement.

Participant's name (Please print)

Date

Participant's signature

Date

Thema Adolphina Mokgadi

Researcher's name (Please print)

Date

Researcher's signature

Date

I understand that the interview, focus group or discussions will be audio-taped. I give consent that it may be audio-taped.

YES / NO