

American Dental Hygienists' Association Data Sharing Agreement

Title of Research Project: _____

Principal Investigator/Student (Name/Contact Information): _____

Faculty Advisor (Name/Contact Information): _____

Requested date for Principal Investigator/Student to receive data: _____

Period of time data will be used: _____

Data may not be used beyond this time frame, and must be destroyed (deleted from hard drives, shredded, burned, etc.) when period ends. Use of provided data beyond this time period, or for any other purpose outside of an approved research request places the Principal Investigator/Student, Faculty Advisor, and affiliated Institution/University at risk of legal action.

Intended use of the data: _____

State as specifically as possible how you will use the data. What studies will be performed, what questions will be asked and what are the expected outcomes? Can the ADHA use the data to explore additional research questions without the approval or consent of the Principal Investigator/Student?

Constraints on use of the data: _____

*List any restrictions on how the data or data findings can be used. Can the ADHA share, publish or disseminate data findings and reports without the approval or review of the Principal Investigator/Student? If the ADHA generates a report based on the data, does the report belong to the ADHA, the provider, or both? Can the ADHA share, sell or distribute data findings or any part of the database to another agency? **NOTE:** ADHA will not approve any research requests that do not allow ADHA use of research results, and at least partial ownership of the data.*

Data confidentiality: _____

Describe the required processes that the receiver must use to ensure that data remain confidential. Because some data may contain information that can be linked to individuals, it is important to put safeguards in place to ensure that sensitive information (e.g., salaries, exam results) remains private. Personal data should remain confidential and should not be disclosed verbally or in writing to an unauthorized third party, by accident or otherwise. Will the receiver report information that identifies individuals? What safeguards are in place to prevent sensitive information from becoming public?

Data security: _____

Describe the methods that the ADHA must use to maintain data security. What will happen to the data after the data-sharing period ends?

Methods of data-sharing: _____

Identify the way in which data will be transferred from the Principal Investigator/Student to the ADHA. Will data be transferred physically or electronically? If data are to be sent over the Internet, how can a secure connection be guaranteed? Will the data be encrypted before being transferred?

Financial costs of data-sharing: _____

Clarify who will cover the monetary costs of sharing the data. Will there be expenses related to sharing the data? Will the Principal Investigator/Student or the ADHA share the costs, or will one agency pay for all data-sharing expenses?

Requested Data: _____

The table below outlines that pricing options for data provision. Prices apply to member numbers, regardless of whether the data will be provided to the Principal Investigator/Student or if the survey will be distributed by the ADHA. The prices listed below are in addition to a \$100 administration fee.

Pricing for Data Provision	
1,000	\$30
2,500	\$75
5,000	\$140
7,500	\$200
10,000	\$250

To the best of my knowledge, the answers to the above questions are true, complete and accurate. I have read the agreement and agree to comply with its terms and conditions. I am an institution/university student/faculty member authorized to disclose or receive the information noted above and to conduct the research contemplated by the agreement.

Principal Investigator/Student: _____ **Date:** _____

Faculty Advisor: _____ **Date:** _____

Text adapted from the University of Chicago: http://researchadmin.uchicago.edu/clinical_trials/DSA.shtml.