



Consent to Participate in a Quality Improvement Program

You are being asked to participate in a quality improvement program for Audio Information Network (AIN). The purpose of this program is to assess the effectiveness of voice-activated speakers (Echo) to provide news and information to residents of Colorado who are blind/low vision or print disabled (cannot hold a paper, read or otherwise understand print materials). Your participation will help AIN identify your listening preferences so that AINC programming can better meet your needs.

Your participation is voluntary, and you may change your mind and end your participation at any time.

What will we ask you to do?

- Accept an Amazon Echo (smart speaker) in your living area and a tablet for setup (free)
- Participate in a short training session that will show you how to use your new devices

What are the risks and downsides of participating in this program?

- The Echo in your room is always on. It is a listening device that is triggered when you say "Alexa" (or another "wake" word).
- The Echo records any command it receives after you say "Alexa"
- Currently, you cannot use the Echo to access emergency services, such as 911
- One AIN staff person (the AIN Preferences Tracker) will be assigned the role of tracking and categorizing each engagement with the device to improve AIN program quality. This information will be used to identify your preferences in using the Echo. The AIN Preferences Tracker may hear all commands, contacts, phone numbers, credit card information and any other information you or others give to the Echo. Once the Tracker has categorized your preferences, the recording of engagements will be deleted from the device.

What are the benefits?

- Access your own calendar and other community calendars.
- Listen to news, information and music – all with a simple voice command.

There is no compensation for participation

You will not receive any compensation for participation in this project, but the devices will be on permanent "loan" to you for as long as you want to use them.

Confidentiality

- Information on engagement with your device will not be tied to your name or any other personal identifying information; you will be identified only as an AIN listener by random ID number.
- De-identified data in aggregate form (e.g., a summary of all AIN Echo users) may be shared with our funding agencies. We will remove or code any personal information that could identify you before files are shared with others to ensure that, by current scientific standards and known methods, no one will be able to identify you from the information we share. All data will be stored in a secure manner using all reasonably available data security technologies and data security procedures, so there is minimal risk that an unauthorized person may access the quality improvement program dataset.

If you have questions

The AIN staff person conducting this quality assurance program is Dorie Glover. You may contact Dorie Glover at dorie@aincolorado.org or at 303-786-7777 X104.

You will be given a copy of this form to keep for your records.

Statement of Consent

I have read the above information, and have received answers to any questions I asked. I consent to take part in this quality assurance program.

Your Signature

Date

Your Name (printed)

Signature of person obtaining consent

Date

Printed name of person obtaining consent

This consent form will be kept by AIN for five years beyond the end of the program.