

Informed Consent for Telepractice

Speech Pathology

Consent for the Provision of Speech Pathology Services through Telepractice (Telehealth)

Full Name:	Date of Birth:
Contact no:	Email Address:

What is the purpose of this form?

The purpose of this form is to provide information to you about, and to obtain your consent to participate in, a telepractice consultation with your speech pathologist.

What is Telepractice?

Telepractice is the use of telecommunication to provide speech pathology services to clients. The speech pathologist typically uses videoconferencing to administer client sessions in real-time but may utilise other formats, such as email, for related communication. Telepractice is sometimes referred to as telehealth, telerehabilitation, or teletherapy.

What does a telepractice consultation involve?

A telepractice consultation usually involves some or all of the following:

- Detailing case history, diagnosis, implement treatment /coaching, recommendations and a personalised treatment plan.
- You are not permitted to video or audio record the session, unless your speech pathologist gives you permission to do so.

What are the potential benefits of telepractice?

Telepractice *might*:

- Improve access to speech pathology services
- Reduce your need for travel
- Decrease exposure to infectious disease

What are the potential risks of telepractice?

Telepractice *might*:

- Be impacted by technical problems, such as delays due to technology failures.
- May not offer the same visual and sound quality for observations and modelling.
- Not feel the same as an onsite session.

- Not achieve everything that is required and therefore require another telepractice consultation or a face to face consultation.
- Increase exposure to privacy and digital security risks.

Will my privacy be protected?

The speech pathologist must maintain confidentiality and privacy standards during sessions, and in creating, keeping and transmitting records.

While the speech pathologist is obligated to meet standards to protect your privacy and security, telecommunication, including videoconference, may increase exposure to hacking and other online risks; as with all online activities, there is no guarantee of complete privacy and security protection.

What does informed consent mean?

There are a few important principles related to informed consent:

- **You must be given relevant information.** Ask the speech pathologist if you have questions about telepractice and the services offered.
- **You have the right to understand the information.** Ask the speech pathologist if you do not understand.
- **You have the right to choose.** If you do not agree to telepractice, you may refuse to participate. You may agree to or refuse specific activities and procedures.
- **You have the right to stop using telepractice anytime.** You can change your mind about telepractice or a specific activity or procedure, even in the middle of a session.
- **You can agree or refuse in writing or verbally.** You may give your consent using the form below. You may also give consent or change your mind by telling the speech pathologist. Consent and refusal that you give verbally will be documented by the speech pathologist.
- **You can ask about alternatives to telepractice.** If you refuse or change your mind about telepractice services, your speech pathologist will discuss any other options with you. The speech pathologist may or may not be able to offer alternative services.

Written consent form:

Please tick all that apply:

- I agree to receive speech pathology services via telepractice.

Name: _____

Date: _____

Signature: _____

Date: _____

**A parent or Legal guardian's signature is required for minors below 21 years old.*

Thank you 😊