

678 High Street Thornbury 3071 630 Bell Street Preston West 3072 Phone: **9484 6299** Fax: 9480 0838 e: admin@crisalida.com.au w: www.crisalida.com.au

3F - INFORMED CONSENT FOR TELEPRACTICE

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 therapist.

What is Telepractice?

Telepractice is the use of telecommunication to provide speech pathology services to clients. The therapist 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 telespeech.

What does a telepractice consultation involve?

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

- Your therapist will discuss your health and your health history with you and, where appropriate, will offer information and advice.
- You may bring a support person with you, as you might in a face to face consultation.
- If you attend a health service to participate in a telepractice consultation, other health professionals may be present and may need to examine you according to your therapist's instructions.
- A technical support person might be present for part of the consultation to assist with technical issues.
- You are not permitted to video or audio record the consultation, unless your therapist 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 negatively impacted by technical problems, such as delays due to technology failures.
- Not offer the same visual and sound quality for observations and modelling
- Require someone onsite with you to support the therapist
- 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.
- Include practices and procedures that are not as well understood in a telepractice setting as they are onsite
- Increase exposure to privacy and digital security risks. (See next section.)

Will my privacy be protected?

This practice is subject to the Privacy Act 1988 and must comply with obligations related to the collection, use and disclosure of personal information, including through telepractice. The therapist must maintain confidentiality and privacy standards during sessions, and in creating, keeping and transmitting records.



At times, audio and video recordings of sessions may be taken to support the therapist's work, as might occur in a face to face consultation. You will be informed before a recording takes place and can refuse to be recorded for any reason. The therapist will inform you of the reason for the recording and how it will be stored.

While the therapist 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. You may decrease the risk by using a secure internet connection, meeting with the therapist from a private location, and only communicating using secure channels.

What does informed consent mean?

There are a few important principles related to informed consent:

- You must be given relevant information. Ask the therapist if you have questions about telepractice and the services offered.
- You have the right to understand the information. Ask the therapist 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 therapist. Consent and refusal that you give verbally will be documented by the therapist.
- You can ask about alternatives to telepractice. If you refuse or change your mind about telepractice services, your therapist will discuss any other options with you. The therapist may or may not be able to offer alternative services.

Written consent form:

Please tick all that apply:

- □ I agree to receive services via telepractice.
- I understand that I may agree or refuse any service or part of a service at any time. I can agree or refuse in writing or verbally.

please print full name

sign

date