



Providing therapy to a child when the parent or guardian is absent

Have you ever considered a situation where you're providing therapy to a child and the parent or guardian intends to leave the child alone with you? This may be because they wish to collect another child from school or sport, or they may wish to pick up something from the supermarket. Regardless of why it occurs, this is unfortunately not a completely unfamiliar situation for speech pathologists to experience.

At first thought this may not seem like a particularly concerning situation. However, to understand the potential risks if this were to occur, it's worth considering the following circumstances.

What if...

- > The session finishes before the parent has returned and you're ready to start your next session?
- > You were in the family's home as opposed to a clinic and the parent wants to leave to go to the shops briefly? And consider that there may be other children in the house.

- > The child becomes upset with their parent not being there?
- > The child has a medical emergency?
- > The child is a new client who you aren't overly familiar with?

Do you think this situation is acceptable?

Speech Pathology Australia's Ethics Board have advised speech pathologists that a situation where a parent leaves during therapy sessions should only occur under exceptional circumstances, it should not become the norm or commonplace. However, this doesn't mean speech pathologists have to allow this to occur even when there may be exceptional circumstances; they are permitted to decline to provide therapy under this situation if they don't feel it's appropriate or they aren't comfortable.

It's recommended that speech pathologists consider the possible scenarios mentioned earlier, as well as other possible similar scenarios, and decide on a standard

for what they would and wouldn't feel is professionally appropriate.

And this may be different for different practitioners based on the nature of their work and clients, as well as personal comfort levels.

A speech pathologist may feel okay when a child is left in their care without a parent when at the clinic, but not when at the client's house. A speech pathologist may also only accept parents leaving once the child is over a certain age. Or they may just want to consider each situation individually based on each child. What's most important is that the scenarios have been considered before they arise.

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Setting expectations

It's important to set expectations with families at the beginning of the therapeutic relationship. This should be in relation to parents being present during therapy but also other elements of the therapeutic relationship. Imagine that a therapy session with a child is about to start and the parent quickly tells the speech pathologist, as they're walking out the door, that they're heading out briefly. If this scenario has never been discussed, this could be quite a challenging moment and the speech pathologist may not know how to respond until the parent has left.

Policies assist greatly with setting expectations. The process of developing policies provides the speech pathologist with reason to reflect on and consider what they think is professionally acceptable and required and how they want their clinic to operate. Policies developed for a clinic provide a standard which everyone is to work within, creating consistency between colleagues. These policies should be discussed with clients and their families at the start of the therapeutic relationship during the process of setting expectations. The policies will make it easier for the speech pathologist to have an open and honest conversation, making it clear how they'll work together to achieve the best therapeutic outcomes.

Setting expectations and agreeing on actions and behaviours means the parents know what is expected of them and it also empowers the speech pathologist and gives them the authority needed to handle challenging situations.

Implications for the family

When explaining to families what you expect from them in terms of being present during therapy sessions, be sure they understand how this will affect them and their child, not just you.

It's beneficial for parents to be aware of their child's diagnosis as well as progress over the course of their therapy. Parents may also be expected to do some work with their child outside of therapy sessions. Therefore, there is possibly going to be implications for the child and their progress if a parent isn't present.

Discussion before they leave

If a parent does leave the therapy session, the speech pathologist should have a process in place for discussing necessary information before they leave. This information should include:

- > Where the parent is going (this may be useful if for some unforeseen reason the parent doesn't return)
- > When they expect to return; the parent should agree to return by a nominated and agreed to time
- > Contact names and phone numbers during this time (there may be people other than just that parent to consider, such as a neighbour)
- > What will occur if they parent hasn't returned by the agreed time, such as the child being left unsupervised in the reception area.

Record keeping

Speech pathologists would be aware of their professional obligation to maintain detailed and up to date clinical records. However, records should contain more than clinical outcomes, they should tell the story of the therapy provided and progress made. It is advisable that speech pathologists make a note in the record which, if any, parent was present during the session and what was discussed with the parent regarding the therapy. This will assist with the ongoing continuity of care as the speech pathologist will have on record what the parents have been told and what information still needs to be provided to them.



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