



Position Statement

International Telepractice in Speech Pathology

Copyright © 2023 The Speech Pathology Association of Australia Limited

Disclaimer: To the best of the Speech Pathology Association of Australia Limited's ('the Association') knowledge, this information is valid at the time of publication. The Association makes no warranty or representation in relation to the content or accuracy of the material in this publication. The information in this publication is of a general nature; it does not apply to any specific circumstances. The information does not constitute legal or other advice. The Association expressly disclaims any and all liability (including liability for negligence) in respect of the use of the information provided. The Association recommends you seek independent professional advice prior to making any decision involving matters outlined in this publication.



Acknowledgements

| | |
|-----------------------|--|
| Baldac, Stacey | Manager, Professional Standards |
| Cornish-Raley, Nathan | Professional Support Advisor |
| Harris, Nichola | Manager, Professional Practice |
| McGill, Dr Nicole | Senior Advisor, Evidence-Based Practice and Research |
| Russo, Diana | Senior Advisor, Professional Standards |

Contents

Acknowledgements.....i

Contents..... 1

1. Definitions.....2

1. Origins of the document4

2. The position of Speech Pathology Australia5

3. Conclusion..... 10

References..... 11

1. Definitions

The definitions of 'telepractice' and 'standard care' reflect the definitions found in the Speech Pathology Australia *Telepractice in speech pathology: Position statement* (2022a, p. 1).

Telepractice: The application of telecommunications technology to deliver [speech pathology] services at a distance by linking the service provider to the service user, caregiver, or any person(s) responsible for delivering care to an individual, for the purposes of assessment, intervention, consultation and/or supervision.

Telepractice involves the delivery of [speech pathology] services over any distance that are guided, monitored, or modified by a service provider for each service user or purpose.

Telepractice may also be known as telehealth, telerehabilitation, telespeech, teletherapy, virtual care or teleSLP.

Telepractice forms part of a larger concept known as e-Health or digital health, which are terms given to electronic processes and communication technology that supports healthcare practice. E-health/digital health includes but is not limited to electronic medical records and technology-delivered, self-guided consumer education and training (for example, therapy software apps). While integral to the provision of healthcare, they are not within the scope of this document.

Standard care: Telepractice services are commonly offered as an alternative to standard in-person care. In this context, standard care refers to the existing model of care being provided for the delivery of a service.

International telepractice: The use of telepractice to deliver services to people located in a country different to the service provider. International speech pathology telepractice in Australia may occur when:

- Australian-based speech pathologists and/or supervised students offer services to individuals in other countries
- speech pathologists trained and located in countries outside Australia offer services to individuals located in Australia
- Australian-trained speech pathologists continue to provide services to people in Australia while travelling or after relocating to another country.

International telepractice may occur in a range of contexts, including:

- service provision to an individual in another country
- continuing service provision to an individual who has relocated to another country
- practice educators who supervise students in another country
- multinational participation in virtual group intervention programs
- supporting assistive technology users in other countries
- establishing a practice that offers services across national borders
- an Australian business hiring a speech pathologist who is located in another country
- offering direct supervision or regular practice support to a speech pathologist located in another country.

General 'global telehealth' activities (Koplan et al., 2009; Rule, 2021) are not within the scope of this document. These include:

- multinational collaborations that address global communication disability issues

- developing general resources that support equity among nations
- training and mentoring students and colleagues in other countries (where practice education or supervision of a service is not involved).

1. Origins of the document

Speech Pathology Australia (the Association) developed its initial position statement on telepractice in 2014 to assist speech pathologists to implement telepractice in the Australian context. This document was reviewed and updated in 2022 to reflect the growing evidence base informing and supporting the delivery of telepractice services across population groups, practice areas and contexts. The COVID-19 pandemic intensified the need to use telepractice in speech pathology and accelerated interest in its potential to provide services across international borders. This potential was supported by advances in technology and improved access to global telecommunication.

International telepractice may address local staff shortages, continue services while practitioners or service users travel or relocate overseas, and address inequities in global access to speech pathology services (Rule & Ramrattan, 2021). It may also provide opportunities for student practice education placements (Lowman et al., 2022). However, challenges associated with international telepractice include differences between countries that relate to practice requirements, professional standards, funding sources, access to technology, and data security. Further, ensuring culturally safe and responsive services may pose extra challenges when delivering services into unfamiliar contexts.

This document seeks to guide and assist Australian-based speech pathologists to develop and provide telepractice services to people outside Australia, and speech pathologists based outside Australia to provide telepractice services to people in Australia. Throughout this position statement, reference is made to speech pathologists providing international telepractice services; however, this document is also relevant to workplaces/organisations and employers who employ speech pathologists engaging in international telepractice, and speech pathologists supervising students providing international telepractice.

This position statement should be read in conjunction with the Speech Pathology Australia *Telepractice in speech pathology: Position statement (2022a)* and the *Principles of practice for telepractice in speech pathology (2022b)*.

2. The position of Speech Pathology Australia

The following statements articulate Speech Pathology Australia's position regarding speech pathologists' engagement in international telepractice.

2.1. It is the position of Speech Pathology Australia that the delivery of speech pathology services via international telepractice is appropriate when telepractice services are based on current best available evidence, and outcomes are at least equivalent to standard speech pathology care

Speech pathologists providing international telepractice and/or supervising students providing international telepractice must possess the knowledge and skills to deliver competent, evidence-based speech pathology services via telepractice in international contexts.

Speech pathologists must be competent to provide the specific speech pathology service being delivered or have access to appropriate professional support and mentoring to enable them to do so. Speech pathologists must be able to recognise when it is or is not appropriate to provide services via telepractice.

Required skills specific to telepractice include the ability to:

- effectively use telepractice equipment and software
- troubleshoot technical issues
- effectively engage service users and others involved in the telepractice sessions
- direct speech pathology tasks effectively and efficiently
- maintain the safety of service users and staff.

Speech pathologists must also have the knowledge, professional attributes and ethical judgement to employ these skills in contexts that may be significantly different to their own. This includes the skills and knowledge to recognise when telepractice is/is not an appropriate mode of service delivery in a specific context.

2.2. The delivery of international telepractice services must comply with relevant professional practice and ethical standards, and legal, privacy and other requirements at the location of the service provider and the service user

Speech pathology practice standards, scope of practice and code of ethics may vary by country. Speech pathologists must know and understand the professional practice areas and procedures that they are permitted to engage in at their own location and at the service user's location. Speech pathologists should be aware of regulations and requirements that shape international telepractice, including (but not limited to) the need for skills assessment and/or certification, license or registration to practice, privacy and health record requirements, and police checks.

Speech pathologists who use international telepractice to provide services to or from Australia may be subject to Australian privacy laws, including the *Australian Government Privacy Act 1988* (Cth), the *Australian Privacy Principles* (Office of the Australian Information Commissioner, 2014) and state/territory health record laws. These requirements may have implications for the security of devices, notes, files or other data and physical items. There may also be requirements related to data security, technology and third-party partners involved in the transmission, storage and disposal of personal health information.

Australian-based speech pathologists wishing to provide services to service users outside of Australia should consult relevant organisations within the country of the service user (for example, national

speech pathology peak bodies and professional associations, registration boards, government agencies) for support in identifying practice requirements. Guidance should be sought where the standards and practice requirements in a service user's location conflict with professional standards and ethical obligations that a speech pathologist must abide by in Australia.

Specific considerations for international telepractice are outlined in the following Speech Pathology Australia documents, available on the Speech Pathology Australia website:

- *FAQs from members: The provision of telepractice services to clients located overseas by speech pathologists in Australia*
- *FAQs from the general public: The provision of telepractice services to clients in Australia by speech pathologists located overseas*

2.3. Speech pathologists who have not trained in Australia and are seeking to provide telepractice services into Australia must hold qualifications that meet the standards for speech pathology practice in Australia

At a minimum, overseas-trained speech pathologists should undergo a skills assessment¹ to ensure that they meet the professional standards and requirements to practice in Australia. Speech Pathology Australia is recognised by the Australian Government as the authority to assess overseas qualified speech pathologists to confirm they meet Australian standards. Speech Pathology Australia's assessment process seeks to protect Australian consumers and maintain professional standards. It is incumbent on speech pathologists who have not trained in Australia but wish to provide telepractice services into Australia, and workplaces/organisations in Australia wishing to employ overseas trained speech pathologists, to ensure all required skills assessments and legal requirements are met.

Speech Pathology Australia also recommends that all speech pathologists who provide services to individuals in Australia hold, at a minimum, Certified Practising Speech Pathologist (CPSP) status². The CPSP status allows speech pathologists to provide services that are funded by Australian government schemes and private health insurance agencies. CPSP status also confirms a speech pathologist has met minimum standards for practice and continuing professional development.

Further information about practice standards and requirements for speech pathology practice in Australia can be found on the Speech Pathology Australia website.

2.4. Speech pathology services provided by international telepractice must be inclusive, equitable, sustainable, and culturally safe and responsive

To support culturally safe and responsive practice with individuals and communities with backgrounds that are different from their own, speech pathologists should consider how a service can support capacity building and be culturally relevant and sustainable (Wylie et al., 2016).

In Australia, the nations, languages and identities of Aboriginal and Torres Strait Islander Peoples are diverse and include the oldest cultures in the world. Telepractice services in Aboriginal and Torres

1

https://www.speechpathologyaustralia.org.au/SPAweb/Join_us/Qualification_Assessments/Overseas_Qualification_Assessment/SPAweb/Join_Us/Overseas_Qualifications/Overseas_Qualification_Assessment.aspx?hkey=c0413dd4-da6f-4ce1-bbf6-8c9605a8f4fa

2

https://www.speechpathologyaustralia.org.au/SPAweb/Members/PSR/SPAweb/Members/Professional_Self_Regulation/Professional_Self_Regulation.aspx?hkey=1a793d97-f224-46e8-a6eb-9aa776c3450d

Strait Islander communities must be developed in partnership with communities and with local Aboriginal and Torres Strait Islander services. Community guidelines must be followed to ensure appropriate, culturally safe and responsive consultation and engagement. Speech pathologists should be 'guided by Aboriginal and Torres Strait Islander Peoples and communities to respond to their shared identity as well as the differences in history, culture, language and traditions across nations, communities, families and individuals' (SPA, 2020b, p. 12). Speech pathologists should be guided by Speech Pathology Australia's *Reconciliation Action Plan* (SPA, 2021); *Code of ethics* (SPA, 2020a); *Professional standards for speech pathologists in Australia* (SPA, 2020b), and other relevant documents and frameworks such as the Indigenous Allied Health Australia (IAHA) *Cultural Responsiveness in Action Framework* (IAHA, 2015).

In addition, Australia is a culturally and linguistically diverse country with approximately one-third of the Australian population born overseas and one fifth of the population speaking a language other than English at home (Australian Bureau of Statistics, 2017). Even where speech pathologists and individuals share aspects of culture and language, speech pathologists must adapt their practice to 'respond to the influence of personal history, culture, language and social background' of unique individuals and communities (SPA, 2020b, p. 12).

To support culturally safe and responsive practice, speech pathologists providing international telepractice services are encouraged to:

- be familiar with the cultural, linguistic, economic, and political history of the country and the community of the service user.
- engage local stakeholders including service users, families, carers, other professionals, and policy and decision makers in bidirectional learning about speech pathology services (Rule, 2021).
- collaborate with service users to co-create service delivery models that are accessible, equitable, and sustainable within the cultural and national contexts of the individual (Hyter, 2014; Wylie et al., 2013).
- engage in critical analysis and reflection to identify personal assumptions and biases that may exist in relation to different cultures, with the aim of supporting a deeper understanding and appreciation of cultures that are different from their own (Hyter et al., 2017).

2.5. Informed consent must be obtained from service users prior to commencing international telepractice and this must include information about the risks associated with telepractice conducted across international borders

As part of the process for gaining informed consent, service users should be informed of and understand the potential risks specifically associated with international telepractice. These may relate to consistency of technology and networks, security of cross-border data transmission and storage of personal health information, and safety issues (for example, medical, physical, and/or mental health) related to the service user and practitioner being in different locations.

Speech pathologists should be aware of and address factors that might interfere with service users' understanding of the service and ability to provide informed consent to an international telepractice service (Staley et al., 2021). These factors may include language differences (Sharp, 2015), cultural perspectives (Verdon et al., 2015), roles of the individual and other stakeholders in making healthcare decisions (Davis-McFarland, 2020), and perceptions regarding a service user's ability to refuse a service and comfort in doing so (Staley et al., 2021). Further information regarding informed consent can be found on the Speech Pathology Australia website.

2.6. Speech pathologists who engage in international telepractice must prioritise the safety and wellbeing of service users

Speech pathologists should understand how to manage emergency physical, medical and other situations that may arise and impact the safe delivery of telepractice services to individuals in other countries. This may involve establishing a risk contingency plan upon intake to the telepractice service (SPA, 2022b).

Speech pathologists must be aware of their responsibilities to report and be able to respond to suspected abuse or exploitation.

Speech pathologists must have the ability to refer individuals to other professionals should this be required. In the case that the needs of a service user cannot be met through the international telepractice service, speech pathologists should refer individuals to professionals who can appropriately supplement or replace the service (Rule & Ramrattan, 2021).

2.7. Speech pathologists who engage in international telepractice should discuss with service users whether they are able to access local funding sources for the services provided. Secure methods of payment should be established prior to commencing the service

Health systems and funds vary widely across countries. In Australia, many individuals receive funding or rebates via schemes such as Medicare, National Disability Insurance Scheme (NDIS), Department of Veterans Affairs, or private health funds. Each scheme has unique requirements. Services provided by speech pathologists based in a country other than Australia may not be eligible for rebates. Similarly, services provided by speech pathologists who were based in Australia but have relocated or are travelling overseas may no longer be eligible for rebates. There may be similar issues for individuals wishing to access health funds and subsidies in countries other than Australia for an international telepractice service. Speech pathologists should discuss the possibility and availability of rebates and funding sources with service users prior to commencing services and ensure informed financial consent is obtained prior to commencing service delivery.

Payment for speech pathology services that occurs across national borders may pose risks to security of funds and financial information. Speech pathologists must ensure payment methods are secure and adhere to privacy requirements.

Where speech pathologists partner with third parties to implement international telepractice services, the speech pathologists should understand the costs, financial implications, and security risks posed to service users and work to manage these.

2.8. Speech pathologists who engage in international telepractice must have the necessary insurance to cover issues that may arise both at their location and the location of service users. Service users must be informed of the process for making a complaint

The *National code of conduct for health care workers* (Council of Australian Governments, 2015) requires speech pathologists who provide a health service in Australia to be covered by appropriate insurance in the states and territories where the code has been implemented. Other countries may also have insurance requirements which apply to an international telepractice service. A common requirement is for speech pathologists to have professional indemnity insurance to cover complaints that may arise in the countries where they provide services. Depending on the service, speech pathologists might also be required to obtain other insurance cover such as public or product liability, and business insurance. Speech pathologists who provide international telepractice services to and from Australia should be familiar with the insurance requirements that apply to all relevant locations to

which they provide services and the terms and conditions of their own professional indemnity insurance policy.

A vital component of clinical governance in Australia is for service users to have the ability to provide feedback and, when necessary, make a complaint (Australian Commission on Safety and Quality in Health Care, 2017; 2020). In Australia, service users may lodge complaints about speech pathologists and other health workers through the *National code of conduct for health care workers* (Council of Australian Governments, 2015) in the Australian states and territories where the code has been implemented. Service users can contact Speech Pathology Australia to enquire about lodging a complaint to the Association and to seek advice on other avenues to manage a complaint.

Speech pathologists must be familiar with clinical governance frameworks in the countries where they provide services and share relevant information about clinical governance with service users. Information might include consumer rights and the process for filing a complaint with the appropriate professional body or government agency in another country.

3. Conclusion

Speech Pathology Australia affirms that international telepractice is an appropriate method of speech pathology service delivery between Australia and other countries.

Speech pathologists and workplaces/organisations intending to provide international telepractice services must ensure they have the necessary skills, training, and governance to provide tailored services within ethical, evidence-based and culturally safe and responsive frameworks.

Speech Pathology Australia acknowledges that international telepractice may enhance access to speech pathology services globally. However, it is critical that the outcomes from speech pathology services delivered via international telepractice are at least comparable to standard services, and that issues related to cross-border practice are understood and managed.

It is incumbent upon speech pathologists and workplaces/organisations seeking to provide international telepractice services to ensure that formal practices and procedures are in place to address issues related to practice requirements and standards present at the location of a service user. These should include guidelines and procedures to support access to and use of technology, support funding of the service, and maintain privacy and security.

Services provided across international borders must ensure the safety and wellbeing of service users, be responsive to the cultural and linguistic contexts in which individuals communicate, and be implemented in an inclusive, ethical, equitable, and sustainable manner.

References

- Australian Bureau of Statistics. (2017). *Cultural diversity in Australia*. Author. <https://www.abs.gov.au/ausstats/abs@.nsf/Lookup/by%20Subject/2071.0~2016~Main%20Features~Cultural%20Diversity%20Data%20Summary~30>.
- Australian Commission on Safety and Quality in Health Care (ACSQHC). (2017). *National model clinical governance framework*. Author. <https://www.safetyandquality.gov.au/sites/default/files/migrated/National-Model-Clinical-Governance-Framework.pdf>
- Australian Commission on Safety and Quality in Health Care (ACSQHC). (2020). *Understanding my healthcare rights: A guide for consumers*. Author. <https://www.safetyandquality.gov.au/publications-and-resources/resource-library/understanding-my-healthcare-rights-guide-consumers>
- Australian Government. *Privacy Act 1988*. (Cth). <https://www.legislation.gov.au/Details/C2018C00292>
- Council of Australian Governments (COAG). (2015). *COAG Health Council final report: A national code of conduct for health care workers*. <http://www.coaghealthcouncil.gov.au/NationalCodeOfConductForHealthCareWorkers>
- Davis-McFarland, E. (2020). Ethics in international practice. *Perspectives of the ASHA Special Interest Groups*, 5, 1779–1784. https://doi.org/10.1044/2020_PERSP-20-00132
- Hyter, Y. (2014). A conceptual framework for responsive global engagement in communication sciences and disorders. *Topics in Language Disorders*, 34(2), 103–120. <https://doi.org/10.1097/TLD.0000000000000015>
- Hyter, Y., Roman, R., Staley, B., & McPherson, B. (2017). Competencies for effective global engagement: A proposal for communication sciences and disorders. *Perspectives of the ASHA Special Interest Groups*, 2(1), 9–20. <https://doi.org/10.1044/persp2.SIG17.9>
- Indigenous Allied Health Australia (IAHA). (2015). *Cultural responsiveness in action framework*. <https://iaha.com.au/workforce-support/training-and-development/cultural-responsiveness-in-action-training/>
- Koplan, J.P., Bond, T.C., Merson, M.H., Reddy, K.S., Rodriguez, M.H., Sewankambo, N.K., & Wasserheit, J.N. (2009). Towards a common definition of global health. *The Lancet*, 373(9679), 1993-1995. [https://doi.org/10.1016/S0140-6736\(09\)60332-9](https://doi.org/10.1016/S0140-6736(09)60332-9)
- Lowman, J., Walker, J., & Houston, T. K. (2022). Preparing speech-language pathology graduate students for effective telepractice: Recommended knowledge and skills. *Topics in Language Disorders*, 42(2), 107–126. <https://doi.org/10.1097/tld.0000000000000279>
- Office of the Australian Information Commissioner (OAIC). (2014). *The Australian Privacy Principles from Schedule 1 of the Privacy Amendment (Enhancing Privacy Protection) Act 2012*. <https://www.oaic.gov.au/privacy/australian-privacy-principles/read-the-australian-privacy-principles>
- Rule, D. W. (2021, November 18–20). *Perspectives in international telepractice: Ethical bidirectional partnership, sustainability, & opportunities for collaborative advancement* [Conference session]. American Speech-Language-Hearing Association Convention, Washington, DC, United States.
- Rule, D. W., & Ramrattan, H. M. (2021). International telepractice: Encouraging equity, partnership, and sustainability. *Perspectives of the ASHA Special Interest Groups*, 6, 1864–1870. https://doi.org/10.1044/2021_PERSP-21-00033

- Sharp, H. (2015). Informed consent in the clinical and research settings: What do patients and families need to make informed decisions? *Perspectives on swallowing and swallowing disorders (Dysphagia)*, 24, 130–139. <https://doi.org/10.1044/sas24.4.130>
- Speech Pathology Australia. (2020a). *Code of ethics*. Author. <https://www.speechpathologyaustralia.org.au/SPAweb/Members/Ethics/spaweb/Members/Ethics/Ethics.aspx?hkey=5c5556d0-327f-4d06-8e89-fd1a638e543a>
- Speech Pathology Australia. (2020). *Professional standards for speech pathologists in Australia*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/Resources_For_Speech_Pathologists/Professional_Standards/Professional_Standards/SPAweb/Resources_for_Speech_Pathologists/CBOS/Professional_Standards.aspx?hkey=583a56af-74e0-4111-95fa-656502269967
- Speech Pathology Australia. (2021). *Reconciliation Action Plan*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/About_us/Reconciliation/SPAweb/About_Us/Reconciliation/Reconciliation.aspx?hkey=16f210c6-a24d-46c2-8339-c616574c1d10
- Speech Pathology Australia. (2022a). *Telepractice in speech pathology. Position statement*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/Members/Position_Statements/spaweb/Members/Position_Statements/Position_Statements.aspx?hkey=dedc1a49-75de-474a-8bcb-bfbd2ac078b7
- Speech Pathology Australia. (2022b). *Principles of practice for telepractice in speech pathology*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/Members/Clinical_Guidelines/spaweb/Members/Clinical_Guidelines/Clinical_Guidelines.aspx?hkey=f66634e4-825a-4f1a-910d-644553f59140
- Speech Pathology Australia. (2022c). *FAQs from members: The provision of telepractice services to clients located overseas by speech pathologists in Australia*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/Resources_for_Speech_Pathologists/Professional_Resources/HTML/Telepractice_Resources.aspx
- Speech Pathology Australia. (2022d). *FAQs from the general public: The provision of telepractice services to clients in Australia by speech pathologists located overseas*. Author. https://www.speechpathologyaustralia.org.au/SPAweb/Resources_for_Speech_Pathologists/Professional_Resources/HTML/Telepractice_Resources.aspx
- Staley, B., Hickey, E., Rule, D., Barrett, H., Salter, C., Gibson, R., & Rochus, D. (2021). Speech-language pathology and ethical practice in global contexts. *International Journal of Speech-Language Pathology*, 23(1), 15–25. <https://doi.org/10.1080/17549507.2020.1743358>
- Verdon, S., Wong, S., & McLeod, S. (2015). Shared knowledge and mutual respect: Enhancing culturally competent practice through collaboration with families and communities. *Child Language Teaching and Therapy*, 32, 205–221. <https://doi.org/10.1177/0265659015620254>
- Wylie, K., McAllister, L., Davidson, B., & Marshall, J. (2013). Changing practice: Implications of the World Report on Disability for responding to communication disability in under-served populations. *International Journal of Speech-Language Pathology*, 15(1), 1–13. <https://doi.org/10.3109/17549507.2012.745164>
- Wylie, K., Amponsah, C., Ohenewa Bampoe, J., & Owusu, N. A. (2016). Sustainable partnerships for communication disability rehabilitation in majority world countries. *Journal of Clinical Practice in Speech-Language Pathology*, 18(3), 116–120. <https://doi.org/10.1080/17549507.2019.1651395>