

PROJECT INVESTIGATOR:

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Project title: The ECU Late-Talking Study
Approval Number: 2021-02166-MELDRUM
Principal Investigator: Dr Suzanne Meldrum

I, _____, parent/guardian of

_____ have read the Participant Information Letter or someone has read it to me in a language that I understand. By signing this consent form, I acknowledge that I:

- have been provided with a copy of the Participant Information Letter, explaining the research study
- have read and understood the information provided
- have been given the opportunity to ask questions and have had questions answered to my satisfaction
- can contact the research team if I have any additional questions
- understand that participation in the research project will involve:

1. An assessment and initial training session.

At this visit we will ask you about your child's language and you will complete another OZI vocabulary survey. We will also make a video of your child playing with you and the speech therapy student. We use the video to write down all the words that your child says. This will take around 45 minutes to complete. You will then receive individual training in how to deliver the speech pathology treatment at home. We will give demonstrations, written instructions and you will be given opportunities to practice with your child. This will take around 45 minutes to complete, making the whole session around 1.5 hours long.

2. Eight weekly group training sessions.

Every week you will come to the clinic and receive group training with your child and three other families. We will demonstrate how to complete the intervention at home, and give you new materials and ideas. We will also ask your child to say some words, you will let us know if they have acquired any new words. This will take around one hour.

3. At home intervention.

You will be asked to do the intervention at home, twice per week for 30 minutes. We will ask you to keep a record of when you do the treatment, and how you found the experience.

4. Two video recording sessions

After two of the group training sessions, we will ask you to stay and administer the treatment to your child at ECU. We will videotape this, and see if we have been successful in training you to complete the intervention.

5. *Final assessment*

After the 8 weeks of training, we will do another assessment, where we ask you about your child's language and you will complete another OZI vocabulary survey. We will also make a video of your child playing with you and the speech therapy student. We use the video to write down all the words that your child says. This will take around 45 minutes to complete

- understand that the information provided will be kept confidential, and that my or my child's identity will not be disclosed without consent
- understand that I am free to withdraw from further participation at any time, without explanation or penalty
- freely agree to participate in the project with my child
- The data and/or samples collected for the purposes of this research project may be used in further approved research projects provided my name and any other identifying information is removed.

I agree to have the clinical visits to ECU with my child video and audio recorded?

Yes

No

Parent/Guardian Name: _____

Parent/Guardian Signature: _____

Date: _____

HREC Reference No: