

## CONSENT TO ASSIST YOUR CHILD IN THE RESTROOM

Although it is preferable for parents/guardians to assist their children with toileting, there may be times when it is necessary for HSDC staff members to take a child who is attending therapy to the restroom. This generally applies to children under age 5 or to older children who may still need help in this developmental area because of behavioral or cognitive difficulties.

So we can best protect your child's safety, please read and sign one of the following statements:

1. My child needs assistance using the restroom. If I am not present in the clinic, I understand that a staff member will take my child to the restroom and remain at the door. The door will remain open just enough to allow for privacy but also to provide assistance to my child if needed.

This consent is effective for the duration of my child's therapy program.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

OR

2. I agree to be present in the waiting room during the entire time that my child is in speech therapy, so that I can be available to accompany my child to the restroom. If I am not in the waiting room when my child requires assistance in the restroom, I understand that a staff member will take my child to the restroom and remain at the door as described in Statement #1.

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

OR

3. My child does not require assistance with toileting and may leave the speech therapy room unaccompanied to use the restroom, as needed.  
Age of my child \_\_\_\_\_

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_