Australian Psychology Accreditation Council

Towards Good Practice Guide

Informed Consent

Version 1 (November 2026)

APAC Towards Good Practice Guide: Informed Consent

Purpose

The 2025 Accreditation Standards for Psychology Programs (Accreditation Standards) include criteria requiring education providers to demonstrate informed consent is obtained from clients[1] before the provision of psychology services by students[2] while undertaking placement components of an accredited program. This Guidance Note intends to provide guidance to education providers and APAC assessors regarding consent procedures and documentation, and communication of consent within education providers, used in internal and external placement activity[3].

Educating students on correct informed consent procedures is essential for them to provide ethical psychological services and meet the PsyBA Professional Practice Standards. Learning and implementing effective informed consent procedures supports students in developing engagement skills when interacting with clients and in understanding client autonomy and their right to self-determination, dignity, and independent decision-making regarding their psychological service.

Following feedback from education providers and APAC assessors seeking greater clarity on what may be considered appropriate consent procedures, APAC, through a partnership with Australian Psychology Placement Alliance (APPA) (in consultation with Australian Association of Psychology Training Clinics (AAPTC) and Heads of Psychology Australia (HPA), have developed this Towards Good Practice Guide document to provide supportive guidance for describing consent procedures and producing documentation for accreditation evidence purposes. Given the breadth of placement activities and education provider-specific legal requirements, APAC proposes that this guidance document supports APAC assessors to understand and Education Providers to develop new, or revise existing, consent procedures and documentation to meet the Accreditation Standards.

APAC's Accreditation Standards take an outcome-focused approach. Consequently, the Evidence Guide does not prescribe informed consent procedures, the content of consent forms, or record management procedures. This document is intended to be used in conjunction with the Accreditation Standards and Evidence Guide to assist education providers and APAC assessors in understanding and demonstrating that informed consent procedures within accredited programs are obtained.

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[1] Client includes individuals, groups (including families and kinship communities), and/or organisations that are provided with services by a psychologist or a provisional psychologist

[2] Student encompasses all persons enrolled in a psychology program and including a psychologist holding provisional or general registration with the PsyBA.

[3] Practice placements provide opportunities in a relevant professional setting for the education and training of psychology students for the purpose of: integrating theory into practice; familiarising the student with the practice environment; building the knowledge, skills and attributes essential for professional practice and can include simulated learning activity.

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Relevant Accreditation Standards Criteria applying to informed consent

The following 2025 APAC Accreditation Standards criterion is relevant to informed consent:

APAC Standard 1, Criterion 1.5 Where students provide psychological services to clients and organisations, clients' informed consent is obtained prior to provision of the service.

How can Education Providers evidence good informed consent practice?

Several policies and pieces of legislation govern consent requirements in addition to those included above. Education providers should ensure that any consent form used for placement activity is compliant with:

- Privacy Legislation in accordance with State, Territory and National laws
- Education provider policies and procedures
- PsyBA Code of Conduct (noting that the Code does not substitute legislation), Principle 3.3(h) "*not disclose, transmit, share, reproduce or post any person's information or images, even if the person is not directly named or identified, without first getting written and informed consent.*"

Additional information deemed necessary to comply with education provider and/or external service mandatory or legal requirements is to be included at the discretion of the education provider.

The Australian Association of Psychology Training Clinics and Association of Psychology and Training Clinics (AAPTC and APTC) Guidelines for Psychology Training Clinics state, "*Development of comprehensive written informed consent procedures that meet the requirements of the jurisdiction and all authorities under which the Clinic operates are essential*." (2022, p.13).

The document provides a list of standard items for internal clinic consent forms and includes:

a. Fee structures and billing policies.

b. Information regarding the services provided, including assessment methods and therapeutic strategies to be employed.

c. Consent to assessment, treatment, monitoring and evaluation as appropriate.

d. Limits to confidentiality according to the legal regulations under which the Clinic operates.

e. Client/patient files/records storage and the timing of their disposal.

f. The conditions under which access to client/patient files/records is provided.

g. Access to records with/without the client's/patient's written consent, in accordance with the legal jurisdiction within which the Clinic operates.

h. Additional specific guidelines (e.g. copies of privacy policies) that are consistent with national and regional mental health laws.

i. The name and contact information of the supervising psychologist.

j. Voluntary consent for de-identified data usage for research purposes where relevant.

k. Where Psychology services are provided, Clinics are expected to develop and document specific procedures and policies, including professional and ethical guidelines and codes for the delivery of e-services. These need to be adhered to in conjunction with

l. Established procedures and policies of the Clinic.

In addition to the above, APAC Accreditation Standards (Criterion 1.5) and PsyBA (Code 3.3) compliant informed consent forms should contain the following information:

a. Student name and registration status

b. Services are delivered by a student undergoing supervision

c. Supervision arrangements (individual and group),

d. Purpose/nature of service (note if simulated practice),

e. A statement informing the client of use of information for academic/education purposes,

f. Use of recordings,

g. Right to withdraw consent, and implications of this,

h. Storage of consent information and how long consent applies,

i. When consent will be revisited, if relevant

j. Substitute decision-maker issues, where relevant.

Education providers should ensure that consent processes and documentation clearly communicate to clients the use of any technology, including digital health tools, AI-assisted tools, transcription, or telehealth tools that may be used during psychology sessions. Clients should be informed of the data handling and storage protocols and their privacy rights, including any associated risk. This allows the client to be appropriately informed and provides them the opportunity to opt out or withdraw consent for the use of these tools during sessions with students.[4]

Education providers should use culturally safe consent processes and documentation to ensure clients receive informed consent that supports their autonomy and cultural relationships to family, kinship groups, and communities.

[4] Please refer to The Australian Clinical Psychology Association. ACPA Practice Guidance: Use of AI-assisted Tools in Clinical Psychology (2025) and Australian Psychological Society. Things to consider when gaining informed consent from clients (2025), for further information.

Student disclosure of client information

Disclosure of client information is made explicit in Principle 3.3(h)of PsyBA's Code of Conduct. In situations in which the student will or may disclose information regarding a client for academic assessment purposes (even when the person is not directly named or identified), consent for this disclosure needs to be obtained from the client (or their substitute decision maker). Therefore, the consent form should state that the client's de-identified information may be used for the student's educational activities or record (e.g., oral case presentation), allowing the client to opt in or opt out of disclosure.

When engaged in placement activity and coursework, students are likely to disclose (de-identified) client information in one or more of the following educational activities:

- oral presentations
- written case summaries/reports
- consultation meetings
- in placement record documents such as portfolios and logbooks
- publication

The consent form should include an explicit statement regarding the use of (de-identified) client information in students' educational activities.

The following are examples from education provider's consent forms of such statements:

- "training clinicians, including teaching, supervising, assessing, and grading" (WSU, 2025);
- "facilitating Clinicians learning and peer-based education discussions" (WSU, 2025);
- "your provisional psychologist may also discuss aspects of your psychological service in group supervision or postgraduate psychology classes. This will always occur in a way where you/your child cannot be personally identified, and the information will not be shared with anyone outside of these contexts" (UTAS, 2025);
- "education assessments: Using de-identified information (that means removing your name and any details that could identify you) in written or verbal assessments such as case reports, case presentations, reflective assignments, etc." (CMI, 2026).

If the client declines or withdraws consent for educational use, the client needs to be made aware of the implications regarding their access to psychological services provided by the student, using explicit and non-coercive language. If necessary and consistent with service procedures, alternative options should be provided (e.g. access to another clinician or service provider in a timely manner).

PsyBA Code of conduct Principle 3.3 stipulates that informed consent must be formally documented. How this is recorded is at the discretion of the education provider (e.g. signed consent form, contemporaneous note on client file detailing provision of verbal consent). A record of the consent should be kept in the client's file within the associated service where the client is seen by the student.

Ideally, consent processes are discussed, and the education provider consent form is completed before the student engages with the client. Education provider consent forms

must be completed alongside any other standard consent forms required by the placement organisation at the placement site.

Simulated Learning Activity (SLA) consent considerations

When using SLA[5] as a training tool, additional consent issues require consideration, and informed consent must be obtained from all participants. The Australian Postgraduate Psychology Education Simulation Working Group (APPESWG) (2021a, b) suggests education providers implement the following as part of SLA practice:

Design a clear informed consent process to obtain consent from those playing the "client" and "therapist" roles (e.g. supervisor, actor, another student). In this consent, education providers should clearly explain and make explicit that, if issues are raised in the SLA that may be activating to the personal circumstances of those involved, result in distress or cannot be tolerated by either party, provisions can be made to change the case scenario content or for them to opt out. An opt-out option is explicit within informed consent, however, consideration of opt-out requests should be on an individual basis in consultation with the student.

[5] For more information on claiming SLA as DCA, please refer to the APAC Towards Good Practice: Direct Client Activity document.

References and Resources

To produce this Guidance Note, the following resources were considered and referenced[6]:

- Australian Association of Psychology Training Clinics and Association of Psychology and Training Clinics (AAPTC & APTC). (2022). Guidelines for Psychology Training Clinics. Retrieved from: https://placementreview.net/aaptc
- Australian Clinical Psychology Association (ACPA). (2025). ACPA Practice Guidance: Use of AI-Assisted Tools in Clinical Psychology. Retrieved from: https://www.acpa.org.au/acpa/Site/CPD/Resources.aspx?hkey=65710dc2-4592-4c95-9edc-a81ee53bbe04
- Australian Postgraduate Psychology Education Simulation Working Group (APPESWG). (2021a). Guidelines for the Incorporation of Simulated Learning Activities in Postgraduate Psychology Training. Retrieved from: https://placementreview.net/appa
- Australian Postgraduate Psychology Simulation Education Working Group (APPESWG). (2021b). A New Reality: The Role of Simulated Learning Activities in Postgraduate Psychology Training Programs. Front. Educ. 6:653269. https://doi.org/10.3389/feduc.2021.653269
- Australian Psychology Accreditation Council (APAC). (2025). Accreditation Standards for Psychology Programs. Retrieved from: https://apac.au/education-providers/standards/
- Australian Psychology Accreditation Council (APAC). (2026). Evidence Guide. Retrieved from: https://apac.au/education-providers/standards/
- Australian Psychological Society (APS). (2025). Things to consider when gaining informed consent from clients. Retrieved from: https://psychology.org.au/insights/how-informed-consent-is-evolving
- Psychology Board of Australia (PsyBA). (2025). Code of Conduct for Psychologists. Retrieved from: https://www.psychologyboard.gov.au/Standards-and-Guidelines/Professional-practice-standards/Code-of-conduct.aspx

and the following organisations/networks were consulted[7]:

- Australian Psychology Placement Alliance (APPA)
- Australian Association of Psychology Training Clinics (AAPTC)
- Heads of Psychology Australia (HPA)

[6] EPs are encouraged to refer to these documents for further clarification on consent procedures.
[7] Thanks to those who provided feedback, advice, exemplars etc to assist with this project.

Appendix 1: Table of Amendments

Version Number	Date	Short description of amendment
Version 1	04/11/2026	First Toward Good Practice Guide