
INFORMED CONSENT FOR ONLINE PSYCHOLOGICAL SERVICES

IMPORTANT THINGS FOR STARTING ONLINE SERVICES:

- ❖ You will need access to the internet and tools to engage in telehealth-based services with your provider; phone sessions can also be arranged and require adequate phone service
- ❖ Telehealth has both benefits and risks, which you and your provider will be monitoring as you proceed with your work
- ❖ It is possible that receiving services by telehealth will turn out to be inappropriate for you, and that you and your provider may have to cease work by telehealth
- ❖ You can stop work by telehealth at any time without prejudice
- ❖ You will need to participate in creating an appropriate space for your telehealth sessions
- ❖ You will need to participate in making a plan for managing technology failures, mental health crises, and medical emergencies
- ❖ Your provider follows security best practices and legal standards in order to protect your health care information, but you will also need to participate in maintaining your own security and privacy. Services delivered via telehealth rely on a number of electronic, often Internet-based, technology tools. These tools can include videoconferencing software, email, text messaging, virtual environments, specialized mobile health (“mHealth”) apps, and others.

Confidentiality

Information that clients reveal to me is treated as highly confidential, with the following rare exceptions. If someone is a serious danger to their own or another person’s life or if a child or vulnerable adult is being abused the psychologist is legally required to report these. If subpoenaed to appear in court or psychological notes are subpoenaed, the psychologist must comply with the subpoena. The psychologist may choose to consult with another professional to aid in their work with me, in which case identifying information will be kept confidential.

Given the nature of the clinical practice, client files may be accessed minimally by other associates, our receptionist/intake clinician, or our clinical director. In cases of conflict, the clinical director will be made aware and may become involved in resolving the conflict as deemed necessary. In these circumstances, privacy and confidential details will be respected at all times.

Description of Services Provided

— *Assessment:* The goal of a psychological assessment is to answer questions concerning issues related to cognitive, intellectual, academic, social, emotional, and/or behavioural functioning. This is generally accomplished through standardized testing (e.g., intelligence, academic, personality tests), informal testing, interviews, questionnaires, observations, and/or review of previous records or reports. Each assessment of this kind typically involves a few appointments for a background interview, individual assessment sessions, and a feedback interview. In cases where an assessment is not able to be completed, or parts of assessment cannot be included online, I will be informed and

the process may be stopped. The scores will be interpreted according to evidence-based research and guidelines from the scientific and professional literature. The results of the assessment include a detailed description of current levels of functioning in the areas assessed, a diagnosis (if appropriate), as well as detailed recommendations. Feedback is provided both in a face-to-face meeting and in the form of a written report. Billable hours for any services will be discussed in detail. If I withdraw consent prior to conclusion of an assessment, I acknowledge that the psychologist will bill for and write a 1-2 page document indicating what was conducted and that no conclusions can be made due to early withdrawal.

—*Counseling*: Informed consent is my full and active participation in decisions that affect me and freedom of choice based on the information shared. This is a continuous process throughout the counseling relationship. I understand that the process is typically, but not limited to, goal-oriented and solution-focused. It likely includes individual sessions, couple's sessions, or family sessions depending on my situation and clinician recommendations. I understand that my psychologist works collaboratively with me to help set and achieve goals while facilitating personal growth through the counselling process.

Counseling presents both benefits and risks. The benefits include, but are not limited to, better relationships, solutions to specific problems, an increased sense of well-being, and a reduction of distressing symptoms. However, because counselling tends to bring up uncomfortable feelings and difficult memories, people sometimes feel worse before they begin to feel better. Some find that, as they experiment with new ways of thinking and behaving, relationships with others are altered or disrupted. I am encouraged to share any feelings of fear, concern or doubt about the counselling process with my psychologist at any time during sessions.

Psychotherapy may elicit uncomfortable thoughts and feelings, or may lead to the recollection of troubling memories. I also understand that choosing not to engage in therapeutic treatment may also result in greater discomfort or escalating risks. It has been explained to me that my feedback and communication about the therapy process and impact is crucial in reducing my risk for harm, and my therapist has encouraged me to communicate any concerns or discomforts with them as soon as is feasibly possible in my treatment. I also acknowledge that therapy is most effective when I am comfortable with my therapist and so, should I not feel comfortable or connected to this therapist I will either request a transfer to another individual or make my concerns known in order to best facilitate care for myself. Should my therapist determine that there may be a better option or fit with another therapist, I understand that they will inform me and discuss my options.

Data Storage and Retention of Records

Client files are kept for a period of eleven years past the last date on which a professional service was provided, whichever is longer. Electronic records have appropriate passwords and encryption in place to protect your confidentiality. Paper files are kept in a locked filing room and/or locked filing cabinets.

Financial Agreement

Payment is due at the end of each session. Services are \$200 per hour (50-minute session and 10-minutes for required preparation of session notes and preparation for sessions). Longer sessions are also occasionally scheduled as needed. I agree to pay promptly at each face-to-face, online, and telephone therapy/consultation session, all fees and charges owed to Little Oaks Psychology, except for the amounts that can be immediately received or that have already been approved for payment by a third party through instant direct billing by Little Oaks Psychology or through a pre-established contractual agreement. Direct billing is available from BlueCross insurance provider. Any outstanding balance can be paid by credit card or debit, and a receipt with my registration number will be provided which may be used to make claims on extended medical plans or for income tax deductions (psychological services are classified as a medical expense for tax purposes). A credit card is kept on file for your convenience or in the case of no-show's or late cancellations (see below). Unpaid balances will be invoiced and billed to the credit card on the clients' account; outstanding balances are paid prior to further appointments being scheduled. Should a collections agency be required in cases of unpaid accounts, it should be noted that the collections agency would be made aware

that a psychological service was provided on the given date and only necessary payee financial and contact information will be shared. I hereby also agree to pay all fees, charges and legal costs incurred for services associated with the recovery of outstanding amounts owed.

Bringing your concerns to your provider is often a part of the process. You also have a right to stop receiving services by telehealth at any time without prejudice. If your provider also provides services in-person and you are reasonably able to access the provider's in-person services, you will not be prevented from accessing those services if you choose to stop using telehealth.

I also understand and accept that other billable services, such as report writing, professional letters, form completion, communication with collateral contacts, and review of written records from other specialists, are billed at the same rate unless made known to me otherwise. I understand that a retainer amount may be collected to hold an appointment or prepare for an assessment and that additional charges will be added to that retainer to reach previously discussed or agreed upon fee for service and fees shall not exceed the agreed upon amount. All communications that require more than 10-minutes of the psychologists time will be billed the standard rate.

Cancelling Appointments

If I need to cancel an appointment, I agree to provide as much notice as possible. If I cancel with 24 hours notice there is no fee. If I cancel with less than 24 hours notice, half of the regular fee will be charged unless another client is able to fill the spot. If I do not show up and did not let Little Oaks know in advance, I will be billed for the full appointment fee as this is time the clinician cannot recoup.

Right to Ethical Treatment, Terminating Therapy, & Right To Withdraw Consent

I have the right to be treated according to best interests of the client and according to the Code of Conduct of the College of Alberta Psychologists. I may ask questions about the psychological work together. If I ever believe I have been treated unethically by any psychologist, I can contact the College at 780-424-5070. I may, of course, end therapy at any time and have the right to withdraw consent at any time. It is best if this is discussed between myself and the therapist. If I stop therapy without having discussed this, I acknowledge that the therapist will likely contact me to verify that I am indeed terminating, to ensure that I am doing well, and to allow the file to be formally closed.

Benefits of Telehealth

- Receive services at times or in places where the service may not otherwise be available.
- Receive services in a fashion that may be more convenient and less prone to delays than in-person meetings.
- Receive services when you are unable to travel to the service provider's office.
- The unique characteristics of telehealth media may also help some people make improved progress on health goals that may not have been otherwise achievable without telehealth.

Risks of Telehealth

- Telehealth services can be impacted by technical failures, may introduce risks to your privacy, and may reduce your service provider's ability to directly intervene in crises or emergencies. Here is a non-exhaustive list of examples:
- Internet connections and cloud services could cease working or become too unstable to use
- Cloud-based service personnel, IT assistants, and malicious actors ("hackers") may have the ability to access your private information that is transmitted in the process of telehealth-based service delivery. We use a secure system and do not store any video or audio.
- Computer or smartphone hardware can have sudden failures or run out of power, or local power services can go out.
- Interruptions may disrupt services at important moments, and your provider may be unable to reach you quickly or using the most effective tools. Your provider may also be unable to help you in-person.

- There may be additional benefits and risks to telehealth services that arise from the lack of in-person contact or presence, the distance between you and your provider at the time of service, and the technological tools used to deliver services. Your provider will assess these potential benefits and risks, sometimes in collaboration with you, as your relationship progresses.

Assessing Telehealth's Fit For You

Although it is well validated by research, service delivery via telehealth is not a good fit for every person. Your provider will continuously assess if working via telehealth is appropriate for your case. If it is not appropriate, your provider will help you find in-person providers with whom to continue services.

Please talk to your provider if you find the telehealth media so difficult to use that it distracts from the services being provided, if the medium causes trouble focusing on your services, or if there are any other reasons why the

Your Telehealth Environment

You will be responsible for creating a safe and confidential space during sessions. You should use a space that is free of other people. It should also be difficult or impossible for people outside the space to see or hear your interactions with your provider during the session. If you are unsure of how to do this, please ask your provider for assistance.

Our Communication Plan

At our first session, we will develop a plan for backup communications in case of technology failures and a plan for responding to emergencies and mental health crises.

The best way to contact your provider between sessions is by email direct to your clinician, or our general email (intake@littleoakspsychology.com) or by telephone or text at 780-405-4209 to reach our intake clinician who will share your message. Your provider will respond to your messages within 24 business hours. Please note that your provider may not respond at all on weekends or holidays. Your provider may also respond sooner than stated in this policy. That does not mean they will always respond that quickly. Our phone and online work is done primarily during our appointed sessions, which will generally occur during business hours. Contact between sessions should be limited to: appointment rescheduling or rebooking. These terms may be different for email therapy arrangements. Your provider is located in the Pacific time zone. Please note the time difference from your own time zone. Please note that all textual messages you exchange with your provider, e.g., emails and text messages, will become a part of your health record. Your provider may coordinate care with one or more of your other providers. Your provider will use reasonable care to ensure that those communications are secure and that they safeguard your privacy.

Our Safety and Emergency Plan

As a recipient of telehealth-based services, you will need to participate in ensuring your safety during mental health crises, medical emergencies, and sessions that you have with your provider. Your provider will require you to designate an emergency contact. You will need to provide permission for your provider to communicate with this person about your care during emergencies. Your provider will also develop with you a plan for what to do during mental health crises and emergencies, and a plan for how to keep your space safe during sessions. It is important that you engage with your provider in the creation of these plans and that you follow them when you need to. You will receive notification of your appointment via email and text message on several occasions. Phone-based appointments require you to answer your phone at the scheduled time. If you do not answer, your clinician may try again, but after one additional attempt, the appointment will be considered a No-Show and will need to be rescheduled at your providers discretion.

Your Security and Privacy

Except where otherwise noted, your provider employs software and hardware tools that adhere to security best practices and applicable legal standards for the purposes of protecting your privacy and ensuring that records of your health care services are not lost or damaged. Client files are kept for a period of two years after the client turns 18, or eleven years past the last date on which a professional service was provided, whichever is longer. Electronic records have appropriate passwords and encryption in place to protect your confidentiality. Paper files are kept in a locked filing room and/or locked filing cabinets. As with all things in telehealth, however, you also have a role to play in maintaining your security. Please use reasonable security protocols to protect the privacy of your own health care information. For example: when communicating with your provider, use devices and service accounts that are protected by unique passwords that only you know. Also, use the secure tools that your provider has supplied for communications. Psychologists are required to maintain professional boundaries in all settings and will not engage in communication outside the professional setting and are not permitted to accept “friend” or contact requests from clients or former clients on social media (e.g., Facebook, LinkedIn).

Recordings

Please do not record video or audio sessions without your provider’s consent. Making recordings can quickly and easily compromise your privacy, and should be done so with great care. Your provider will not record video or audio sessions unless discussed with you in detail and with your consent for purposes of supervision and training.

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