



# Central Ontario Psychology

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Dr Jonathan Douglas, Dr Robin Mitchell & Associates

## Client Orientation Information

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Welcome to Central Ontario Psychology!

This orientation guide lets you know about our services and policies, including:

1. Who we are and what we do
2. Policies about psychological assessment
3. Policies about psychological services and fees
4. Policies about privacy & confidentiality of records
5. Information about video and telephone services
6. Information about infection control
7. Information about working with WSIB

Please read these documents and feel free to ask any questions or raise any concerns about this information. Then, please sign and date the statement at the bottom of this page indicating you have read and understand the client orientation information and that we have addressed your questions or concerns.

- I have read the policies about the professional practice of Central Ontario Psychology, and have had my questions answered and concerns addressed regarding policies. I consent to service.

Or,

- I have received the policies about the professional practice of Central Ontario Psychology. My provider has reviewed the contents of this document with me. I can raise any questions I might have at any time. I consent to service.

Client Name: \_\_\_\_\_

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

Parent/Guardian Signature: \_\_\_\_\_

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

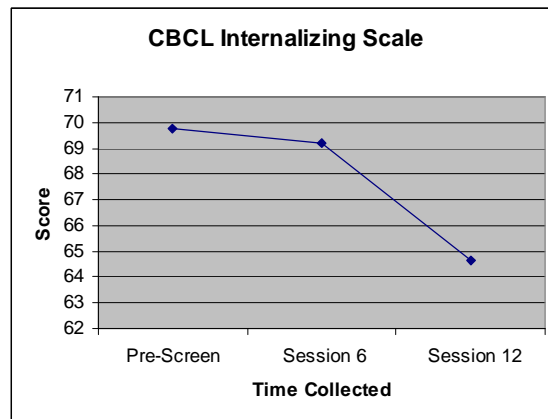
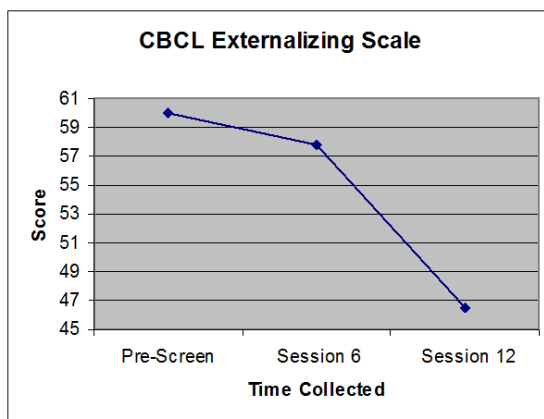
### Who We Are and What We Do

We psychologically assess, support, and treat adults, children, adolescents, and families with a wide range of problems: trauma, anxiety, obsessive-compulsive disorder, depression, learning/school difficulties/disorders, attentional disorders, autism spectrum disorders, behavioural concerns, grief/ loss, adjustment to significant life events, life challenges, stress, relationship difficulties, relationship conflict, and other issues.

Our professional style is collaborative and strength-based. We know how important the therapeutic relationship is, so we build a strong, active partnership with our clients. We will work together to find the answers to the questions that bring you in to see us.

We believe in both evidence-based practice (using techniques validated by research) and practice-based evidence (tracking outcomes to ensure that what we are doing is working). Our assessment, diagnosis, recommendations and treatment integrate each client's unique characteristics and preferences, our clinical expertise and experience, and the best available scientific evidence.

Dr Mitchell and colleagues (Mitchell and Guindon, 2011) conducted research evaluating the effectiveness of integrative psychotherapy services for children and teens. With 6-12 sessions of integrative psychotherapy, the results showed a reduction in defiance, aggression, and temper tantrums (externalizing symptoms), as well as an improvement in emotional symptoms such as low mood, anxiety, and low self-esteem (internalizing symptoms):





## **Psychological Services: Policies, Approaches, Risks, and Benefits**

Depending on the goals of our involvement, there are many potential benefits of psychological services. Goals are generally worked out between the psychologist and the client. In some cases, goals may be assigned by third parties such as schools, insurers, or the courts.

### ***Psychological Service: Policies and Fees***

1. Typically, psychological treatment sessions last approximately one hour. Some techniques will require more time, or shorter but more frequent sessions. Psychological assessments may require visits of several hours or may need to be broken into several shorter visits.
2. The fee for a session may include additional time for activities such as preparation for a session, reviewing the file, recording notes, or preparing a letter.
3. Phone consultations lasting more than 10 minutes may be billed, pro-rated at the hourly fee.
4. Fees are billed after each session and are due in full upon receipt of each invoice.
5. Payment options are available, including debit and credit.
6. Except for an emergency or unforeseen illness, at least 24 hours notice (phone or email message) is required in order to cancel an appointment. Failure to let us know may result in full charges for that appointment.
7. Psychological services are not covered under OHIP. Part or all of the cost of psychological services may be covered under an extended health care benefit plan, private insurance policy, or other third-party payor. However, the client is ultimately responsible for the payment of all fees.
8. Some insurers cover services provided by a non-registered provider under the supervision of a psychologist; others do not. It is the responsibility of the client to be familiar with their own insurance policy, and to alert us if services under our supervision will not be covered.
9. The current hourly fee for psychological services is \$250.00/hour. Although this is our customary fee, we may adjust our fees based on clients' ability to pay or the complexity of the service offered. Our fee may change, although we will inform clients in advance about the date and amount of impending fee increases. It is the client's responsibility to speak to us about any difficulty paying for services. Lower fees are often available, depending on the provider.
10. No interest will be charged the first time that a past due account occurs.
11. Subsequent non-payment of a psychotherapy account may be subject non-payment fees, currently at a rate of 1% of the outstanding balance.
12. Continued non-payment of fees may result in the withdrawal of service, client referral to appropriate publicly funded mental health services, and referral of the overdue account to a collection agency.



### ***Psychological Assessment Policies***

1. The time required for assessments will vary depending on the recommended assessment procedures.
2. When specific assessment procedures are recommended, time and cost estimates will be discussed.
3. We often use highly educated and trained clinical assistants (psychometrists) in our work. They are under our supervision, and we are responsible for their work.
4. When clients seek assessments on their own, the findings of the assessment will be shared with them in a feedback interview as well as in the form of a psychological report. (In some cases, assessments conducted as independent examinations do not permit feedback; you will be informed of this in advance).
5. When third parties request an assessment, in some cases, feedback may not be permitted before a report is submitted. Your provider will explain this prior to the assessment.

### ***Psychological Assessment: Approaches, Risks and Benefits***

Psychological assessments help the client, their family, the therapist or third parties to quickly understand the nature of the problems, the factors that contribute to them, and our recommendations for dealing with them.

Our assessments are tailored to the presenting problem. We gather and integrate important and complex information using a range of methods, and from a variety of sources, such as our clients, their families, other health care providers, and other professionals such as teachers or lawyers. These procedures may include interview, observation, and completion of questionnaires, as well as the administration, scoring, and interpretation of psychological tests.

Psychological assessments help us develop specialized, comprehensive, and in-depth knowledge about an individual's functioning, including their learning profile, emotional functioning, mental health, and coping styles. The reports provide recommendations for appropriate programming and support, and made it easier to advocate for these. Our clients are able to develop meaningful goals and expectations for themselves or their children.

The benefits of psychological assessment may include increased understanding of the nature of the presenting problem, increased self-understanding including areas of personal strength and need, demonstrating the need for services by third parties, and helping us to develop our recommendations for treatment or for accommodations in work or at school.

Possible risks of psychological assessment include raising uncomfortable feelings, frustration with assessment activities, and receiving unexpected information. When assessment reports are provided with your consent to third parties such as schools, lawyers, or insurers, we are not responsible what they do with the reports.



### ***Psychological Treatment: Approaches, Risks and Benefits***

Depending on each client's needs and preferences, our integrative approach may include mindfulness, cognitive-behavioural therapy (CBT), positive psychology, client-centred therapy, emotion-focused therapy (EFT), mindfulness, dialectical behaviour therapy (DBT) skills, schema therapy, interpersonal therapy, psychodynamic/attachment-focused therapy, EMDR (eye movement desensitization and reprogramming), narrative therapy, and solution-focused therapy approaches. We may also use neurofeedback and cranial electrotherapy stimulation in our practice, and encourage exercise and good nutrition.

Possible benefits of psychological treatment may include attainment of goals, improved functioning, reduction of symptoms, increased coping skills and resources, decrease in uncomfortable emotions, increase in positive emotions, greater satisfaction with the self or one's external environment, and increased self-understanding.

Psychological treatment is generally safe and beneficial. However, no treatment, including psychological treatment, is entirely risk free. Possible risks include the discussion of uncomfortable topics and activation of negative emotions.

### **Privacy & Confidentiality of Records**

We are committed to collecting, using, and disclosing personal information responsibly and only to the extent necessary for the services we provide. We strive to be open and transparent about how we handle personal information, and we are ethically and legally obligated to collect, use, and disclose your personal health information in accordance with Ontario law.

The following information will explain our policy regarding privacy and confidentiality of your records.

#### ***What Is Personal Information?***

Personal information is information about an identifiable individual. Personal information includes information that pertains to an individual's ***personal characteristics***, (e.g., age, gender, home address, telephone number, ethnic background, family status, who to contact in case of an emergency, etc.), ***health*** (e.g., health history, health conditions, history of health services used, names of other health professionals currently providing professional services to the individual, etc.), and ***activities and views*** (e.g., opinions expressed by an individual, life history, opinions or evaluation of an individual).

#### ***Primary Reasons Why We Collect Personal Information***

This is not an exhaustive list of all the information we collect, but provides you with a general idea. If you wish to know more about the personal information in your file, please ask.



We collect personal information about our clients in order to provide the best psychological service we can. We need a great deal of information about each client (e.g., name, address, reason for request for professional service, nature and history of the problem, etc.) in order to plan an appropriate and cost-effective psychological assessment or treatment plan, and to meet our profession's standards for the retention of records. We continue to collect personal information as we provide psychological assessment and or treatment to ensure that our services are tailored to each client's individual needs.

For example, we collect information about a client's developmental history, family history, employment history, physical and medical conditions, or mental health, as well as information about intellectual, personality, and interpersonal characteristics, to assist in the assessment of psychological issues and needs. This information lets us advise each client of our findings and formulate recommendations. This information will also assist us during treatment by providing us with baseline information about health and social functioning so that the client and we can identify changes that occur over time.

### ***Secondary Reasons Why We Collect Personal Information***

We also collect, use, and disclose personal information for secondary reasons. The most common examples of these related but secondary purposes include the following:

1. To invoice clients.
2. To provide a third-party payer, such as an insurance company, with specific information, so that we can receive payment or you can receive reimbursement for psychological services that you received. For example, if you have an extended health benefits plan, your insurance company will require your consent to direct us to disclose to them certain information in order to demonstrate that you are entitled to this funding (e.g., policy number, name, date of birth, marital status, address, etc.).
3. The College of Psychologists of Ontario, the regulatory body for psychologists in Ontario, also requires that we retain client records in a secure fashion for a period of ten years or, in the case of a client under 18 years, ten years following the client's eighteenth birthday.
4. We may also conduct research using collected information. If we use clinical data from your file, such as test scores, we will ensure that no personal information will be used that can result in your identification.

Clients can choose not to be part of some of these related or secondary purposes (e.g., by declining to participate in any research). We do not, however, have much choice about some of these related or secondary purposes (e.g., regulatory requirements).



### ***Protecting Personal Information About Clients***

We understand the critical importance of protecting personal information. For that reason, we have taken the following steps:

1. Paper information is either under our direct supervision or secured in a locked or restricted area.
2. Electronic hardware is either under our direct supervision, secured in a locked or restricted area, or is fully encrypted. We require that all computers and external drives be encrypted.
3. Paper information is transmitted through sealed, addressed envelopes by reputable companies.
4. Email is not a secure form of communication, is often hacked, and can be copied onto numerous servers before being routed to the recipient. Some clients do like to use email to communicate with us. We can use text or email messages to remind clients of appointments if clients so choose. We ask that clients accept these risks if they wish to use email. However, we ask that highly personal information not be discussed via email. We can provide you with access to our secure messaging system instead.
5. We avoid sending personal health information through email, except in an encrypted form. Fax information is transmitted securely.
6. In our psychological practice, we collect, use, and disclose personal information only as necessary. Our admin staff is bound by this privacy policy and legislation.
7. If external consultations are needed with anyone other than a regulated health professional involved in your care, these are requested with the informed written consent of the client. (Note: RPs are required by their Standards to always require written consent).
8. We may disclose your personal health information to your doctor or other regulated health care professional if that information is necessary for your treatment, if it is not possible to obtain your explicit consent in a timely manner. However, this does not apply if you have explicitly requested that we *not* communicate with such a person, or that we withhold specific information. In the latter case, we may have to inform the person receiving the information that something has been withheld.

### ***Retention and Destruction of Personal Information***

We retain personal information to ensure that we can answer any questions a client might have about the services we provided and because of our professional obligations. We keep personal information on each client in secure files for a period of ten years, or in the case of a client under 18 years, ten years following the client's eighteenth birthday.

After ten years, or in the case of a client under 18 years, ten years following the client's eighteenth birthday, we shred paper files containing personal information. We destroy electronic information by deleting it, and when the hardware is about to be discarded, we ensure that the hard drive is physically destroyed.



### *Limits of Confidentiality*

Everything that you tell us will be kept in the strictest confidence; even the fact that you are attending appointments is confidential. However, there are some exceptions to this:

1. If we have reasonable grounds to suspect ***child abuse or neglect***, we must make a report to the Children's Aid Society.
2. Suspected ***abuse of residents in long term care*** facilities must be reported to appropriate authorities.
3. If you inform us that you have been ***sexually abused by a regulated health care professional***, the psychologist is required to report the name of the professional to their regulatory body. In this case, we are not permitted to report your name without your consent.
4. A court has the power to ***subpoena*** us, along with your record, and require us to testify. In addition, the court can issue a court order allowing for the search and seizure of your record.
5. We will take the appropriate action if there is a significant risk that you may ***harm yourself or someone else***. This may include, but is not limited to, informing significant others, potential victims, and the police.
6. We may share information with the police ***to protect ourselves, our homes, our families and our property*** from criminal activity, such as harassment, trespass, vandalism, or fraud.
7. We will inform your family physician of a concern about your ***capacity to drive***.
8. We will release information with verbal or, preferably, written ***consent from you*** or your legal representative. Such releases of information usually specify exactly what is to be released, the purpose of the release and the period of time for which the release is valid, and to whom it will be released. Consent may be revoked at any time by you or your legal representative.
9. The ***College of Psychologists of Ontario*** may inspect our records as part of their regulatory activities in the public interest. External regulators have their own strict privacy obligations.
10. Various ***government agencies*** (e.g., Canada Customs & Revenue Agency, the Information and Privacy Commissioner) ***could compel us to share confidential records*** in accordance with applicable laws or court orders. In these circumstances, we may consult with professionals such as lawyers and accountants, who will investigate the matter and report back to us.
11. We are often contacted by ***insurers to confirm dates of service and amounts invoiced***. We will provide this information when they demonstrate that you acknowledged the insurer's right to collect this information by accepting the terms and conditions of submitting a claim. We are under no obligation to be a party to fraudulent activity.
12. We may ***consult with some third party payers, such as VAC, WSIB, or auto insurers***, who require us to explain our treatment plans and clinical formulations. In some cases, your benefits may depend on our being able to share information held in our records. We are happy to share with you any written documentation we send them, unless to do so would cause harm.





13. Children have similar rights to confidentiality as adults; adolescents have exactly the same rights. ***We attempt to keep parents or guardians informed of their child's progress*** and will share specific information which, in our judgment, is appropriate or necessary to share. However, your mature child may have the right not to consent to such disclosure; unless it is an emergency, we will respect that right.
14. ***Within our clinic, we practise collaboratively.*** We may discuss your information with others who work in our group practice, unless we have reason to believe that there is a conflict of interest (for example, if one of us knows you socially, we will neither seek nor share information about you). If more than one family member is seen at the clinic, we will seek your consent to discuss the case with the others involved if we feel a team approach would be beneficial.
15. Occasionally, someone might be seen by the same therapist in an individual session as well as in a session with a partner, spouse, or family member. ***In sessions with multiple clients, each client consents to release of information we have gathered in individual sessions,*** if in our judgment it is appropriate and relevant to share.
16. We use ***online services*** including practice management software and outcome management software. These services are highly secure, use bank-level encryption, and meet Canadian standards for the protection of health care information.
17. Under the ***Missing Persons Act*** (2018) psychologists must disclose information to the police in a timely manner to facilitate the police work of locating missing persons.

Depending on your specific situation, there may be other limits of confidentiality that will be discussed with you if necessary.

### ***Client's Right to Access Personal Information***

With only a few exceptions, a client has the right to see what personal information we have placed in his/her file. A client who wants to see that information simply has to ask for it. We will also be available to explain any information in the file that a client may not understand (e.g., technical terms). We do not have to show you raw scores or questions from psychological tests. We reserve the right to charge a reasonable fee for this service.

### ***Correcting Personal Information in a Client File***

Although we check personal information about each client carefully, a file may contain factual mistakes. If a client believes that there is a mistake in the information, a client has the right to ask that we correct it. This does not apply to professional opinions or conclusions we may have formed about the client.



We may request that a client provide documentation that the file is incorrect. We will revise any reports or clinical notations that contain incorrect factual personal information and offer to re-issue corrected reports. If a client and we cannot agree about whether there is a factual error, we will agree to include a brief statement in the file from the client about the existence of a disagreement about fact(s), and we will forward this statement to anyone who received the original information.

### ***Complaints about Privacy, Professionalism or Competence***

If a client has a concern, we invite open discussion, verbally or in writing. However, if the client believes that we did not satisfactorily address the concerns, the client is entitled to file a complaint to the **College of Psychologists of Ontario (Tel: 1-800-489-8388; website: [www.cpo.on.ca](http://www.cpo.on.ca))**.

### ***Personal Information Protection Acts***

This policy is made under the provisions of the Personal Health Information Protection Act (PHIPA) and the Personal Information Protection and Electronic Documents Act (PIPEDA). These are complex Acts, and contain some additional exceptions to the privacy principles that are too detailed to set out here. There are some rare exceptions to the commitments set out above.

The Information & Privacy Commissioners of Ontario and Canada oversee the administration of the privacy legislation in the health care (Ontario) and private (Canada) sectors. The Commissioner also acts as a kind of ombudsman for privacy disputes.

The Information and Privacy Commissioner of Ontario can be contacted at:

2 Bloor Street East, Suite 1400  
Toronto, Ontario M4W 1A8  
Canada  
Tel: 1-800-387-0073  
<http://www.ipc.on.ca/>

The Information and Privacy Commissioner of Canada can be reached at:

112 Kent St.,  
Ottawa, Ont., K1A-1H3.  
Tel: 1-800-282-1376  
Fax: (613) 947-6850  
[www.privcom.gc.ca](http://www.privcom.gc.ca)



### **Infectious Disease Control**

We work with a vulnerable population, and we do our best to provide an environment which is safe for all, including the very young, the elderly, those who may be pregnant, and those with disabilities. We do not require that masks are worn at this time. However, we have a “Mask Mirroring” policy; our staff and therapists will wear a mask if the client is wearing one, or on request. We continue to encourage masks for the safety of all, and high quality masks are freely available throughout the office.

We also attempt to maintain good ventilation (though our ability to do so is hampered by the lack of opening windows). Each office has a HEPA filter, which helps to compensate for the limited supply of fresh air.

There may be services which can only be provided without masks. Time spent unmasked in a small office can increase risk of exposure to illnesses. In addition, not all masks are equally effective. Surgical and cloth masks provide some benefit, but are not as effective as a well-fitted respirator mask. While we provide respirator (KN95) masks, these are not fit tested, and may not fit all faces.

We ask that everyone, including our staff and clients, remain at home if they are ill (or if they have been exposed to someone who is ill), and make alternate arrangements, including rescheduling, or using virtual services. There is no charge for cancelling a face-to-face session due to illness.

While we do our best to maintain this safer environment, face-to-face encounters do carry an inherently greater risk of infection. Please note that we cannot be held responsible for any illness which you believe may have been contracted in our office.



### **Consent for Telepsychology**

This information applies to services provided by video or telephone.

We offer video services as an option, for many reasons, including health, convenience, reduced demand on the parking lot, and reducing travel time, fuel costs and greenhouse gases.

The use of telephones or video conferencing can come with some unique risks, and it is important to be familiar with these.

We use a video platform which is integrated into our practice management software (Owl Practice). It is designed for Canadian healthcare, uses end-to-end encryption, and does not record and store the session. Only the people on the call can access it, and once terminated, there is no record of the call's contents. Chat messages sent during a video call are not stored.

The service does include a separate secure messaging app, which will store messages. It's available at any time through your client portal, and it's preferable to email for personal information and sharing documents, as it is encrypted and secure. Email is not a secure form of communication, and should not be used to share personal health information, unless it is in the form of an encrypted attachment. (We recommend communicating passwords through a different mode of communication, eg, voice).

Because loss of communication could happen at any point during online service (eg, loss of the internet connection), it is important to have a plan in place. This will usually involve us calling the phone number we have on file for you; please let us know if any other arrangements are necessary.

In the event of a loss of service, try refreshing your browser (usually a circular arrow) and signing back in.

It's important for us to know where you are during the session, so that we can take action in the event of an emergency.

You should also ensure that you are in a place where you have adequate privacy to discuss personal matters.

If you are outside of the province of Ontario, to provide you with services we require authorization from the jurisdiction in which you are located; this can vary from simply confirming that there's no problem with our doing this, to requiring submission of an application and a fee. This includes brief stays, such as vacations. If you plan to travel outside the province and hope to continue services, please discuss this with your provider well in advance. We may not be able to provide services while you are out of province.

While evidence shows that video services are as effective as face-to-face sessions, there may be some services that cannot be effectively delivered by video or telephone. It may also be more challenging to manage an emergency situation. We may ask that you visit the office instead or, if this is not possible, we may need to refer you to someone who can see you face-to-face.

If you are paying out of pocket for services, please contact the office following the session to provide your credit card information.

### **Working with WSIB**

This information is based on our understanding of relevant law and WSIB policies. However, please be sure to discuss your situation with WSIB, your union, or your representative. This is provided for your informed consent.

WSIB requires that injured workers cooperate with them. In addition, the WSIB Act places a requirement on healthcare providers to share whatever information that the WSIB requires to manage an active claim, even without the worker's consent. This can even include information that was gathered prior to a claim being made.

The WSIB acts as a barrier between the employer and the personal health information which it collects. The WSIB will inform the employer of:

- A claim being submitted
- The general nature of the claim
- A claim being accepted by WSIB
- The worker's restrictions, accommodations, and limitations
- Information as needed for return to work planning

While WSIB maintains worker confidentiality within these general bounds, there are circumstances in which the employer may gain access to your personal health information.

The employer has the right to request the WSIB's file, so that they may review it and, potentially, challenge the claim.

If such a request is made, WSIB informs the worker, who has the right to deny the request. (In a psychological claim, the information collected is highly personal, and can include information about issues that may complicate your recovery, including your history and other circumstances. This may be information you do not want to have shared with your employer).

If you deny access, and the employer does not accept this, WSIB has the authority to release your information *despite your expressed lack of consent*, under the WSIB Act. If they do, they must offer you a chance to appeal that decision. This will ultimately land in front of the Tribunal, a process that will take quite some time—and will delay the release of the information to your employer.

If WSIB does send your personal health information to the employer, they must share it with you first, so that you have an opportunity to remove information you don't feel is relevant, or do not want shared. WSIB will provide you with further information about this process.

It is important for WSIB to know of circumstances that may prolong your recovery. If you have a pre-existing condition or injury, WSIB will still be responsible for your claim, so long as you were made substantially worse by the workplace incident or injury.

When we submit reports to WSIB, we do our best to balance our obligation to provide WSIB with honest, comprehensive information, and our concern for the information reaching the employer. We are happy to share with you any documentation we send to WSIB.