



**McGill**

Department of  
Educational and  
Counselling Psychology

Département  
de psychopédagogie et  
de psychologie du counseling



# McGill Psychoeducational and Counselling Clinic

## Trainee Policies and Procedures Manual

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<https://www.mcgill.ca/edu-ecp/students/clinicresources>

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# *Mission Statement*

The mission of the McGill Psychoeducational and Counselling Clinic (hereafter referred to as the Clinic) is to: (a) provide training opportunities in the application of evidence-based assessment and intervention techniques to Counselling Psychology and School/Applied Child Psychology graduate students; (b) provide high-quality, affordable psychological services to the Montreal community; (c) and promote research training in Counselling Psychology and School/Applied Child Psychology; (d) implement the student's knowledge of the requirements of an ethical-based practice.

The Clinic provides training opportunities that complement academic coursework and as such, it is an indispensable part of both the Counselling Psychology and the School/Applied Child Psychology programs.

## *Clinic Ethics*

All Trainees working in the Clinic must be familiar with the required ethical and legal standards of professional practice of psychology in Quebec. These have been thoroughly presented and discussed in the courses *EDPE 627 - Professional Practice of Psychology*, and *EDPC 618 - Professional Ethics and the Law*. Typically, most Trainees would have either: (1) already completed one of these courses or (2) are concurrently enrolled in one of these courses during their first exposure to working in the Clinic. Issues relative to ethics are also an important aspect of the work and problems and questions relative to ethics must be raised in supervision with the Course Instructor.

Trainees working in the Clinic are expected to adhere to the Code of Ethics set by the [Ordre des Psychologues du Québec \(OPQ\)](#), as well as the one set by [Ordre des conseillers et conseillères d'orientation du Québec \(OCCOQ\)](#).

The following websites provide additional information:

- [Canadian Psychological Association \(CPA\)](#)
- [Ordre des psychologues du Québec \(OPQ\)](#)
- [Ordre des conseillers et conseillères d'orientation du Québec \(OCCOQ\)](#)

## *Clinic Staff and Students*

### *Clinic Director Role*

The Clinic Director's role, in consultation with the Clinic Advisory Committee and the approval of the Department Executive Committee and Department Chair, is to establish policies and procedures on all aspects of Clinic services. The Clinic Director is responsible for both communicating policies and procedures to and ensuring adherence by all members of the Clinic staff that includes Trainees, Course Instructors, and the Clinic Coordinator. The current Clinic Director is Dr. Judith Norton, psychologist.

## ***Clinic Coordinator Role***

The Clinic Coordinator works closely with the Clinic Director and has an office located within the Department of Educational and Counselling Psychology (ECP; Room 614G). The Clinic Coordinator can be reached primarily via email at [ecpclinic.education@mcgill.ca](mailto:ecpclinic.education@mcgill.ca), or via the Clinic telephone extension (514-398-4641). The Clinic Coordinator is responsible for maintaining the client waitlist in accordance with instructions. The waitlist is established by requests for service submitted to our online request form. The Clinic Coordinator manages the Clinic's primary file storage location, which is situated within room 614G and on Department servers. At all times, the Clinic Coordinator will be able to provide information to the Clinic Director regarding who is in possession of, and thus responsible for, individual client files. The Clinic Coordinator will also process all required unit financial transactions associated with the operations of the Clinic per University guidelines. The Clinic Coordinator also serves as ECP's [Assessment Materials Resource Centre Coordinator](#).

## ***Course Instructor Role***

The Course Instructor is responsible for the supervision of each of their trainees' assigned client files. In order to properly supervise, Clinic Instructors must be thoroughly familiar with the Clinic Policies and Procedures outlined in this manual. Below is a list of responsibilities held by the instructor:

- Assignment of clients from waitlist to students
- Tracking of clients that accept services and those who refuse (list of refusal of services will be provided to the clinic coordinator from the course instructor throughout the term)
- Signature of all case notes, assessment reports, authorizations to obtain/release information
- Signature of course attestation form
- Deletion of all Haivision Media Platform videos for students under direct supervision by the instructor
- Instructors remain responsible for any queries made by a client after when the file is archived. Note, any requests coming in from clients after the closing of the file will be subject a fee based on \$80 per hour (e.g. addition copies of final report, signing any forms provincial, federal of educational institutions, etc.).

Course Instructors must log and track all cases assigned to students registered in their courses and monitor all aspects of clients file and case management in a systematic and timely manner. The course instructor is responsible for ensuring that all videos pertaining to a client file are deleted prior to submitting the client file to be closed to the clinic coordinator at the end of the term or when a case is terminated. This would include video files recorded on the Haivision Media Platform in the Psychoeducational and Counseling Clinic. If a client session was authorized exceptionally by the instructor to be held remotely, they are also responsible for the deletion of any video files created from remote sessions conducted via MS Teams which are stored for the instructor in OneDrive (see [Appendix P for the Client Video Recording Inventory](#)). Additionally, at the end of each semester or when a case is terminated, Course Instructors are required to review each file assigned to their students and attest to the contents and quality of the information and documents in each file (see [Appendix J for the Course Instructors Attestation](#)). **It is not until this attestation is signed by both the Course Instructor and the Clinic Director and all documents have been deleted from the trainee's OneDrive client folder that Course Instructors are permitted to submit a final grade.**

## ***Trainee Role***

The term trainee will be used throughout this document to refer to the graduate students in the Masters (MA) and Doctoral (PhD) School/Applied Child Psychology program and the Masters (MA) graduate students in the

Counselling Psychology program (Non-Thesis) Project Concentration. The following table outlines the programs of study and specific courses in which students are required to train in the Clinic. The average number of cases assigned to students in each course is listed below.

<i>Program of Study</i>	<i>Course Code</i>	<i>Semester</i>	<i>Number of Cases Assigned (approximation – consult with course instructor for specifics)</i>	<i>Active Semesters</i>
School Psychology MA	EDPE 682D1	Fall	1	Fall
	EDPE 682D2	Winter	1	Winter
School Psychology PhD	EDSP 705D1	Fall	2	Fall
	EDSP 705D2	Winter		Winter
Counselling Psychology MA (Non-Thesis) Project Concentration	EDPC 625 EDPC 626	Fall Winter	2 (ongoing counselling sessions)	Fall & Winter

The trainee’s responsibility is to become familiar with and adhere to **all** Clinic Policies and Procedures outlined in this manual. Without any exceptions, trainees must follow every aspect related to video recording, file maintenance, file sharing and financial transactions (collecting fees, providing receipts, keeping records). All Clinical services must be conducted in a professional manner and complying, at all times, with the OPQ/OCCOQ [Code of Ethics](#).

## ***Clinic Operations***

### ***Trainee Professional Responsibility***

Trainees must adhere to clinic policies and procedures. Failure to do so will have serious consequences that may include failing a clinic-based course. Decisions concerning the consequences of not adhering to policies will be made by the course instructor who will consult with the Clinic Director, the Graduate Program Director and the Director for Clinical Training. All trainees using the clinic will sign a document attesting to the fact that they have read the clinic manual and are aware of the rules and the consequences of not abiding by these rules (see [Appendix O for Confirmation of Trainee Responsibility](#)).

### ***Clinic Location and Infrastructure***

The Clinic is located in the basement level of the Faculty of Education located at 3700 McTavish Street. It is currently comprised of the following:

- A waiting area.
- Twelve consultation/interview rooms, which are labeled as either “Counselling Room” or “Assessment Room” on the doors. All rooms are equipped with the required technology to permit video recording of either counselling or assessment sessions, depending on the designation of the room.
- Counselling rooms (rooms 1, 2, 8, 10, 11, 12) are equipped with a phone, couch, armchair, and coffee table. Assessment rooms (rooms 3, 4, 5, 6, 7, 9) are equipped with a phone, round table, desk chairs, and a height-adjustable chair for children.

- Two of the twelve rooms are Family Rooms, which are larger and can accommodate more people.
- The Audiovisual Room (B129). This room is locked and is only accessible to the Clinic Coordinator, IT Administrator and Clinic Director.
- Ten live Observation Rooms provide a clear view of the consultation/interview rooms using a one-way mirror. See sections on Clinic Audio Visual Resources and Room Booking for more information.
- Viewing Room (B163) that contains 20 playback stations (used for the review of video recordings), secure filing cabinets that can be locked to store client files, and a key lockbox containing Observation Room keys.
- A Trainee Office (B128) contains three desks - each with a computer, phone and message board designated to different cohorts of students.

The Clinic Coordinator's office is an extension of the Clinic space and is located within the Department of Educational and Counselling Psychology (ECP) in room 614G.

### ***Hours of Operation and Clinic Access***

The Clinic operates from September to May. Requests for service are taken in advance of the start of term via an [online request form on the website](#). The Clinic Director closes the request for service form when the Clinic is unable to accommodate additional clients on our waitlist. Each year, the Clinic is most active from October to the beginning of December, and then from January to the beginning of April. Operating hours for the Clinic consultation/interview rooms and waiting area are **Monday through Friday from 8:30 a.m. to 5:00 p.m.** Assessments will predominately take place on Thursdays between 8:30 a.m. to 2:30 p.m. Otherwise, pending availability, they may be conducted on weekdays between 8:30 a.m. to 5:00 p.m. The clinic space is only accessible to authorized individuals granted card access via their McGill ID card. **Students who wish to deviate from the regular hours must consult and adhere to the decision of the course instructor. Scheduling clients outside the regular hours of operation must be done with the course instructor's knowledge and agreement. This is only done in exceptional circumstances.**

The clinic is not equipped to handle crises or emergencies (see **Safety and Security** section below). This is clearly stated in the [Informed Consent forms \(Appendix A and A1\)](#) that trainees must review with clients during the first meeting. It is important that this be discussed with clients so that they know how to access appropriate emergency services in the event a need arises. A list of useful telephone numbers is provided in the [Directory of Referral Sources in the Greater Montreal Area \(Appendix N\)](#). When appropriate, a copy can be printed and made available to the client.

### ***Parking***

For clients who wish to drive, there is limited parking on the streets located around the Education Building (Doctor Penfield, Drummond, Avenue des Pins) but availability is highly unpredictable. Paid indoor parking is available in the Faculty of Education, McIntyre building and the Allan Memorial parking. A map of the downtown campus can be viewed [here](#). You can advise clients to search for the Education Building on this site. Information about paid parking can be viewed [here](#). The building is within walking distance from the Sherbrooke and Peel Metro Stations and, if preferred, from the Sherbrooke Metro Station, one can take the STM Bus #144 that will let you off at the corner of Peel and Avenue des Pins.

\*The parking garage at the Education Building is currently under construction, therefore parking is not available on-site.

### ***Clinic Physical Space***

Clinic rooms must be kept clean and professional in appearance. All unessential items (e.g., magazines) must be removed from rooms and maintenance staff must be contacted for any building-related problem (Custodial Services – 514-398-7497 or [educationporter.fmd@mcgill.ca](mailto:educationporter.fmd@mcgill.ca) with a copy to [ecpclinic.education@mcgill.ca](mailto:ecpclinic.education@mcgill.ca)). Each Clinic room is configured in a particular way with specific furniture. After moving or rearranging furniture (e.g., for assessments), the furniture must be returned to the original configuration. A trainee must not leave the premises at the end of an appointment without ensuring that the room is tidy and ready for use by the next person.

### ***Clinic Professionalism***

What is a trainee's role relative to professionalism in providing services on behalf of the Psychoeducational and Counselling Clinic?

### ***Professional Behavior***

The Clinic is a professional environment shared by trainees, ECP Faculty members, professional psychologists, and members of the community. In this environment, trainees must conduct themselves in a professional manner with regard to all clinic matters including their interactions with clients, other trainees, and clinic administrative staff. Professional conduct is especially crucial in all matters regarding client confidentiality and privacy. Trainees may not visit with colleagues or clients in the waiting room. They must maintain ethical and professional attitudes and behaviors at all times, as outlined in the OPQ code of ethics, and should never discuss client cases in any public area of the clinic or beyond.

### ***Punctuality***

Punctuality is expected of all clinic trainees at all meetings and appointments. It is essential to be at the Clinic at least ten minutes prior to any appointment with a client to prepare the room, prepare audio-visual equipment (if needed), and to get settled in. In the rare instance when an unforeseen and unavoidable delay occurs, the client must be contacted as soon as possible. To accommodate this, it is important for trainees to always have the client's cell phone number available. When the client cannot be contacted, it is the responsibility of the trainee to call a classmate who is available to meet the client and to pass on the message about the delay. It is only as a last resort that the trainee may contact the ECP Support Staff at 514-398-4242 and make arrangements to have someone meet and inform the client of the delay.

### ***Food and Drink***

Eating and drinking throughout the Clinic rooms (including the counselling/assessment rooms, viewing room, observation rooms, and office) is **absolutely forbidden** for both trainees and/or clients. For trainees it helps maintain a professional relationship and for clients it communicates that the visit does not constitute a social situation. If parents want their child to have a snack, this can be done in the waiting room or in the cafeteria.



## *Attire*

Trainees are expected to dress in a manner that conveys a serious and professional attitude, and this professionalism extends to in all areas of the clinic. Certain items of clothing (e.g., jeans of any kind, shorts, tank tops, casual t-shirt (short-sleeved or long-sleeved), shirts that expose midriff, skirts that fall well above the knee) are inappropriate **and not permitted** at any time in the clinic whether you are meeting with a client or just going in to use the phone. Clients may be going in or coming out of a session and it is important that all personnel using the clinic appear professional at all times. For those students working with families and children below 18-years old be mindful of appropriate dress given the age of the child with whom you are working.

## *Noise Levels*

Noise levels must be monitored at all times in all areas of the clinic as the noise will distract clients and other trainees as they work. It is also distracting to a client or another trainee to overhear a conversation going on outside their session. Waiting room conversations must be kept at low levels and corridor conversations must be kept at a minimum. Arrangements for appointments, fees, and feedback must occur in a previously booked clinic room and not in the corridor or waiting room.

The noise rule extends to the office (B128) and viewing room (B163) where multiple users may be booking rooms, calling clients, or reviewing videos of previous sessions. These rooms must be used for their intended purpose and not as a social gathering place.

Trainees can anonymously contact an ECP Support staff member to report disruption and noise in these spaces ([ecpclinic.education@mcgill.ca](mailto:ecpclinic.education@mcgill.ca) or by calling 514-398-4242).

# *Clinical Procedures*

## *Requests for Service*

In order to make a request for services in the Clinic, potential clients are required to complete the online request for service form found [here](https://www.mcgill.ca/edu-ecp/clinic): <https://www.mcgill.ca/edu-ecp/clinic>. This form solicits information from the potential client, depending on the type of service request they are submitting. Prospective client information is provided to course instructors for allocation to the trainees in their course.

## *Active Files*

### **Case assignment**

Cases are assigned to trainees at the start of the Fall and/or Winter semester and replacement cases are assigned as needed. The course instructor is responsible for file allocation to their student trainees. At the start of each Fall semester, the Clinic Coordinator/Clinic Director will conduct a mandatory Clinic Workshop with Course Instructors and Trainees (EDSP 682, EDSP 705, EDPC 625) and their Doctoral Student Supervisors (EDSP 715, EDPC 780) to orient trainees to the Clinic, to review the Trainee Policies and Procedures Manual, and to address any questions and concerns of the trainees and course instructors. The course instructor and clinic coordinator/clinic director will work together to adhere to waitlist priorities and assign each trainee the allotted

number of client cases. They will also decide on the number of secondary files that will be used in the cases where potential clients decline services.

## **Counselling**

Instructors will assign client files to trainees for the trainees to conduct a screening process to ensure suitability for Counselling services in our Clinic. Student trainees are responsible for making initial contact with their potential clients based on instructions provided by their course instructor. See section below entitled, ***Initial Trainee-Potential Client Phone Contact***, for additional information.

## **School/Applied Child Psychology**

For assessment files, a screening process is done by MA and PhD students to ensure that our services are appropriate for the client and to gather more information from the client prior to the file being assigned to a trainee by their Course Instructor. This takes place in March-April to secure clients for September. Once a client has been accepted and assigned to the trainee by the course instructor, student trainees are responsible for making initial contact with their potential clients. See section below entitled, ***Initial Trainee-Client Phone Contact***, for additional information.

### ***Initial Trainee-Client Phone Contact***

Trainees should be familiar with all policies and procedures in this manual prior to contacting their potential client. Unless otherwise stated in their request for service information, the trainee should contact the potential client by telephone or by email. Trainees may be provided with a McGill Resource account by their course instructor which will be deleted at the end of their course. Logging of attempted contacts should be documented with the [\*Trainee-Potential Client Initial Contact form \(Appendix U\)\*](#). Generally, trainees should reach out to a potential waitlist client up to two (2) times within the space of one week. If there is no reply from the potential client, the trainee should submit the completed Appendix U form to their course instructor and seek an additional potential client case.

Only after a client is accepted for service will they be assigned a client code. Once a client has agreed to meet a trainee for a session, the client may be assigned a tentative client code. If a potential client does not show up or cancels their appointment, refuses to sign an Informed Consent Form (A or A1) and/or does not respond to calls or emails to schedule a session, they should be removed from the waitlist and the tentative client code removed. Once they visit the clinic for their first session and sign the [\*Informed Consent form \(Appendix A or A1\)\*](#), they are provided a permanent client code and the Clinic file retention policy is applied.

The client code is established with the use of C or A, depending on services being provided (Counselling or Assessment), followed by the semester in which the services are being provided (Fall 2022 would be reflected as F22), then the first three (3) letters of the first name and first three (3) letters of the last name. For example, *Jane Doe* being seen for Counselling in Fall 2022 would be reflected as CF22JANDOE. For confidentiality reasons, the client's name never appears on physical documentation but is instead identified by a code assigned when the file is opened.

***Please note:*** When contacting clients by telephone at any time, the trainee must **not** say that the call is from the Clinic or mention assessment/counselling/therapy to anyone other than the client unless permission has been

granted. To preserve client confidentiality, the trainee must provide their name and refer only to McGill University as the affiliation. Under no circumstances should a message or the Clinic telephone number be left on a voicemail or with any person answering the telephone, unless indicated on their request for service information.

**Important:** For safety and privacy reasons, trainees are not to provide their home or cellular phone number to clients. For additional information see the section on *Client Contact between Sessions* below.

When the trainee contacts the potential client, the initial phone call should be used to communicate/collect the following pieces of information.

- ✓ Verify that there is still a need for service. If the potential client declines services, solicit a reason to transcribe on [Trainee-Potential Client Initial Contact form \(Appendix U\)](#);
- ✓ Advise the potential client that the Clinic is a training facility and that as a trainee you are under the direct supervision of your course instructor and clinic director;
- ✓ Inform the potential client about audio/video recording of interviews/consultations for the purposes of training;
- ✓ Confirm that services provided are an English-speaking assessment/therapy session exclusively;
- ✓ Describe the clinic fee policy to the potential client and ask if they have submitted or are familiar with the [Document for Fee Assessment form \(Appendix G or G1\)](#) and if they are aware of the decision;
- ✓ Discuss with the potential client their availability for first consultation (see *Room Bookings* below);
- ✓ Set up an appointment for the first consultation (see *Initial Trainee-Client Session* below);
- ✓ Give the potential client orienting information such as your name, Clinic location, options for transportation and parking, how to contact you in case of a change;
- ✓ Verify the contact information they provided on their *Request for Service* in case there has been any changes and collect additional contact numbers where they might be reached (e.g., cell phone number or email address, if missing);
- ✓ Provide the potential client with opportunity to ask any questions they have.

### ***Clinic Fee Policy***

Clients of the Clinic are charged fees for services rendered by trainees. The cost to the client is set unless the client requests a fee reduction and then it is determined by the Clinic Director based on the client's financial situation. A [Document for Fee Assessment form \(Appendix G or G1\)](#) and proof of income, such as a provincial or federal Notice of Assessment from the previous year's income tax is required at the time of application for services. If a potential client advises that they did not file taxes in the last year, they are required to send along their most recent Notice of Assessment, and a copy of their latest pay stub (pay stubs from both parents would be required in the case of assessment services; and only by the client in the case of counselling services). The fee scale and associated rates used by the Clinic Director to assist trainees in their communication with their potential client are found online ([Appendix M - Sliding Fee Scales for Psychoeducational Assessment and Counselling](#)).

- Counselling services provided are charged on a session-by-session basis. Counselling fees are set on a sliding scale from \$20 - \$80 per session. In extenuating circumstances, fees can be waived by the Clinic Director. Trainees are to collect fees at the end of each session.

- Assessment services are set on a sliding scale from \$200 - \$1800 for a full assessment. In extenuating circumstances, fees can be waived by the Clinic Director. Trainees are to collect the total fee in two installments: One half prior to the first assessment session and the final half PRIOR to the final assessment session. Under no circumstances should the final assessment session occur if the fee has not been paid in full. In cases where assessments are terminated mid-process, due to a request made by the client, the client will be charged a cancellation fee of 300\$.

Once a potential client has been accepted for services in the Clinic, trainees are required to collect the *Document for Fee Assessment Form* ([Appendix G or G1](#)) (if requested) and supporting documents and send it via email to the Clinic Director for review so that a fee can be established. The Clinic Director will reply to the trainee directly returning the signed form indicating the required fee for the client. Only after fees are clearly communicated to and accepted by the client may a trainee schedule a client session.

If potential clients do not wish to be considered for an alternative fee or cannot complete Appendix G or G1 they will be charged the maximum fee for the service they are seeking (\$80 for Counselling or \$1800 for Assessment).

Trainees must provide a receipt for every payment the client makes (see *Collecting Fees and Receipting Clients*). Trainees must inform the client that given the Psychoeducational and Counselling Clinic is a training facility, dependent on the client's individual insurance plan, trainee services may not be an eligible insurance claim.

### ***File management***

Client files are maintained by trainees electronically and often files contain physical components which will eventually be scanned for retention in the electronic file. Client files are stored in Microsoft 365 OneDrive, that is, client files are stored electronically via these secure servers that may only be accessed with your McGill email and password credentials or with the resource account email credentials provided to you by your Course Instructor. Files may contain physical file contents for eventual secure electronic storage in the primary OneDrive folder. OneDrive accounts used to store client files **may not be synced** to be downloaded to a trainee's personal laptop. They may only be accessed through a browser by logging into OneDrive.

It is imperative that trainees adhere to the OneDrive Client File Management instructions to appropriately organize and retain their files. Effort here throughout the year makes closing of client files easier and more efficient. The following documentation will outline the necessary procedures to create client folders for your course and share files/folders with your Course Instructor or Student Supervisor(s). These instructions are found on the [Clinic Trainee Resources Website](#) and should be reviewed and upheld by the course instructor.

- Instructions on **OneDrive Client File Management in ECP Clinic for Trainees and Course Instructors** [[link forthcoming](#)].
- Instructions on [Creating and Sharing OneDrive Files](#) for Trainees
- Instructions on [Creating and Sharing OneDrive Files](#) for Course Instructors

- Instructions on [Troubleshooting OneDrive and How to Disable OneDrive Synchronization](#) for trainees and Course Instructors

### ***File review***

Course Instructors are responsible for the periodic auditing of their student trainee client folders to ensure adherence to all rules of confidentiality assigned by the Course Instructor in accordance with the clinic policies and procedures.

### ***Physical file content management***

Trainees will be allocated a key for a personal storage locker unit in room B163 for the purposes of ensuring that they secure any physical file contents in a safe location prior to scanning and saving these documents in their designate OneDrive Client Folder, or consumables/protocols that need to be retained. No physical contents of a file can leave the trainee's care. Any part of a client file that is a hard copy must always be stored in the designated secure locker unit. **Files may only be removed from B163 for client meetings or report writing.** Trainees are absolutely forbidden to take any component of a client file with them when they leave the Education Building or Duggan House. No paper file can ever leave these areas, whatsoever. All report writing that requires the physical contents of a client file must take place in one of these designated McGill buildings. It is a trainee's sole responsibility for the security of the file and the trainee must follow the guidelines set out in this manual concerning file storage, as well as the guidelines to record keeping as written by the OPQ/OCCOQ.

The consequence for a trainee who has been found to have removed a file, without their Course Instructor's written permission could be failure of the course. If a trainee has chosen to leave the University with a client file and that file is stolen, the trainee must write an incident report to the course instructor and clinic director, file a police report and inform the client or their representative. A copy of the police report must be submitted to the Clinic Director and the Course Instructor and will be put into both the client and the trainee student file.

### ***File Retention Policy***

All electronic and physical file archiving is coordinated by the Clinic Coordinator further to directives from the Clinic Director. The Clinic's primary file storage location, which is situated in room 614G and on Department servers. Client files will be retained for five (5) years from the last contact with the client.

### ***Collecting Fees and Receipting Clients***

Trainees are required to collect fees for services rendered in the Clinic. This process is an important component of one's clinical training, as billing can be an important aspect of working as a professional psychologist. Moreover, the financial commitment on the part of clients often translates to commitment to the therapeutic or assessment process.

As such, trainees have these major responsibilities with respect to fees:

1. To advise clients about payment policies, and payment methods;
2. To complete requisite Financial Compliance Training;
3. To collect fees and issue receipts in a timely manner and issue invoice, if necessary;
4. Retain required financial documentation in their client files in accordance with McGill Financial Services policies as established in this manual.

## ***Methods of Payment***

Clients must pay by debit or with credit card on-site in the Clinic. The Clinic does not accept any other form of payment (either by cash or cheque or e-transfer). These points must be conveyed to the client clearly and unambiguously to avoid any confusion about payment methods.

The Moneris Debit/Credit terminal is located in room B128 within the Clinic space, the very first door on the left after entering the main entrance with one's card reader. You must use your McGill ID to enter B128 to access the terminal to process your client's payment.

## ***Mandatory Financial Compliance Training Course for Trainees***

Each trainee must complete a McGill Mandatory Financial Compliance Training Course established by Financial Services entitled, *Payment Card Industry (PCI)* training. Trainees will receive an email directly from Financial Services with a link to the course which will take approximately 30 minutes to complete. All trainees collecting client fees from their clients are classified as Merchant Personnel and are required to familiarize themselves with relevant policies in order to collect fees on behalf of the ECP Clinic.

Evidence of completion must be sent to the trainee's course instructor prior to using the Moneris Terminal to collect fees from clients.

On a yearly basis, every person involved in a McGill merchant process (i.e. anyone who may receive/see credit card information and/or process credit card transactions on behalf of McGill University) is required to take the online PCI Compliance Course/Exam as well as read the [Merchant Policy](#) and [Merchant Manual](#). The first step is to familiarize yourself with the Merchant Policy and Manual:

- [Merchant Manual](#)
- [Merchant Policy](#)

## ***Clerk IDs***

For the purposes of processing transactions on the Moneris Terminal, each trainee is provided a unique, two-digits Clerk ID to allow the Department to track and validate their individual transactions. Clerk IDs will be emailed to each trainee who has been confirmed as having completed their PCI Training with their course instructor.

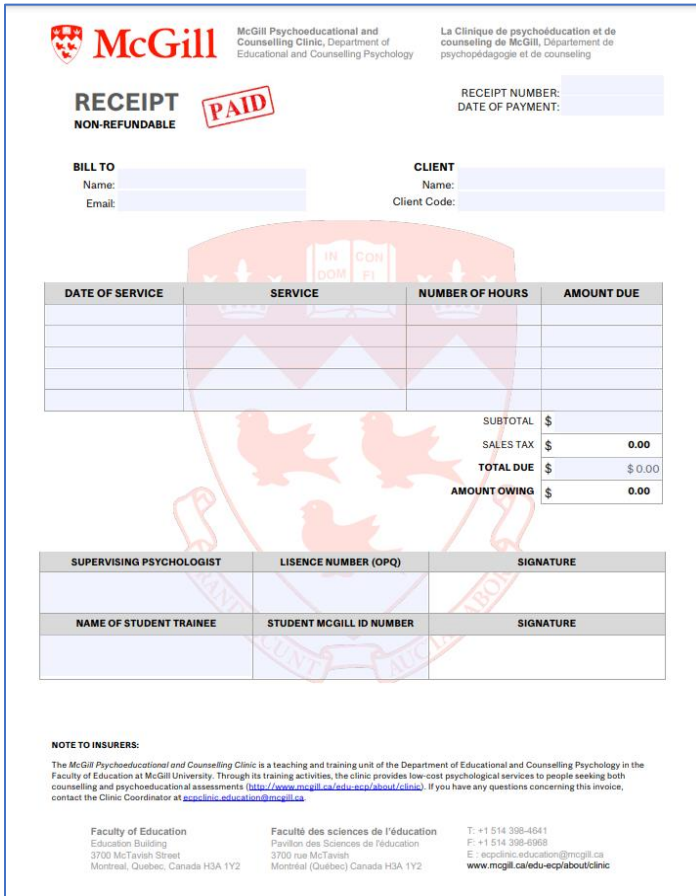
## ***Moneris Debit/Credit Terminal***

Instructions and training videos are found on [our trainee website](#). Demonstration videos on how to process a [purchase](#), [refund](#) and [replace a paper roll](#) are found there as well.

## ***Special Note for Counselling Client Fee Management***

Counselling clients pay for services immediately following each session. In the event that Counselling trainees cannot collect payment from a client, trainees should not be scheduling any future appointments. The client should be informed about this and told that a spot will be held for them for two weeks only, and following this timeline, services will be terminated, and another client will be given their slot. If terminated for non-payment of fees, a client cannot return to the clinic and will have to find future therapy elsewhere. Therefore, it is imperative that if a client is struggling financially and their financial status has changed, the trainee should refer them to the clinic director for a review of their fee determination.

## Issuing Receipts



The receipt form includes the following sections:

- McGill Logo and Clinic Information:** McGill Psychoeducational and Counselling Clinic, Department of Educational and Counselling Psychology / La Clinique de psychoéducation et de counselling de McGill, Département de psychopédagogie et de counselling.
- Receipt Status:** RECEIPT NON-REFUNDABLE and a PAID stamp.
- Receipt Number and Date of Payment:** Fields for RECEIPT NUMBER and DATE OF PAYMENT.
- Bill To and Client Information:** Fields for Name and Email for both the Bill To and Client.
- Service Table:** A table with columns for DATE OF SERVICE, SERVICE, NUMBER OF HOURS, and AMOUNT DUE.
- Summary Totals:** SUBTOTAL, SALES TAX (\$ 0.00), TOTAL DUE (\$ 0.00), and AMOUNT OWING (\$ 0.00).
- Supervising Psychologist and Student Trainee Signatures:** Fields for Name, License Number (OPQ), and Signature for both.
- Notes to Insurers:** A section providing contact information for the clinic coordinator.
- Contact Information:** Faculty of Education, Education Building, 3700 McTavish Street, Montreal, Quebec, Canada H3A 1Y2.

A trainee must issue an official Clinic receipt any time a client pays for services. Trainees are required to prepare a receipt for their client for insurance purposes and the ECP Clinic Receipt template is the only one that may be used for this purpose. It is found on the Trainee Website. This receipt may only be issued to a client after a trainee has successfully accepted payment on the Moneris terminal. A receipt must be completed to contain the following information:

### 1. Receipt number

➤ [Receipt numbers should be established with the use of the unique client code with the suffix 01, 02, 03, 04, etc. [ex: First receipt for a given client should end in 01 (AW22JANDOE01) and fourth receipt for the same client should end in 04 (AW22JANDOE04)].

### 2. Date of Payment

3. Bill to Name/Email (e.g., Parent pays for child's assessment; may be same as Client)

### 4. Client Name/Client Code

### 5. Date of Service (date when session held)

### 6. Description of Service (from dropdown menu)

➤ Select one per line (*SACP trainees have multiple options and should consult with their instructors on classification of session type*)

- Assessment Session (SACP)
- Consultation Session (SACP)
- Psychotherapy Session (SACP)
- Individual Psychotherapy Session (Counselling)

### 7. Number of hours

➤ All counselling sessions should round up to one (1) hour

### 8. Amount Due per service line

### 9. Subtotal

### 10. Instructor/Supervising Psychologist name, license number and signature

### 11. Student trainee name, McGill ID, Signature

The process for collecting fees is mapped out below:

1. You would need to have prepared a completed fillable pdf entitled ECP Clinic Receipt (found above). Print one copy to provide to your paying client. You are to retain an electronic copy for your client file in OneDrive. You are not to provide this receipt to the client unless you have successfully collected payment via debit/credit card.
2. The Moneris Terminal in B128 is defaulted to payment screen.
3. You will enter the payment amount required for your client session.
4. Follow the prompts on the terminal. You will be required enter your unique two-digit Clerk ID.

5. You will then pass the terminal to the client to process payment. They will insert or tap card their card to complete the transaction.
6. 2 receipts will print out of the Moneris Terminal. One for the customer to keep and one for the merchant (trainee) to keep.
7. Staple the customer copy to the completed client receipt for insurance purposes and provide to your client
8. Retain the merchant copy for scanning and electronic retention for your records
9. You are then required to email a copy of the Clinic receipt you prepared and a scan of the Moneris terminal issued Merchant Copy receipt to the following email account: [clinicfees.ecp@mcgill.ca](mailto:clinicfees.ecp@mcgill.ca); Note: When collecting the first payment from the client, please also ensure you include a copy of the *Document for Fee Assessment* indicating established fee signed by the Clinic Director, if applicable.
10. An entry must be made in the [Payment History form \(Appendix Q\)](#) that a payment was accepted by the trainee on behalf of the Clinic, a receipt was issued, the amount paid, and the receipt number, and confirmation it was email to the [clinicfees.ecp@mcgill.ca](mailto:clinicfees.ecp@mcgill.ca) to notify administrative staff of payment for reconciliation, etc.

*Please note:* Trainees should review the ECP Clinic Receipt on [the appropriate section of the Trainee Website](#).

### ***Audio/Visual Recording***

In most cases, video and/or audio recording of every client session is required by the Course Instructor. The Client must be informed of this during the Trainee-Client initial phone contact (i.e., prior to the first Trainee-Client meeting). [Authorization for Audio/Visual Recording \(Appendix B\)](#) must be signed at the first meeting and prior to recording.

Each time a recording is made, trainees must log this in the *Case Chronology* form (Appendix I). As new recordings are created, trainees must record the **title of the video file** on the [Client Video recording Inventory form \(Appendix P\)](#).

Within each Clinic room, there is a wall-mounted touch panel that is used to initiate a recording and to move the camera angle. The cameras **cannot** be manipulated by hand. To record a session from a Clinic room, trainees must use the touch panel and follow the instructions found in the [Clinic Recording System Instructions document](#), which includes screenshots of the touch panel and Viewing Room software. This document can be accessed from the Clinic trainee resources website.

### ***Room Booking***

It is the responsibility of the trainee to book a Clinic room for their client sessions. Each academic year, the McGill email addresses of the trainees registered in the courses using the Clinic will be given access to a secure online booking system called [Supersaas](#). The directions for the [Supersaas](#) system are below. Course Instructors will also be able to log into the booking system to book rooms, if needed for role play or training purposes.

1. Access the [website](#).
2. Log in with your McGill email.



3. Sign in with your password.
4. This brings you to the scheduler, which is a 7-day calendar with 30-minute time slots that start at 8:00 and go to 20:00. At the top right-hand side of the page there is a list of the 12 Clinic rooms that can be booked for trainee use (5 for counselling, 5 for assessment, 1 family room for counselling and 1 family room for assessment) and associated observation rooms.



5. Choose the room that you want to book and sign up by clicking in the time slot for the day.

6. If you need to cancel that booking, click on the time slot and click the cancel button.

7. You are the only one who can book and un-book a time slot.

The Clinic meeting rooms are shared among Master and Doctoral students in both the Counselling Psychology and the School/Applied Child Psychology programs. As a result, usage is heavy at times. Trainees should not assume that a room will be available during peak periods.

Prior to calling a client to set up a first session, trainees must ensure that a room is available for the time/date required. As soon as an arrangement has been made for the consultation, the room should be booked by the trainee using the [Supersaas](#) online booking. If the meeting with the client occurs at regular times, the room can be booked in advance. Trainees are expected to be respectful to their peers and one way to express this respect is to use the facilities judiciously. For instance, a room should be booked only for the duration of the session and not beyond; more than one room should

NEVER be booked for one session. If time is required for set up and clean up, as in the case of assessments for example, trainees should also be sure to book the meeting room for the additional time needed.

If a session is taking place in a room that was mistakenly **double booked** for another trainee, then regardless of the fault of the error, the session must not be interrupted. This maintains a professional atmosphere in the Clinic, as well as maintains the confidentiality of sessions. In such an event, trainees must contact the Clinic Director and Coordinator immediately via email, another room should be located and booked, and effort made to begin the session in a timely manner. If a room cannot be located, apologize to the client for the error and book another session at the first available time that is convenient for the client.

If a room is unavailable because the session is **running overtime**, then the trainee should knock on the door to inform their colleague that their time is up and a new session will begin shortly. Every session **MUST** end on the scheduled end time. If the client has shown up late for the session, the session must still end at the scheduled time. As such, it is not necessary to leave any buffer time (ex. half an hour) between the previous session and the next session when booking a room. This only results in less overall time available for using the rooms. The SuperSaaS administrators will monitor room bookings to ensure efficient usage of time and space and in accordance to these regulations.

Trainees should contact the Clinic Coordinator and Director for any misuse of rooms in the Clinic space. This can be reported anonymously.

### ***Observation Rooms***

In the case that the trainee requires an Observation Room for their session, the Observation Room must be booked in SuperSaaS prior to retrieving the key from the lock box in B163 (Viewing Room). The lock box contains one key for each Observation Room door, labelled on the key tag. The code for the lock box is changed regularly and trainees will be provided with the current code at the start of the Fall semester. The key must be picked up immediately before the scheduled session and returned to the lock box immediately after the session concludes.

### ***Initial Trainee-Client Session***

While the Course Instructor will determine the specific information that should be collected during the initial client meeting (as per the needs of the course or the training goals), to meet the policies of the Clinic, the following forms must be completed during the initial meeting:

- *Informed Consent* ([Appendix A or A1](#))
  - If the client cannot sign for some reason, it must be stated on the consent form and in the session notes that oral consent has been received.
  - The student must always witness the signature under ‘who was receiving consent’.
- Any other applicable consents forms;
  - [Appendix B – Authorization for Audio-Video Recording](#)
  - [Appendix C – Authorization to Obtain Confidential Information](#)
  - [Appendix E – Permission to Visit School](#)

### ***Client Contact between Sessions***

If a client needs to contact a trainee to change an appointment or to discuss service issues, they must call the appropriate Clinic telephone located in B128 to leave a message or contact their trainee providing service via their resource email account. There are 3 Clinic telephones in the Trainee Office B128 (see list below). Trainees should provide their clients with the correct contact phone number for their cohort.

- **514-398-7430** is designated for the School Psychology MA Trainees and
- **514-398-8828** is designated for the School Psychology PhD Trainees
- **514-398-3568** is designated for the Counselling Psychology and Counselling Psychology MA Project Trainees MA Internship Trainees

A trainee can make other arrangements with the client as well (e.g., McGill resource email account), but it is best practice **not** to share private numbers nor personal emails with clients. As such, for safety and privacy reasons, trainees should not be providing @mail.mcgill.ca emails nor personal cellphone numbers to clients. This should be an issue discussed thoroughly with Course Instructors. There are several issues involved: the first is client privacy. Think of email as the equivalent of writing a postcard; others can read it. If clients agree to that and understand it, this is a possibility. However, remember when you give a client your email address or cellphone number, they will continue to have access to you after services terminate. This may be something you

would not wish and should not be taken lightly. On all cellphones, one can block their own number. But this can still be a bit tricky as it only takes once that you forget to block your number and the client has it permanently. However, in the case of an emergency, this can be used.

### ***Retrieving Messages (B128)***

In the Trainee Office, room B128, the “message” light on the phone indicates that there is a message waiting. Anyone who retrieves messages must record all messages in the notebook located by the phone in the Trainee Office and then post them on the message board above the phone. Trainees can also send an email to their peers to advise them to listen to their messages. Entries must be complete and include the name of the person to whom the message is directed. Once a trainee receives their message, it should be removed from the message board. If there is an urgent message for a colleague, the colleague must be contacted and given the message. There is a computer station located near each phone, which can be used to email messages to colleagues. Also, a list of numbers and trainee names is posted near the phone. Only if it is not possible to connect with the individual, the Clinic Coordinator and/or ECP Departmental Administrative Coordinator (514-398-4242) should be notified.

### ***No Shows and Cancellations***

No shows and cancellations disrupt the regular flow of service, but these are often unavoidable occurrences. Here are some general guidelines to help you negotiate such situations:

- If a potential client misses the first meeting, the trainee should call the potential client to determine the reason, to see if services are still required, and to offer another appointment. Should the client miss the subsequent appointment, the trainee should develop a plan with their course instructor to problem solve in preventing further events and/or determine if services continue or be withdrawn.
- ***Counselling Only:*** If a client misses an appointment and fails to give 24 hours' notice, the full session fee for the missed session should be charged to the client at the next appointment (as stated in the [Informed Consent Appendix A](#)).
- When an ongoing client misses a session, the trainee must contact the client and rebook the appointment. If it is not possible to speak to the client directly, a message must be left (if permission has been granted). However, no more than two messages should be left. Consultation with the course instructor should be conducted in these circumstances. The second message should include a statement that conveys that the trainee is interpreting the “no reply” as the withdrawal of their initial request for services. In such cases, the trainee must complete the [Discontinuation of Services \(Appendix R\)](#).
- Where a client cancels frequently and intermittently it is important to clarify early on that this is not optimal, and that the client will need to be consistent with attendance in order to benefit effectively from services offered. This is especially important with ongoing counselling/therapy.
- In general, three absences or cancellations in a row without a valid reason indicate the need to reassess with the course instructor if services are to continue and to decide on a course of action to prevent and/or resolve this problem.

- The trainee must log all missed appointments, cancellations, and calls in the [Case Chronology form \(Appendix I\)](#).

### ***Client Tardiness***

- When a client arrives late, the session should end at the scheduled time, and the client must pay the full session fee.
- If the client consistently arrives late, then the trainee and the client must plan jointly and agree on how to proceed to avoid such a pattern. For instance, they must agree on what period of wait time is reasonable after which the trainee can assume that the client will not make the appointment. This may be especially critical during winter months where bad weather can cause delays in transportation.

### ***Client Termination***

Cases normally terminate when the service has been delivered and all reports have been finalized. Once the service has ended and before a file can be closed, the Course Instructor must review the file and sign the [Course Instructor's Attestation form \(Appendix J\)](#). This signature is an attestation that the file is complete and complies with the policies and procedures of this manual and the regulating bodies affiliated with the Clinic. The Course Instructor must delete all video files for the client and sign the bottom of the [Client Video Recording Inventory form \(Appendix P\)](#), testifying that all videos have been deleted (from Haivision Media platform and any remote session approved of and recorded via MS Teams stored in OneDrive). Once the attestation has been signed by the course instructor, it is submitted to the clinic director who again reviews the file and signs the Attestation. The file is then submitted electronically to the Clinic Coordinator, who archives the file. All files are retained for 5 years (in compliance with accreditation bodies and audit procedures).

In some cases, clients choose to suddenly discontinue services. In these cases, a [Discontinuation of Services form \(Appendix R\)](#) must be completed and signed by the trainee, Course Instructor and Clinic Director.

### ***Submitting a Closed Client File***

A file is closed when the client declines the service or when the service has been provided and is no longer needed. When an active file is being closed, the trainee must ensure that the *Inventory of Forms/Documents* (Appendix H) is complete, and all forms are placed in the file in the order that they appear on the *Inventory of Forms/Documents*. Every document in the file (e.g., forms, receipts, reports and Clinical notes) must be identified with the Client Code and listed in the *Inventory of Forms/Documents*. In addition, the *Course Instructor's Attestation form* (Appendix J) attesting to the file's "completeness" and the *Client Video Recording Inventory form* (Appendix P) attesting that all videos have been deleted, must be signed by the Course Instructor before submitting the file to the AMRC for review by the Clinic Director. Trainees are to put all protocols and any other raw data into an **unsealed** departmental envelope before submitting the closed file to the AMRC. After final review by the Clinic Director, the Clinic Coordinator will stamp the envelopes ("For licensed psychologist only") and the envelope will be sealed. It is the responsibility of both the trainee and the Course Instructor to ensure that all files comply with the record-keeping guidelines set out by the OPQ and OCCOQ. [A Guide to Record Keeping](#) is available from the OPQ website. Failure to organize and complete the closed file properly **will** result in a delay of course grades.

**Please Note:** The timeline for these procedures is as follows:

- The time from the last interaction with the client or representative of the client to having the instructor sign the Course Attestation form is a maximum of two weeks.
- The time from the Course Attestation form being signed and submitting the file to be archived by the Clinic Co-Ordinator for the Clinic Director to sign and be archived is 48 hours.

**Please Note:** When submitting the file to the clinic coordinator:

- All passwords must be deleted
- Transfer unprotected file to clinic coordinator and do not transfer them to anyone else without passwords.
- Once the Clinic Director has signed the course attestation form, the clinic coordinator will be informed, and they will archive the file.
- Once the file is archived, the clinic coordinator will inform both the student and the course instructor that the file can be deleted. **IMPORTANT:** Trainees are not to delete the file until the clinic coordinator has emailed confirming it is safe to do so.
- Once authorized to do so, the student must delete the file, all downloads, emails, trash bin and any other possible identifying correspondence from or to the client.
- Email the clinic coordinator that everything has been deleted.

**Note to Course Instructors:** No file is considered complete unless it contains all the required documentation and materials identified on the [Inventory of Forms/Documents \(Appendix H\)](#). All entries on forms must meet expected professional standards. **Final grades are not to be submitted until the file is returned and is inspected for completeness and subsequently signed off by the Course Instructor and Clinic Director and archived. Only when the file has been completely deleted should a grade be submitted.**

### ***Clinic Audio Visual Resources***

Given the Clinic's training mandate, all 12 rooms allow for video recording of sessions needed for Clinical supervision. Rooms were equipped with a recording system that allows users to create video files and saves them directly onto a secure network.

- Video recording equipment currently comprises 12 control panels (wall-mounted tablets), 14 cameras, 12 microphones, and one secure network server.
- Ten Observation Rooms provide the opportunity for live supervision of a client session. Each Clinic room can be viewed from an adjacent Observation Room with a one-way mirror and headphones. The Observation Rooms can be opened using a key from the lock box in room B163 (Viewing Room).
- Playback equipment (B163) consists of 20 Apple computers and 20 headphones. Videos are accessed by logging into the Haivision platform with your McGill email address and password.
- The maintenance of equipment is conducted through a contractual agreement with a technology service provider. Equipment problems are to be reported to the following email address immediately: [ecpclinic.education@mcgill.ca](mailto:ecpclinic.education@mcgill.ca). Trainees can also call a support staff member at 514-398-4242.

## ***The Assessment Materials Resource Centre (AMRC)***

The Department maintains a well-equipped Resource Centre of assessment materials and tests. [The Resource Centre website](#) contains detailed information about their holdings and the procedures for borrowing.

### ***Copyright Law***

All materials housed in the Assessment Materials Resource Centre (AMRC) are protected by copyright law. To reproduce or adapt them, in whole or in part, for any purpose whatsoever, by any means, including photocopying, mimeographing, reprinting, or any form of computer storage (i.e., OneDrive, and other online/electronic sharing software) or programming is not only a violation of copyright law, but is unethical and unprofessional.

## ***Clinic Safety and Security***

Trainees must be proactive and take great care to minimize the risk of harm to themselves or others. If a trainee has any concerns about working with a particular client, they should discuss this issue with the course instructor prior to, or after seeing the client.

If during an assessment or counselling session a trainee feels that their safety is being compromised, they should end that session in a sensitive and professional manner. In cases where threat is imminent, one of the panic buttons installed in every room can be used (located in each counselling room under the armrest of the counsellor's chair and in each assessment room under the seat bottom of the chair marked with the room number sticker). This alerts McGill Security who will send someone to investigate immediately. McGill Security can be contacted by telephone at 514-398-3000 (3000 from the Clinic phones). Each panic button is labelled with the room number sticker for which it belongs. Panic buttons must remain in their designated rooms so that Security Services will know which room to investigate if the button is pressed. Trainees should also be aware of the emergency exit, located at the opposite end to the entrance of the hallway that gives access to the clinic consultation/interview rooms.

### ***Supervision and Insurance***

Services provided in the Clinic are in conjunction with specific course work. As such, the Course Instructor assigned to the course acts as a clinical supervisor and is responsible for deciding on case assignments, decision making, and the overseeing of all clinical work conducted. All supervisors must be well informed about the policies and procedures of the clinic and must review these and all aspects of record keeping with their trainees on a periodic basis. Of special importance are the policies with regard to collecting fees and receipting for services rendered and providing proof of payment to the Clinic administrative staff for proper financial reconciliation.

McGill University provides liability coverage and other insurance for all its students actively registered in required courses for which clinical work with clients is part of the curriculum. As long as the trainee is a registered, full-time student either in the Counselling Psychology or School/Applied Child Psychology program, they will have liability insurance with regard to work carried out in the McGill Psychoeducational and Counselling Clinic. All work done in the Clinic requires regular, ongoing supervision. Trainees cannot see Clients in the Clinic without the knowledge and approval of their Course Instructor. Providing services without

supervision has serious liability and insurance implications and could seriously jeopardize the trainee's standing in their program.

### ***Protecting Personal Privacy***

Trainees should be particularly aware of the fact that clients can obtain personal information about them using the internet. Therefore, it is important for trainees to realize that as professional trainees, they need to secure all of their social media and refrain from having public access. Being open to the public could result in receiving unsolicited electronic communications from clients and/or giving the wrong impression to clients as well as future colleagues. Course Instructors should be consulted about how to address this if it does occur. Students should review the [ECP Student Social Media Policy](#) for more information.

### ***Special Situations***

In the course of a trainee's work with a client, they may encounter a situation that falls outside the boundaries of what is expected. When in the course of an assessment or treatment, a trainee encounters an extraordinary situation (for instance, a client threatening harm to self or others, a client who is a victim of abuse or another situation), supervision must be sought out immediately and an [Incident Report \(Appendix K\)](#) must be completed and placed in the client file.

### ***Risk of Suicide***

All trainees working in the Clinic **must** have training in suicide risk assessment. This section provides guidelines for suicide risk assessment but does not replace the training required.

All trainees providing services that are working with clients that they deem may be a potential suicide risk must do a suicide risk screening. Following a positive screen, the trainee will need to proceed to a full risk assessment and determine what course of action will be required. At this time, an [Incident Report \(Appendix K\)](#) must also be completed and filed.

*The following is a set of guidelines for proceeding through a suicide risk assessment.*

**At Intake if the client presents with a possible suicide risk and thereafter when deemed necessary, the trainee probes with the following questions:**

- Do things ever get so bad that you've thought that life isn't worth living?
- Do you ever think about suicide or ending your life?

*If the client clearly says "no"* –the assessment can be discontinued but vague answers should be probed further.

*If the client clearly says "yes"* – trainee should screen for history of suicide and past attempts.

- Have you had these thoughts before (in the past)?
- Have you tried to kill yourself at some other time in the past?

*If there is a history of previous attempts*, details of each event should be assessed. Risk goes up substantially with previous attempts and it is the single most important predictor of suicide and death by suicide. However, this predictor must be considered in conjunction with the information that is gathered from a thorough assessment (see below) where risk is a concern.

*If no past history, assess current ideas relative to suicide including:*

- How strong is the desire to die?
- How specific is the plan for ending life?
- How accessible and lethal is the plan?
- Does he/she intend to carry out the plan? When?
- Do the reasons for dying exceed reasons for living?
- Is the client impulsive or does he/she have a history of impulsive behavior?
- Does he/she consume drugs or alcohol?
- Does he/she have limited social support?
- Does the client perceive him/herself as a burden to others?

*Also, assess for protective factors.*

- To what extent does the individual display adequate coping skills and problem solving?
- What are their experiences of success, efficacy?
- Are they connected to an important social group (family, friends, church)?

*Note:* Distinguish between self-injury with no intent to die—cutting, burning—from suicidal behavior with intent to die.

*If after your assessment of the risk is high and danger to self is imminent*, advise the client of your concerns and contact appropriate emergency services. You must offer to accompany the client through this process by making calls to their family and friends, contacting the emergency room of the McGill University Health Centre (MUHC), and in some cases accompanying the client to the hospital ER.

<b>Emergency services</b>	911
<b>McGill Security</b>	514-398-3000 ( <i>3000 from the Clinic phones</i> )
<b>Suicide Action Montreal</b>	514-723-4000

*If risk is low and danger is not imminent*, then treatment should focus on further reducing risk by providing closer follow up and referral to appropriate resources. Course instructors should be contacted immediately to review this plan.

## ***Youth Protection***

In the case of child abuse, mental health service providers are legally mandated to report suspected abuse or neglect to the appropriate agency (Youth Protection Services). If in the course of providing services a trainee becomes aware of potential abuse/neglect, they must also fill out an *Incidence Report* (Appendix K) and contact their Course Instructor immediately and review the situation prior to filing a report. Please note, anyone over the age of 18 that divulges past child abuse has full confidentiality and it cannot be reported. However, if there is still a younger child at risk, then we are mandated to call DPJ and [file a report](#) or contact Montreal Youth Protection via phone at 514-873-5146.

## ***Threat to Harm Other(s)***

While there has never been an incident of violence or an aggressive act in our Clinic, the Clinic staff is responsible for remaining vigilant and recognizing violence or warning signs of violence. Training in Non-Violence Crisis Intervention is required by all trainees prior to seeing clients from the community (mid-September).



*The following are some general guidelines for how to respond to situations where violence or aggression might be a risk.*

- Your first responsibility is to protect your own safety which means leaving/escaping the situation and alerting emergency personnel (3-1-1 or 9-1-1). Where you cannot leave or where leaving is not wise, Clinic rooms are equipped with panic buttons – using buttons alerts McGill Security who will respond immediately and who are trained to deal with these types of situations.
- The best approach to all situations is vigilance and prevention. It is especially important to notice signs of escalation and to act accordingly. These might be:
  - Behavioral disinhibition and impulsivity;
  - Emotional disturbances (especially paranoia);
  - Cognitive impairment;
  - Attitudes supportive of violence (e.g., being a gang member);
  - Social disruption

*If during the course of your work with a client (assessment or counselling/therapy) a client reports (or you suspect) previous acts of aggression and violence, or expresses intent to harm someone you should assess directly in the following way:*

- Have you ever been hurt or harmed by anyone? (In the past week?)
- Has anyone ever tried to or threatened to hurt or harm you? (In the past week?)
- Have you ever hurt or harmed anyone? (In the past week?)
- Have you ever tried to or threatened to hurt or harm someone? (In the past week?)
- Have you ever had thoughts, images, fantasies, desires or urges of hurting or harming anyone? (In the past week?)
- Do you think you might actually do something to hurt or harm someone? How would you carry this out?

*If observation and screening suggest an imminent risk for violence*, end the meeting tactfully and sensitively and leave the Clinic and contact your Course Instructor. If the risk is not imminent, consult with your Course Instructor to determine a course of future action.

### ***Breaching Confidentiality***

If an assessment suggests that an imminent risk for violence or suicide exists and after consulting with your Course Instructor, the best plan of action is to notify the appropriate person or persons. The following guidelines, taken from the [OPQ code of ethics](#) must be used (Professional Code, R.S.Q., c. C-26, s. 87).

***“Psychologists may communicate confidential information to prevent an act of violence, including a suicide, where they have reason to believe that there is an imminent danger (death or serious bodily injury to a person or an identifiable group of persons). The information can only be communicated to the person/group, to their representative, or a person who can come to their aid (e.g., police). Psychologists may only communicate sufficient information to achieve the purposes intended.”***

The trainee must document interactions with third parties carefully and diligently. In the *Incident Report* form, document the actions taken to prevent violence, reasons for the action taken, and the identity of the person(s) who received the information and the information that was communicated and the identity of the person or persons to whom the communication was addressed.

### ***Clients Under the Influence***

Trainees must never have a session with a client who is intoxicated. If they suspect their client is intoxicated or under the influence of a narcotic, trainees should terminate the session immediately and advise the client that they will be contacted soon to reschedule a session. The trainee should then strongly suggest to the client that he/she call a family member or friend to come and pick them up (if they came by car) or offer to call them a taxi ([Taxi Coop](#) 514-725-9885).

The trainee must fill out an Incident Report ([Appendix K – Incident Report](#)) and arrange to meet with their Course Instructor.

### ***Referral Resources***

Useful numbers and resources in the community are available in the [Directory of Referral Sources in the Greater Montreal Area in Appendix N](#).

**All Clinic forms are [available online on this page](#).**