



Department of Educational and Counselling Psychology
Psychoeducational and Counselling Clinic

McGill Psychoeducational and Counselling Clinic

Manual of Policies and Procedures

Last Updated October 21, 2020*

Please note that the manual was updated to reflect telepsychology procedures that will be employed in Fall 2020 – Winter 2021 terms. Some of the procedures in this document might still refer to regular face-to-face model, that was exclusively used in the clinic prior to Fall 2020, and thus might not apply to your current situation. In case you have any questions or concerns, consult with your Course Instructor.

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.

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), found here: https://www.ordrepsy.qc.ca/web/ordre-des-psychologues-du-quebec/centre-de-documentation3_old/tags/media-cat-guides-cadres-lignes-directrices, and the Ordre des conseillers et conseillères d'orientation du Québec (OCCOQ), found here: https://www.orientation.qc.ca/files/GOQ_D.1169-2018_CO_CodeDeonto_15aout2018-1.pdf.

The following websites provide additional information:

American Psychological Association (APA) - <http://www.apa.org/>

Canadian Psychological Association (CPA) - <http://www.cpa.ca/>

Ordre des psychologues du Québec (OPQ) - <http://www.ordrepsy.qc.ca/en/>

Ordre des conseillers et conseillères d'orientation du Québec (OCCOQ) - <http://www.orientation.qc.ca/>

Clinic Staff and Students

Clinic Director

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. Nate O. Fuks, psychologist.

Clinic Coordinator

The Clinic Coordinator reports directly to the Clinic Director and has an office located within the Department of Educational and Counselling Psychology (ECP; Room 614G). The Clinic Coordinator serves as the Clinic

receptionist for all incoming calls and requests from the community for information about Clinic services. The Clinic Coordinator answers the Clinic line (514-398-4641) and takes requests for service Monday through Friday from 9:00 a.m. to 5:00 p.m. The Clinic Coordinator is equally responsible for maintaining the Client waitlist and subsequently initiating all Client files. The Clinic Coordinator manages the Clinic's primary file storage location, which is situated within room 614G. It is also the Clinic Coordinator's responsibility to ensure that a Trainee, a Course Instructor, or the Clinic Director, appropriately signs out all files removed from the primary file storage location for their use. All Client file exchanges (e.g., from Trainee to Course Instructor for a review of progress) **must** go through the office of the Clinic Coordinator. 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 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 (<http://www.mcgill.ca/edu-ecp/students/amrc>).

Course Instructors

The Course Instructor is responsible for the supervision of each of their Trainees' assigned Client cases. In order to properly supervise, Clinic Instructors must be thoroughly familiar with the Clinic Policies and Procedures outlined in this manual. Course Instructors must log and track all cases assigned to students registered in their courses and monitor all aspects of Client file and case management in a systematic and timely manner. 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 complete that Course Instructors can submit a final grade. The Course Instructor is responsible for ensuring that all videos pertaining to a client file are deleted prior to submitting the file to the Clinic Coordinator at the end of the term.

Note to Course Instructors: In the event that a case is to continue beyond the end of the second semester, instead of a final grade, an HH grade must be given to the student. This grade is changed after the student has met all requirements including completing and returning files. The Course Instructor remains responsible for supervising the student's activity until a final course grade is submitted.

Trainees

The term Trainee will be used throughout this document to refer 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</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	1	Winter
Counselling Psychology MA (Non-Thesis) Project Concentration	EDPC 625 EDPC 626	Fall Winter	4 (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](#). **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 may consult with the Clinic Director or the Clinic Advisory Committee.

Clinic Operations

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 and Clinic Director.
- Ten live Observation Rooms that 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) that 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

Access to the Clinic is temporarily prohibited due to the Coronavirus pandemic. Students who do not have the means to conduct telehealth services from their home due to internet or confidentiality issues should notify the Clinic Director or Clinic Coordinator by email. In such cases students can make a request to use a clinic room for their remote counselling/assessment sessions.

The Clinic operates from September to May but requests for service are usually taken year-round. Additionally, should the need arise, some Clinic services may continue during the Spring/Summer semester should the need arise and if Trainees and Course Instructor are available for the work. Each year, the Clinic is most active from October to the beginning of December, and then from January to beginning of April. Operating hours for the Clinic consultation/interview rooms and waiting area are Monday through Friday from 9:00 a.m. to 7:00 p.m. Outside of these times, the consultation/interview rooms and waiting area will be locked and can only be opened by a valid, clinic-user McGill ID card.

Scheduling Clients outside the regular hours of operation must be done with the Course Instructor’s knowledge and agreement and only when safety is clearly not an issue. Weekends are often popular times for child assessments, as children are not in school. Weekend bookings for assessments should also be done with the Course Instructor’s knowledge. Booking therapy sessions with adults on weekends is not advisable. Please refer to the section on Safety and Security in the Clinic for specific details and recommendations.

The Clinic is not equipped to handle crises or emergencies (see Safety and Security section below). This is clearly stated in the *Informed Consent* (Appendix A) that Trainees must review with Clients during first meeting. It is important that this be discussed with Clients so 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 (Peel Street, McTavish Street and Avenue des Pins) but availability is highly unpredictable. Paid indoor parking is available in the Faculty of Education and the McIntyre building. A map of the downtown campus can be viewed here: <http://www.mcgill.ca/maps/>. Information about paid parking can be viewed here: <http://www.mcgill.ca/transport/parking/downtown/visitors/>.

Clinical Procedures

Requests for Service

In order to make a request for services in the Clinic, potential Clients are required to contact the Clinic Coordinator by phone at 514-398-4641. At that time, a *Request for Service Form* (Appendix M) is completed. This form includes contact information for the potential Client, as well as some information regarding the reason for the request for services. Once the form is complete, the Clinic Coordinator assigns a Client code to the new prospective Client and opens an official file that includes the completed *Request for Service Form*. For confidentiality reasons, the Client's name does not appear on the outside of the file but is instead identified by a code assigned by the Clinic Coordinator when the file is opened.

Active Files

See Telepsychology Procedures on the [Clinic Trainee Resources website](#) for Fall 2020 and Winter 2021 semesters. These semesters will be conducted remotely, and all files will be stored electronically.

Case assignment. Cases are assigned to Trainees at the start of the Fall and/or Winter semester and replacement cases are assigned as needed. For assessment files, a screening process is done by MA2 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 for the assessment. At the start of the Fall semester, the Clinic Coordinator/Clinic Director will meet with Course Instructors and Trainees in courses that use the Clinic to orient Trainees to the Clinic, to review the Policies and Procedures Manual, and to address any questions and concerns Trainees and Course Instructors may have. The Course Instructor and Clinic Coordinator/Clinic Director will work together to adhere to waitlist priority and assign each Trainee the allotted Client cases. They will also decide on a number of secondary files that will be used in the cases where potential Clients decline services.

Signing out files. Once assigned a Client case, the Trainee must meet with the Clinic Coordinator and sign out the Client file and a key for a locker unit in room B163. No file can leave the Clinic Coordinator's care without being signed out to a Trainee, Course Instructor or the Clinic Director. All exchanges of files must take place through the Clinic Coordinator who keeps a central log of every file in the Clinic. When a Trainee or Course Instructor signs out a file from the Clinic Coordinator, they take sole responsibility for the security of the file and 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.

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 may consult with the Clinic Director or the Clinic Advisory Committee.

File review. Course Instructors regularly review the contents of a Trainee's active Client file during the scheduled course time. As such, Trainees are expected to bring their active files to class when requested by their Course Instructor. If the Course Instructor wants to review the file outside of course time, the Trainee must return the file to the Clinic Coordinator. This will allow the Course Instructor the opportunity to then sign out the file from the Clinic Coordinator, and take sole responsibility for the care of the Client file until it is returned and signed back in with the Clinic Coordinator. Course Instructors cannot return the file to the Trainee directly; all file exchanges must go through the Clinic Coordinator.

File storage. All files are kept in the Clinic Coordinator's office/primary file storage location until they are signed out by a Trainee or Course Instructor. When the Trainee meets with the Clinic Coordinator to sign out their Client file, a key for a locker unit must also be signed out at the same time. Current Client files signed out to Trainees (i.e., active, ongoing file with notes, protocols etc.) must always be stored in the designated secure locker unit in B163. **Files may only be removed from B163 for Client meetings or report writing.**

Trainees may not take Client files with them when they leave the Education Building, the Coach House or Duggan House. Thus, all report writing that requires the use of the Client file must take place in one of these designated McGill buildings. **Trainees may lose access to the use of the Clinic in the future should they misplace the Client file they have signed out from the Clinic Coordinator or if they are known to have taken the file with them upon leaving the designated McGill Buildings. Decisions concerning the consequences of not adhering to policies will be made by the Course Instructor who may consult with the Clinic Director or the Clinic Advisory Committee.**

Should Trainees wish to write components of reports outside one of the designated McGill building, they are advised to discuss options with their Course Instructors. If photocopies of documents are made for this purpose, the copies must not contain any identifying Client information (i.e. name, address, particularities that would identify the client) and should be shredded after use/prior to submitting the final Client file.

Trainees may not leave Client files in publicly accessible locations (such as Course Instructors' mailboxes), nor may they leave a Client file with the Course Instructor after class time unless the file has been properly signed out with the Clinic Coordinator.

Note Concerning Electronic Documents: All rules of confidentiality regarding files also apply to electronic documents. Trainees are encouraged to discuss options for keeping electronic documents confidential (e.g., using password protected documents) with their Course Instructors.

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 on the *Request for Service Form*, the Trainee should contact the potential Client by telephone. 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 and complete the reverse side of the Request for Service form titled Initial Contact (see below for ***Declined Services***);

- ✓ Advise the 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;
- ✓ For assessments, verify that this will be an English-speaking assessment;
- ✓ Remind the Client that there is a cost and advise them of the fee and payment structure (specifics regarding the fee are also communicated during the Request for Service conversation with the Clinic Coordinator but must also be reviewed by Trainees). The following sample statement is provided for your reference and should be used as a guide during the initial Trainee-Client phone conversation;

“The Clinic fee for therapy is \$40/assessment is \$600. Are you comfortable with this fee structure?”

- *If yes, Trainees should* advise the Client that payments are accepted in the form Interac e-transfer, exclusively.
- *ONLY if the Client indicates that this is not an affordable option, the Trainee should* briefly discuss the possibility of and requirements for a Fee Reduction request, which includes providing proof of household gross income before taxes (see below for **Clinic Fee Policy, Fee Reduction, and Billing and Collecting Fees**). As fees can sometimes be challenging to discuss, the following sample statement is provided for your reference and should be used as a guide during the initial Trainee-Client phone conversation;

“If you are unable to cover the full cost of services at this time, the Clinic does have a fee reduction policy that may be applied based on your household family income. If this is the case, proof of household family income must be emailed to me prior to the first appointment, at which time we will complete the appropriate forms and submit them to our Clinic Director to see if you qualify for a reduced rate.”

- ✓ Inform the Client about video recording of interviews/consultations (if applicable; see **Video Recording**);
- ✓ Discuss with the Client their availabilities for first consultation (see **Room Bookings** below);
- ✓ Set up an appointment for the first consultation (see **Initial Interview** below);
- ✓ Give the Client orienting information such as your name, Clinic location, options for transportation and parking, how to contact you in case of a change, collect additional numbers where they might be reached (e.g., cell phone number), and verify the Client contact information available on *Request for Service* form in case there has been any changes;
- ✓ Answer any questions the Client may pose.

Please note: When contacting Clients by telephone at any time, the caller 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** (see information on the completed *Request for Service* form). To preserve Client confidentiality, the caller/Trainee must provide his/her name and refer to only to McGill University as the affiliation. Under no circumstances should a message or the Clinic telephone number be left on a voice mail or with any person answering the telephone, unless the completed *Request for Service* form (Appendix M) or the Client has specifically indicated that this is acceptable.

Important: For safety and privacy reasons, it is a best practice for Trainees to not provide their home or cellular phone number to Clients. For additional information see the section on Client Contact between Sessions below.

Declined Services

If the Client declines service, the Trainee must still complete the *Initial Contact* section on the reverse side of the *Request for Service* form (Appendix M) and specify the reason that services were declined. At this stage, the Trainee must return and sign in the declined Client file to the Clinic Coordinator. At that time, the Clinic Coordinator will assign the Trainee a new Client file.

Clinic Fees Policy

Clients of the Clinic are charged fees for services rendered by Trainees. Trainees must provide a receipt for every payment the Client makes. 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.

- Counselling services provided are charged on a session by session basis. Counselling fees are set at 40\$ per session. Trainees are to collect fees at the end of each session.
- Assessments have a flat fee of 600\$. Trainees are to collect the total fee in two installments: 300\$ at the end of the second meeting and then the final payment of 300\$ at the final assessment meeting, yet prior to the feedback session. Under no circumstances should the feedback and/or the report be provided to Clients who have not paid the full fee. In cases in which assessments are terminated mid-process, due to a request made by the Client, Clients should be charged a cancellation fee of 300\$.

In the event of a Client being granted a Fee Reduction, the fee schedule remains the same as stated above (e.g., Counselling services are charged on a session by session basis and Assessments fees are collected in two installments) but at the reduced fees.

Fee Reduction Policy

Many Clients come to the Clinic because services offered by the private sector are often prohibitively costly. Prospective Clients are made aware of the fee structure during their first contact with our training facility in their Request for Service conversation with the Clinic Coordinator and reminded of the fee structure in the initial Trainee-Client phone call.

1. For Clients who indicate that they cannot pay the established fees, a Fee Reduction may be granted if the Client meets a particular set of criteria. See the section on *Initial Trainee-Client Phone Contact* for further guidelines on addressing this issue with Clients.
2. The Trainee should provide the Client with the *Request for Fee Reduction* form (Appendix G), review with them the requirements for completion, and inform them that all documents will be submitted to the Clinic Director for review and approval.
 - a. Forms may be sent to the Client by fax, mail or email and completed and returned prior to the initial meeting.

Please note: If documents are returned to the Trainee prior to the initial meeting, this option *may* allow for the Clinic Director to review the request prior to the initial meeting and as a result, reduced fees *may* be applied to the first meeting if a Fee Reduction is granted. Trainees should communicate with the Clinic Coordinator and be sure to allow sufficient time for review by the Clinic Director prior to scheduling the first meeting.

- b. Forms may also be given to the Client at the Initial Trainee-Client meeting.

Please note: This option does not allow for the Clinic Director to review the request prior to the first collection of fees. As such, Clients receiving Counselling services will be expected to pay the full fee of 40\$ at the end of the first session. As Assessment Clients are not expected to pay the first installment of fees until the end of the second meeting, Trainees should communicate with the Clinic Coordinator and be sure to allow sufficient time for review by the Clinic Director prior to scheduling the second assessment meeting, when assessment fees will be collected.

3. Proof of current gross household income before taxes from all parents/guardians is required and the requirements for such documents are outline on the *Request for Fee Reduction* form.
 - a. Sufficient proof of income should include the client's most recent T4 slip, their summary of assessment from their last year's tax return or a Record of Employment.
4. Once a completed Fee Reduction Form and accompanying financial documents are available, they should be emailed to the Clinic Director for review. **When emailing the documents, Trainees must black-out any identifying information such as the client's name, address, social insurance number, etc.**
5. If the client applied for a fee reduction, the original *Fee Reduction Request* form should be included in the Client file whether or not a reduction was given.
6. If a fee reduction is granted, all receipts should clearly note the reduction/revised fee amount. This decision should also be included in the *Payment History* form, by entering the date that the Client completed the form and the date that the reduction was granted. All receipts and the *Fee Reduction Request* form must be stapled to the *Payment History* form when submitting the final Client file.

Payment Methods

Clients must pay by Interac e-transfer at the beginning of *each* session (one e-transfershould be issued per counselling session). The e-transfer should be sent to ecpclinic.education@mcgill.ca. At the present time, the system does not accommodate any form of cash, credit, debit or cheque payments. These points must be conveyed to the Client clearly and unambiguously to avoid any confusion about payment methods..

Billing and Collecting Fees

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 fee policies, amounts, and payment methods as described above;
2. To collect fees and issue receipts in a timely manner (see below for **Issuing Receipts** and see Appendix O for sample receipt);
3. To remit payments to the Clinic Coordinator no later than 2 business days after having collected cheques or money orders from Clients. If for some extenuating circumstance, a Trainee cannot remit payments within this timeframe, they are required to contact the Clinic Coordinator by email to obtain authorization for the delayed submission.

Issuing Receipts

See Telepsychology Procedures on the [Clinic Trainee Resources website](#) for Fall 2020 and Winter 2021 semesters. *Payment: Issuing Invoices and Details About Interac e-Transfer.*

A Trainee must issue an official Clinic receipt any time a Client pays for services. As needed a Trainee is to sign out pre-numbered receipts from the Clinic Coordinator. Each receipt will be logged as being connected to the Trainee. Trainees are to use the associated pre-numbered receipts each time they receive payment for services rendered for the associated Client. Payment cannot be accepted unless a receipt will be issued the same day. A receipt must be completed to contain the following information:

- Client Name and Payee Name if different (e.g., Parent pays by cheque for child's assessment)
- Client Code
- Date
- Description of Service (i.e. Counselling, Assessment, etc.)

- Session dates associated with payment
- Amount of Payment Received
- Method of Payment (cheque or money order) along with associated cheque or money order number
- Receipts must be signed by the Trainee who collected the fees.

Please note: Trainees should review Appendix O for a sample receipt.

Each receipt contains three sheets – one original (white) and two carbon copies (yellow and pink). Trainees should apply pressure when filling out the receipt. The Trainee should provide the client with 2 copies of their receipt - the original WHITE copy and the YELLOW copy. The PINK copy is retained by the Trainee in the Client file. An entry must be made in the *Payment History* form (Appendix Q) that a receipt was issued, the amount paid, and the receipt number etc.

Trainees must plan in advance in order to make sure that files and receipts are organized in time for a session. It is not realistic to arrive at the Clinic Coordinators office five minutes before the client arrives and expect that everything will happen instantly. Treat receipts as you would cash or a credit card. They have a value and are not just pieces of paper. Unused receipts are to remain securely stored in the associated Client file until services are terminated. At the time that the completed Client file is signed in, all extra receipts must be paper clipped to the left inside sleeve of the file. All completed/used receipts should have already been photocopied by the Clinic Coordinator (see above for timeline) and appropriately logged in the *Payment History* form (Appendix Q).

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).

See temporary instructions for video recording on the [Clinic Trainee Resources website](#) during the Fall 2020 and Winter 2021 semesters.

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.

1. Enter your McGill **email address** and password.
2. In the “Client Code” field, enter the official client code that has been assigned to your client (ex., AF18JIDLOK). Students in EDPC 665 will use the following format for their client codes: Last name of **Trainee_client1/2/3** (example: Smith_client2). Make sure you do **not** use the last name of your client.
3. Select the appropriate course for which the recording is being made. You will need to know your Course Codes (ex. EDPC 665, EDPC 625, EDSP 682, EDSP 705).
4. The “Title” and “Created By” fields are populated automatically.
5. Check the camera view by selecting “Camera Control”.
6. Select a preset camera set-up, or manipulate the camera angle by using the arrows and zoom feature. The Camera Preview is shown as you change the settings. If there are two cameras in the room, as in the

Family Rooms, you will have to do this for each camera, by first selecting “Camera 1”, and then selecting “Camera 2”.

7. Select “X” to return to the previous screen.
8. Ensure that the “Volume” is set to at least the middle of the bar. This is the volume level that will be heard when you view your recording.
9. Select “Start” to begin your recording. There will be a blinking red dot in the right hand corner to indicate that a recording is in session. The rest of the screen will go black. Touch anywhere on the screen to return to the Recording Control screen.
10. From the Recording Control screen, the recording may be “paused” and “resumed” several times during the session.
11. When the session is over, select “Stop” on the Recording Control screen.
12. Select the “Sign out” button. This will bring you to the Log Out screen. Select “Yes” to log out or “No” to return to the Recording Control screen (you must press “Yes” to end your session). return to the Recording Control screen (you must press “Yes” to end your session).

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** available at: <http://www.supersaas.com>. The directions for the Supersaas system are below. Course Instructors will also be able to log into the booking system.

1. Enter the site.
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 6 Clinic rooms that can be booked.
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 all times. To offset the room bookings, different programs observe different class schedules and as a result there should be blocks of time that are free for each program’s group of Trainees. 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 online Supersaas system. 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. Course instructors and the Clinic Director will monitor the system to ensure rooms are being booked according to these regulations.

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 immediately, 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 should end promptly when the time is up. 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.

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 Meeting

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) and any other applicable consents forms;
- The Clinic *Request for Fee Reduction* (Appendix G) if applicable

Client Contact between Sessions

Consult with your Course Instructor for best practices during Fall 2020 and Winter 2021 semesters. The instructions below don't apply for Fall 2020 and Winter 2021.

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

A Trainee can make other arrangements with the Client (e.g., McGill email, McGill research lab phone number) as well, but it is a best practice not to share private numbers with Clients. For safety and privacy reasons, Trainees should be wary of providing email and cell phone numbers to clients before they are familiar with the Client. This should be an issue discussed thoroughly with Course Instructors. There are several issues involved. One is Client privacy. Think of email as the equivalent of writing a post card; 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

cell phone 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. Use of phones with the *67 option will allow you to contact clients and to conceal your number. This is another possibility that should be explored.

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. 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 Secretary (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 instances:

- If a new Client misses the first meeting, the Trainee should call the 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 his/her Course Instructor to problem solve in preventing further events and/or determine if services should continue or be withdrawn.
- 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*).
- 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 three messages should be left. The third message should include a statement that conveys that Clinic staff is interpreting the “no reply” as the withdrawal of their initial request for services.
- 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 in a row without a valid reason indicate the need to reassess with the Course Instructor if services are to continue and if necessary, to decide on a course of action to prevent and/or resolve of this problem.
- The Trainee must log all missed appointments, cancellations, and calls in the *Case Chronology* form (Appendix I).

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.

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 can either be done during class time, or the Course Instructor may sign out the file from the Clinic Coordinator for review. 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. Once the attestation is completed, and submitted to the Clinic Coordinator, files are archived for 7 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

See instructions for closing a file on the [Clinic Trainee Resources](#) website during the Fall 2020 or Winter 2021 semester. These instructions are still being developed and will be shared soon.

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 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 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 insure 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 at the following link:

https://www.ordrepsy.qc.ca/c/document_library/get_file?uuid=25fd6fae-afb6-485d-856f-58ae42101ba2&groupId=26707. Failure to organize and complete the closed file properly could result in a delay of course grades.

Please Note: A file should be closed and returned to the Clinic Coordinator as soon as the service is rendered and all documentation is completed. Under no circumstances should files be kept by Trainees or Course Instructors when they are no longer active.

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.

Note to Counselling Program Trainees: If the Trainee is aware that continued services are required for their Client, it is imperative that the Trainee: 1) advise the Clinic Coordinator that the counselling file is still active and 2) transfer the file to another Trainee for continued service and complete the *Authorization to Transfer a File* form (Appendix D). The *Final Summary Report* (typically completed using the template provided by individual Course Instructors) must be replaced by a *Transfer Summary Report* (further details regarding the contents of this report should be provided by Course Instructors).

General Clinic Protocol

Professional Behaviour

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 with 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 behaviours 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.

Eating and drinking in the Clinic rooms (including the counselling/assessment rooms, viewing room, observation rooms, and office) is not allowed for either Trainees 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.

Dress code

Trainees are expected to dress in a manner that conveys a serious and professional attitude. Certain items of clothing (e.g., ripped jeans, shorts, tank tops) are inappropriate when meeting with Clinic Clients.

Punctuality

Punctuality is expected of all Clinic members 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 Departmental Secretary at 514-398-4240 and make arrangements to have someone meet and inform the Client.

Noise Levels

Noise levels must be monitored at all times in all areas of the Clinic as 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.

“Sounds screens” are recommended to be used during Client sessions. “Sound Screens” are white noise generators intended to mask conversation and add a layer of confidentiality to sessions. They are located on the shelf under the corner table in each Clinic room and must be turned on and off for each use.

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 its intended purpose and not as a social gathering place.

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 problems (Custodial Services - ext 7497). Each Clinic room is set up in exactly the same way. 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 Audio Visual Resources

Given the Clinic's training mandate, all 12 rooms allow for video recording of sessions needed for Clinical supervision. Recording equipment was upgraded in 2018 when all rooms were equipped with a state of the art recording system that records audio/visual files and saves them directly onto a secure network.

- Video recording equipment currently comprises 12 control panels (wall-mounted tablets), 14 cameras, 12 microphones, 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 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 Clinic Director immediately.

The Assessment Materials Resource Centre (AMRC)

The Department maintains a well-equipped Resource Centre of assessment materials and tests.

The Resource Centre website (<http://www.mcgill.ca/edu-ecp/students/amrc>) contains detailed information about their holdings and the procedures for borrowing.

Copyright Law

All materials housed in the Assessment Materials Resource Centre 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., Dropbox, 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

As mentioned under Hours of Operations, the Clinic is accessible by all Trainees at any time. 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.

Counselling and therapy services cannot take place on the weekend since there may be few colleagues present. Friday evenings (e.g., after 5 pm) should also be avoided. When a Trainee is in the Clinic, it is advised that he/she be aware of who else is also present by checking the booking sheet for that day.

Assessments often take place on weekends when children are not in school. It is a good practice to schedule weekend assessments at the same time as another Trainee.

If during an assessment or counselling session a Trainee feels that his/her 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 to. 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 & 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 cases 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 invoicing of services, collection of fees and issuing of receipts.

McGill University covers liability and other insurance for all its students enrolled in professional thesis programs. As long as an individual is a registered, full-time student in either the Counselling Psychology or School/Applied Child Psychology program, she/he will have liability insurance with regard to work carried out in the McGill Psychoeducational and Counselling Clinic. Non-thesis students using the Clinic must have active registration in a course related to clinic work in order to have liability insurance. 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 his/her program.

Protecting Personal Privacy

Trainees should be particularly aware of the fact that Clients can obtain personal information about them using the internet. Trainees should be careful about the nature of personal information publicly available from on-line venues (e.g. Facebook). Such information may result in receiving unsolicited electronic communications from Clients. Course Instructors should be consulted about how to address this if it does occur.

Special Situations

In the course of a Trainee's work with a Client, he/she 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 and an *Incident Report* (Appendix K) must be completed and placed in the Client file.

Risk of Suicide

All Trainees working in the Clinic should have training in suicide risk assessment. This section provides guidelines for a suicide risk assessment but does not replace the training required.

All Trainees providing counselling and therapy services will need to routinely screen for suicide risk. 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 (and when required), 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 behaviour?
- 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 behaviour with intent to die.

If after your assessment 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 ER of the MUHC, and in some cases accompanying the Client to the hospital ER.

Emergency services	911
McGill Security	514-398-3000 (3000 from the Clinic phones)
Suicide Action Montreal	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 he/she must also fill out an *Incidence Report* (Appendix K) and contact his/her Course Instructor immediately and review the situation prior to filing a report.

For information on filing a report, refer to:

<http://www.cdpdj.qc.ca/plainte/jeunesse/Pages/default.aspx>

Montreal Youth Protection contact: 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:
 - Behavioural disinhibition and impulsivity;
 - Emotional disturbances (especially paranoia);
 - Cognitive impairment;
 - Attitudes supportive of violence (e.g., being a gang member);
 - Social disruption (loss of status, divorce, unemployment).

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; available at <https://www.ordrepsy.qc.ca/code-de-deontologie1>).

*“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, Trainees should terminate the session immediately and advise Client 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 cab ([Taxi Co-Op](https://www.taxicoop.ca/) 514-725-9885).

The Trainee must fill out an incident report and arrange to meet with his/her Course Instructor.

Referral Resources

Useful numbers/resources in the community are available in the *Directory of Referral Sources in the Greater Montreal Area* in Appendix O.

APPENDICES

The forms in this appendix are for reference purpose only. All Clinic forms are available in separate PDF documents on the web:

<http://www.mcgill.ca/edu-ecp/students/clinicresources#Forms>



Department of Educational and Counselling Psychology
Département de psychopédagogie et de counseling

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Montreal, Quebec, Canada H3A 1Y2

Faculté des sciences de l'éducation
Université McGill
3700 rue McTavish
Montréal (Québec) Canada H3A 1Y2

Tel/Tél : (514) 398-4242
Fax/Télécopieur: (514) 398-6968
<http://www.mcgill.ca/edu-ecp/>

Appendix A1: This document should be presented to the Client or parent/guardian during the initial intake interview prior to the **assessment**. Subsequently, the signature(s) of the appropriate parties should be obtained.

Informed Consent

Client Name: _____

Client Code: _____

Trainee Name: _____

Trainee McGill ID: _____

Supervisor Name: _____

Supervisor OPQ License number: _____

Clinic Description

The McGill Psychoeducational and Counselling Clinic (MPCC) is a teaching and training unit of the Department of Educational and Counselling Psychology. The Clinic offers services to the community, facilitates professional training in Educational and Counselling Psychology, and supports related research. Services are offered to children, adolescents, and adults, by Masters and Doctoral students under the supervision of the faculty in the Department. Every effort is made to provide the highest quality of services and when required, to provide appropriate referrals to other resources.

Fees

We strive to make our services accessible for everyone and as such, our fees are well below standard rates in the community. Fees are set at 600\$ fixed cost for a complete psychoeducational assessment. Fees are paid in two installments of \$300 via Interac e-transfer to ecpclinic.education@mcgill.ca. The first installment is paid at the first testing session and the last installment is paid at the last testing session. If for valid reason these fees add to your financial burden, ask your service provider about the Clinic Fee Reduction Policy.

Cancellation policy

All Clients: If it is necessary to cancel an appointment, Clients are required to provide 24 hours notice. If 24 hours is not provided, the Client will be charged the full session fee per missed session. This cancellation fee is required to be paid promptly at the Client's next visit to the Clinic. *This cancellation policy applies to both counselling and assessment services.*

Assessment Clients: In cases in which assessments are terminated mid-process/prior to completion, due to a request made by the Client, Clients should be charged half of the fee owed (e.g. if paying regular assessment rate of \$600, the Client would owe \$300).

Tardiness

Clients who are late will be charged the full session fee and the appointment will end at the scheduled time.

Client records

All Client files are saved on McGill University systems and kept confidential. Access to records is available only to authorized Trainees, faculty and staff members of the Clinic. Files are deleted seven years after the last Client contact. All reports are written and provided in English.

Audio/video recordings

Audio or video recordings of a session are made for the purpose of training. As part of ongoing supervision, video and audio recordings are periodically reviewed by faculty, or graduate students enrolled in the School and Applied Child Psychology program. Video/audio materials are maintained as part of the Client's Clinic file, and like written reports, cannot be released without the Client's written consent. Audio/video recordings are deleted after supervision or by the end of the second semester (mid/end of April).

Teaching/supervision of clinical services and trainees

Client files may be reviewed in the context of individual or group supervision for the education and training of our students. When client information is shared in the context of group clinical supervision, all efforts are made to protect the identity of the client. The clinical supervisor and other trainees may interact with the client or observe sessions between the client and the trainee named on page 1 for training/learning purposes.

Emergency services

Since all our services are by appointment only, availability of staff varies from day to day. The Clinic is not equipped or staffed to handle emergencies. In the event of an emergency, call your CLSC or go to the emergency room of your local hospital.

Telepsychology

Due to the pandemic landscape, the use of telepsychology has been selected with your verbal agreement obtained during the screening process. By consenting to telepractice services, you agree that all options besides remote assessment has been presented to you (i.e., deferring services to Fall 2021; retracting your request for service, participate in telepractice, etc.). There are certain limitations to this practice that need to be understood and it is important to take certain steps to address these limitations. Thus, before beginning a follow-up in telepsychology, the psychologist will agree with you on the process to be followed.

Confidentiality

All client information is kept strictly confidential. No information will be communicated to a third party without your permission. When records (i.e., reports) are requested by a third party, your written authorization is required before any information can be released.

The psychologist trainee will take any necessary measures to ensure the confidentiality of telepractice meetings. Although every measure is taken to destroy all traces of telepsychological encounters (e.g., erasing browser history; delete videos from Microsoft TEAMS), the type of software used cannot guarantee absolute confidentiality and breaches of confidentiality beyond the psychologist trainee's control. You must also ensure that you take the necessary measures to ensure the confidentiality of your information with regard to the software used on your computer and your computer data management. It is important to choose a place where you will not be disturbed by other people, noise or any other distracting element for the duration of the meeting. It is important to use a computer or electronic device that ensures your privacy when possible (personal & non-public device).

For more information about telepsychology, you can consult the document from the Ordre des psychologues du Québec (OPQ) entitled: Guide de pratique concernant l'exercice de la télépsychologie, which the psychologist can give you on request or which you can find on the OPQ website. E-mail services (e.g., Gmail, Hotmail, Yahoo, etc.) cannot guarantee the confidentiality of your communications. Thus, if you communicate with the psychologist by e-mail, you consent to the fact that the confidentiality of the information transmitted may be compromised. However, you should know that the psychologist will use all possible means within his reach to ensure the protection of the information you transmit.

Please note: Confidentiality does not apply in cases which the Client discloses information that suggests imminent harm to self or another individual (e.g., child abuse/neglect).

Please note: Confidentiality does not apply if the law demands that information from a Client file be disclosed (e.g., in the case of a criminal investigation).

Informed Consent

To be completed by all Clients and Parents/Guardians

A staff member has described and explained the services provided by the McGill Psychoeducational and Counselling Clinic and has provided me with a copy of the consent form. I understand the contents of this document and participate freely in the services that are provided. I am aware that the Clinic has a policy for fee reductions for those Clients who meet the criteria for reduced fees. I understand that I may terminate these services at any time.

Signature of Client or Parent/Guardian: _____

Date: _____

PLEASE PRINT; Last name, First name: _____

Children

To be completed for Clients <14 years of age

I _____ (PLEASE PRINT; Last name, First name of Parent/Guardian) have read and understand the above information and consent to the assessment/treatment of my child, _____ (PLEASE PRINT; Last name, First name of Child.), at the McGill Psychoeducational and Counselling Clinic.

Signature of Parent/Guardian: _____

Date: _____

PLEASE PRINT; Last name, First name: _____

Person obtaining consent (trainee)

Signature of trainee: _____

Date: _____

PLEASE PRINT; Last name, First name: _____



**Department of Educational and Counselling Psychology
Département de psychopédagogie et de counseling**

Faculty of Education
McGill University
3700 McTavish Street, Room 614
Montreal, Quebec, Canada H3A 1Y2

Faculté des sciences de l'éducation
Université McGill
3700 rue McTavish
Montréal (Québec) Canada H3A 1Y2

Appendix A2: This document should be presented to the Client during the initial **counselling** intake interview. Subsequently, the signature(s) of the appropriate parties should be obtained.

Tel/Tél : (514) 398-4242
Fax/Télécopieur: (514) 398-6968
<http://www.mcgill.ca/edu-ecp/>

Informed Consent - Counselling

Client Name: _____

Client Code: _____

Trainee Name: _____

Trainee McGill ID: _____

Supervisor Name: _____

Supervisor OPQ License number: _____

Clinic Description

The McGill Psychoeducational and Counselling Clinic (MPCC) is a teaching and training unit of the Department of Educational and Counselling Psychology. The Clinic offers services to the community, facilitates professional training in Educational and Counselling Psychology, and supports related research. Services are offered to children, adolescents, and adults, by Masters and Doctoral students under the supervision of the faculty in the Department. Every effort is made to provide the highest quality of services and when required, to provide appropriate referrals to other resources.

Fees

We strive to make our services accessible for everyone and as such, our fees are well below standard rates in the community. Fees are set at \$40/hr for counselling and therapy services. If for valid reason these fees add to your financial burden, ask your service provider about the Clinic Fee Reduction Policy. Fees are paid at each session via Interac e-transfer to ecpclinic.education@mcgill.ca.

Cancellation policy

If it is necessary to cancel an appointment, Clients are required to provide 24 hours notice. If 24 hours is not provided, the Client will be charged the full session fee per missed session. This cancellation fee is required to be paid promptly at the Client's next visit to the Clinic. *This cancellation policy applies to both counselling and assessment services.*

Tardiness

Clients who are late will be charged the full session fee and the appointment will end at the scheduled time.

Client records

All Client files are saved on McGill University IT systems and kept confidential. Access to records is available only to authorized trainees, faculty, and staff members of the Clinic. Files are deleted seven years after the last Client contact. All reports are written and provided in English.

Audio/video recordings

Audio or video recordings of a session are made for the purpose of training. As part of ongoing supervision, video and audio recordings are periodically reviewed by faculty, or graduate students enrolled in the Counselling Psychology programs. Video/audio materials are maintained as part of the Client's Clinic file, and like written reports, cannot be released without the Client's written consent. Audio/video recordings are destroyed after supervision or by the end of the second semester (mid/end of April).

Outcome Rating Scale (ORS)

We are very interested in making sure that our clients get the results they are looking for. For this reason, we invite our clients to participate in monitoring their progress. The clinic has adopted a formal procedure for monitoring this with "The Outcome Rating Scale (ORS)." This scale takes about a minute to fill out, which will be conducted at the beginning of each session.

Teaching/supervision of clinical services and Trainees

Client files may be reviewed in the context of individual or group supervision for the education and training of our students. When client information is shared in the context of group clinical supervision, all efforts are made to protect the identity of the client. The clinical supervisor and other trainees may interact with the client or observe sessions between the client and the trainee named on page 1 for training/learning purposes.

Emergency services

Since all our services are by appointment only, availability of staff varies from day to day. The Clinic is not equipped or staffed to handle emergencies. In the event of an emergency, call your CLSC or go to the emergency room of your local hospital.

Telepsychology

Due to the pandemic landscape, the use of telepsychology has been selected with your verbal agreement obtained during the screening process. By consenting to telepractice services, you agree that all options besides telepsychology have been presented to you (i.e., deferring services to Fall 2021; retracting your request for service, participate in telepractice, etc.). There are certain limitations to this practice that need to be understood and it is important to take certain steps to address these limitations. Thus, before beginning a follow-up in telepsychology, the psychologist in training will agree with you on the process to be followed.

Confidentiality

All client information is kept strictly confidential. No information will be communicated to a third party without your permission. When records (i.e., reports) are requested by a third party, your written authorization is required before any information can be released.

The psychologist trainee will take any necessary measures to ensure the confidentiality of telepractice meetings. Although every measure is taken to destroy all traces of telepsychological encounters (e.g., erasing browser history; delete videos from IT systems), the type of software used cannot guarantee absolute confidentiality and breaches of confidentiality beyond the psychologist trainee's control are possible. You must also ensure that you take the necessary measures to ensure the confidentiality of your information with regard to the software used on your computer and your computer data management. It is important to choose a place where you will not be

disturbed by other people, noise or any other distracting element for the duration of the meeting. It is important to use a computer or electronic device that ensures your privacy when possible (personal & non-public device).

For more information about telepsychology, you can consult the document from the Ordre des psychologues du Québec (OPQ) entitled: Guide de pratique concernant l'exercice de la télépsychologie, which the psychologist in training can give you on request or which you can find on the OPQ website. E-mail services (e.g., Gmail, Hotmail, Yahoo, etc.) cannot guarantee the confidentiality of your communications. Thus, if you communicate with the psychologist in training by e-mail, you consent to the fact that the confidentiality of the information transmitted may be compromised. However, you should know that the psychologist in training will use all possible means within his reach to ensure the protection of the information you transmit.

Please note: Confidentiality does not apply in cases in which the client discloses information that suggests imminent harm to self or another individual (e.g., child abuse/neglect).

Please note: Confidentiality does not apply if the law demands that information from a client file be disclosed (e.g., in the case of a criminal investigation).



Department of Educational and Counselling Psychology
Département de psychopédagogie et de counseling

Informed Consent

To be completed by all Clients and Parents/Guardians

A staff member has described and explained the services provided by the McGill Psychoeducational and Counselling Clinic and has provided me with a copy of the consent form. I understand the contents of this document and participate freely in the services that are provided. I am aware that the Clinic has a policy for fee reductions for those Clients who meet the criteria for reduced fees. I understand that I may terminate these services at any time.

Signature of Client or Parent/Guardian: _____ **Date:** _____

PLEASE PRINT; Last name, First name: _____

☐ I have been given a copy of this consent form.

Children

To be completed for Clients <14 years of age

I _____ (PLEASE PRINT; Last name, First name of Parent/Guardian) have read and understand the above information and consent to the assessment/treatment of my child, _____ (PLEASE PRINT; Last name, First name of Child.), at the McGill Psychoeducational and Counselling Clinic.

Signature of Parent/Guardian: _____ **Date:** _____

PLEASE PRINT; Last name, First name: _____

☐ I have been given a copy of this consent form.

Person obtaining consent (trainee)

Signature of trainee: _____ **Date:** _____

PLEASE PRINT; Last name, First name: _____



Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic

Appendix B: This form should be completed in cases when audio/video recording will be used.

Authorization for Audio/Video Recording

Client Name: _____ **Client Code:** _____

Trainee Name: _____ **Trainee McGill ID:** _____

Audio or video recordings of a session are made for the purpose of training. As part of ongoing supervision, video and audio recordings are periodically reviewed by faculty, or graduate students enrolled in the School/Applied Child Psychology or Counselling Psychology programs.

All video/audio files are saved on McGill University IT systems and kept confidential. Video/audio materials are maintained as part of the Client's Clinic file, and like written reports, cannot be released without the Client's written consent. Audio/video recordings are destroyed after supervision or by the end of the second semester (mid/end of April).

I have read and understand the above description of video-taping and audio-taping that may occur during Clinic services. I give my consent for the recording of Clinic sessions.

Signature of Client or Parent/Guardian: _____ **Date:** _____

PLEASE PRINT; Last name, First name: _____



Department of Educational and Counselling Psychology
Psychoeducational and Counselling Clinic

Appendix C: The purpose of this form is to authorize the Trainee to obtain confidential information from third parties (e.g., a teacher at a school, another clinician).

Authorization to Obtain Confidential Information

Client Name: _____ **Client Code:** _____

Trainee Name: _____ **Trainee McGill ID:** _____

I _____ (PLEASE PRINT; Last name, First name of Client or Parent/Guardian) authorize
_____ (PLEASE PRINT; Last name, First name of Trainee) of the McGill Psychoeducational and
Counselling Clinic to obtain information from the following parties:

Name of Individual/Agency: _____

Address: _____

Specific information to be disclosed: _____

Name of child if applicable: _____

☐ In keeping with the Regulation I request that the information not be obtained prior to 15 days. I may withdraw my authorization any time during this 15 day period.

☐ I waive my right to the 15 day delay and request that this information be obtained immediately.

Signature of Client or Parent/Guardian: _____ **Date:** _____

Signature of Course Instructor: _____ **Date:** _____

Trainee Signature: _____ **Date:** _____

*This authorization will expire automatically after 30 days from the date on which it is signed.



Department of Educational and
Psychosocial and Counselling

Appendix D: This form should be used when counseling services will be transferred from one Trainee to another Trainee (i.e., services are needed beyond the Fall and Winter semesters and require a new Trainee to work with the Client). This form authorizes the transfer of the Client file to another Trainee in the Clinic. Subsequent to completing this form, the Trainee should ensure that the Client file is complete, obtain a completed *Course Instructor's Attestation* (Appendix J) and sign in the file to the Clinic Coordinator.

Authorization to Transfer File

Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

I authorize that my file be transferred to a graduate Trainee from the McGill Psychoeducational and Counselling Clinic.

Signature of Client/Guardian: _____ Date: _____

Signature of Course Instructor: _____ Date: _____

Trainee Signature: _____ Date: _____



Department of Educational and Counselling
Psychoeducational and Counselling Clinic

Appendix E: This form authorizes the Trainee to visit the school of a Client. Once this form is completed, the Trainee should contact the school to organize meetings with the appropriate teachers and/or classroom(s). This form should be faxed to the school prior to the visit and/or brought to the school on the day of the visit.

Permission to Visit School

Client Name: _____ **Client Code:** _____

Trainee Name: _____ **Trainee McGill ID:** _____

I _____ (PLEASE PRINT; Last name, First name of Parent/Guardian) authorize
_____ (PLEASE PRINT; Last name, First name of Trainee) of the McGill
Psychoeducational and Counselling Clinic to visit _____ (PLEASE PRINT Full
name of School) in order to observe my child, _____ (PLEASE PRINT; Last name, First
name of Child) and to consult with teachers and/or support staff who are working with my child in the school.

The purpose of this observation will be to: _____

The following restrictions apply: _____

I understand that consent for school observation shall remain effective for 15 business days from the date signed and may be revoked at any time upon prior written notice.

Signature of Client or Parent/Guardian: _____ **Date:** _____

Signature of Course Instructor: _____ **Date:** _____

Trainee Signature: _____ **Date:** _____



Department of Educational and Counselling Psychology
Psychoeducational and Counselling Clinic

Appendix F: The purpose of this form is to authorize the Trainee to release confidential information (e.g., a psycho-educational report) to other agencies, however, it is preferable for the Trainee to advise parents/guardians to copy and distribute the information on their own.

Authorization to Release Confidential Information

Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

I _____ (PLEASE PRINT; Last name, First name of Parent/Guardian) authorize
_____ (PLEASE PRINT; Last name, First name of Trainee) of the McGill
Psychoeducational and Counselling Clinic to release information to the following parties:

Name of Individual/Agency: _____

Address: _____

Specific information to be disclosed: _____

Name of child if applicable: _____

☐ In keeping with the Regulation I request that the information not be sent prior to 15 days. I may withdraw my authorization any time during this 15 day period.

☐ I waive my right to the 15 day delay and request that this information be sent immediately.

Signature of Client or Parent/Guardian: _____ Date: _____

Signature of Course Instructor: _____ Date: _____

Trainee Signature: _____ Date: _____

*This authorization will expire automatically after 30 days from the date on which it is signed.

Appendix G: For Clients who indicate that they cannot pay the established fees, a Fee Reduction or Fee Waiver may be granted if the Client meets a particular set of criteria. Trainees should inform Clients about this policy during the initial Trainee-Client phone call so that the appropriate documentation of their current gross household income before taxes can be brought to the first meeting (i.e., T4 slip, Notice of Assessment from last income tax return, copies last two pay stubs, or a copy of a government registered Record of Employment form). This form should be completed at the Initial Trainee-Client meeting and subsequently submitted to the Clinic Director.

Request for Fee Reduction

Client Name: _____ **Client Code:** _____

Trainee Name: _____ **Trainee McGill ID:** _____

For a complete psychoeducational assessment, a 600\$ fee is charged. For counselling services a 40\$ fee is charged for each session. When for financial reasons these fees are unaffordable, a request may be made for a fee reduction. In order to process the request the following information must be provided by the individual who is requesting the reduction (i.e., the adult Client or the Parent/Guardian of a child Client).

Name: _____

Home Address: _____

Number of adults in the household: _____

Number of children in the household: _____

Gross household income (before taxes): _____

Number of people (including yourself) dependent on this income: _____

Have there been recent changes in your finances you would like to be considered? Please explain.

Signature: _____ Date: _____

One of the following proofs of income must be provided: Notice of Assessment from the most recent income tax return, copies of the most recent two pay stubs, T4 slip, or official Record of Employment form.

Clinic Director Use Only

Client fee is set at _____ for the time period of _____ to _____.

Please note: For clients receiving counselling services, the fee will be reviewed at this second date.

Director's signature: _____ Date: _____



Department of Educational and Co
Psycheducational and Counselling

Appendix H: The inventory of forms/documents should be a snapshot of the information included in the file. It is to be completed before the Client file is reviewed by the Course Instructor and prior to being signed in to the Clinic Coordinator. This form must account for every document (e.g., protocols, reports, letters, notes) that the file contains. Be specific when listing protocols (e.g., BASC-2 Parent Rating Scale - Adolescent). Please ensure that the Client Code is on each document in the file.

Inventory of Client Documents

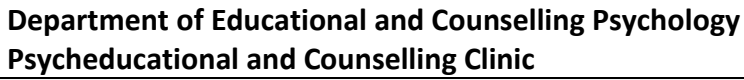
Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

Note: Place forms in the order of 1-20 when submitting your client file(s) for review (i.e., *Test/Assessment Protocols* on the bottom of your file, and *Course Instructor Attestation* on the top of your file.)

- | | |
|--|---|
| 1. <input type="checkbox"/> Course Instructor Attestation | 11. <input type="checkbox"/> Authorization for Audio/Video Recording |
| 2. <input type="checkbox"/> Discontinuation of Services | 12. <input type="checkbox"/> Permission to Visit School |
| 3. <input type="checkbox"/> Termination Report (Counselling) | 13. <input type="checkbox"/> Incident Report |
| 4. <input type="checkbox"/> Psychoeducational Report (Assessment) | 14. <input type="checkbox"/> Authorization to Transfer File |
| 5. <input type="checkbox"/> Request for Fee Reduction | 15. <input type="checkbox"/> Authorization to Release Confidential Information |
| 6. <input type="checkbox"/> Payment History | 16. <input type="checkbox"/> Authorization to Obtain Confidential Information |
| 7. <input type="checkbox"/> Copies of Invoices and Receipts | 17. <input type="checkbox"/> Intake Report (Counselling) |
| 8. <input type="checkbox"/> Case Chronology | 18. <input type="checkbox"/> Informed Consent |
| 9. <input type="checkbox"/> Session Notes | 19. <input type="checkbox"/> Request for Service Form |
| 10. <input type="checkbox"/> Client Video Recording Inventory | 20. <input type="checkbox"/> Test/Assessment Protocol(s) & Other Documents |
- (List below):

<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____
<input type="checkbox"/> _____	<input type="checkbox"/> _____



Client Name: _____ **Client Code:** _____

Trainee Name:_____ **Trainee McGill ID:**_____

[illegible]



Department of Educational and Counselling Psychology
Psychoeducational and Counselling Clinic

Appendix J: This form is to be completed by Course Instructors after the file is complete. The Course Instructor can either complete the attestation in class or they may sign out the file from the Clinic Coordinator.

Course Instructor Attestation

Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

Course Instructor: _____

Course number: _____

I have inspected the above mentioned case file and attest that it is complete and complies with all current policies of the McGill Psychoeducational and Counselling Clinic and adhere to the standards required by our accrediting bodies.

Signature of Trainee: _____ Date: _____

Signature of Course Instructor: _____ Date: _____

Clinic Director Use Only

The contents of the file match those listed on the Inventory of forms/documents adhere to the standards required by our accrediting bodies.

Signature: _____ Date: _____

Notes (all notes should be initialed and dated):



Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic

Appendix K: When this form is required, it should be completed with the Course Instructor.

Incident Report

Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

Date of Incident: _____

Date of Supervision: _____

Type of Incident: ☐ Threat of Imminent Harm to Self
☐ Threat of Imminent Harm to Other
☐ Report of Child Abuse
☐ Other: _____

Summary:

Action Taken and Outcome:

Signature of Course Instructor: _____ Date: _____

Trainee Signature: _____ Date: _____



Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic

Appendix L: This form is for **both** assessment and counselling services. Course Instructors should provide information regarding the content of session notes (e.g., record of what happened in the session, Client improvement or deterioration, any treatment delivered such as relaxation training, anything that is to be followed up on next session).

Session Notes

Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

Date	Description of Session	Trainee Initials	Supervisor Initials



**Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic**

Appendix M: The first page of this form is completed by the Clinic Coordinator when they receive a request for services. The second page of this form should be completed by the Trainee at the time of the initial phone contact.

Request for Service

Name of caller: _____ Date of call: _____
(Last name/First name)

Relationship of caller to potential Client: ☐ Self ☐ Parent/Guardian ☐ Other: _____

Requesting service for:

☐ Adult ☐ Child/Adolescent ☐ Other: _____

Source of referral:

☐ Former Client ☐ Staff/student ☐ Newspaper ad ☐ Other: _____

Type of Service: ☐ Counselling ☐ Assessment

Details of service requested/Reason for referral/Type of Counselling/Assessment Required:

Name of Potential Client: _____
(Last name/First name)

Date of Birth: _____ Age: _____ Gender: M F Other: _____ Language: _____
(YYYY/MM/DD) (Circle One)

Address:

Street: _____ Apt/Unit #: _____ City: _____ Postal Code: _____

Name of School _____ Grade Level (if applicable): _____

Contact information for purposing of scheduling session:

Daytime Phone: _____ Is it OK to leave a message at this number? YES NO

Evening/Home Phone: _____ Is it OK to leave a message at this number? YES NO

Cell Phone: _____ Is it OK to leave a message at this number? YES NO

Email (optional): _____

Please Note: Regardless of whether or not services are accepted, this page must be completed by the Trainee. If the Client declines services, this form should be returned, along with the Client file, to the Clinic Coordinator.

Initial Trainee-Client Contact

(Reverse-side of Request for Service Form; to be completed by Trainee)

Trainee Name: _____
(Last name/First name)

Trainee McGill ID: _____

Course Number and Section: _____

Course Instructor Name: _____

Date of Phone Call: _____

Individual spoken with: ☐ Self (Prospective Client) ☐ Parent/Guardian ☐ Other: _____

Services: ☐ Accepted ☐ Declined

If **declined**, please elaborate of Client reason for the decline:



Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic

Appendix N: This form is for Trainee use ONLY. Trainees should be aware that some of the contact information provided may not be up to date and as a result Trainee's should verify the contact information prior to providing it to Clients.

Directory of Referral Sources in the Greater Montreal Area

<i>CSSM – Central Agency</i> (514) 842 – 5141	<i>Information and Referral Centre of Greater Montreal</i> (514) 527 – 1375	<i>O.C.C.O.Q.(Ordre des Conseillers et Consielleres d’Orientation du Quebec)</i> (514) 737 – 4717	<i>O.P.Q.(Ordre des Psychologues du Quebec)</i> (514) 738 – 1881
<i>O.P.T.S.Q.(Ordre professionnel des travailleurs sociaux du Québec)</i> (514) 731 – 3925			

Local Hospitals and Clinics

<i>Lakeshore General Hospital</i> 160 Stillview Road Pointe Claire, Quebec H9R 2Z2 Physician's Referrals: (514) 630 – 2010	<i>Jewish General Hospital</i> 3755 Cote-Sainte- Catherine Street Montreal, Quebec H3T 1E2 Psychiatry Department : (514) 340 – 8222 (Ext. 8210)	<i>Montreal Children's Hospital</i> 2300 Tupper Avenue Montreal, Quebec H3H 1P3 Children and Adolescent Psychiatry: (514) 412 – 4400 (Ext. 24449)	<i>St. Mary's Hospital Centre</i> 3830 Lacombe Avenue Montreal, Quebec H3T 1M5 Outpatient Department: (514) 345 – 3511
<i>Montreal General Hospital</i> 1547 Pine Avenue West Montreal, Quebec H3G 1B3 Short and Long Term Units: (514) 934 – 1934 CBT services: (514) 485 – 7772	<i>Royal Victoria Hospital</i> 687 Pine Avenue West Montreal, Quebec H3A 1A1 Psychiatry Department: (514) 394 – 1934 (Ext. 34530 / 35519)	<i>Ste. Justine's Hospital</i> 3175 Cote-Sainte- Catherine Street Montreal, Quebec H3T 1C5 Psychiatry Department: (514) 345 – 4695 (Ext. 5704)	<i>Douglas Hospital</i> 6875 Boulevard Lasalle Verdun, Quebec H4H 1R2 Psychotherapy: (514) 761 – 6131 (Ext. 2606) ASD Clinic: Phone: 514-761-6131 ext. 3085 www.douglas.qc.ca/

<i>Allan Memorial Institute</i> 1025 Pine Avenue West Montreal, Quebec H3A 1A1 Intensive Psychotherapy: (514) 394 – 1934 (Ext. 35532 / 34530)	<i>Ometz</i> 5151 Cote-Sainte- Catherine Street, Suite 300 Montreal, Quebec H3W 1M6 (514) 342 – 0000	<i>McGill</i> <i>Psychoeducational</i> <i>and Counselling Clinic</i> 3700 McTavish, 1B Montreal, Quebec H3A 1Y2 (514) 398 – 4641	<i>Women's Centre of</i> <i>Montreal</i> 3585 Saint Urbain Montreal, Quebec H2X 2N6 (514) 842 – 4780
<i>Université de Montréal</i> <i>Clinique Universitaire de</i> <i>Psychologie</i> Pavillon Marie-Victorin, local D-331 90 Vincent d'Indy Avenue Montreal, Quebec H2V 2S9 (514) 343 – 7725	<i>UQAM Centre de</i> <i>Services Psychologiques</i> <i>(French Services)</i> 320 Sainte Catherine East, 4th Floor, local DS-4202 Montreal, Quebec H3C 3P8 (514) 987 – 0253		

Counselling Services Only

<i>CBT Clinic - Queen</i> <i>Elizabeth</i> <i>Medical Complex</i> Suite 261 2100 Marlowe Avenue Montreal, Quebec H4A 3L5 (514) 485 – 7772	<i>Concordia University –</i> Applied Psychology Centre 7141 Sherbrooke West Montreal, Quebec H4B 1R6 (514) 848 – 2424 (Ext. 7550)	<i>Head and Hands</i> 5833 Sherbrooke Street West Montreal, Quebec H4A 1X4 (514) 481 – 0277	<i>Hellenic Community of</i> <i>Montreal</i> 5777 Wilderton Avenue Montreal, Quebec H3S 2V7 (514) 738 – 2421
<i>Argyle Institute of Human</i> <i>Relations</i> 4150 Ste. Catherine St. West, Suite 328, Westmount, Quebec H3Z 2Y5 (514) 931 – 5629	<i>Famille Nouvelle</i> <i>(Spanish Services)</i> 1150 Saint Joseph Street East, Suite 106 Montréal, Quebec H2J 1L4 (514) 277 – 6097		

Assessment Services Only

<i>Fluency Centre</i> 4626 Sainte Catherine Street West, Westmount, Quebec H3Z 1S3 (514) 489 – 4320	<i>Concordia University –</i> Applied Psychology Centre 7141 Sherbrooke West Montreal, Quebec H4B 1R6 (514) 848–2424 (x.7550)		
--	---	--	--



Department of Educational and Counselling Psychology
Psychoeducational and Counselling Clinic

Appendix O: Sample Invoice

INVOICE

INVOICE # CLIENTCODE01

DATE: DATE

BILL TO:

Recipient Name

Email: email

CLIENT:

Recipient Name

DATE	SERVICE	NUMBER OF HOURS	AMOUNT DUE
Date of service	Select one: Intake/Assessment/Counselling/Feedback Session		
SUBTOTAL			
SALES TAX			0.00
TOTAL DUE			

NAME OF SUPERVISING PSYCHOLOGIST	LISENCE NUMBER (OPQ)	SIGNATURE
NAME OF STUDENT TRAINEE	STUDENT NUMBER	SIGNATURE

NOTE TO INSURANCE COMPANIES:

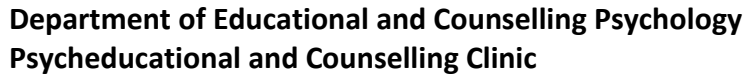
The *McGill Psychoeducational and Counselling Clinic* is a teaching and training unit of the Department of Educational and Counselling Psychology in the Faculty of Education at McGill University. Through its training activities, the clinic provides low cost psychological services to people seeking both counselling and psychoeducational assessments (<http://www.mcgill.ca/edu-ecp/about/clinic>).

PAYMENT INSTRUCTIONS:

Interac e-transfers accepted at ecpclinic.education@mcgill.ca. If a password is required by your institution please use the agreed upon password as discussed with your service provider.

If you have any questions concerning this invoice, contact the Clinic Coordinator at ecpclinic.education@mcgill.ca.

Thank you!



Client Video Recording Inventory

Trainee Name:_____ **Trainee McGill ID:**_____

I, _____, testify that all of the above listed recordings have been deleted.
(Name of Course Instructor)

Page 45 of 47



Department of Educational and Counselling Psychology
Psycheducational and Counselling Clinic

Appendix Q: An entry must be made in the *Payment History Form* that a payment was collected. All information listed in the columns below must be completed. All copies of receipts, cheques and any additional fee related forms must be stapled to the back of the *Payment History Form* in chronological order.

Payment History

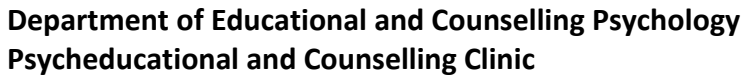
Client Name: _____ Client Code: _____

Trainee Name: _____ Trainee McGill ID: _____

Fee Reduction Granted (Y/N)? _____ New Rate: _____ Effective Date: _____

Session Date	Invoice Number	Date Invoice was Emailed to Client	Receipt Number	Receipt Date	Notes	Trainee Initials

Total Payment Received: _____ Trainee Signature: _____ Date: _____



Discontinuation of Services

Date services commenced:_____ **Date services were discontinued:**_____

Reason for discontinuing services:

Clinic Director's Signature: _____ **Date:** _____