

Consent to Services Child Form

Welcome to the Psychological Service Centre (PSC). This document summarizes some of the important information that you need to know when bringing your child here as a client. Please read this over. If there is anything that you want more information about, your clinician can help you. So that our records are clear that we shared this information with you, we ask that you sign this document after you have reviewed it.

Who we are: The PSC is the primary training clinic for the Clinical Psychology Program at the University of Manitoba. All work is done by graduate student clinicians who are supervised by registered psychologists. These supervisors are ultimately responsible for the work that is done. Students at the PSC are also involved in advanced coursework and psychological research projects necessary to complete their doctorates in clinical psychology. No fees are charged at the PSC and the cost of operating the PSC is funded by the University of Manitoba.

Cancelling appointments: As students are often at the PSC only to see their clients, it is important to call if you can't make an appointment. Graduate students in clinical psychology face a heavy academic program and when clients fail to notify us about a cancellation, it costs the student valuable time waiting. Clients who consistently fail to attend will have services cancelled.

How work is supervised: Video recording of sessions is routine. These recordings are used for giving feedback to the student clinicians about their work and to ensure that all work is competent and professional. These recordings are encrypted and are for internal supervision only. These recordings are also erased after viewing and are not retained in the health record. Sometimes students discuss their cases in group supervision or in their graduate classes. If this is done, the client's identifying information is never presented.

Types of services:

- Clients seen for therapy usually follow this process:
 1. An initial intake. This would usually involve meeting with the child and with the parents/caregivers, both together and separately.
 2. Subsequent therapy sessions are usually 50 minutes in length and are often weekly. You might be given an outcome measure to complete at the beginning of each session as well.
 3. Treatment is usually terminated by four months as the student's practicum will be nearing completion, so typical treatment would involve around 12 to 16 sessions. If your treatment goals are met after fewer meetings, then you may stop sooner.

- Clients seen for assessment usually follow this process:
 1. Initial intake with the parents/caregivers and sometimes the child (some clinicians also send out a history questionnaire before this meeting).
 2. Psychological testing, which typically occurs over several appointments. The length of these appointments will be determined by your child's needs, abilities, and age.
 3. Feedback meeting with parents/caregivers and sometimes the child to discuss the results.
 4. Preparation of the assessment report. If the client was referred by someone else then a copy of this report normally goes to this clinician. You will receive a copy of this report as well.

Measuring change: At the PSC, many cases involve the use of outcome measures, which are short questionnaires administered on a device such as an iPad, smart phone or computer or by paper that are completed just before or just after therapy sessions. Some forms are used with parents; some forms are for minors. It takes a few minutes to complete this brief assessment. This information is used by the clinician to track changes in thoughts, feelings, and behaviour over time. Research has shown that both the client's treatment and the therapist's training are improved by collecting this type of ongoing feedback. The questionnaire used is web-based; however, the information is stored by an ID code and not by client name. Later a summary of this information will be transferred to the secure health record, usually once services are complete. Normally, this information is only reviewed by the clinician and the clinician's supervisor. If the therapist is using such a measure, you are welcome to see the summary of the information yourself. Annual summaries of this outcome data averaged across all clients will be used at the PSC for internal program evaluation purposes. This outcome data might also be used for archival research involving large numbers of clients, but only in approved projects that have had a formal ethics review and only when the identifying information of all clients has been removed.

Length of treatment: As students see clients during defined clinical practicum, our treatment services are shorter-term and usually end after four months, although successful treatment can sometimes take less time. We are not normally able to offer longer-term work, although sometimes treatment cases might be transferred to another student clinician. We are also not able to offer emergency or after-hours services. If you wish to have a list of other options for obtaining services, including crisis services, the receptionist can provide you with some information.

Privacy: The information you or your child provides to the clinician is considered health information and is therefore covered by the *Personal Health Information Act (PHIA)*. Health information at the PSC is private and would only be shared with others with your knowledge and consent. Some health information may be stored as paper (e.g., psychological test results) and some would be stored electronically (e.g., psychotherapy notes). This electronic health record information is kept on a secure server and is not accessible via the internet. The University retains health records of children for 10 years after the person turns 18. Video recordings are not retained in the health record, as mentioned earlier.

There are some exceptions to confidentiality, however, such as when the safety of a child or other vulnerable person is at risk. For example, suspected or unreported child abuse must be reported to Child and Family Services authorities according to Manitoba law. Imminent harm to self or others might also trigger disclosure of health information to the proper authority. Health

records can also be subject to court order. In some cases the child's clinician might require the parent(s) to agree that some information shared by the child remains private and is not shared with the parent(s), unless this information relates to safety. If you have any questions about privacy or the limits of confidentiality you should discuss these with your clinician before services begin or at any time over the course of your meetings.

Potential Risks and Benefits of Psychological Services:

- **Therapy Services:** Psychotherapy is intended to help change emotions, facilitate changes in behaviour, improve relationships, and help the child develop as normally as possible. However, psychotherapy can sometimes be emotionally challenging and the consequences might not be as initially expected. This is normal and is something you can discuss with your child's clinician.
- **Assessment Services:** A psychological assessment is intended to give you or a referring clinician greater insight into the cognitive or personality functioning of your child, or to determine if your child meets criteria for a mental disorder of some type. This clinical opinion would then play an important next step in your overall health care. However, the conclusions drawn from an assessment may not be what you expect or could lead to information that is difficult to learn about your child. In some cases, the assessment report might also comment upon the client's level of effort during testing or if there are any concerns about the client's level of honesty in responding. Finally, once an assessment is done, it cannot be undone, and the resulting assessment report becomes a part of the health record at the PSC whatever the results, so don't proceed with the assessment unless you are comfortable doing so. With this caution in mind, it is also the case that such concerns with from clients have been rare.

Consent Practices:

Our practices and procedures with respect to consent for treatment of minor children are based on the following general understandings:

- Psychologists must obtain adequate informed consent from the client, or an individual or agency with legal authority to consent on the client's behalf, prior to providing psychological services to the client.
- As a general guideline, psychologists can presume that persons who are at least 16 years of age or older have the legal capacity to consent to psychological services. Similarly, psychologists can presume that persons who are under 16 years of age do not have this capacity.
- If the psychologist is satisfied that the minor is mature enough to understand the nature and consequences of the proposed psychological service, consent from the minor's parents will not be sufficient. Consent must also be obtained from the "mature minor".
- If, following the individual assessment of the minor, the psychologist concludes that the child does not have sufficient intelligence and understanding of the proposed treatment to meet the requirements of a "mature minor", the child shall be considered an "immature minor". In those cases, consent must be obtained from a substitute decision maker prior to the psychologist providing psychological services.
- In situations involving "immature minors", consent must be obtained from at least one of the minor's parents. To avoid potential disagreements between parents of the minor, we recommend that the psychologist obtain the consent of both parents prior to providing psychological services to a minor. Some psychologists obtain consent from both parents as routine practice.
- Where the parents of a minor never cohabited after the birth of their child, consent must be obtained from the parent with whom the minor resides.

- Where the parents of a minor are separated, the psychologist must obtain the consent of the parent to whom that authority has been designated under the separation agreement. If no separation agreement exists, both parents have equal rights to consent or withdraw services on behalf of the minor. As above, we suggest that the consent of both parents be obtained.
- Where the parents of a minor are divorced, the psychologist must obtain the consent of the parent to whom that authority has been designated by court order.

Court Involvement:

We are committed to providing psychological services to your child in an emotionally-safe environment. To this end, we require your agreement that our provision of services through the PSC will be strictly limited to providing therapy or evaluations that will benefit your child. Our clinicians do not provide forensic or custody evaluations, nor do our clinicians recommend custody or visitation arrangements. In addition, our clinicians do not participate in court proceedings unless required to do so pursuant to a lawfully-issued subpoena. We make an effort to screen out cases that might involve court.

My signature on this document is my consent for treatment and acknowledgements that I have read, understood, and agree to the conditions described above.

(If you have any questions or concerns feel free to ask the student clinician prior to signing.)

Client Name (Printed): _____

Signature of parent/caregiver (1): _____ Date: _____
(MM/DD/YYYY)

Signature of parent/caregiver (2): _____ Date: _____
(If determined to be necessary) (MM/DD/YYYY)

Client Signature: _____
(For clients under age 18 when developmentally appropriate)

Student Clinician's Name (Printed): _____

Student Clinician's Signature: _____

Supervisor's Name (Printed): _____

Notice Regarding Collection, Use, and Disclosure of Personal Information and Personal Health Information by the University:

Your personal information and personal health information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of documenting your acknowledgement and consent of the conditions associated with services provided by the Psychological Service Centre. Your personal information and personal health information will not be used or disclosed for other purposes, unless permitted by *The Personal Health Information Act (PHIA)* or *The Freedom of Information and Protection of Privacy Act (FIPPA)*. If you have any questions about the collection of your personal information or personal health information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library, University of Manitoba, Winnipeg, MB, R3T 2N2.