

AA

**Psychoeducator's name:** \_\_\_\_\_ **Client's**  
**name:** \_\_\_\_\_

**Nature of the services**

Various interventions may be proposed within the framework of psychoeducation. To determine which interventions best meet your needs, your expectations, your specific situation and your skills, the psychoeducator will perform an initial assessment to better ascertain how you function and the issue at hand. The psychoeducator will also discuss your objectives, expectations and needs with you. Next, the psychoeducator will establish the mandate, the consultation objectives, the frequency of sessions and the terms of the intervention with you. The psychoeducational intervention will end when the objectives are achieved, when the psychoeducator decides she is no longer able to help you, or when you decide to cease the intervention.

**Client's request** *(please specify):*

**Tools or techniques used** *(if relevant):*

**Advantages, disadvantages, and alternatives to the services** *(if relevant):*

## Terms of service provision

The number of sessions will be \_\_\_\_\_ (in the case of a fixed term), or the sessions will take place once a week (or other \_\_\_\_\_), in which case the duration of psychoeducational intervention will be determined based on factors such as the difficulties experienced, the achievement of objectives, and the progress of the intervention. The sessions will last for 60 minutes.

The psychoeducator will prepare a confidential file for each client in accordance with the Code of Ethics and record-keeping regulations of psychoeducators. During each session, information describing the process will be entered in your file and kept in a safe place. The psychoeducator is responsible for managing the conservation of files for a minimum of five years after service provision ends, and for ensuring that only authorized persons can access them.

## Remote practice

Due to the pandemic, or for other reasons, the use of remote practice has been chosen with your agreement. There are some limits to remote practice, and it is important to know their scope and take measures to guard against them. As such, before beginning remote intervention, an agreement will be reached as to the process to follow.

**Chosen software:** \_\_\_\_\_

**Client's user name:** \_\_\_\_\_

**Psychoeducator's user name:** \_\_\_\_\_

**Confidentiality:** The psychoeducator does everything in her power to guarantee the confidentiality of remote sessions. Although every measure is taken to destroy every trace of remote sessions (e.g. by erasing browser history), the type of software used cannot guarantee absolute confidentiality. Breaches of confidentiality beyond the psychoeducator's control may occur. You must also make sure to take the measures necessary to ensure the confidentiality of your information with regard to the software used on your computer and your management of electronic data. It is important to choose a place where you will not be disturbed by people, noises, or other distractions for the duration of the session. It is also important to use a computer or electronic device that protects your privacy as much as possible (personal, non-public device).

Electronic messaging services (e.g. Gmail, Yahoo, Outlook, Hotmail, etc.) cannot guarantee the confidentiality of your communications. If you communicate with the psychoeducator by email, you consent to the fact that the confidentiality of the information transmitted may be compromised. However, the psychoeducator will use all possible methods at her disposal to ensure that the information you send to her is protected.

### **Agreement on fee amounts and payment terms**

Professional fees are required after each session. It is agreed that you will pay these fees by Interac transfer or credit card (or other *agreed-upon term*). A receipt for your payment will be sent to you by email.

If you are late connecting to the session, it will still end at the agreed-upon time, and it is agreed that you will be required to pay the fee amount for a full session. If the psychoeducator does not appear at the planned time, she will propose a time that is convenient for you so that you can benefit from the full length of the session. The psychoeducator will do the same if there are technical problems that lead to you losing your session time.

### **Information on the option to decline the professional services offered or to cease to receive services at any time**

You are free to stop the intervention at any time. However, it is always preferable to speak with the psychoeducator to discuss why you are stopping the service, so that she can better understand your reasons and refer you to appropriate resources, if applicable.

### **Rules on confidentiality and its limits (*according to context*)**

The information you disclose during psychoeducational sessions is protected by professional secrecy and therefore confidential. The Code of Ethics of Psychoeducators states that the psychoeducator, for the purposes of preserving professional secrecy, must not disclose any information regarding her client, except as formally authorized by the client in writing (or verbally in the case of an emergency), or as set out by law, such as in the following examples:

- 1) To prevent an act of violence (suicide, homicide, assault) when the psychoeducator has reason to believe that there is a serious and imminent risk of death or serious injury for an identifiable person or group of persons. In this case, the psychoeducator may reveal the necessary information to the person in question, his or her representative, or individuals who can protect the person(s) in danger.
- 2) When the safety or development of a child is threatened, the psychoeducator must notify the Director of Youth Protection.

**Terms related to the transmission of confidential information** (*according to context*)

Information about you can only be transmitted to a third party with your written consent, except as otherwise provided by law.

**Consent**

I consent to receive the services proposed and discussed. I have familiarized myself with the present document and accept the conditions herein. I have received adequate responses to the answers I have asked (if applicable).

**Signature (client):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature (parent for minor 13 or younger):** \_\_\_\_\_

**Signature (professional):** \_\_\_\_\_ **Date:** \_\_\_\_\_

***Natalie Morrissette, psychoeducator, Ordre des psychoéducateurs et psychoéducatrices du Québec licence number: 14947-01***

[This form is sent by email to the client, who must digitize, photograph or photocopy it and send it back to the psychoeducator by email.](#)