



Michel'e Bertrand Psychotherapy

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Psychotherapy Service Agreement & Informed Consent (current clients)

Thank you for reviewing this service agreement and informed consent form. In April 2015, I joined the College of Registered Psychotherapists of Ontario (CRPO) (registration no. 1435). I abide by their code of ethics and standards of practice. I also continue to maintain my membership as a Canadian Certified Counsellor with the Canadian Counselling and Psychotherapy Association. This document contains information about my professional services and business practices that I have clarified or updated in accordance with the policies of the CRPO. If you have any questions about what you read, I am happy to talk them over with you at any point in our professional relationship.

Psychotherapy Services

The psychotherapy I offer is typically a particular kind of conversation that focuses on helping you strengthen your relationships and emotional life. It works by discussing your experiences of these, and in these conversations I ask you to talk about them as openly as possible and to reflect on whatever feels most important to you. It also works by my own listening carefully to different aspects of your experience that “slip away” or be silenced in everyday life, and finding ways with you to give voice to them; by our noticing patterns in your feelings, thoughts and actions as they occur in relationships; and finding new ways of responding in relationship, among other things. More than offering advice, I would like to help you come to your own well-considered conclusions, hopes and direction for your life.

There are benefits and risks to this and any practice of psychotherapy. Since it often involves discussing challenging aspects of your life, you may sometimes experience uncomfortable feelings such as sadness, guilt, anger, frustration, or loneliness. On the other hand, conversations such as these can bring things like clarity about who you are and prefer to be; the potential to understand and co-exist more deeply with (rather being controlled by) emotions; enhanced sense of aliveness, energy and creativity. While there are no guarantees about what you will experience, these benefits are among those towards which I would like to work with you.

Privacy and Confidentiality

As part of this contract, we each agree not to make recordings (audio or video) of our sessions together.

I will hold all aspects of your involvement in psychotherapy with me in confidence. I will not discuss information you reveal to me with outside parties without your written consent. There are some exceptions to this, some of which we discussed in our initial consultation. These

are where I am legally and/or ethically required to disclose confidential information to an appropriate authority in the following circumstances:

- 1) If I become concerned you may harm yourself or someone else
- 2) if you reveal apparent, suspected, or potential child (under 16) abuse or neglect
- 3) if you report sexual abuse by a Regulated Health Care Professional
- 4) if the court issues a summons to me for records or testimony
- 5) if I am required by law to comply with an investigation or inspection
- 6) if I need to contact a relative, friend or substitute decision maker if you are injured, ill, incapacitated, or otherwise unable to give or withhold consent
- 7) If I am required to provide information about our work and/or the records I keep, for example as part of the CRPO's Quality Assurance program, or to facilitate an investigation or complaints process; or in the case of mandatory reporting of unsafe practices if, for example, you are a regulated health professional and you have sexually abused a client.

Professional Records

The laws and standards of my profession require that I keep progress records. The law entitles you to receive a copy of your records on request. I can prepare a summary of these for you as well. Because of the nature of these records, they can be misinterpreted by and/or be confusing to readers not familiar with specific kinds of terms or concepts. If you wish to see your records, I recommend that we review them together to make sure they are understandable and fully accessible to you.

Meetings and Fees

The duration of our meetings is usually 60-70 minutes for individual sessions; 90-100 minutes for joint sessions (sessions shared with a partner or another person). I schedule meetings when we meet in person, or by email. Once I have offered a time that I can meet, I can hold it for us for 24 hours as you get back to me. After 24 hours, I might have needed to fill that time, and so it might no longer be available to us.

Once an appointment is scheduled, I ask that you pay for it unless you provide me with at least 24-hours advance notice of cancellation by one of the contact methods below. If there were extenuating circumstances that you could not foresee (e.g. snowstorm or other emergency), and you need this cancellation fee waived, please let me know and I would be open to discussing this at the next meeting. In those situations, I will do what I can to accommodate this, but it may not always be in my ability to do so.

My fee is \$150 for joint sessions and \$110 for individual sessions, unless we are currently working with another fee or fee arrangement. I ask that you pay for each session at the time we

hold it, unless we agree otherwise. I accept payment by cash, cheque, or interac e-transfer.

If our work takes time outside of session, such as for extended phone calls (e.g. more than 20 mins), letters/emails, reports, court appearances, or collaborating with others in your circle of care, I am happy to do so at the same rate that we establish for our sessions.

Video Sessions

I offer video sessions via a platform that is accessible to you. As they are part of my psychotherapy services in general, they fall under the same terms with regard to legal limits to confidentiality, fees and cancellation as in-person sessions.

Because they take place over the internet and can be intercepted (seen, recorded, and distributed) by someone else without our knowledge, video sessions are less private than in-person meetings at my office.

Please do not record my voice or image. If you accidentally record my voice or image, please delete it.

If we are disconnected or have a limited connection (for e.g the video call is repeatedly dropped, our images and/or voices freeze, or are otherwise unclear) our conversation may end abruptly. Depending on what we are discussing and how, this can feel uncomfortable or upsetting. I will make every effort to reconnect with you or improve our connection during our session time. If we are not able to do so during the session time, I will email you as soon as I can to re-schedule.

If we cannot re-connect or improve our connection, and I will determine if the connection issue is on my end. If the connection issue is on my end, I will make up the difference in time in future sessions with you or refund you for time we could not meet. If the connection issue is not on my end, I will need to treat the session as a "late cancellation" and ask that you pay the session fee.

If you are unable to find a private location to talk, or are unsure about connectivity and think we might get easily get disconnected, I recommend we re-schedule our session (with 24 hours' notice or more) until you have a location that works better for a video session.

Intials: _____

Contacting me

I am often not immediately available by telephone. When I am unavailable, you can leave me a voicemail at 416.939.0238. You can also reach me at michelebertrand@hushmail.com. I will make every effort to reply to you within 48 hours, except on weekends. If you think you may harm yourself or someone else, please go to the nearest hospital emergency room, or call the Toronto Distress Centres at 416.408.4357 or the Gerstein Crisis Line at 416.929.5200.

Because telephone and email are not secure, I cannot guarantee that our messages will remain safe from interception by a third party. Additionally, I may be required (by law or my College) to

include our email and other electronic communications as part of your record. I recommend that we use email or telephone for scheduling appointments and brief information only.

Your signature below indicates that you have read the information in this document and agree to abide by its terms during our professional relationship.

Signature _____

Name (please print) _____ Date _____