

This document contains important information about our decision (yours and mine) to resume in-person services in light of the COVID-19 public health crisis. These services may take place in my office, or in an outdoor space as mutually agreed. Please read this carefully and let me know if you have any questions. When you sign this document, it will be an official agreement between us.

Decision to Meet Face-to-Face

We have agreed to meet in person for some or all future sessions. Please note that the use of masks is now mandatory. If you do not bring one with you, I will provide one to you. Masks must completely cover your mouth and nose, and may only be removed for emergencies. They are to be worn in the waiting area and in my office at all times. Please do not bring drinks or food to consume during your session. At any time, if I deem it necessary for our mutual safety, I may require that we meet via video or telehealth. If you have concerns about meeting through video or telehealth, we will talk about it first and address any issues. You understand that, if I believe it is necessary, I may determine that we begin/return to video or telehealth for everyone's well-being.

If you decide at any time that you would feel safer beginning, staying with, or returning to, video or telehealth services, I will respect that decision, as long as it is feasible and clinically appropriate. Reimbursement for video and telehealth services, however, is also determined by insurance companies and applicable law, so you will inform yourself about the conditions of your own extended health care benefits.

Risks of Opting for In-Person Services

You understand that by coming to the office, or meeting outdoors, you are assuming the risk of exposure to the coronavirus (or other public health risk). This risk may increase if you travel by public transportation, cab, or ridesharing service.

In addition, outdoor sessions increase the risk that other people will hear our conversation or disrupt our session. If we are meeting outdoors, you accept the risk that our session may be overheard, disrupted by others, or that someone may see and recognize one of us, and may interrupt us during our session. If we are interrupted, we each agree to tell whoever has interrupted us that it is not a good time, and ask them to leave as soon as possible. If there is a disturbance that makes it difficult for us to continue (noise or other nuisance), we may choose to relocate. Your session time will not be extended to accommodate these disruptions.

Your Responsibility to Minimize Your Exposure

To obtain services in person, you agree to take certain precautions which will help keep everyone (you, me, and our families, my colleagues and other clients) safer from exposure, sickness and possible death. If you do not adhere to these safeguards, it may result in our starting / returning to a video or telehealth arrangement. By signing this consent form, you are indicating that you have read the following, understand, and agree to these actions:

You will only keep your in-person appointment if you are symptom free.

I will take your temperature before beginning each appointment. If it is elevated (over 38 degrees celcius), or if you have other symptoms of the coronavirus, you your session will be cancelled at no charge.

You will wait in your car or outside until our appointment time. You will call or text me to know you have arrived. You will wait until I invite you up to the office to enter the building. You will

stop to use hand sanitizer in the waiting area, then proceed to my office. I will show you to your seating place in my office. You will not move seats during your session.

You will adhere to the safe distancing precautions we have set up in the waiting room. For example, you won't move chairs or sit where we have signs asking you not to sit.

You will keep a distance of 6 feet and there will be no physical contact (e.g. no shaking hands) with me or anyone else in my office.

You will try not to touch your face or eyes with your hands. If you do, you will immediately sanitize your hands.

You will take steps between appointments to minimize your exposure to COVID-19. This includes washing your hands frequently, not meeting or socializing in groups of more than 6 people at one time, and maintaining a 2 metre distance from others whenever feasible.

If you have a job that exposes you to other people who are infected, you will immediately let me know.

If your commute or other responsibilities or activities put you in close contact with others (beyond your family), you will let me know.

If a resident of your home tests positive for the infection, you will immediately let me know and we will then begin/resume treatment via video or telehealth.

I may change the above precautions if additional local, provincial or federal orders or guidelines are published. If that happens, we will talk about any necessary changes.

My Commitment to Minimize Exposure

My practice has taken steps to reduce the risk of spreading the coronavirus within the office and we have posted our efforts in the office. Please let me know if you have questions about these efforts.

If You or I Are Sick

You understand that I am committed to keeping you, me, and all of our families safe from the spread of this virus. If you show up for an appointment and I believe that you have a fever or other symptoms, or believe you have been exposed, I will require you to leave the office immediately. We can follow up with services by video or telehealth as appropriate.

If I or my colleagues test positive for the coronavirus, I will notify you so that you can take appropriate precautions.

Your Confidentiality in the Case of Infection

If you have tested positive for the coronavirus, I may be required to notify local health authorities that you have been in the office. If I have to report this, I will only provide the minimum information necessary for their data collection and will not go into any details about the reason(s) for our visits. By signing this form, you are agreeing that I may do so without an additional signed release.

Informed Consent

This agreement supplements the general informed consent/business agreement that we agreed to at the start of our work together.