



CREATIVE WELLNESS SERVICES

NEW CLIENT PACKET

Policies, Services and Agreement for Entering into Services

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Victoria, BC

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www.hearttimes.ca

Please read thoroughly and make a note of any questions you may have.

After you sign this agreement, you will be able to request a copy for your records. A copy of this signed agreement will be stored in a highly confidential, PIPEDA compliant, encrypted, electronic storage system along with the rest of your clinical file.

*Please print off this document, fill it out by hand, and **send before your first session** via the Heart Times website at <https://hearttimes.ca/contact-us>
You can also scan it and send to Shelaine's email at shelaine@hearttimes.ca*

HEART TIMES, CREATIVE WELLNESS SERVICES:

Heart Times, Creative Wellness Services operates in the province of British Columbia from the city of Victoria, providing counselling services through various approaches depending on the needs of the client, and specializes in using expressive arts therapy.

Shelaine Grant, the Founder of Heart Times, holds a Diploma of Social Work from Grant MacEwan University in Edmonton, AB; a bachelor's degree in Social Work from the University of Victoria; a Master of Social Work from the University of British Columbia; a post-degree diploma in Expressive Arts Therapy from the Vancouver School of Healing Arts; and further training in expressive arts therapy at the European Graduate School in Switzerland.

Beyond expressive arts therapy (EXAT), Shelaine is specifically trained in therapies such as Cognitive Behavioural Therapy (CBT), Dialectical Behavioural Therapy (DBT),



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Emotion-Focused-Therapy (EFT), Internal Family Systems (IFS), Acceptance and Commitment Therapy (ACT) and Solution-Focused-Brief-Therapy (SFBT).

Counselling provides an added resource in life – one that enables you to explore thoughts and feelings in a supportive environment, while working toward resolutions on any number of concerns. At Heart Times, we take a creative approach that is informed by the cognitive, emotional, physical, social and spiritual needs and preferences of the individual.

As your counsellor, Shelaine is focused on ensuring that you get what you need from the counselling experience, so please feel free to share with her your suggestions that would make this experience uniquely beneficial for you.

Initial: _____

BENEFITS OF COUNSELING:

We encourage individuals and families to consider the risks and benefits before committing to treatment.

Examples of potential benefits would be reduction in symptoms, and improvement in areas such as emotional self-regulation, social and communication skills, distress and/or frustration tolerance, awareness and insight, coping mechanisms, behavior modification, self-confidence, resiliency and competency, problem solving, concentration, and task sequencing skills, conflict resolution, healing or improvement in family relationships, and integration of difficult/traumatic experiences.

Participants can develop and maintain a sense of balance in life, a sense of contentment, satisfaction, and skills for coping life's challenges. Clarity of sense-of-self develops, as well as experiences of relaxation and relief from mental and physical tension. Research has consistently supported the value of counselling over time.

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RISKS OF COUNSELING:



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Occasional uncomfortable levels of sadness, guilt, anxiety, frustration, loneliness, helplessness or other negative feelings as a part of the process of healing and finding balance. Often symptoms will increase in the short term before improving.

Unpleasant memories may be recalled through the process. Significant others in one's life may have their own objections or negative reactions to a client's positive changes. Families may feel frustrated when their expectations and urgency for change is not readily met. This is normal and can be supported through verbal and non-verbal processing in therapy.

Overall, the benefits greatly outweigh the risks. When individuals and families, and the therapist, are all committed to the process of counseling, with the understanding that therapy is not a "quick fix", transformational results are often observed.

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CONFLICT OF INTEREST POLICY:

Shelaine is employed on a part-time basis with Foundry Victoria as an expressive arts therapist and drop-in counsellor. If you or any members of your family are currently involved with Foundry programs/services, Shelaine asks that you inform her of this right from the beginning of working together.

As well, if you or any members of your family begin working with Foundry Victoria while receiving services from Heart Times, Shelaine asks that you report this new involvement immediately, so we can discuss options for ethical care. This might include, but is not limited to, discussing how to continue working together if appropriate, and/or providing other options/referrals for support.

As part of this policy, Shelaine will contact her employer right away to report the conflict of interest and will get back to you as soon as possible.

Please be aware, Heart Times' hours of business are Mondays and Fridays from 9 am to 8:30 pm, and Tuesday, Wednesday, and Thursday evenings from 7-8:30, as stated on the hearttimes.ca website. As such, Shelaine will not be responding to calls or emails during her hours of employment with Foundry Victoria.

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ELECTRONIC DATA STORAGE PROCEDURE:

In accordance with the Personal Information Protection and Electronic Documents Act (PIPEDA), Heart Times utilizes a three-tier encryption measure for clinical record keeping and billing purposes, as well as a secure server.

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YOUR CLINICAL RECORD:

You should be aware that, pursuant to PIPEDA, information is kept about all Heart Times clients in a collection of professional records. This constitutes your Clinical Record and it is stored in a PIPEDA compliant electronic location. Heart Times observes legal and ethical rules for maintaining your confidentiality. If we work with someone at least nineteen years old, we are required by law to keep this clinical record for seven years past the date of the last session. If someone is under nineteen, we are required to keep the record up until nineteen, and seven years past this.

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CLIENT CONTACT POLICY:

We need to be able to communicate regarding appointments, scheduling, and service-related issues. Therefore, you will need to provide a phone number and email address where you can receive messages related to appointment reminders, scheduling, and billing matters.

In an effort to protect your privacy, messages Heart Times leaves you will not include specific mental health information.

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TELE-HEALTH POLICIES AND YOUR CONFIDENTIALITY:

In this age of electronic communication, we are required to be very clear with our clients as to the nature of the risks and benefits of "Tele-health." Any time you and your therapist communicate in a way that cannot be guaranteed as secure in maintaining



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your confidentiality, there is a risk involved. There are limits to your confidentiality when participating in any form of “Tele-health.”

Tele-health is the use of electronic information and telecommunications technologies to support distance clinical health care. Technologies include videoconferencing, phone counselling, the Internet, and wireless communications. In order to make every effort to keep your private health information secure and confidential, please note the following specific policies:

EMAIL POLICY:

Email cannot be guaranteed a secure means of transmitting/receiving your private health information. You may choose to forego this electronic system and request a hard copy of any letters or support materials from Shelaine. The use of email should be for brief and general communications when possible. Shelaine will use encryption tools when communicating with you via email, which provides additional protection against a breach of confidentiality.

If you email Shelaine questions related to mental health concerns or protected health information, she will not respond via email to the questions you ask, and will follow up with you to book another session to discuss. When requesting information via email, you are acknowledging and accepting the risk and limits of your confidentiality.

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TEXTING POLICY:

Texting will only be used for brief notification regarding scheduling reminders or in the event that Shelaine must cancel your appointment due to emergency. It could happen, that you receive a text and are in a position where others would view this communication, thereby creating potential for breach of confidentiality. By signing this document, you are accepting the risk and limits of your confidentiality by using texting.

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PHONE POLICY:



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Phone communications cannot be guaranteed as a confidential form of communication. Shelaine utilizes a cell phone at Heart Times, and typically clients will use personal cell phones for communicating. Shelaine makes every effort to ensure our phone conversations are held confidential within her ability to do so. When you have a conversation with Shelaine via cell phone you are acknowledging and accepting the risk and limits of your confidentiality.

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VOICEMAIL POLICY:

Per the above phone use policy, Shelaine's voicemail system is password protected and secure to the best of her ability, but it cannot guarantee complete confidentiality, although every measure is taken to protect this. It is advised that you not leave sensitive information on voicemail, rather utilize voicemail to request a return call and/or to schedule an in-person appointment. Voicemail is checked throughout the week unless on vacation or away for any reason. When not possible to return calls within the same business day, calls will be returned within 3 business days maximum.

Shelaine cannot guarantee to respond to crisis calls immediately, therefore community supports will be explored at the start of counselling.

Shelaine is not available when in session with other clients.

When away from the office for vacation or business travel and unable to access voicemail and/or email, Shelaine will notify you in advance and remind you of community resources for support in case of urgent and emergency issues.

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VACATION/TRAVEL POLICY:

When away from the office for vacation or business travel and unable to access voicemail and/or email, Shelaine will notify you in advance and discuss community resources with you for support in case of urgent and emergency issues.

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DUAL RELATIONSHIP AND SOCIAL MEDIA POLICY:

Professionally, Shelaine has specific standards and a code of ethics she upholds regarding conduct both inside, and outside of, her practice as a social worker and expressive arts counsellor. It is against her professional code of ethics to engage in a dual relationship, such as a friendship, with clients and/or their families.

In line with professional ethics, requests for friendship on personal social media platforms will not be accepted, as this is likely to put your confidentiality at risk and blur therapeutic boundaries.

You may choose to follow Shelaine's business social media pages if you like. There is no expectation that you, as a client, will want to follow any of these platforms and your participation in social media posts is at your discretion. Several followers of these platforms are not former or current clients and Shelaine will never identify you or your child as such on social media. If you happen to follow any of the Shelaine's social media platforms, it is requested that you please not post any comments identifying yourself or your child as a therapy client. If you do, and this is identified, your post will be removed in order to protect confidentiality and privacy.

You may find Shelaine and/or Heart Times, Creative Wellness Services on search engines or on sites that list local therapists and/or businesses. Some sites include forums that allow users to rate their providers and/or add reviews. If you find Shelaine listed on any of these sites, please know that this is not a request from Shelaine for a rating or review from you as a client. If you choose to complete a rating or review, protecting your privacy and confidentiality prevents Shelaine from responding to them. As these sites do not inform Shelaine when reviews or comments are added, she will rarely ever see them. If you do choose to post something, Shelaine encourages you to protect your identity to prevent being associated with your other social networks, online groups, accounts, or emails.

Initial: _____

PUBLIC/SOCIAL INTERACTION POLICY:

If you meet in a public setting, in order to protect the confidentiality of our therapeutic relationship, it is Shelaine's policy not to approach you or initiate contact with you in order to maintain healthy and clear boundaries. If you say "hello" to Shelaine, she will



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smile and return this greeting. Often times, children will become excited and want to talk to Shelaine when they see her in settings outside of therapy. This is understandable and normal, and Shelaine is comfortable with following their lead and matching the tone of their greeting.

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SUPERVISION AND PEER CONSULTATION:

As a professional counsellor, occasionally there is the need to consult with a professional peer or supervisor on the services provided in order to ensure you are receiving the best services possible. This may include details of your case and in this age of electronic technology it may mean that this information is shared via HIPAA compliant-video conversations. All of these professionals are bound by the same legal and ethical rules of confidentiality.

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WEATHER POLICY:

Shelaine will follow the Greater Victoria School District policy regarding weather related delays, early dismissals, and cancellations. If school is cancelled, released early, or delayed due to weather conditions, Heart Times is typically closed at those times and you will not have your scheduled *in-person appointment*. *Please note this does not affect online sessions*. In response to these closures, you will be contacted personally, and Shelaine will do her best to reschedule those appointments with you when possible.

Initial: _____

SICK POLICY:

In respect to in-person sessions, the following applies:

Please do not come to a session if you or your child has a fever.

If you or your child is vomiting or has diarrhea, please do not attend the session.



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Symptoms of colds and/or cough that warrant keeping you, your child, or anyone accompanying your child to therapy, at home include, but are not limited to:

- Green or yellow nasal drainage
- Persistent, hacking cough
- A cough that is producing green or yellow phlegm
- May present with or without fever

If your child is unable to participate in their daily routines at home, or to go to school, they are probably too sick to be at therapy.

If you or your child, or anyone who will have to accompany your child to therapy, is experiencing a rash that is unusual, uncomfortable, or presents with other symptoms of illness, please take them to their pediatrician or GP to be assessed prior to returning to therapy.

Shelaine takes her responsibility for everyone's health and safety seriously and you will be sent home without being seen should your child, or those who have to accompany your child, show up ill, or with symptoms that prove too severe, to allow for reasonable participation in counselling.

Clients must remain symptom free for 24 hours after vomiting/diarrhea has stopped before returning to therapy.

Please note, in regards to online counselling, we may proceed with a counselling session if you have a minor illness like a cold, for example. If you are unable to attend an online session due to a more severe illness, please give 24 hours notice, to avoid being charged for the session.

Initial: _____

EMERGENCY & CRISIS SUPPORT:

Heart Times is not an emergency services agency. Shelaine does not provide emergency services. If you have a life-threatening emergency, you should call 911 or go to the nearest hospital where you live. Only contact Shelaine in an emergency after you have already obtained emergency assistance from 911 or your choice of medical support.



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Heart Times operates out of Victoria, BC; therefore, the following resources are for clients who reside in the Victoria area or on Vancouver Island. If you live in a different region of BC, Shelaine will go over other resources with you at the start of counselling.

If you are in crisis and need to speak with someone, please call the Vancouver Island Crisis Line at 1-888-494-3888 or www.vicrisis.ca, where you may also access the Integrated Mobile Crisis Response Team if needed.

If you are a child, teen, or young adult, you may call the Children's Help Line at 310-1234 or at www.kidshelpphone.ca/ or 1-888-668-6810 from anywhere in Canada.

If you are an adult, you can also get free, confidential drop-in counselling sessions through Wellness Together Canada by calling 1-866-585-0445 or go online to www.wellnesstogether.ca

Additional Mental Health Resources:

Anxiety Canada: www.anxietycanada.com

BC Mental Health & Substance Use Services: www.bcmhsus.ca

Canadian ADHD Resource Alliance: www.caddra.ca

Collaborative Mental Health Care: www.shared-care.ca/toolkits-intro

ERASE Bullying: www.erasebullying.ca/

Kelty Mental Health Resource Centre: www.keltymentalhealth.ca

Need2: Suicide Prevention, Education, and Support: <https://need2.ca>

Foundry Victoria (ages 12-24): <https://foundrybc.ca/get-support/>

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TERMINATING SERVICES:

If Shelaine determines she is unable to be of professional assistance to clients, she will speak with you and work towards discontinuing the counseling relationship. Shelaine will terminate a counseling relationship when it becomes reasonably apparent that the client no longer needs assistance, is not likely to benefit, or may potentially be harmed by continued counseling. Shelaine may also terminate counseling after multiple late cancellations or no-shows for sessions, when in jeopardy of harm by the client or another person with whom the client has a relationship, or when clients do not pay fees as agreed upon.



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In the event one of these scenarios occurs, Shelaine will provide appropriate referral resources and suggest alternatives. If clients decline the suggested referrals, Shelaine will follow through with discontinuing the relationship.

Initial: _____

Appointments and Fees:

Heart Times offers a *free, 30-minute consult* to understand what you are looking for and assess how we might be able to support you.

Fees are \$130.00 for each 50-minute session for adults.

For minors under 19 attending school, post-secondary/trades students, and seniors, the fee is \$110 per 50-minute session.

For those in the Langford area, in-person sessions are available, but limited, and must be booked between 9 am and 5 pm on Monday or Friday in advance. Due to having to book a private office on a “need-to” basis at the center, the fee for in-person sessions is \$150/50 minute session. The room is only available for one hour, so please be on time to avoid a shortened session.

For Employment Assistance Programs (EAP) such as Walmsley, First Nations Health Authority (FNHA), ICBC, and the Crime Victim’s Assistance Program (CVAP), the fee is paid for through these benefits. *Please note, you will see the payment for each of these contracts/programs in the booking, however it is taken care of by the corresponding program and there is no need for you to pay it.*

However, if you do not show up for a session under these contracts/programs or cancel without giving 24-hours-notice, you will be billed directly for the cost of the session, which is due within 24 hours.

Please be aware that CVAP *will cover up to 3 sessions* that are cancelled late or a no show, however it goes toward the number of sessions you have, so bear this in mind.

Due to the intake paperwork that needs to be reviewed initially, as well as time to create an appropriate and effective treatment plan at the beginning of counselling, *please note that the initial session for adults is \$150.00 and \$130.00 for students/seniors.*

Telephone calls that are primarily therapeutic in nature and extend beyond ten minutes will be *pro-rated and billed at the usual rate.*



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With prior consent from the client, parents/caregivers can book a 30-minute session with Heart Times' counsellors for \$60 to review pertinent skills that are being learned in sessions, receive possible recommendations, and/or ask questions that are coming up.

Payment is required before the start of the session.

Receipts will be provided once payment has been received.

If you do not pay for a session, you will not be able to be seen again until you provide payment for that session.

Invoices will be sent out if payment is not received before the session.

By signing the below, you agree to pay the above stated fees by e-transfer to shelaine@hearttimes.ca at the start of the session (preferred), or through PayPal or Square via the website <https://hearttimes.ca/appointments> at the point of booking a session.

By signing below, you understand the session time booked is reserved for you and agree that with less than 24 hours' notice, *you are responsible for the full fee for the missed, changed, or cancelled appointment. As stated above, this is also for those who are with EAP/Walmsley, FNHA, and ICBC: you will be required to front the full cost yourself.*

Initial: _____

Confidentiality:

I will not release or request information about you or your child without your written consent, except in the situations listed below:

- If I suspect or know of abuse/neglect of a child, dependent adult, or elder.
- If I suspect or know of serious harm to self or others.

Measures that may be taken include but are not limited to: calling child protection, local law enforcement, family members, and/or contacting the person(s) who may be in danger due to the threat made against them.

- If a judge subpoenas your clinical record. In such a case, Shelaine will consult with the BC College of Social Workers and its standards. Shelaine would only release what is necessary by law.



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- When sharing information with a third-party support agent for purposes of coordinating care or facilitating service referrals. An Authorization to Release Information form will be completed before *any* contact is made with anyone.
- When seeking professional consultation/supervision to improve the quality of services provided, details of a treatment plan may be discussed. Identifying information about you and/or your child will not be disclosed.
- Electronic communication and Tele-health include limitations of your confidentiality. Although all due process is in place to be secure (i.e., encryption), email, cell phone, and video communications cannot be 100% guaranteed to be confidential, as these means of electronic communication are considered non-secure.
- In the case of death or incapacitation, all clients will be contacted, and a designated professional who will ensure confidentiality will access records.
- In the case we need to collect unpaid payments, a collection agency may be utilized.

Initial: _____

Consent for Counselling:

Treatment may be more effective with the involvement of a parent/caregiver, however, under BC Law, children have the right to consent to their own treatment and to confidentiality to their own treatment. This age is not specified by law and typically depends on the maturity of the child.

You have the right to ethical treatment without discrimination regarding race, ethnicity, gender identity, sexual orientation, religion, disability status, age, or any other protected category.

You have the right to decide not to receive services with Shelaine. If you wish, Shelaine will provide you with names of other qualified professionals.

You have the right to terminate therapeutic services with Shelaine at any time without any legal or financial obligations other than those already accrued. Shelaine asks that you discuss your decision with her in session before terminating or at least contact her by phone letting her know you are terminating services.



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I, the undersigned, do hereby voluntarily give consent for **Shelaine Grant** to provide confidential counselling services under the conditions described within this document. The limits of confidentiality have been explained to me and I acknowledge that I understand. I also understand that I may change the status of my voluntary informed consent at any time by giving either written or verbal notification.

Adult Client (19+) Name: _____

Adult Client Signature: _____ Date: _____

IF APPLICABLE:

Child/Youth's Name: _____ DOB: _____

Child/Youth's Signature: _____ Date: _____

Legal Guardian's Name: _____

Legal Guardian's Signature: _____ Date: _____

Legal Guardian's Name: _____

Legal Guardian's Signature: _____ Date: _____

Shelaine Grant, MSW, BSW, RSW

Date