

## **STEP 1: Privacy and Confidentiality**

### *Privacy*

Personal Counselling Services collects information for the purpose of providing counselling services to our students. Personal Counselling Services follows legislated privacy obligations in accordance with the Personal Health Information Protection Act (PHIPA) and when applicable, the Freedom of Information and Protection of Privacy Act (FIPPA), such as when assisting in an accommodation process.

Our professional staff (regulated health professionals, office assistants, and management) are committed to collecting, using, and disclosing personal health information responsibly and only to the extent necessary for the services we provide.

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### *Record Collection, Use and Disclosure*

When you register with Personal Counselling Services, a confidential digital file will be created. This file will contain information related to your intake, appointments, points of contacts with our office, as well as personal health information collected or created as part of the delivery of our services. The material and information that you share will be held in strictest confidence and no one outside Personal Counselling Services will have access to your file without your consent.

Personal Counselling Services collects, uses and discloses only as much personal health information as is needed to achieve the following purposes:

1. to provide assessment, counselling, treatment, referral and/or consultation services as requested by individuals
2. to conduct quality improvement and risk-management

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### *Limits of Confidentiality*

Personal Counselling Services relies on a student's express consent to release information, but there are some exceptional situations where Personal Counselling Services are required to disclose your information without your consent. The exceptions include:

1. If you intend to harm yourself
2. If you intend to harm another person
3. If you or your counsellor has a strong reason to think that a Seneca College community member may be at risk of harm based on information that you provided in your session
4. If there is a reasonable suspicion that a child (any individual up to their 18th birthday) is at risk of emotional and/or physical neglect or emotional, physical and/or sexual abuse. We are required by law to report this to the Children's Aid Society immediately
5. If an elderly person in a Long-Term Care Home or Retirement home is at risk of emotional or any form of maltreatment.
6. If your counselling record is subpoenaed by law
7. If you have a complaint about a regulated health professional (e.g., doctor, nurse, psychologist, chiropractor, or massage therapist, etc.) with respect to their inappropriate sexual behavior towards you, and you provide us with that individual's name, we are required to report this complaint to their regulatory body

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## **STEP 2: Consent to Participate in Personal Counselling**

1. I consent to participate in Personal Counselling Services.
2. I understand that Seneca College's Personal Counsellors use short-term goal oriented and strength-based approaches to support academic participation and this service is not designed as a primary support for on-going, health related issues.
3. Psychotherapy/counselling is a collaborative effort between you and your counsellor. Your active participation in the treatment process is a crucial element to ensure positive outcomes.
4. I understand that there are many benefits but, seeing a Personal Counsellor can sometimes bring on feelings such as sadness, guilt, and anger, and that my participation is completely voluntary, and can stop at any time.

5. Counselling can often lead to better interpersonal relationships, improved self-esteem, enhanced problem-solving skills, solutions to specific problems and reduction in your feelings of distress. However, there are no guarantees of what you will experience.

6. I understand that for the purpose of receiving Personal Counselling my file will be accessed as required by the employees within Personal Counselling Services, and as permitted under PHIPA and include:

- o Personal Counsellors
- o Office Assistants
- o Senior Manager and/or Director of Personal Counselling Services
- o Student Support Intervention Services

7. I understand that this consent is valid from the date that it was reviewed with me and remains valid during my term of study at Seneca College unless my consent is revoked.

8. I understand that I can withdraw my consent for the collection, use or disclose of my personal health information (subject to the limitations of confidentiality described above).

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### **STEP 3: Notice About Virtual Services**

We do our best to make sure that any information you give to us during virtual appointments is protected and secure, but no video or audio tools are ever completely secure. There is an increased security risk that your information may be intercepted or disclosed to third parties when using video and audio communications tools; however, using a private computer/device and a secure internet connection reduces this risk. Virtual services may also contribute to the inability to see communication in context, including non-verbal communication, and may lead to misinterpretation of thoughts/feelings of a service provider or student. In addition, there is a risk that a service disruption may occur due to technical issues.

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### **STEP 4: Agreement (Discussion to be held during initial appointment)**

You will be given the chance to discuss the information on this form and ask any questions you may have. Your counsellor will then ask for your consent to participate in Personal

Counselling Services and to the collection, use and disclosure of your personal health information as described above.