



Tele-Counselling Checklist

Semester

Year

Practicum Student Name:

Acadia Student #:

Practicum Period:

September 1 to December 31 (Fall Practicum)

January 1 to April 30 (Winter Practicum)

Practicum Site:

Site Supervisor Name:

- **In addition to the expectations outlined in the Practicum Agreement, additional conditions must be met in the provision of tele-counselling services (i.e., online/virtual counselling or telephone counselling) during practicum.**
- **This form needs to be completed by students and supervisors when interns will be providing tele-counselling services by the end of the first week of practicum.**
- **Please initial to indicate you are willing and able to meet these conditions and send with the Practicum Agreement.**

	Student Acknowledgement	Supervisor Acknowledgement
1. The most secure online and telephone communication technology will be used to protect confidentiality and client privacy. Please indicate the platform to be used for tele-counselling work:	N/A	
2. Client consent to receive tele-counselling will be obtained and clients will be informed that, while every effort is made to maximize its security for privacy protection, online communication security cannot be guaranteed.		
3. Client consent will be obtained before recording of tele-counselling sessions for supervision purposes (when applicable). Where possible, supervision of tele-counselling work will be live, minimizing the need to record tele-counselling sessions.		
4. Client consent will be obtained with respect to the conditions under which the breach of confidentiality might take place on ethical grounds (e.g., imminent threat of harming self or others).		
5. Client's exact location, phone number, and emergency contact will be confirmed at the beginning of each tele-counselling session.		

6. Supervisors will be informed of times and dates of tele-counselling sessions. When possible, supervisors will also be provided with links for tele-counselling video sessions ahead of time so they can offer immediate assistance for their intern upon request in urgent situations.		
7. Supervision meetings will be held with supervisees in person when possible. When providing e-supervision, appropriate means of communication to protect client privacy and confidentiality will be utilized.	N/A	
8. The supervisor will monitor practicum intake interviews and new clients will be screened for suitability for tele-counselling with an intern.	N/A	
9. The supervisor agrees to offer real-time observation and/or participate as co-counsellor in tele-counselling sessions when appropriate, with client consent.	N/A	
10. The student will only provide tele-counselling services to clients who are within the jurisdiction that the supervisor is regulated to provide supervision in at the time of the counselling session.		
11. The student and supervisor agree to have a secure method of confidential record keeping and personal information.		
12. Student and supervisor agree to ensure trainees' privacy with respect to personal information (e.g., phone numbers, email addresses, online IDs) by separating trainees' private contact information from the contact information to be shared with clients.		

Signature of **Practicum Student**

Signature of **Practicum Site Supervisor**

Please complete and sign the Tele-Counselling Checklist and forward with the Practicum Agreement as an attachment to the Practicum Faculty Supervisor.