



Dr. Shari Couture, Ph.D., R. Psych.
Moving Forward Together

Informed Consent

I am pleased to welcome you and look forward to working with you. This form provides key information to clarify the terms of our involvement in counselling.

Confidentiality

The information that you or your family shares with me will not be revealed to any person or agency without your written permission. Your information will be kept on file in a secure and private location. You may review the contents of your file upon request. There are certain situations which I may disclose personal information in accordance with ethical and legal requirements and standard business practices.

1. If I have reason to believe that you are in danger to yourself or others I have a duty to protect the safety of yourself and others. This means I may need to disclose confidential information to the appropriate authorities who can intervene on behalf of the person(s) at risk.
2. If your psychological file is subpoenaed to court the information must be revealed.
3. Information indicated child abuse or neglect must be reported to Child Welfare authorities.
4. Parents or legal guardians of a minor have the right of access to information about their dependent during counselling. There are exceptions to this when all parties agree ahead of time to the confidentiality of information disclosed. This will be discussed on a case-by-case basis where applicable.
5. My professional activities are regulated by the College of Alberta Psychologists who may inspect records and interview staff as part of their regulatory activities in the public interest. External regulators have their own strict privacy obligations. Also, like all organizations, various government agencies (e.g. Canada Customs and Revenue Agency, Information and Privacy Commissioner, Human Rights Commission, etc.) have the authority to review files and interview staff as a part of their mandates. In these circumstances, I may consult with professionals (e.g. lawyers) who will investigate the matter and report back to myself.
6. If you consent to release the information. In these cases, information will be shared on a minimal, need to know basis.



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Email or Texting Privacy

Email or texting can be very quick and convenient. Many clients use it to communicate with their therapists. However, I cannot guarantee the confidentiality of email correspondence. If this is a concern for you please do not send me an email or text. I will only use email or text to communicate with you as you authorize it or request it. In addition, clients should be aware that I typically will not respond to texts or emails outside of business hours.

Sessions on Line

Although on-line sessions can be convenient, easier on the environment and very effective there are some limitations that we need to consider.

- **Therapeutic Limitations and Alternatives to On-Line Counselling**

Please be aware that there is the potential for misunderstandings in conversation when visual cues are absent and/or limited in communications during on-line or telephone communications/sessions. There will always be a strong need to seek clarification on the part of all parties when questions of misinterpretations surface. Please bring up any concerns you may have in regard to this so that we can work through them together.

I will need to routinely review the appropriateness of service delivery to determine if on-line sessions remain in your best interest. If we have agreed that in-person sessions would be more effective, we will move to this type of session when possible. If this is not possible, we will review the options for referrals to different resources if needed.

- **Technology Limitations**

Please be aware that technology-related complications (e.g., time delays, equipment failure, and poor internet speeds) may result when engaging in on-line counselling. We will do our best to work together and find ways to overcome these difficulties. If on-line session format is not working for technical reasons, we will switch to a telephone line conversation.

Although there are many secure and encrypted forums to accomplish on-line sessions, I cannot guarantee all information transmitted via the internet is secure.

Because of the nature of on-line sessions there may be increased effort to protect client information (e.g., client verification). I may use a password or code or ask to see identification to ensure I am speaking to the person I intended to speak to.



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- **Confidentiality Limitations**

With the use of technology there are some limitations and risks. There is a risk of possible hackers, internet participation being discovered by others, or risk of public discovery. Although we will make our best efforts to avoid this please be aware that there is always a risk when we work on-line.

- **Emergencies**

If we are meeting on-line please be aware that we may need to access emergency resources in the event that on-line communication is not sufficient to keep you safe. We will discuss your own emergency contacts and if, needed, local medical professionals or emergency services.

Payment of Services

The fee is \$180.00 for each 50 minute session. Payment for service is required at the time of each appointment. At this time e-transfers are accepted. If you have extended health benefits, please submit your receipt for reimbursement. Most insurance plans cover on-line sessions with registered psychologists. In special circumstances a sliding scale or pro-bono sessions may be an option.

Cancellation Policy

The appointment time you have booked is reserved exclusively for your use. If you find you are unable to keep an appointment please advise me as soon as possible. Cancellation or rescheduling of an appointment requires twenty four hours advance notification to avoid being charged the missed appointment fee of \$35.00.

Emergency Assistance

If your life or safety is in danger please phone 911 or go to the nearest emergency room. For further emergencies a useful resource is the Calgary Distress Centre (24 hrs) at (403)266-1605. Non-urgent concerns should be reserved for a scheduled appointment.



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Complaints or Questions

It is important to me that you feel that you are benefiting from our work together. Please let me know if you have concerns or questions at any point in counselling. I will do my best to resolve your concerns and answer your questions. However, you may also voice concerns or complaints to the regulatory body based here in Alberta.

Your Signature

Your signature below confirms that the above information has been read by you or to you and that you accept these terms for yourself and/or your child.

Print Name

Signature

Date

Print Name

Signature

Date



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Liability Agreement, Release and Waiver

_____ (Client's name) would like to participate in Shari Couture's animal assisted and equine facilitated counselling program. In any activity involving horses, there is always some inherent risk of injury, property damage, and even death. By signing this liability agreement, release and waiver I will be assuming all liability for injury or damage to myself, my child (ren) and/or my property. I acknowledge the risks and potential for risk of horseback riding and being around and interacting with horses and with other animals. However, I feel that the possible benefits to myself/ my child / my ward are greater than the risks assumed. I hereby, intending to be legally bound, for myself, my heirs and assigns, executors or administrators, waive and release forever all claims against Shari Couture and any staff or contracted counsellors of these said persons for any and all injuries and/or losses I/ my son/ my daughter/ my ward sustain while participating in any counselling, horsemanship, riding, educational or related activities with Shari Couture and/ or her delegates. This extends to claims against the owner of the property Ellwood and Amy Sawby.

By attending activities at our facility I agree that I understand the risks of horseback riding and being around and interacting with horses and with other animals and by signing this liability agreement, release and waiver I agree to indemnify and hold harmless Shari Couture and her counsellors, instructors, staff, property owners, volunteers, their heirs, successors, administrators, assigns or employees, individually and collectively.

The Client, Participant, and/or the parent/guardians of the minor children, understand the risks of contraction of COVID-19 and/or any other illness, infectious disease or otherwise transmittable diseases. By attending activities within this therapeutic context I confirm that I understand the risks associated with contraction to COVID-19 or other transmittable diseases and by signing this liability agreement, release and waiver I agree to indemnify and hold harmless Shari Couture and her counsellors, instructors, staff, volunteers, property owners, their heirs, successors, administrators, assigns or employees, individually and collectively. I confirm I have read, understood and agree to follow the COVID 19 protocol as detailed later in this document.

Client Signature (if age 12 or older)

_____ Date _____

Signature of parent/ guardian if client is under 18

_____ Date _____



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Authorization for Emergency Medical Treatment

With regards to: _____ (Client's name)

In the event emergency medical aid/ treatment is required due to illness or injury during the process of receiving service, or while being on the property of Amy and Ellwood Sawby, I authorize Shari Couture or their delegate to:

1. Secure and retain medical treatment and transportation if needed
2. Release records upon request to the authorized individuals or agency involved in the medical emergency treatment.

The authorization includes x-ray, surgery, hospitalization, medication, and any treatment procedure deemed 'life saving' by the physician. This provision will only be invoked if the person(s) listed in our documents as the emergency contact is unable to be reached.

I authorize Shari Couture/ her delegate to administer hand sanitizer, antihistamine, acetaminophen, sunscreen and fly repellent as requested and deemed necessary.

Client Signature (if age 12 or older)

_____ Date _____

Signature of parent/ guardian if client is under 18

_____ Date _____



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Practical and Safety Protocol for Sessions

The sessions take place at a farm, in part outdoors, with horses and other animals, creating several safety and practical considerations:

1. Dress code: please dress in clothes which you don't mind getting dirty, and dress for the weather. Wear long pants (no shorts or skirts). Sun screen recommended for summer sessions. Warm jackets, gloves and hats recommended for spring/ fall/ winter sessions. Footwear: No sandals, open toes/ heels or high heels. Ideal footwear would be boots with a low heel. Avoid jewelry or clothing which may interfere with horse related activities, e.g. large earrings, bracelets, scarves or necklaces.
2. Helmets are mandatory for all horse interactions for clients under 18 and for all clients who get on a horse. If participants ride, the helmet needs to be an approved riding helmet (can be provided by Healing Hooves); for groundwork, a bike or hockey helmet would be adequate.
3. Safety around the horses will be discussed and explored during sessions. All participants are required to follow the safety rules and directions of facilitators and staff while at Healing Hooves. This includes being respectful to the horses, other animals, staff and other participants.
4. Smoking: No smoking at any time (fire risk) anywhere on the premises. Please note this rule applies to the parent/other caregiver who brings a child to their session.
5. Cell phones and other electronic devices need to be left in your vehicle/ at home. We are not responsible for any phones or other technology brought onto the property.
6. Medical needs or conditions: Please inform us in writing of any allergies, medications (including side effects), and any medical needs or conditions which might have any impact on your/ your child's participation in sessions. Consent for medical treatment form, and Consent and liability forms, need to be completed and signed.
7. Please read our payment and cancellation policies carefully and sign to indicate your agreement.
8. If you arrive early for a session please be aware that we may be busy working with another client in the office, arena or horse pasture. To honour their privacy please wait in your vehicle until we come to greet you. If we are able to start your session early please note that we will also finish the session early, so that you receive the same session length. If you arrive late for your session, we will need to finish at the regular time and bill for the full session time booked. Remember we may have another client booked after you!
9. Please note (and discuss with your child) that while we hope to offer every participant the opportunity to get on a horse during sessions this is not primarily a riding program. Most of the horse interactions will be groundwork i.e. non riding activities and interactions with horses.

I have read, understood and agree to comply with the considerations and requirements detailed above:

Date_____

Consent signature_____

Client (over 18), parent or legal guardian



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COVID 19 Detailed Protocols for Individual Clients – updated October 6, 2020

While we are excited to start to increase EFW activities again, we must continue to do our part to minimize the risk of infection from COVID-19 or any other contagious illness/disease. Here are our updated guidelines.

These guidelines/protocols are a temporary change from our regular rules. We reserve the right to change these guidelines as needed, or as directed by the medical officer of health. Please review the following protocols with your child and family as applicable, prior to attending any scheduled sessions with Shari Couture.

Important:

1. Do not - UNDER ANY CIRCUMSTANCE - come to our facility if you, or anyone in your household, have been in contact with anyone that has any symptoms of COVID-19, including fever, coughing, sneezing, runny nose, sore throat, loss of taste and smell, or digestive issues.
2. Please DO NOT attend if you, or anyone in your household, have travelled internationally in the past 14 days - please stay home.
3. If before or during a scheduled session the client shows any symptoms, we reserve the right to end any session early, or cancel the session.

Prior to arriving at the facility:

Please complete the Alberta Health Services COVID-19 Self-Assessment.
<https://myhealth.alberta.ca/journey/covid-19/Pages/COVID-Self-Assessment.aspx>

Procedures at the facility:

1. Clients should arrive at the facility on time for their session, and no more than 5-10 minutes early for their session. Please wait in your vehicle until your session starts and your counsellor/ instructor comes to greet you.
2. When client arrive at the facility they must immediately use a generous amount of hand sanitizer before touching anything (including any animals) at the facility. Hand sanitizer will be supplied at the Healing Hooves facility. Alternately, you may use your own personal hand sanitizer. We encourage you to carry sanitizer with you for personal use.
3. While with the horses clients can wear gloves. You may use your own personal gloves in which case we will spray these with hand sanitizer at the start of each session. We encourage you to carry gloves with you for personal use.
4. Wherever possible clients will maintain 2 metres physical distance from the counsellor/ instructor.
5. Clients must always cough or sneeze into their elbow.
6. Clients should refrain from touching their eyes, nose, mouth and face during sessions.



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7. Clients will have designated areas they may use that session. The Clients are to only use the equipment provided to them by their counsellor/ instructor.
8. Clients are not to touch anything that they don't need to during their session. For example, please allow your counsellor/ instructor to open gates, choose a halter and grooming equipment etc.
9. At the end of the session, client(s) will go directly to their vehicles.

Parents/ Caregivers/ Drivers:

1. Parents/ anyone else accompanying a client should not enter the facility unless they are required to physically assist with their child.
2. If you are required to physically assist (e.g. to fit a helmet), you may only enter the facility for this portion of the session.
3. If siblings or anyone else accompany a client they will be asked to stay in the vehicle for the duration of the session. If possible, please so not bring anyone other than the client to the client's session.
4. Parents that choose to wait at the facility while their child's session is in progress, and are not assisting with the session, please remain in your vehicle.
5. Parents that stay and need to enter the facility or interact with an animal for any reason must follow cleaning protocols as listed above for the client.
6. At this time, we do not have a public bathroom please consider this when you come to the session.
7. Doors will be left open as much as possible, so we limit the amount of touching of common areas and to maximize air flow. Sessions will be kept outside wherever possible.
8. Please be ready to pick up your child immediately after their session.
9. Parents must remain a minimum of 6ft apart from the counsellor/ instructor at all times and face masks are recommended. If you touch any of the animals, we ask that you wear gloves.

Other protocols that will be followed by Shari Couture before/after each session for your and our safety:

1. Cleaning of any tack used by the client with saddle soap.
2. Washing gloves or towels used by clients.
3. Cleaning and sanitizing of all equipment that was used during sessions.
4. Cleaning and sanitizing the sinks, washroom/toilet and high touch areas such as door handles and light switches.