



**Nova Scotia
Board of Examiners
in Psychology**

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**SPECIAL BULLETIN FROM NSBEP
CONCERNING THE EVOLVING CORONAVIRUS DISEASE (COVID-19)
March 19, 2020**

NSBEP has, understandably, received a number of communications in relation to telepsychology in the current context.

In addition to providing ongoing information from the Chief Medical Officer of Health, NSBEP issued the following bulletin on March 12 via email on COVID-19. [Click here to access the bulletin.](#)

NSBEP aims to issue communication to registrants to address matters relating to COVID-19 and telepsychology, though we are unable to provide specific guidance in every situation.

NSBEP staff have continued to review and correspond with our colleagues across the country and in the US, and wishes to provide further information, based on a number of issues that are being presented at this time in relation to COVID-19.

Out-of-Province Service During this Time

In Atlantic Canada there is an existing MOU in place which allows NSBEP registrants to provide service via telepsychology. This is a brief process to inform the other jurisdiction. The link to more information appears below:

<http://www.nsbep.org/information-for-registrants/telepsychology/>

Additionally, the province of Quebec does not currently have an issue with a psychologist outside of Quebec providing service to clients in their province via telepsychology.

NSBEP has a courtesy register that is quite generous and easy to access relative to some other jurisdictions (e.g., ON only recently introduced a courtesy register and it appears to be quite limited). Some jurisdictions (including ON) may have legislation or policies either at the Board/College or provincial level that will apply in a crisis or pandemic, but we don't have all of this information.

Our recommendation for NSBEP registrants wishing to extend their practice of telepsychology outside of Atlantic Canada and Quebec, is to contact the jurisdiction in which they wish to practice.

Below is a paragraph taken from the last NSBEP Annual Report:

We continue to be contacted by registrants wanting the NSBEP to approve their provision of service to a client who is located in another jurisdiction. While we understand why registrants contact us for direction, we have no legal authority to approve such an arrangement in another jurisdiction. Generally, the view in North America is that the practice extends into the jurisdiction where the client is located. Since practice would be taking place in the jurisdiction where the client will be located, even if only temporarily, we advise registrants to contact that jurisdiction. As well, registrants should review our Guidelines on Telepsychology. Some registrants have asked if the following factors would change the need to contact the other jurisdiction: the period of service provision will be brief; the person is a Nova Scotia resident but only temporarily located elsewhere; the regulatory body in the other jurisdiction may not provide a timely response; the regulatory body in the other jurisdiction may not communicate in English; and could the registrant could just use a different title (other than Psychologist). While we appreciate that there can be practical issues in making arrangements with other jurisdictions, we must direct registrants to contact the jurisdiction where the client will be located.

Having said that, many jurisdictions are looking at ways of relaxing telepsychology access during the health crisis.

The Association of State and Provincial Psychology Boards (ASPPB) began collecting this type of information. The ASPPB has polled its member Canadian and US regulatory bodies about telepsychology and has put the information on its public website.

The information is not complete, and some of the information may now be out of date, but will hopefully be updated on a regular basis. You may find some information related to the state(s) you are interested in there.

<https://www.asppb.net/page/covid19>

https://cdn.ymaws.com/www.asppb.net/resource/resmgr/members/temporary_interjurisdictional.pdf

Informed Consent

As mentioned in our March 12th bulletin, registrants should review information about the technology with respect to confidentiality, privacy and security. When obtaining informed consent, registrants should clarify and document any relevant potential limitations or issues posed by the use of the technology.

Some psychologists have requested a consent form for telepsychology. NSBEP has not published a consent form on this matter. However, there is a helpful informed consent checklist acquired through APA, which is provided below. (This could also be adapted for non-video use such as telephone sessions)

Here is a link to the Informed Consent Checklist for Telepsychology Services:
[Click here for the link.](#)

Technology Platforms and Treatment Modalities

NSBEP cannot validate a particular technology or online therapeutic modality. One point to bear in mind is that terminology such as "HIPAA Approved" or "HIPAA Compliant" are more commercial terms than legal. Certain legal obligations are set out in the United States by the The Health Insurance Portability and Accountability Act (HIPAA). Many practitioners in Canada understandably cite HIPAA. In Canada, and NS in particular, psychologists would need to use local privacy law that is applicable, e.g., such as the Personal Health Information Act for most healthcare professionals, and the Freedom of Information and Protection of Privacy Act, etc., the latter being applicable to those employed in the public school system and generally those operating within university settings.

Nova Scotia privacy legislation requires the practitioner to take reasonable steps to address privacy and security, but there is no list of designated/approved technology mentioned in NS privacy legislation. Registrants have the responsibility to do due diligence in establishing a secure conferencing platform if this is how they wish to deliver services. Platforms one might regularly use in personal life might not, by default, provide adequate security.

In discussions with our counterparts across the country, the following information about platforms was distilled:

Skype and FaceTime are generally not always recommended as secure. Skype Enterprise has greater security and FaceTime may be enhanced if both the registrant and every client has, and uses, the necessary enhancements; relying on clients to follow such steps is generally not recommended. Zoom, WebEx, Adobe Connect, Doxy.me, and Theralink are other alternatives registrants might explore.

Systems requiring a link or requiring a password and access code for you and your client offer better protection from hacking, but no absolute guarantees against hacking can be offered. Part of consent is informing clients of the risks inherent in use of these technologies, and this consent would be documented.

Ultimately, decisions about whether to use telepsychology and what treatment modalities are applicable, must be made the psychologist based on individual circumstances and professional judgment.

Although the platform encrypts communication / data, it stores data outside of Canada, so can I use it?

NSBEP Standards do not, and the Personal Health Information Act does not, explicitly prevent any solution from being used even if data is stored outside Canada.

There is NS legislation (Personal Information International Disclosure Protection Act) that prevents a public body from storing data outside Canada, but this Act does not apply to a private practice.

This Act does apply to public bodies. However, there is a clause within that legislation which enables the head of a public body, or the responsible officer of a municipality, to allow storage, access, or disclosure outside Canada if it is determined that doing so "meets the necessary requirements" of the organization's operation. There would be a process for the designated officer to follow in such a case. In such a case, psychologists could bring this matter to the attention of the FOIPOP/Privacy Officer of the public body for further consideration.

Moreover, NSBEP would look at the public interest and if the psychologist has a robust solution that meets requirements then one should document a valid basis for using that software to provide continuity of care in a crisis, and in all cases ensure they have client consent to the process.

What if I want to continue seeing clients in person during this public health crisis?

The Board cannot make a decision for you about whether or not you continue to provide in-person services in light of the current public health crisis.

If you choose to continue seeing clients in person, it is important that they are given the opportunity to refuse this without consequence. Thus if you have a cancellation fee for cancellations without X hours of notice, you may wish to consider waiving the fee for the time being in light of COVID-19 and the panic that is an understandable outcome.

Information regarding Employment

Registrants and others may find the following information, made available to the general public by the firm that serves as the Board's legal counsel, useful in dealing with matters relating to COVID-19 during employment.

[You can click here for the link.](#)

Note: This information provided in this bulletin is not to be construed as legal advice or to substitute for the psychologist's own awareness of the legislation and standards of practice. For legal advice, please speak to your own lawyer or contact the pro bono legal hotline of your professional liability insurer.