



Quebec Association of
Special Care Counsellors

Notice 2020-04-ES

Professional Conduct to be Adopted by
Members and Clarification of Ethical
Rules in the Context of Health and Social
Emergencies

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Professional Conduct to be Adopted by Members and Clarification of Ethical Rules in the Context of Health and Social Emergencies.

Context:

We are currently living in an exceptional period that calls for responsibility, mutual aid and solidarity. All government authorities, particularly the health and social services network, are mobilized to face this great challenge. As professionals, we have been exceedingly solicited since March 12, 2020 because the services of Special Care Counsellors (SCC) remain essential activities. While we ourselves have to take up this challenge, we are called upon to deploy all our professional skills. The second wave of the pandemic challenges us to continue our services to support individuals, families and communities, especially the most vulnerable, who need our support in this particular context.

The QASCC is aware that professionals will have to adjust their practice to the context, but we invite you, as in normal times, to act with the usual rigor. We invite members to respect the directives of their employers, particularly with regard to home visits of their clients, as long as they are consistent with public health directives and the Code of Conduct in Special Care Counselling. However, it is advisable to adapt the way we respond to them in light of our professional judgment and the urgent and unpredictable nature of the evolving situation.

To answer many of the questions that arise in this context, here are some recommendations regarding in-person client interventions and home visits, telework and tele practice, independent practice, and record keeping standards.

SECTION 1

INTERVENTION IN THE PRESENCE OF CLIENTS AND HOME VISITS

To date, being in the presence of clients is not prohibited by the Public Health Directorate. However, in this case, it is essential for Special Care Counsellors (SCCs) to follow the safety and hygiene guidelines, as well as to implement the two-meter social/physical distancing.

To stay up to date on the Public Health Directorate's recommendations, visit the following link: [Coronavirus disease \(COVID-19\) in Québec](#)

SCCs can see their clients in person or tele practice. Given the current pandemic context, they must choose the modality that promotes client accessibility, follow-up and progression. The client's preference for the modality should be taken into account.

With respect to in-person meetings, the following guidelines remain:

- Ask the client whom they wish to meet in person in regard to the presence of COVID-19 symptoms in their home or those close to them;
- Ensure that the client, or their guardian, is willing to participate in in-person meetings by explaining to the client the reasons for such a meeting and the associated risks, in order to fulfill the client's obligations regarding informed consent;
- Implement all hygienic measures recommended by public health before, during and after the meetings;
- Agree that the client may refuse an in-person meeting and determine cooperatively with the client the alternatives to be considered to ensure continuity of service or the resumption of service at a later date.

What conditions would call in-person meetings into question?

Like the client, the SCC cannot be forced to meet a client in person:

- If the client or the professional presents with symptoms of COVID-19;
- If the client/professional is in quarantine (different causes);
- If the client/professional has an at risk medical condition;
- If the client/professional is part of the population that cannot be deconfined;
- If the professional is unable to maintain a proper physical distance in their office and work environment.

If the same interventions can be carried out without risk by other means, such as telephone interviews, the latter should of course be preferred. It is also suggested that you clearly explain to your clients the choice of this means of communication.

It is important to keep in mind that we are all personally and collectively responsible for our own health and that of the people we work with.

SECTION 2

TELEWORK AND TELE PRACTICE

The SCC can offer their services remotely at any time by telephone or through an electronic communication platform. In the context of such a practice, the SCC must apply the same ethical rules that apply to an in-person practice. It is the responsibility of the SCC to assess the feasibility and appropriateness of such a practice, ensuring that confidentiality is respected on both sides.

Following the recommendations of the *Ministère de la Santé et des Services sociaux*, when possible, subject to your employer's directives, telework and tele practice (remote consultation, by telephone or online) should be favoured. The same guideline must be respected for private practice.

However, you must ensure that you obtain the person's free and informed consent for this type of intervention, making them aware of the inherent limits of confidentiality.

- **Client's Rights**

If the client refuses telework services, or requires or requests in-person meetings, the SCC must explain to the client that they are unable to provide this service in-person.

The professional will agree with the client on the terms and conditions for termination of services and transition to other services. The professional will ensure that the termination of professional services with the client does not cause harm or interfere with the client's progress.

As such, the professional will actively seek out services, resources or colleagues who can ensure continuity of service for the client within a reasonable time frame.

- **Softwares and Websites**

The QASCC does not have or express any opinions on specific software or websites; it is up to the SCC to conduct the necessary research or to refer, if necessary, to the responsible authorities in their institution.

The professional may at any time offer remote services by telephone or through electronic communication platforms. In the context of such a practice, the professional must apply the same ethical rules that apply to in-person practice.

It is the responsibility of the SCC to assess the feasibility and appropriateness of this practice, using all available means to promote confidentiality.

Generally speaking, solutions or software offered for use by the general public never offer an absolute guarantee with respect to the security and integrity of the information circulating in them.

Solutions offered by large companies such as Microsoft or Apple present less risk, given their ability to respond quickly to an attack or to correct a security flaw.

The use of paid versions of software increases the configuration and security options available, which can help reduce the risk associated with their use. However, it is important to take the time to become familiar with these options and to use them properly.

The general recommendations on methods and ways of using the available tools are the same regardless of the choice of platform. For example, always using a password to enter a meeting should be part of good practice.

Data encryption varies from platform to platform. The level of encryption can reduce the quality of the sound and image generated by them.

Finally, the fact remains that no platform provides flawless security. Clients must therefore be informed of the risks inherent in the use of these technologies and consent to their use in an informed manner.

SECTION 3

SPECIFICATION ON PRIVATE PRACTICE

Special care counsellors in private practice are responsible for taking the necessary steps to ensure the safety of themselves and their clients. It is up to them to determine whether they offer their services in person, which is currently permitted since private practices of professional resources in the health network are on the [list of essential services promulgated by the Quebec government on March 23](#). If so, they must strictly follow the recommendations of public authorities.

SCCs must respect their obligations regarding fees. They may not request remuneration for services not provided, for example, when the client refuses a tele practice consultation. The QASCC invites its members to show flexibility and understanding, given the exceptional nature of the situation that currently prevails.

In order to guide professionals in the resumption of in-person interventions, the QASCC recommends consulting the document distributed by *the Institut national de santé publique* (INSPQ), which provides comprehensive answers to questions about infection prevention in the context of a pandemic and provides guidance to professionals in private practice regarding the measures to be implemented.

Please consult this document by downloading the file in this link:

<https://www.inspq.qc.ca/en/publications/2999-private-practice-therapeutic-care-covid19>

In addition, the CNESST has adapted information tools that are produced using INSPQ documents, please download the document in this link for information purposes:

<https://www.cnesst.gouv.qc.ca/en/prevention-and-safety/covid-19/covid-19-toolkit>

In support of this notice, we invite you to consult the following sources:

- **Wearing a face mask or face covering**

SCCs are encouraged to refer to public health guidelines regarding the use of face masks and face coverings by viewing the following link:

<https://www.quebec.ca/en/health/health-issues/a-z/2019-coronavirus/wearing-a-face-covering-in-public-settings-in-the-context-of-the-covid-19-pandemic/>

- **Progressive regional alert and intervention system (COVID-19)**

<https://www.quebec.ca/en/health/health-issues/a-z/2019-coronavirus/progressive-regional-alert-and-intervention-system/>

- **Coronavirus disease (COVID-19) in Québec**

<https://www.quebec.ca/en/health/health-issues/a-z/2019-coronavirus/>

You are also encouraged to find out what government measures are available to self-employed workers in the current situation.

SECTION 4

KEEPING AND TRANSPORTING PROFESSIONAL RECORDS

When it comes to record keeping, it is important to preserve your accountability through the traceability of interventions. It may therefore be appropriate to write evaluation reports, plans, progress notes and summaries to be placed in the file in a shorter than usual manner, or even to develop new ways of doing things, adapted to collective and population-based interventions in a crisis context.

It is also possible to transmit information and transport professional records in paper or electronic format while respecting confidentiality obligations and the rules established by the institutions, where applicable.

In these circumstances, professionals must provide a secure arrangement for the temporary safekeeping of files, while informing their clients of the specific arrangements that have been made. Of course, these arrangements must be agreed upon with the relevant authorities within the institution.

Conclusion:

The QASCC is well aware of the particular current context and the need for flexibility. If you have any professional questions, do not hesitate to consult your colleagues and your immediate superiors, especially other SCCs, in order to jointly reflect on more sensitive issues.

The QASCC remains available and will consider the most frequently asked questions to provide appropriate answers as the situation evolves.

For any questions related to professional affairs, please contact us at the following email address: info@aeesq.ca.