The information in this Practice Support checklist is intended to provide general guidance to assist registrants in identifying issues and options that should be considered, and implementing strategies to address issues, resolve problems and improve practice, with respect to a particular aspect of psychology practice. No checklist can anticipate all variables that might be relevant to a specific professional decision or circumstance, but the checklist can provide general quidance to registrants dealing with the identified practice issue. Registrants are also invited to contact the Practice Support Service with any questions.

Readers are advised that documents provided by the Practice Support Service are not legal advice, and do not supplant any applicable legislation, the College's Code of Conduct, its Indigenous Cultural Safety and Humility and Anti-racism Standard, or any other official College communications or professional standards. While an effort has been made to be comprehensive, the information in this checklist is not exhaustive, and the College makes no warranty or representation as to its currency, completeness or accuracy. The College accepts no responsibility for any errors or omissions, and expressly disclaims any such responsibility.

This checklist does not establish standards, limits or conditions for registrants' practice for the purposes of the Health Professions Act, and it is not intended to impose mandatory requirements to the extent that such requirements are not established under the Code of Conduct or the Indigenous Cultural Safety and Humility and Anti-racism Standard. In the case of any inconsistency between this checklist and any Code standard or the Indigenous Cultural Safety and Humility and Anti-racism Standard, the Code standard or Indigenous Cultural Safety and Humility and Anti-racism Standard governs. The final decision on the course of action to be taken in any practice situation is made by the registrant, and checklists are not intended as a substitute for the professional judgment and responsibility of the registrant. Exclusive reliance on checklists is imprudent, as every practice decision depends on its own particular circumstances.

This document may not be copied in part. Registrants wishing to copy it in its entirety must keep this disclaimer attached and must identify it as a College of Psychologists of B.C. Practice Support document. For ease of reference, select Code standards are indicated in brackets following checklist items. Registrants are obligated to consider any other Code standards and legislation that may be relevant to a specific practice situation. All references to the Code of Conduct and other legislation is current to the date indicated at the beginning of each checklist.

Informed Consent and Assent Checklist

This document is intended to be of assistance to registrants with respect to obtaining appropriate informed consent and informed assent. Relevant *Code* standards are indicated in brackets following the checklist items.

I have identified all relevant parties from whom I must seek consent and/or assent, including determining any issues of parental status and rights in any case involving children. (1.1, 1.2, 4.1, 4.3, 4.4, 4.24, 4.25)		
I have determined which of my potential clients have both the legal and cognitive capacity to consent, and have also considered whether they are free of undue influence. I will seek to obtain informed consent from those who are free of undue influence, and informed assent from those who are not. (1.1, 4.1, 4.3, 4.24, 4.25)		
I have determined all exceptions to the right of confidentiality in the particular circumstance. (1.2, 1.6, 3.8, 4.24, 4.25, 5.9, 5.13, 6.1, 6.3, 6.4, 6.7, 6.11, 7.17, 18.1)		
My inf	formed consent process includes the following elements: a review of the proposed service, including any supervised elements and my responsibility for those elements, innovative elements of the service, anticipated risks and benefits, alternative services, and any other elements of the service that could influence a person's decision to provide consent (4.2, 4.6, 4.7, 4.8, 4.24, 4.25, 8.7) the limits of confidentiality, including any expected or intended uses of information obtained, how I will handle confidentiality issues involving multiple clients and/or third parties, and any exceptions to confidentiality (1.6, 3.8, 4.24, 4.25, 5.9, 5.13, 6.1, 6.3, 6.4, 6.7, 6.11, 7.17, 18.1) any confidentiality issues related to common filing systems (6.1, 6.5, 6.14, 14.8) the client's right to ask any questions about the service or my training and experience (4.2, 4.9) the client's right to end service at any time and to request referral elsewhere (5.8, 5.20) my fees and any other charges, including interest charges on overdue accounts and my policy on responding to overdue accounts (12.1, 12.2)	
	my policy regarding missed and late-cancelled sessions (12.2)	
	a statement that as part of routine practice I may occasionally consult with colleagues regarding my practices, and that if I do it will be for the purpose of benefiting the client and client confidentiality will be preserved (3.2, 4.2)	
	my status as a registrant of the College, the College's role in regulating the profession, and how to contact the College in the event of any concerns (7.10)	
	a statement confirming the client has reviewed and understood the information about the service and has had an opportunity to ask any questions (4.9)	
	documentation in my practice record of the informed consent, including where possible the signed consent of the client(s) (4.2, 13.6)	
	the date on which the informed consent was obtained (13.6)	

Ш	In tho	se cases in which a client lacks the legal capacity to accept or reject the service, is compelled or unduly influenced to
	accept	the service, or lacks the capacity to understand all relevant significant information that might influence their decision
	to acc	ept the service, I will seek their informed assent to proceed. My informed assent process includes the following:
		informing the client to the fullest extent possible regarding relevant significant information that might influence
		their decision to accept the service. "Fullest extent possible" means that my informed assent process will be the same
		as my informed consent process in those cases in which the client has the capacity to understand the information
		and there are no other impediments to my reviewing this information with them (1.1, 1.2, 4.1, 4.2, 4.3, 4.24, 4.25)
		a clear description of what information will and will not be shared with specified others (1.2, 1.6, 3.8, 4.24, 4.25, 5.9,
		5.13, 6.1, 6.3, 6.4, 6.7, 6.9, 6.11, 7.17, 18.1)
		any exceptions to expectations of confidentiality (1.2, 1.6, 3.8, 4.24, 4.25, 5.9, 5.13, 6.1, 6.3, 6.4, 6.7, 6.9, 6.11, 7.17,
		18.1)
		any other elements of informed consent deemed appropriate to review with the client in the circumstance and
		consistent with the cognitive capacity of the client. (4.2, 4.3, 4.24, 4.25)