



Cornerstone Psychological Services

1 Promenade Circle, Suite 313C, Thornhill, Ontario, L4J 4P8

TELEPHONE: (416) 284-5923 TOLL-FREE FAX: 1 (866) 842 3748 WEBSITE: www.cornerpsych.com

Covid-19 and Evolving into a Virtual Practice

Life, as we know it, has changed dramatically since the onset of Covid-19. Certainly, physical distancing has placed most of us into situations where we have had to work online and/or at home while juggling the demands of teaching our young children and/or monitoring the progress of our teenagers. For many, working so closely with our children has solidified the need for a proper assessment to help clarify what is required to help them reach their potential.

For those who have booked assessments prior to the government-imposed shutdowns, ***we have not forgotten you or your children.*** Likewise, we have not forgotten those on our waiting list or those who are newly requesting assessments. Behind the scenes, we have been diligently taking courses, reaching out to test publishers and studying virtual practice. This has been an arduous but instructive process and we have learned a lot along the path to plan and unveil our new model.

First and foremost, the collective view of our Cornerstone team is that we are ***relationship driven.*** Thus, with the prospect of opening a virtual practice, we all expressed concerns about losing that “personal touch” for which we have become well known. ***This has driven us to try and figure out how we can maintain relationships without sacrificing anyone’s health.***

So, we asked ourselves, “Is it better to reopen with protective gear in place?” or “Is it better to work virtually?” How can we best forge and maintain relationships and, at the same time, strictly guard testing integrity? A tough set of questions, indeed. After weeks of self-exploration and scientific inquiry, this is what we concluded.

Reopening “in person” right now is not a good alternative. To start, we would not be able to have a waiting room. Instead, we would have to ask clients to remain in their cars and text them when they could enter the office safely. If we could find suitable personal protection equipment (which is exceptionally difficult in and of itself), at the very least, this would consist

of a mask, gloves and, potentially, plexiglass. To our way of thinking, the protective gear would undercut many of the benefits of being face-to-face and the means of establishing relationships. Plus, we felt this could be very anxiety provoking. In addition, having to sanitize each room between clients and having to limit meetings to reduced numbers of people onsite would create even longer waiting lists.

So, we agreed that ***now is the right time to move toward a virtual practice***, especially since everyone in the community has become more acclimatized to technology. While there still is more research being accumulated about online testing, we want to assure you that ***we will assume a responsible approach to testing***. To date, we already have incorporated technology into a large part of our routine testing upon which we can build. Specifically, we have been regularly using online questionnaires and, for several years, we have used tests designed for the iPad. Recently, we have learned that we are able to screenshare these tests online with clients. In addition, there always has been the option for parents or clients themselves to attend virtual interviews and/or feedback sessions online.

To bolster the validity of our work, we will continue to include evidence we collect from clients, parents, report cards, teachers and previous assessments, where applicable. Moreover, and in keeping with what we always have done, we will take a cross battery approach to testing. This means that we will look for specific and repeated patterns and trends across sessions using various assessment tools before we come to any conclusions. If something “doesn’t add up” or if something looks inconsistent, we would adjust our testing to include other related tests to help explore why these differences occurred and under what conditions.

To help ease into the whole transition toward virtual testing, we have generated a comprehensive plan that has involved the complete overhaul of forms, business policies and procedures along with training for all of our team members. At this point, I am pleased to say that we have established our own version of phasing in our business that I would like to share with you:

Phase 1 (April, May and June): Scientific inquiry/meetings regarding best practices with testing virtually; altering forms/procedures; buying new testing equipment; test trials of reliability and validity; staff training and supervision.

Phase 2 (June/July): Contacting clients to complete the assessments that already have been started, writing reports and providing feedbacks.

Phase 3 (June/July): Slowly bringing in clients who already have booked their initial sessions and who, unfortunately, got cancelled.

Phase 4 (Summer/Fall and into 2021): Dealing with our waiting list and phasing in of newer clients.

Phase 5 (To be determined): Resumption of some “in person” testing for those where this is more ideal.

While virtual testing may be a “new normal” for now, moving forward, there are a lot of benefits to being able to perform online assessments. Let me outline these to you:

1. There is **no travel time**, so parents do not need to budget how much extra time they need to take time off from work. Plus, once set up, parents can continue to work at home while the assessment takes place.
2. Virtual assessments mean that **we can help those who live further away from us**. Also, it means that we can offer services to more remote and underserved communities.
3. **Weather will no longer be an issue** as both our clinicians and our clients will be working from home.
4. **Testing is less anxiety provoking** because clients are at home and don’t need to come into a new environment.
5. There can be **more flexibility in testing sessions**. For example, we can schedule shorter sessions for younger children and/or for those who have a limited attention span. Likewise, we can schedule around a more senior student’s breaks at school (e.g. one hour of testing during a spare).

In closing, “necessity has been the mother of invention” and we, admittedly, are on brand new turf. But, as a group, we are excited about the prospect of moving forward with virtual assessments and **we are deeply committed to helping our community during this especially difficult time**. As ever, we consider ourselves partners with our clients and, as such, we welcome any feedback or ideas that can make this process as viable and as meaningful as possible. Feel free to email us through the contact information on our website (www.cornerpsych.com) or by calling us directly at (416) 284-5923.

Take good care of yourselves and stay safe and healthy,



Melissa S. Cait. M. A., ABSNP, C. Psych.
Psychologist and Clinic Director