

Private Practice Guidance

Purpose

Establishing a private practice is a complex process requiring social workers to be aware of relevant legislation, regulation, and any associated standards of practice. This guidance is designed to educate social workers about the professional responsibilities associated with private practice.

Defining Private Practice

Social workers in private practice are not considered employees in the traditional sense and are not part of the organizational structure of an institution or organization. They may be providing social work services independently or in partnership with other health professionals in private practice or acting as the employer of other health care providers. Areas of private practice may include direct practice, clinical practice, education, consultation and supervision.

Establishing a Private Practice

Social workers must meet the requirements for registration on the general register and then reflect and evaluate whether private practice is a good fit.

Business Model and Services Provided

Registered social workers practice in a variety of environments with different client populations. There are many private practice models with pros and cons to each (e.g. sole practice, group practice, contracting). It is the responsibility of each registrant to consider the kind of business model, its risks and benefits, including careful review of any contracts. A registrant must be satisfied that they will be able to uphold ACSW Standards while working within a group practice or for another business. Any registrant intending to establish a private practice must be familiar with what is allowed in Part 5 of the *Health Professions Act (HPA)*, Business Arrangements, the Code of Ethics and Standards of Practice.

Each business situation is different and unique. We encourage registrants to seek business and legal advice from appropriately trained professionals. Because of the many possible corporate, legal, and business arrangements, the ACSW will not give an opinion on someone's situation.

Professional Practice (Standard E)

Registrants must continually assess their knowledge, skill and judgement (i.e. competence) to determine whether they are equipped to work with particular client populations, provide specific services or interventions or engage in independent or private practice.

The HPA defines competence as, *"the combined knowledge, skills, attitudes and judgement required to provide professional services."*

Post-secondary social work education provides the necessary foundation to begin practice in social work. It is, in and of itself, insufficient for registrants to be competent in all areas required for private practice. Preparation for private practice develops over time as knowledge, skills and experience are gained.

Prior to entering private practice, social workers are strongly advised to consider their

Social workers in private practice must have the appropriate educational preparation, significant and current social work experience as well as a network of appropriate professionals for supervision, consultation and referral.

individual competence in the area they are choosing to focus their practice. This may mean after reflection, a registrant limits the services provided, population served or interventions or activities performed. It may also mean acquiring additional education and experience and/or supervised practice.

Social workers must be knowledgeable in many areas beyond the focus of the practice itself before establishing a private practice including but not limited to:

- Working with mandated or involuntary clients
- Dual relationship and conflicts of interest
- Managing boundaries
- Managing privacy and privacy breaches
- Working with 3rd parties
- Insurance requirements (professional and general liability insurance)
- Working with vulnerable and racialized people including 2SLGBTQI+, Indigenous, BIPOC, and disability communities
- Contingency planning for your practice
- Leaving or closing a practice
- Documentation and file management
- Managing and supervising staff
- Competence in business practices
- Accessing consultation and supervision
- Informed consent and confidentiality
- Working as a contractor

Competence is acquired and maintained as part of professional practice and throughout one's career through a variety of learning methods, including but not limited to, consultation and supervision. All social workers, particularly social workers in private practice, benefit from consultation and in some cases, supervision from colleagues. These

terms are often used interchangeably, but each has a different frame and accountability. These terms are described below.

Consultation

The Standards of Practice define consultation as “*a problem-solving process in which professional expertise is offered to an individual, group, organization or community*”. In a professional practice context, consultation is a process that occurs between two or more professionals, where one is seeking help, insight, or assistance regarding a particular matter or problem. The focus is narrow and specific, and the resulting advice or guidance provided may or may not be actioned.

Supervision

The Standards of Practice defines supervision as, “*the professional relationship between a supervisor and a supervisee that includes evaluation and direction over the services provided and promotes the continued development of the supervisee's knowledge, skills, and abilities to provide services in an ethical and competent manner*.” In a supervisory relationship the supervisor is responsible and accountable for the supervisee's practice and can provide direction that the supervisee must follow.

Engagement with other social workers or suitable professionals who are knowledgeable in the area is advised when developing competency in a professional service or technique that is either new or returning to social work.

Supervision and consultation have different frames and accountabilities. Supervision may include consultation. Consultation is not the same as supervision.

The determination of whether supervision or consultation or both is required is the responsibility of the social worker based upon the practice, legislative requirements, and/or risk associated with the practice etc.

Record Keeping & Confidentiality (Standard D)

Social workers working privately, either in their own practice or by contracting their services, are accountable for documenting and maintaining their own records. Social workers must follow the expectations outlined in the Standard for Record Keeping and Confidentiality, including taking steps to determine which privacy legislation(s) record keeping must be complied with.

- Social workers must establish practices consistent with relevant privacy and legislation (Health Information Act (HIA), Access to Information Act (ATIA), Protection of Privacy Act (POPA), Personal Information Protection Act (PIPA) etc.)

- Social workers in private practice must also consider any employment relationship with contractors or contracted staff, ensuring ownership and management of client records is clearly defined and managed.

Protection, Privacy and Security of Electronic Records

The management of information including documentation and retention of records related to client care and services as well as business activities and transactions must be done in alignment with provincial legislation, regulation, and standards of practice. Social workers are personally responsible and accountable for ensuring they comply with the legislative requirements. These requirements include determining the need for and conducting a privacy impact assessment; developing policies and procedures regarding the collection; use and disclosure and security of personal and health information.

The onus is on the private practice social worker to become familiar with all applicable privacy legislation.

A social worker in private practice must have data management policies in place and available should clients wish to review.

Client Access to Records

Clients have a general right to access their own records, and as permitted or required by legislation, social workers should provide access to and disclosure of client records to clients. Social workers in private practice must ensure policies and processes are established and available to clients to ensure and enable client access to records in accordance with the Standards of Practice and any legislative requirements or restrictions.

Access to Client Records by Others

Occasionally, social workers receive third party requests for information, for example from third party payors, or insurance companies. When a social worker receives a request to release information to any third party, they must obtain the client's informed consent to do so, unless a legal exception applies. When compelled to disclose client information for a legal proceeding, social workers are permitted to produce records without consent if served with a court order, subpoena or other direction from a court, professional regulator or other authority. In addition, if called as a witness during a hearing, the judge or adjudicator can direct you to disclose the records or provide testimony about your involvement with your client. Social workers should exercise caution and are advised to consult their legal advisor to determine the best way to respond.

Retention of Health Records

Social workers have an ethical and legal responsibility to safeguard their clients' information, including securing records or files, retaining records in accordance with applicable legislation and standards and establishing an estate

plan for records in the event of an unforeseen event, for example a medical event resulting in incapacitation or death.

Privacy Breaches

Privacy breaches can occur in several ways. Some of the more common incidents include:

A social worker in private practice is expected to be aware of any relevant privacy legislation and its requirements and have policies and procedures in place should a privacy breach occur. This includes reporting to the Office of the Information and Privacy Commissioner of Alberta any unauthorized access to or disclosure of individually identifying personal or health information by themselves or anyone else in their practice.

Fees & Statements (Standard C)

Fees & Billing

The Alberta College of Social Workers is responsible for setting and enforcing standards on fees. The HPA prohibits a regulatory college to set fees social workers may charge for professional services. When establishing fees, registrants must ensure:

- Fees and fee policies are clearly outlined to the client prior to providing services, as registrants also have an obligation to obtain and document client's consent for fees prior to service delivery.
- Fees charged are justifiable. Professional services offered on a sliding scale, which would make services more affordable, are permitted.

Registrants in private practice may bill for services provided by a student. The billing must be clear about who provided the service. Refer to the [FAQs](#) for more detailed information on fees.

Professional Accountability (Standard G)

Advertising and Use of Title

Advertising is one component of marketing a private practice and is an important aspect of business growth and sustainability. Examples of advertising and public communication includes, but is not limited to, brochures, directory listings, websites, social media, radio, television, lectures and other public presentations, resumes, professional correspondence and published materials etc. Ethical marketing is described as the responsible promotion of professional services to potential clients in a way that respects their autonomy, privacy and dignity while avoiding any harm or undue influence. Ensure that advertising does not exploit clients' vulnerability and lack of knowledge.

Social workers must safeguard client privacy and should not post potentially identifiable client information online. Additional information is available in the private practice [FAQs](#).

Social workers must comply with the Social Work Profession Regulation and relevant Standards of Practice and at minimum, provide in any advertising, and on request:

- A clear and honest statement of the academic qualifications relevant to your field of practice
- Display or produce a current practice permit
- Identify the jurisdiction(s) where you are licensed to practice
- Ensure that the use of title after a name in communications are acceptable, accurate, and reasonably informs the public of their relevance to the field of practice
- Ensure the public is clear of your registration status if on the provisional register

It is important that the advertising does not make claims which cannot be demonstrated as true. Also, do not include client testimonials in advertising. If a social worker uses a third-party platform, ensure that advertising and use of title is acceptable and accurate.

The *Health Professions Act (HPA)* outlines that: "A regulated member shall not engage in advertising that is untruthful, inaccurate or otherwise capable of misleading or misinforming the public"

Health Professions Act, R.S.A., 2000, c. H-7, s.102

General Practice Requirements (Standard B)

Hazards and risks are an inevitable part of professional practice. Social workers are responsible for identifying and assessing risks and mitigating their impact. Expert advice from legal counsel, accounting, technology and cybersecurity may be necessary, depending on the circumstances.

Employing Staff

Social workers who hire staff must adhere to the Alberta Labour Code and must develop policies that address human resource management, handling of client concerns, supervision of staff and overall quality of care.

Professional Liability Insurance

Social workers in private practice must acquire the appropriate type and amount of liability protection or insurance, as is required for registration with the ACSW.

Social workers in private practice need to consider how to protect themselves professionally. This may include purchasing additional general and professional liability insurance to augment the required insurance coverage. Determining insurance requirements will include consideration of the professional services provided and the risk associated with those services. Some areas of social work practice carry higher risk than others. Consultation with experts in the insurance and legal field should be considered. At minimum, social workers are required to have \$5,000,000 in liability insurance as well as legal defense coverage in the case of a professional complaint or disciplinary proceeding.

Out of Province Practice

Providing professional services to clients outside of Alberta requires social workers to investigate and comply with registration requirements in other jurisdictions. This includes registration of social work (other social work regulators) as well as registration related to a professional activity (regulation of psychotherapy). Providing professional services to Albertans residing temporarily in other jurisdictions may require the social worker to register with the relevant province. Social workers will use professional judgement in determining the provision of emergent or crisis services to a client while out of province. Social workers are also advised to consult with professional liability insurers regarding coverage for out of province practice.

Use of Technology

Technology and the use of technology in the delivery of professional services continues to grow and evolve. Use of technology refers to digital or other electronic means used to provide information to the public, deliver services to clients, communicate with and about

clients, and manage confidential information. This use of technology includes but is not limited to:

- Telephone
- Email
- Text messaging
- Instant messaging platforms
- Webcam
- Computer/software applications (apps)
- Online office/practice management software for functions such as intake, documentation, billing, online scheduling
- Blogging
- Podcasts
- Use of artificial intelligence (AI)
- Social media
- Virtual reality
- Online forms of evaluation or assessment

Social workers are expected to:

- Understand risks and limitations associated with the use of a particular technology,
- Ensure clients are aware of those risks and possible alternatives as part of the informed consent process,
- Demonstrate competence with technology used in the provision of services.
- Comply with any legislative, regulatory or practice expectations regarding the use of technology, and
- Access supervision or consultation as required when introducing a new technology to their practice

Virtual Practice

Virtual best practices continue to evolve and develop and requires additional knowledge and skills. Social workers are expected to have sufficient knowledge and skills both in the therapeutic modality and in the use of the technology employed. Social workers are advised to consider their liability insurance coverage to determine whether it is sufficient to cover virtual practice and whether it covers provision of service to clients located outside of Alberta. Social workers are also advised to consider and document additional informed consent elements when providing services virtually for example, services that cannot be provided virtually, technology requirements associated with virtual practice, and limitations on professional services and activities should the client temporarily leave the province.

Conflict of Interest

If engaged in private practice at the same time as working as an employee, registrants need to be aware of potential ethical implications and ensure employer's conflict of interest policy is not violated. Social workers need to ensure while working for an organization, they are not leading clients to their own independent business. When in private practice, a social worker must adhere to standards of practice relating to dual relationships and avoid or mitigate actual and perceived conflicts. Social workers should be aware that selling or recommending products or services can result in a conflict of interest if the social worker stands to benefit.

Maintaining Boundaries

Social workers must establish appropriate boundaries and demonstrate self-awareness in professional practice. Maintaining boundaries includes outlining policies to clients about business hours and the use of electronic communication. Social workers should also consider potential boundary implications for both themselves and their clients when operating a home-based practice. Social workers should have a separate business telephone number and email address to maintain professional boundaries.

Closing or Leaving a Practice (Standard B)

A private practice may close in a planned and intentional manner or may close or cease due to unforeseen circumstances. It is expected that social workers in private practice have contingencies for absences including vacations as well as practice closures.

Continuity of Services for Existing Clients

Registrants must ensure that a plan is in place for clients who require ongoing social work services. This plan includes referrals as appropriate, and access to emergent service if required due to gaps in service continuity. The discussions and follow-up plan must be documented in the client record.

Professional Wills

The incapacitation or death of a social worker is an event with profound ramifications for families, friends and clients. There are many legal, ethical, clinical and personal issues for a registrant to consider. When there is advance warning of a disabling condition or death, social workers can plan. In some cases, there will be no advance notice. Ensure contingencies are in place that protect clients, such as creating a professional will. A professional will involves naming an executor, specifying the location(s) of your records, passwords and anything necessary for access to your client and business records and to ensure continuity of care and business obligations.

When taking a leave or closing a practice, ensure that documentation is up to date and records are stored and retained safely and securely according to any requirements and retention periods outlined in legislation and or practice standards. Social workers should consult with legal experts to discuss options for contingency planning that include:

- Risk assessment
- Mitigations strategies for each identified risk (client, communication, continuity of care, access to records, record management and security)
- Ensure plans are compliant with legislation, regulation and practice standards
- Finalize, authenticate and communicate the plan

Contingency planning is not only about protecting the practice's physical and financial assets, more importantly, it addresses a social worker's ethical responsibility to provide confidential, uninterrupted, and professional care in the event something unexpected happens. By identifying and proactively mitigating risks, contingency planning can safeguard a private practice's future and maintain the trust of its clients.

Appendix A: Areas of Private Practice

This appendix provides registrants with descriptions of areas of practice that could be provided in a private practice context.

AREA OF PRACTICE	DESCRIPTION
Clinical Consultation	Providing subject matter expertise, advice and feedback on a case-by-case basis or on a general basis to a group of practitioners in a specialized area such as child protection. The advice may be actioned or not.
Clinical Practice	Providing specialized direct client care that focuses on the assessment, diagnosis, treatment, and prevention of mental illness, emotional, and other behavioral disturbances. Individual, group and family therapy are common treatment modalities. While clinical practice is not a protected scope of practice, use of the title clinical social worker is limited to those who are on the clinical registry.
Community Development	Providing services and activities with a primary focus on helping communities become more resilient, equitable, and connected. Examples include community gardens, collective kitchens, affordable housing initiatives etc.
Direct Client Care	Providing professional services and interventions designed to bring about personal, interpersonal or structural change. Clients or receivers of a service may include an individual, couple, family, or group, for example supporting a family to address unmet social needs for housing and financial support.

Education/training	Providing seminars or workshops in an area in which the practitioner has expertise to targeted groups, organizations, communities.
Institutional Education	Providing education in a post-secondary context to individuals registered in formal education programs. This would not include employees of the organization but could include sessional instructors and those on contract.
Organizational Consultation	Providing program design, review/evaluation, restructuring, operational evaluation/review of an agency, strategic planning, and/or policy development.
Supervision	Engaging with a supervisee through a contractual relationship to provide direction of care and/or services and interventions; promote the professional growth of the supervisee; enhance the supervisee's safe and effective use of self in the client relationship; and safeguard the well-being of the client to meet registration, credentialing, or competence requirements.

Appendix B: Bibliography

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Private Practice FAQs

Starting a Private Practice	
<p>1. Do I need a certain level of social work education before I open a private practice?</p>	<p>Currently, the College does not have specific educational requirements a registrant must possess before establishing a private practice.</p> <p>The ACSW recommends that those entering private practice have a Master of Social Work (MSW) and at least five years of social work experience relevant to the proposed area of practice. Additionally, the ACSW recommends that registrants have completed provisional hours prior to establishing a private practice.</p> <p>A social worker must be able to demonstrate an appropriate knowledge base with the population, service, activity and interventions they are providing in their practice along with significant and current practice experience and supervision in the area of practice.</p> <p>It is also important a registrant have a robust network of professionals for consultation and referral.</p> <p>Registrants must also consider the legal responsibilities for their private practice, including ensuring they have the evidence to support that they are providing, the expected standard of social work service and evidence that the client has received this standard of care.</p> <p>Ask yourself:</p> <ul style="list-style-type: none"> • What is the standard of care nationally? • What is the industry level of education needed to provide the identified intervention? • What would a jury of my peers in this area of practice assess my practice?

	<ul style="list-style-type: none"> • What evidence can you provide to substantiate you have the required competence to establish a private practice in a particular area of practice <p>Before establishing a private practice, review the private practice guidance, talk with other social workers in private practice and consider discussing your plan with the ACSW</p>
<p>2. I am a provisionally registered social worker; can I have a private practice?</p>	<p><u>Social workers entering private practice must hold an active practice permit on the general register.</u></p> <p>Private practice is not an entry to practice activity. Transitioning from being a student to an independent practitioner is recognized as a stressful time. Newly registered professionals often enter new and sometimes challenging environments. Research points to factors such as mentorship, formal supervision, professional development and clear policies and procedures as mitigating the risk and stress associated with the transition.</p> <p>While the draw to private practice may be strong, practicing in isolation for new graduates, those new to practice in the Canadian context, those returning to practice after a period of inactivity can affect safe practice.</p> <p>Joining an established organization or practice offers you the opportunity to gain experience, connect with colleagues, and determine your niche or area of practice.</p>
<p>3. How do I know if I am competent to establish a private practice?</p>	<p>The decision to enter private practice is one that should not be taken lightly. A registrant must be able to demonstrate competency in the chosen services, interventions or activities being provided. The registrant is responsible to assess their education, experience and supervised practice relative to the services they offer. The ACSW recommends that those entering private practice have a Master of Social Work (MSW) and at least five years of social work experience relevant to the proposed area of practice.</p>
<p>4. Can I operate my private practice in other provinces without registering with the</p>	<p>If you operate a private practice that offers services to clients in another province, you are responsible to understand the registration requirements in that province. Most provinces have mandatory registration for social work which means that if you are</p>

social work regulatory college of that province?	practicing in the scope of social work practice in that jurisdiction and are eligible for registration, you must be registered. In some provinces, the activity of psychotherapy is regulated under a different college e.g. the College of Registered Psychotherapists of Ontario. You must be aware of the regulatory landscape in the province in which you wish to practice.
5. How do I determine the kinds of services, activities or interventions I offer as part of my private practice?	<p>It is the responsibility of the social worker considering private practice to assess one's own competence in working independently. The CASW (2005) Code of Ethics asserts that "Social workers have a responsibility to maintain professional proficiency, to continually strive to increase their professional knowledge and skills, and to apply new knowledge in practice commensurate with their level of professional education, skill and competency..." (p.8)</p> <p>The following are some questions one may want to consider.</p> <ol style="list-style-type: none"> 1. What are the best and evidence informed practices relevant to the population I plan to serve or the activities/interventions I plan to deliver? 2. What is my experience in the practice area I am interested in pursuing? 3. What formal training or continuing education have I completed to ensure that I have the appropriate skills, knowledge, and competencies to practice in this area? 4. How will I develop and maintain competence in the full range of activities, interventions and services I plan to offer? 5. What are my identified gaps and how will I address them? 6. Are there practice resources or standards/guidelines that I should be knowledgeable about? 7. How will I obtain consultation or supervision?
6. What kind of professional liability insurance do I require?	All registered social workers require professional liability insurance. The College has no other specific guidance on liability insurance; however, you may wish to discuss additional general

	liability insurance and other coverage (e.g. cyber coverage) if you have a private practice. It is prudent to discuss your situation with an insurance professional.
7. Can I hire other social workers or health professionals if I have a private practice?	A registrant can hire or work with different health professionals. Other regulated health professionals would follow professional expectations from their own college. Clients should be made aware of what services they are receiving, from whom, how information is shared, and any limits on activities or interventions that can be provided.
8. Can I operate a private practice from my home?	<p>There is no College Standard or policy that prevents you from operating a private practice from an office that is also located in your place of residence. However, your municipality may have relevant by-laws or regulations in place related to the operation of a business (especially if clients are physically attending the place of business). It is advised that this be explored prior to establishing a residential office.</p> <p>Other questions to ask yourself include:</p> <ul style="list-style-type: none"> • What is the service I am offering and who is the population being served? What are the potential risks associated with the service and/or population? • How will I manage boundaries and privacy, both for myself and for my clients? • Where in my residence will I conduct my business and is it accessible, appropriate, and safe for myself and clients?
9. Can I have a private practice if I am employed with an organization or agency? In other words outside of my regular employment?	<p>Registrants in private practice can also have employment with organizations providing health/social service delivery. A common dilemma for some social workers is whether they can see agency clients privately.</p> <p>It is important that social workers engaged in private practice, while being employed with organizations, consult with their agency regarding conflicts of interest policies. Registrants must ensure that this does not contravene any contractual obligations and does not pose a conflict of interest. Some employers require employees to disclose and review any outside employment for potential conflict of interest.</p>

Leaving a Private Practice	
10. If I leave a private practice, can I ask clients to follow me to my new practice?	<p>Deciding to leave a private practice and how to manage existing clients can be a complex decision. Consider the following:</p> <ul style="list-style-type: none"> • Any existing contractual obligations including a non-solicitation or non-compete clause. • Autonomy and self-determination. Clients should have the right to choose their provider and asking them to follow you may create a situation where they feel unduly influenced and unable to exercise autonomy. <p>Consulting a lawyer with these types of contractual questions is always advised.</p>
11. Can a private practice charge me a fee to take my clients to my new practice?	Review the terms and conditions of any contract you signed. Some contracts include client transfer fees where the practice owner may require payment if you continue seeing clients who originally came through their business. Consulting a lawyer with these types of contractual questions is always advised.
Fees & Billing	
12. Why doesn't ACSW establish a private practice fee schedule?	<p>The <i>Health Professions Act</i> does not permit regulatory colleges to set professional fees, provide guidelines for professional fees or negotiate professional fees on behalf of some or all of its regulated members.</p> <p>HPA HEALTH PROFESSIONS ACT RSA 2000 Chapter H-7 3(2).</p>
13. Can social workers take a client's credit card information to input into billing software?	<p>Yes, a registrant in private practice can enter a client's credit card information into a billing system. Consider the following:</p> <ul style="list-style-type: none"> • Is the client aware and do you have the client's consent? • Does the billing system meet industry privacy and security requirements and standards? • Are you using a secure platform? • Can you limit access to the system? • Are you maintaining up to date and accurate records of consent, payment processing and communication?

<p>14. Can I offer a promotion to increase my clientele?</p>	<p>Registrants are permitted to offer a promotional rate to clients; however, it is important to avoid potential risks. These risks may include an offer that promotes unnecessary treatment, unduly influences a client's decision to receive treatment, or acts as a barrier once the promotional rate ends. It is <u>not</u> permitted to offer a discount for prompt payment, i.e., an 'early bird' rate.</p> <p>Discussing practice about promotional fees and packages, is part of informed consent and any variance to the usual fee schedule should be documented.</p>
<p>15. Can I offer gift cards?</p>	<p>ACSW recommends gift cards not be used due to the situations that might arise.</p> <p>If you are considering offering a gift card, anticipate how you might handle possible situations that might come up.</p> <ol style="list-style-type: none"> 1. Unbeknown to you, a client of yours that you are seeing individually purchases a gift card for a member of their family. The family member contacts you wanting to book an appointment with you and use the gift card. How would you handle this conflict-of-interest situation? 2. A client wants a refund for a gift card previously bought. How do you handle this? 3. Years later, you are working in a different capacity, a former client wants to use the gift card. How do you handle this situation? 4. The recipient of a donated gift card wants to use it to book services, but their needs don't match what the clinic can provide. How do you handle this situation? <p>While selling gift cards is not prohibited, there are risks and you must be clear on how you will handle possible situations that may arise and ensure continued alignment with best clinical practices and the Professional Practice Standards.</p>
<p>16. Can a student or supervisee at my private practice charge fees?</p>	<p>If registrants and students comply with any professional, credentialling or academic requirements, students and supervisees can charge a fee for services. Registrants and their students and/or supervisees must ensure that the client understands what is included in the fees they are paying, document</p>

	<p>client consent in the client record, and indicate the reason or reasons why a fee may have been reduced or waived.</p> <p>The following information should be included in financial records:</p> <ul style="list-style-type: none"> • clear identification of the person(s) providing the service and their title • a clear identification of the client to whom the service was provided – client's full name and address, and unique identifier (if applicable) • identification or description of the service provided • the cost of the service • date and method of payment received; and • fees charged for services provided by supervised personnel <p>Students and supervisees may <u>not</u> use the title social worker or any other protected title unless they have appropriate authorization to do so.</p>
Advertising	
<p>17. Can you email individuals to solicit business (e.g. Following up on a free consultation with someone who did not re-book)?</p>	<p>The ACSW does not have specific guidance about following up with potential clients. Before contacting individuals, who have inquired about your services, but not booked or engaged in your services, consider:</p> <ol style="list-style-type: none"> 1. Will the individual feel unduly pressured? 2. How will you communicate the individual's freedom to choose to engage with your services? 3. How many times would it be appropriate to follow up with a potential client before ceasing email communication? 4. How can individuals unsubscribe from your emails?
<p>18. Is it appropriate to include personal information about myself, my family, and my relationships on my</p>	<p>The ACSW expects a social worker to be aware of how their personal representations may reflect on the profession. This includes considering what type of content is appropriate to place in a public medium. The ACSW does not have specific guidance about self-disclosure as part of advertising one's private practice. As a</p>

<p>website and in my advertising?</p>	<p>registered social worker consider the following when establishing your advertising:</p> <ol style="list-style-type: none"> 1. What is the intention or purpose of the self-disclosure? 2. How might the disclosure impact your professional relationship with the client? 3. How personal is the self-disclosure you are contemplating? 4. How will you manage boundary setting with a client who is seeking additional disclosure from you about other personal matters? 5. Is the information what you would share with a client if you were in person? 6. What are any potential risks or impacts for you and your family because of the disclosure of personal information.
<p>19. What do I do if I advertise on third party platforms whose descriptions or categories of practice are misleading or incomplete?</p>	<p>Registrants are expected to identify and describe education, training experience, professional affiliations, competence, nature of service and actions in an honest and accurate manner. If a registrant is considering advertising on a third-party platform, they should consider:</p> <ul style="list-style-type: none"> • Does this platform use language that could be misleading and how might I mitigate it? • Can I have the platform correct the problematic language? • Are there other platforms I could use to advertise? • How can I ensure my description is clear and not misleading in any way?
<p>20. Do I have to use the term social work in my advertising? Can I use the term mental health therapist, counsellor or consultant depending on my practice</p>	<p>All registered social workers who are working within the scope of social work practice <u>must</u> hold an active registration and <u>must</u> ensure clients know they are registered social workers. Clients should also know as part of the informed consent process of their right and ability to file a complaint with the ACSW. If you are providing a service that commonly uses another descriptor, e.g.: mental health counselling, consulting, consider the following titling options:</p> <p>Jimmy Cricket RSW Mental Health Therapist</p>

	<p>or</p> <p>Jenny Cricket</p> <p>Registered Social Work</p> <p>Addictions Counsellor</p> <p>This displays both your professional designation and your role.</p>
Record keeping	
21. Can I use artificial intelligence (AI) to create a session summary?	<p>Using AI in professional social work practice can offer powerful tools, but also raises important ethical, practical and relational considerations.</p> <p>Consider the following:</p> <ul style="list-style-type: none"> • Does the AI tool protect client data in accordance with privacy laws (e.g. HIA, POPA, ATIA, PIPA)? • Are clients aware of how AI is being used and what it means for their data or decisions? • Could the AI reinforce systemic biases or exclude marginalized populations? • What is the AI being used for? <ul style="list-style-type: none"> ◦ Administrative support (e.g. scheduling, documentation)? ◦ Clinical decision support? ◦ Risk assessment or predictive analytics? • Is it replacing or augmenting human judgment? • Can you explain how the AI works to clients or colleagues? • Who is responsible if the AI makes an error or influences a poor decision? • Is there a human review process in place? • Do you understand the tool well enough to use it responsibly? • Have you received training or guidance on ethical AI use? • Can you critically evaluate its outputs?

	<p>If a registrant chooses to use AI in delivering a professional service, the registrant is still accountable for the substance of the note or document. If AI is used, a registrant must still review and finalize the document.</p> <p>If a client does not provide consent, a registrant may not use AI.</p>
Consent	
22. In private practice, is there anything unique I must consider around informed consent?	<p>The ACSW standards of practice outlines the requirements regarding informed consent. Whether you are in private practice or in an employment relationship with an organization or agency, the consent requirements are the same.</p> <p>Consider the context and the information a client would reasonably expect to receive regarding the services you are providing and how you provide them in order to ask questions and make an informed decision about consent.</p>
Contingency Planning	
23. When appointing a professional executor, a) does the executor have to be a registered social worker or can they be another regulated professional? b) do they have to be a regulated health professional?	<p>A professional executor does not have to be a registered social worker or a regulated health professional. Consider the role of the professional executor and who is best suited to ensure the provisions of the professional will are carried out. If they are unable to carry out the professional activities, a registrant should ensure individual(s) are identified who can provide the professional service.</p> <p>Consider the following when determining your executor:</p> <ul style="list-style-type: none"> • Do they have a comprehensive understanding of social work practice and the specific requirements of your area of practice? This might mean choosing a colleague or another medical professional who understands the nuances of running a private practice. • Does the executor need to be a regulated health care professional to make certain decisions or handle specific aspects of the practice?
Consultation and Supervision	
24. Is mentoring and coaching the same as	Mentoring, coaching, consultation and supervision can often be used interchangeably, however, they are distinct activities, used for different purposes with different accountabilities.

<p>consultation and supervision?</p>	<p>Mentoring</p> <p>Mentoring describes a relationship in which a more experienced colleague shares their greater knowledge to support the development of an inexperienced individual. Mentoring is typically a long-term, relationship-based process focused on career development and personal growth. Its goals are twofold:</p> <ul style="list-style-type: none"> • transferring knowledge and skills, • offering an opportunity for emotional support, confidence-building, and networking. <p>Coaching</p> <p>Coaching is a collaborative process focusing on specific skills and goals mutually defined by the coach and coachee. It is a structured, goal-oriented process that is typically performance-driven and focuses on specific results within a set timeframe.</p> <p>Consultation</p> <p>The Standards of Practice define consultation as “<i>a problem-solving process in which professional expertise is offered to an individual, group, organization or community</i>”. In a professional practice context, consultation is a process that occurs between two or more professionals, where one is seeking help, insight, or assistance regarding a particular matter or problem. The focus is narrow and specific and advice or guidance provided may or may not be actioned.</p> <p>Supervision</p> <p>The Standards of Practice defines supervision as, “<i>the professional relationship between a supervisor and a supervisee that includes evaluation and direction over the services provided and promotes the continued development of the supervisee's knowledge, skills, and abilities to provide services in an ethical and competent manner</i>.” In a supervisory relationship the supervisor is responsible for the supervisees practice and can provide direction the supervisee must follow.</p>
<p>25. Will ACSW offer sessions on establishing a private</p>	<p>No the ACSW will not be offering sessions on starting a private practice. The ACSW offers consultations regarding the Standards of Practice and Code of Ethics. Consider exploring resources</p>

practice, the legal requirements, record keeping, fees and billing?	offered through the Social Workers Association of Alberta (SWAA) and the Canadian Association of Social Workers (CASW)
26. How can I connect with social workers in private practice?	If you are considering establishing a private practice or have a private practice, consider reaching out to SWAA to connect with other social workers in the same area of practice.
27. Where can I get consultation or supervision from someone about private practice?	If your question is about the Standards or Code, ACSW offers a consultation service. If your question is more about how to establish a practice or managing a practice, consider reaching out to SWAA