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Re: Pandemic Action Plan for Continuing Therapy, March 15 – April 05, 2020

Sunday, March 15, 2020

To My Wonderful Clients,

The Alberta Government website for disease prevention and surveillance regarding COVID-19 expressed that “All Albertans returning from outside Canada after March 12 should self-isolate for 14 days after arrival in Canada and monitor for symptoms.” As you may know, I was away in Cuba from March 7-15, and while the risk to/in/from Cuba was low, this request gave me pause to consider more deeply the impact of exposure and transmission that we see occurring in the world around us and which we are hopeful to avoid.

There is a continuum of concern circulating that reaches from dismissive to panicked, and from angry to fearful. And I, likely similar to you, have seen social media responses with themes of social control versus social responsibility. In managing a balanced response to the epidemic, turned pandemic while away, my intent upon returning to Canada from vacation was to increase health and safety measures within the office and stay abreast of information, allowing clients to determine whether they wished their sessions to move on-line (video), over the telephone, or in-person. I wished to maintain as much normalcy, self-directedness, autonomy and trust as possible in allowing clients to determine the course and format of continuing treatment.

However, over the past few days there has been much consultation between colleagues with varied positions on this topic; exploration of information given by the College of Alberta Psychologists (CAP) and the Psychological Association of Alberta (PAA); and, most recently, access to a webinar provided to psychologists who are members of the PAA which has been made available to any and all interested people (I will include the link for that with this email) which offered insights from Dr. David Fisman, Infectious disease epidemiologist. The themes of the information contained within that webinar seemed clear: social distancing offers good hope and *proactive* measures are what will mediate the spread of this virus. Dr. Fisman suggests, we “embrace virtual connectivity as much as possible”.

I have weighed options, outcomes, and impact, as a private individual, as a professional, and as part of a greater collective, and have done so to the best of my ability, with the information available. Though the risk in Alberta currently remains low, I have decided to make the decision to make therapy sessions available on-line or over the telephone for a minimum of three weeks, to be re-evaluated in two weeks after my self-isolation period.



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This choice was not made lightly; this excess of caution comes down to community values. There may be clients who do not agree and may feel upset with the interruption of services. I whole-heartedly respect those opinions and offer that I am certainly open to discuss any questions or concerns over the telephone.

If you have already booked a session with me, we may keep our booked time and will meet online via Zoom or Doxy.me, or via telephone. You will be contacted by telephone, this week, to inquire as to your preference and I will go over informed consent for these processes as we meet, virtually. Note that there will be no late-cancellation fees during the pandemic and you are urged to make your health and wellness your first priority.

During this time, stress can be amplified by media coverage. Therefore, I encourage you to limit your media exposure, draw from your internal and external resources and utilize coping skills that soothe, redirect and reassure. The office will be heavily cleaned and sanitized upon our return to office use. Thank you for continuing to trust me with your therapeutic needs, and I look forward to connecting with you soon.

Please see the body of the email through which this letter was sent for additional sources of information.

With best wishes and prayers for your health and wellbeing and that of our global community,

Penny Waller Ulmer, R. Psych #5090