

Nova Scotia Board of Examiners in Psychology

SUMMARY OF DECISION OF INVESTIGATION COMMITTEE

Steven Dunsiger, MA, R. Psych.
Registration number: R0103

A panel of the Investigation Committee of the Nova Scotia Board of Examiners in Psychology (the “**Committee**”) concluded its investigation into a complaint against Steven Dunsiger by issuing its decision dated November 3, 2021.

The Committee reached agreement with Mr. Dunsiger with respect to the disposition of the complaint.

A summary of the complaint and disposition appears below.

OVERVIEW OF COMPLAINT AND SUMMARY OF INVESTIGATION

This matter was initiated by a formal complaint dated December 8, 2020, regarding the conduct and competence of Mr. Dunsiger as a registered psychologist in Nova Scotia. A panel of the Investigation Committee, formed in accordance with section 35 of the *Psychologists*, SNS 2000, c 32 (the “**Psychologists Act**”) was responsible for the investigation of this complaint.

The complainant is a former client of Mr. Dunsiger.

Mr. Dunsiger provided a written response to the complaint on January 15, 2021. The complainant replied to Mr. Dunsiger’s written response on February 14, 2021. A final reply from Mr. Dunsiger was provided on March 19, 2021, as well as the complainant’s clinical file for the Committee’s review.

On July 24, 2021, a registered psychologist retained by NSBEP completed an audit review of Mr. Dunsiger’s practice. The completed audit report was provided to the Panel on August 2, 2021.

On August 26, 2021, the Panel met virtually with Mr. Dunsiger in order to clarify some of the Committee’s questions and concerns related to the complaint. At this time, the Committee requested additional information related to the complainant’s clinical file, which had not been initially disclosed by Mr. Dunsiger.

Mr. Dunsiger does not have a disciplinary history with the Nova Scotia Board of Examiners in Psychology (“NSBEP”).

ISSUES

The issues identified for investigation based on the letters of complaint were:

1. Did Mr. Dunsiger fail to adhere to accepted standards or ethics of practice in:
 - a. His professional conduct towards the complainant?
 - b. His record keeping of the complainant’s clinical file?; and

- c. His administration of informed consent?
2. Has Mr. Dunsiger appropriately maintained competence, within his scope of practice?

KEY POINTS AS RAISED BY THE COMPLAINANT

The complainant raised several concerns regarding Mr. Dunsiger's practice, including the following:

- Mr. Dunsiger sometimes held the complainant in psychological sessions for longer than their scheduled duration of one hour (sometimes as long as two hours). However, the complainant was not charged for any overages for these extended sessions; and
- Mr. Dunsiger obtained information about the complainant's psychological profile and personality, including information that the complainant was a "nice person" from a police authority, prior to accepting them as a client and that Mr. Dunsiger informed the complainant of this fact.

MR. DUNSIGER'S RESPONSE

In Mr. Dunsiger's original response, dated January 15, 2021, he indicated that the complainant did not express any concerns to him, regarding the length of their sessions. Mr. Dunsiger acknowledged that sometimes sessions did go beyond the allotted one-hour but only up to an additional 20 minutes. Mr. Dunsiger noted that the complainant was not billed extra for sessions that exceeded one hour and that the complainant had not indicated any issue with sessions that did go over time.

In the complainant's February 14, 2021 reply to Mr. Dunsiger's response, the complainant maintained that they were kept in session for up to two hours and did not say anything to Mr. Dunsiger concerning the overage of time, because the complainant was concerned with how Mr. Dunsiger would respond. In his follow-up response dated March 19, 2021, Mr. Dunsiger indicated that the complainant had been able to bluntly tell him of their upset or negative feelings during sessions, on several occasions.

In Mr. Dunsiger's original response, he also confirmed that he had received information pertaining to the complainant from a police authority and that this did influence his decision to accept the complainant as a client. He indicated that he disclosed this to the complainant in order to be transparent.

AUDIT REPORT

The Committee retained a registered psychologist to audit Mr. Dunsiger's practice.

The report found the following:

- Mr. Dunsiger hand wrote his case notes, which were often difficult to read;

- the content of Mr. Dunsiger's notes sometimes lacked specificity;
- Mr. Dunsiger's record keeping could make continuity of care difficult; and
- Mr. Dunsiger's clinical files did not consistently contain a detailed treatment plan and/or case conceptualization.

The auditor noted that Mr. Dunsiger maintained his records in a manner that allowed Mr. Dunsiger to work with clients "ethically and effectively", despite legibility issues with handwritten notes and a lack of specifics of strategies utilized in some cases.

DISCUSSION

Client sessions

With respect to the complainant's allegation that they were held for sessions longer than their scheduled time, the Committee found that Mr. Dunsiger acknowledged that the complainant's sessions sometimes went longer than the one-hour allotted time, but noted the complainant was not billed for the additional time and the complainant did not express concern about the extended session.

It was the opinion of the Committee that this did not constitute a breach of the standards of practice or ethics.

Obtaining information from the RCMP

In regards to the complainant's concerns about Mr. Dunsiger having obtained information about the complainant from a member of a police authority, including that the complainant was a "nice person", Mr. Dunsiger advised during his interview that he was provided with this information prior to ever meeting the complainant. Mr. Dunsiger further explained that he only realized these comments were in regard to the complainant during their initial session and that he disclosed this information to the complainant, in order to be transparent. He indicated that this information did influence his decision to accept the complainant as a client, whereas he had been hesitant to do so otherwise.

It was the opinion of the Committee that Mr. Dunsiger's conduct in this regard did not constitute a breach of ethics and that he provided the complainant with this information in an ethical manner.

Recording keeping

In reviewing the information gathered during the course of this investigation, and specifically in reviewing the complainant's clinical file as produced by Mr. Dunsiger, the Committee identified significant concerns pertaining to Mr. Dunsiger's record keeping practices. Specifically, Mr. Dunsiger's clinical file was handwritten and difficult to read, there appeared to be information missing, including biographical information, consent forms, a letter referred to in the case notes, and detailed information regarding the client's presenting issues and treatment plan, and there was limited information regarding the specific services being provided to the complainant.

Mr. Dunsiger admitted he was "out of date" regarding knowledge of such standards for record keeping and needed improvement in this area.

Further, although Mr. Dunsiger indicated he screened clients for symptoms of COVID-19 for in-person sessions, he acknowledged he has not maintained records of such screenings.

Similarly, he did not document having obtained informed consent for telepsychology practice.

The Committee found that Mr. Dunsiger's conduct with respect to record keeping engaged the following:

- NSBEP Standards of Professional Conduct, Principle 7.2 – complete client records;
- NSBEP Standards for Providers of Psychological Services, Standard V.1 – accurate record keeping and current records; and
- Canadian Code of Ethics for Psychologists, Principle II. 21 – creation of records sufficient to support continuity of care.

Further, Mr. Dunsiger's failure to document COVID-19 screening question responses engaged the NSBEP COVID-19 Pandemic Practice Guidelines, issued to NSBEP registrants on May 7, 2021.

Informed consent

The Committee observed that there were no consent forms contained within Mr. Dunsiger's clinical file, nor any apparent references made to obtaining verbal consent referenced within his case notes. He indicated he does not use consent forms as he does not view signing a consent form as constituting informed consent. He did note that he explains limits of confidentiality to clients as well as the client's right to withdraw from services, but does not provide this information to clients via a consent form.

Additionally, Mr. Dunsiger had difficulty outlining aspects of consent related to telepsychology practice and, while he stated he does obtain consent for telepsychology, he also does not document this in his clinical files.

Mr. Dunsiger's conduct in this regard engaged the following:

- NSBEP Standards of Professional Conduct, Principle 5.1 – informed consent with respect to the delivery of all psychological services;
- NSBEP Standards of Professional Conduct, Principle 5.2 – informing clients of the limits of confidentiality;
- NSBEP Standards for Providers of Psychological Services, Standard II.2 – clearly defined policies and procedures to structure the delivery of services; and
- Canadian Code of Ethics for Psychologists, Principles I.17, I.21, I.22, and I.23 – informed consent.

Maintaining competence, scope of practice, and consultation

The Committee is of the opinion that Mr. Dunsiger likely has not maintained current knowledge

and professional development in his areas of practice, namely CBT and the treatment of PTSD.

Mr. Dunsiger advised the Committee he typically uses CBT as his primary modality for intervention, as well as “story-telling” therapy. In the complainant’s clinical file, Mr. Dunsiger made notations indicating he was using “CBT”, but did not always provide details about particular strategies he employed in each session, or indicate how techniques he implemented related to an overall treatment plan. In his interview, he described examples of CBT techniques he may have employed with the complainant while acknowledging his notes “should have been more explicit” with respect to the types of activities completed in sessions.

In his interview, Mr. Dunsiger confirmed his continuing competency activities have centered around peer consultation and self-directed readings.

With regard to the complainant, Mr. Dunsiger indicated he was reluctant to accept them as a client due to the complexity of their presenting issues and having seen a number of mental health providers in the past. Nevertheless, he agreed to accept the complainant as a client and acknowledged he did not engage in consultation regarding the complainant’s treatment despite these concerns.

Although Mr. Dunsiger indicated he consulted with the complainant’s psychiatrist, when asked for details about this consultation he acknowledged he advised the complainant’s psychiatrist that the complainant was attending sessions, but apparently did not make use of this opportunity to engage in case consultation.

On the basis of these considerations, it was the opinion of the Committee that Mr. Dunsiger may not have adequately maintained current knowledge and professional development in CBT and the treatment of PTSD, thus engaging the following:

- NSBEP Standard for Providers of Psychological Services, Standard IV.2 – maintain current knowledge of scientific and professional development;
- Canadian Code of Ethics for Psychologists, Principle II.6 – carry out only those activities for which they have established competence;
- Canadian Code of Ethics for Psychologists, Principles II.8 and III.35 – consultation; and
- Canadian Code of Ethics for Psychologists, Principles II.9 and IV.3 – keep up to date with relevant knowledge, research methods, techniques, and technologies.

DISPOSITION

The Investigation Committee determined there is sufficient evidence that, if proven, would constitute professional misconduct and/or incompetence and warrants a registration sanction.

In lieu of forwarding this matter to the Hearing Committee and with the consent of Mr. Dunsiger, the Investigation Committee orders the following pursuant to section 35(11) of the *Psychologists Act*, Mr. Dunsiger is **reprimanded** for failing to:

- a. maintain client records in a manner that supported continuity of care;

- b. follow informed consent processes; and
- c. maintain current knowledge of scientific and professional developments in CBT and treatment of PTSD.

Further, Mr. Dunsiger agreed to:

- stop accepting new clients effective November 4, 2021; and
- retire permanently from the practice of psychology within six months.

Mr. Dunsiger shall undertake the following **re-education and training**:

- a. To participate in mentorship with a mentor approved by the Board for the remainder of his practice of psychology; and
- b. To arrange for the mentor to submit monthly reports to the Board.

A reprimand is a registration sanction. Mr. Dunsiger has consented to the reprimand and the re-education training.

The Committee believes that the disposition outlined above reflects its serious concerns with Mr. Dunsiger's practice and conduct.

The Committee believes the public interest is served by reprimanding Mr. Dunsiger and requiring remedial re-education and training.