Sanctuary Christian Counseling: INFORMED CONSENT FOR TELETHERAPY

This Informed Consent for Teletherapy contains important information focusing on doing psychotherapy using the phone or the Internet. Please read this carefully and let us know if you have any questions. This document is meant to be understood in addition to the Informed Consent General policy, which includes information about therapy in general that also applies to teletherapy. When you sign this document, it will represent an agreement between us.

Telehealth, or online therapy, is an up-and-coming way to deliver therapy in this Internet age, and it also makes it possible for us to connect and help you fulfill your goals even when meeting face-to-face is difficult, or not wanted or advisable.

Benefits and Risks of Teletherapy

Teletherapy refers to providing psychotherapy services remotely using telecommunications technologies, such as video conferencing or telephone. One of the benefits of teletherapy is that the client and clinician can engage in services without being in the same physical location. This can be helpful in ensuring continuity of care if the client or clinician moves to a different location, takes an extended vacation, or is otherwise unable to continue to meet in person. It is also more convenient and takes less time. Teletherapy, however, requires technical competence on both our parts to be helpful. Although there are benefits of teletherapy, there are some differences between in-person psychotherapy and teletherapy, as well as some risks. For example:

- Risks to confidentiality. Because teletherapy sessions take place outside of the therapist's private office, there is potential for other people to overhear sessions if you are not in a private place during the session. On our end we will take reasonable steps to ensure your privacy. But it is important for you to make sure you find a private place for our session where you will not be interrupted. It is also important for you to protect the privacy of our session on your cell phone or other device. You should participate in therapy only while in a room or area where other people are not present and cannot overhear the conversation. If your therapist is concerned about the confidentiality on your end they may postpone or end your session, and you will still be responsible for any costs. It is YOUR responsibility to make sure you are in a safe and confidential location to talk to your therapist.
- <u>Issues related to technology</u>. There are many ways that technology issues might impact teletherapy. For example, technology may stop working during a session, other people might be able to get access to our private conversation, or stored data could be accessed by unauthorized people or companies. We have taken steps to mitigate these risks by using a secure Internet platform, iTherapy and Secure Video, which are fully HIPAA compliant. If there are technical problems, your therapist will make every effort to fix them, but may

- have to postpone or end a session, in which case they will determine if there is a charge to you, or if the session will be rescheduled without charge.
- <u>Crisis management and intervention</u>. Usually, we will not engage in teletherapy with clients who are currently in a crisis situation requiring high levels of support and intervention. Before engaging in teletherapy, we will develop an emergency response plan to address potential crisis situations that may arise during the course of our telepsychology work.
- <u>Efficacy</u>. Most research shows that telepsychology is as effective as in-person psychotherapy. However, some therapists believe that something is lost by not being in the same room. For example, there is debate about a therapist's ability to fully understand non-verbal information when working remotely. This is something we will discuss with you in our sessions, if necessary.

Electronic Teletherapy Communications

We will decide together which kind of teletherapy service to use, but it will most likely be video using our secure platform which overlays Zoom. It is quite secure and private, and no one can get into the session without your permission.

You may have to have certain computer or cell phone systems to use teletherapy services. You are solely responsible for any cost to you to obtain any necessary equipment, accessories, or software to take part in teletherapy.

How to do it --You need to have the Zoom app downloaded on your computer, tablet or phone, but you will find a better experience with a larger screen. "SecureVideo," our video provider, will email you a link to the session, plus reminders. At your first notice, you will be invited to RSVP. Please do so. At your last reminder, just before the session, you will be prompted to enter the waiting room. Please do that, and we will join you as soon as we are free. You will need to turn on both the video and audio components for us to hear and see each other.

The cost will be the same as your in-person fee. Please be prepared to give us your credit or debit card information at the end of the session, and we will run your card using Square, as we have always done. We ask that, once you've done that, you allow us to store your card in our private and confidential devices so that we can skip the payment step in your next session and charge you after the session. It saves time and effort on your part. Your signature below also allows us to do this.

Emergencies and Technology

Assessing and evaluating threats and other emergencies can be more difficult when conducting teletherapy than in traditional in-person therapy. To address some of these difficulties, we will create an emergency plan before engaging in teletherapy services. We will ask you to identify an emergency contact person who is near your location and who we could contact in the event of a crisis or emergency to assist in

addressing the situation. Your signature on the bottom of this document agreeing to teletherapy will also serve as our authorization to contact the emergency person we agree upon, whose name and contact information you have already listed on the Client Overview and Signature Page. We will only contact your emergency contact person as needed during such a crisis or emergency.

If the session is interrupted for any reason, such as the technological connection fails, while you are having an emergency, do not call me back; instead, call 911, or go to your nearest emergency room. Call me back after you have called or obtained emergency services.

If the session is interrupted and you are not having an emergency, disconnect from the session and I will wait two (2) minutes and then re-contact you via the teletherapy platform on which we agreed to conduct therapy, in this case Zoom/SecureVideo. If you do not receive a call back within two (2) minutes, then call me on the phone number I provided you (717-200-3158).

If there is a technological failure and we are unable to resume the connection, you will only be charged the prorated amount of actual session time. For this purpose, it is understood that a therapeutic hour is 45 minutes.

Confidentiality

The teletherapy sessions shall not be recorded or photographed in any way unless agreed to in writing by mutual consent. We will maintain a record of our session in the same way I maintain records of in-person sessions in accordance with our policies.

I/we understand that telehealth includes consultation, treatment, transfer of medical data, emails, text messages, telephone conversations and education using interactive audio, video or data communications. I/we understand that telehealth may also involve the communication of my medical/mental health information.

I understand that I have the following rights and responsibilities with respect to telehealth:

- 1. I/we understand that in order to participate in a telehealth session, I/we must sign, date and return this form to our Sanctuary therapist before the start of the first session.
- 2. I/we have the right to withhold or withdraw consent at any time without affecting my/our right(s) to future care or treatment, but it may not be possible to do that treatment online in that instance.
- 3. I/we understand our sessions will be conducted using Zoom and SecureVideo or another HIPAA-compliant video platform. I/we will arrange a safe location with sufficient lighting and privacy that is free from distractions or intrusions for my/our teletherapy session.

- 4. I/we understand that every attempt has been made to secure our emails in a HIPAA-complaint form using Hushmail, and our phone calls and texts using phone.com, but it is possible that at times privacy could be compromised by events outside of our control. In addition, communication to and from our cell phones and their numbers is not HIPAA compliant and not private. By using these methods of communication, I/we signify we are aware of the risks of not having complete confidentiality.
- 5. I/we understand that there are risks and consequences in using teletherapy, including, but not limited to, the possibility, despite reasonable efforts on the part of our Sanctuary Christian Counseling therapist that: the transmission of my/our information could be disrupted or distorted by technical failures; the transmission of my/our information could be interrupted by unauthorized persons; and/or the electronic storage of my medical information could be accessed by unauthorized persons.
- 6. I/we understand that online-based services may not be as complete as face-to-face services. I/we also understand that if our therapist believes I/we would be better served by another form of therapeutic services (i.e. face-to-face services), I/we will be referred to a professional who can provide such services in my area, provided one is available.
- 7. Finally, I/we understand that there are potential risks and benefits associated with any form of mental health therapy, and that despite my/our efforts or those of my/our therapist, my/our condition may not improve, and in some cases, even get worse. I/we understand that I/we may benefit from telehealth, but the results cannot be guaranteed or assured by my/our therapist.
- 8. I/we accept that telehealth and Sanctuary Christian Counseling do not provide emergency services. If I/we am/are experiencing an emergency situation, I/we will call 9-1-1 or proceed to the nearest hospital emergency room for help. If I/we am/are having suicidal thoughts or making plans to harm myself/ourselves, I/we will call the National Suicide Prevention Hotline at 1-800-273-TALK (8255) for free 24-hour support.
- 9. I have read, understand and agree to the information provided in this informed consent for teletherapy document and I/we consent to telehealth therapy with a Sanctuary Christian Counseling therapist.

	(client 1 signature)
(client 1 printed name)	(date)
	(client 2 signature)

(client 2 printed name)	(date)
	(client 3 signature)
(client 3 printed name)	(date)
	(client 4 signature)
	(onone roighaearo)
(client 4 printed name)	(date)
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Our emergency contact, who is geographically close to	us and can respond in a crisis,
is:	
(name)	
(relationship)	
(contact information, phone, email, etc.)	
Additional information or contacts:	