INFORMED CONSENT FOR TELEPSYCHOLOGY & ELECTRONIC COMMUNICATIONS

Ann Dunnewold, PhD

This Informed Consent contains important information focusing on psychotherapy over telephone or the Internet and on communication via electronic means. Please read this carefully and let me know if you have any questions. When you sign this document, it will represent an agreement between us.

Telepsychology refers to providing psychotherapy services remotely using telecommunication technologies, such as video conferencing or telephone. Benefits of telepsychology include 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, as in illness or pandemic. It is also more convenient and takes less time. Telepsychology, however, requires technical competence on both our parts to be helpful. Although there are benefits of telepsychology, there are some differences between in-person psychotherapy and telepsychology, as well as some risks. For example:

* Risks to confidentiality. Because telepsychology sessions take place outside the therapist’s private office, there is potential for others to overhear sessions if you are not in a private place during the session. On my end I will take reasonable steps to ensure your privacy. But it is important for you to 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. Please participate in therapy only while in a room or area where others are not present and cannot overhear the conversation.
* Issues related to technology. There are many ways that technology issues might impact telepsychology. For example, technology may stop working during a session or others might be able to access to our private conversation. If the session is interrupted due to technical issues, disconnect from the platform for two minutes and then re-enter your information to re-start the session. If I do not hear from you in two minutes, I will call the telephone number you have provided.
* Crisis management and intervention. Usually, I will not engage in telepsychology with clients who are in a current crisis situation requiring high levels of support and intervention. Before engaging in telepsychology, we will develop an emergency response plan to address potential crisis situations that may arise during the course of our telepsychology work.
* Efficacy and comfort. Research shows that telepsychology is about as effective as in-person psychotherapy. However, some therapists believe that not being in the same room means potential for each party having difficulties interpreting nonverbal communication. Client comfort level varies as well, with discomfort with virtual face-to-face versus in-person treatment. Please feel free to address your concerns and we will endeavor to address these issues.

The telepsychology system I use (https://doxy.me) meets HIPAA standards of encryption and privacy protection but we cannot guarantee privacy. You will not have to purchase a plan or download any software or app to use this platform. You will have to enter your name. No recordings are made of sessions. You may need certain computer or cell phone systems to use this platform; desktop or laptop ensures higher quality communication. You are solely responsible for any cost to you to obtain any necessary equipment, accessories, or software to take part in telepsychology.

*Electronic Communications*

For communication between sessions, I only use email communication with your permission, which you grant by signing this agreement, and only for administrative purposes unless we have made another agreement. This means that email exchanges with my office should be limited to administrative matters, such as setting and changing appointments, billing matters, and other related issues. You should be aware that I cannot guarantee the confidentiality of any information communicated by email. Therefore, I will not discuss any clinical information by email and prefer that you do not either. If you initiate discussion of clinical material, you have accepted full responsibility for any risks involved. Though I check email several times daily between sessions, I cannot respond immediately, so these methods should not be used if there is an emergency.

Treatment is most effective when clinical discussions occur at your regularly scheduled sessions. If an urgent issue arises, you should feel free to attempt to reach me by phone. I will try to return your call within 24 hours except on weekends and holidays. If you are unable to reach me and feel that you cannot wait for me to return your call, contact 911 or the nearest emergency room and ask for the psychologist or psychiatrist on call. If I will be unavailable for an extended time, I will provide you with the name of a colleague to contact in my absence if necessary.

*Confidentiality*

I have a legal and ethical responsibility to make my best efforts to protect all communications that are a part of our telepsychology and electronic communications such as email. However, the nature of electronic communication technology is such that I cannot guarantee that communications will be kept confidential or that other people may not gain access to communications. I will try to use updated encryption methods, firewalls, and back-up systems to help keep your information private, but there is a risk that our electronic communications may be compromised, unsecured, or accessed by others. You should also take reasonable steps to ensure the security of our communications (for example, only using secure networks for telepsychology sessions and having passwords to protect the device you use for telepsychology).

The extent of confidentiality and the exceptions to confidentiality that I outlined in my Services Agreement still apply in telepsychology. Please let me know if you have any questions about exceptions to confidentiality.

*Appropriateness of Telepsychology*

From time to time, we may schedule in-person sessions to “check-in” with one another. I will let you know if I decide that telepsychology is no longer the most appropriate form of treatment for you. We will discuss options of engaging in in-person counseling or referrals to another professional in your location who can provide appropriate services.

*Emergencies and Technology*

Assessing and evaluating threats and other emergencies can be more difficult when conducting telepsychology than in traditional in-person therapy. To address some of these difficulties, we must create an emergency plan before engaging in telepsychology services. In the space below, please identify an emergency contact person who is near your location who I will contact in the event of a crisis or emergency to assist in addressing the situation. By entering this information below, you are allowing me to contact your emergency contact person as needed during such a crisis or emergency.

Below, please include the names and telephone numbers of your local emergency contacts (including local physician; crisis hotline, trusted family, friend or confidant. By including this information, you provide permission to contact these sources.)

Physician or Psychiatrist Name & Relationship Contact Number

Crisis Hotline and Local Crisis Center Name Contact Number

Family Member Name & Relationship Contact Number

Friend Name & Relationship Contact Number

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

*Fees*

The same fee rates will apply for telepsychology as apply for in-person psychotherapy. During the 2020 COVID 19 pandemic, Texas insurance providers have been mandated to cover sessions that are conducted via telecommunication. At other times, please contact your insurance company prior to our engaging in telepsychology sessions in order to determine whether these sessions will be covered, if you wish.

*Records*

The telepsychology sessions shall not be recorded in any way, by either party, unless agreed to in writing by mutual consent. I will maintain a record of our session in the same way I maintain records of in-person sessions in accordance with my policies.

*Informed Consent*

This agreement is intended as a supplement to the general informed consent that we agreed to at the outset of our clinical work together and does not amend any of the terms of that agreement.

Your signature below indicates agreement with its terms and conditions.

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Client Date

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Ann Dunnewold, PhD Date