



## Tele-therapy Consent and Policy Form

This document outlines Partnership Health Centers' office policies related to use of Tele-therapy as either a substitute for or in addition to in office, face to face visits. It will help you to understand the variety of issues involved in telehealth, including but not limited to: Benefits, Risks and Limitations; Method of Delivery of Tele-Therapy; Assessment and Reassessment of Progress and Effectiveness; Procedures When Interruption of Services Occurs; Emergency Procedures/Verification of Location; Appropriate Environment/Conduct/Privacy/Confidentiality, Telephone Sessions

If you have any questions about anything within this document, Partnership Health Centers encourages you to discuss them with your licensed clinician at any time. As new ethical guidelines and laws are developed this policy may be amended and you will be notified of any policy changes both verbally and in written form.

### Benefits, Risks and Limitations of Tele-Therapy

Under most circumstances, tele-therapy, AKA remote counseling/psychotherapy, should not be viewed as a substitute for face-to-face counseling; however, certain circumstances may arise that lead us to determine that short or longer term tele-therapy is clinically indicated and in your best interest.

Typically, remote counseling is used as an adjunctive treatment option in the event that our licensed clinician or you, the client, are unable to travel to the office. These situations include, but are not limited to, illness, inclement weather, or some emergency situations such as a natural disaster.

Inherent in the use of tele-therapy are certain risks and limitations, including, but not limited to:

- Lack of visual and/or audio cues, leading to misunderstanding/misinterpretation;
- Delayed responses;
- Technology failures that lead to disruptions and decrease the quality of the service;
- Unsuitability for clients experiencing a psychological crisis, acute psychosis, or suicidal or homicidal thoughts;
- Confidentiality breaches.

Research supports tele-therapy as an effective psychotherapy tool. It has shown to have similar results as traditional face-to-face, in office therapies. But, as with in-office treatment, it varies depending on the person accessing services. There are many potential benefits to engaging in remote psychotherapy services including but not limited to:

- **Flexibility and Convenience:** With tele-therapy, it's almost always in the comfort of your own home or office. It can reduce scheduling barriers and reduce the wait time for an appointment;
- **Privacy:** when special safeguards are adhered to (see below), it can be as secure as face-to-face sessions;
- **Efficiency:** It eliminates the need to get in the car, on the train or ride the bus to your appointment. As long as you are in a private and secure space, your commute can be steps away;
- **Accessibility:** Remote psychotherapy allows for those who would otherwise be unable to receive mental health services. Such as individuals who experience transportation barriers due to illness, physical limitations, child-care challenges, lack transportation options, or reside in rural or remote areas. Additionally, tele-therapy may also be a useful temporary substitute when the weather creates dangerous travelling conditions;



### **Assessment and Reassessment of Progress and Effectiveness**

As with face-to-face, in office treatment, your remote psychotherapy treatment plan will be individualized and will be assessed/reassessed on a regular basis. We need to carefully monitor the effectiveness of the treatment platform and evaluate your overall progress. As with your face-to-face, in office visits, our licensed clinician may ask you to complete brief questionnaires/assessments about your thoughts, feelings and behaviors. Homework may be assigned on a more regular basis in order to supplement the work we are doing remotely.

### **Method of Delivery of Tele-Therapy**

Tele-therapy with Partnership Health Center will be provided through a HIPAA Compliant, synchronous, video-conferencing platform. There will be no fee for clients to utilize these platforms.

### **Logging in**

You will be sent a link. In some cases, you may need to click on the camera, microphone, and audio icon to set up your camera, microphone, and speakers. Most computers, tablets and smartphones will automatically detect its internal camera, microphone, and speaker. If there is any difficulty you can call your clinician who will guide you through the steps to connect to them. We suggest that you sign on at least 5 minutes prior to your session start time. You are responsible for initiating the connection with our licensed clinician at the time of your session.

### **Testing out your device, internet browser, etc.**

We recommend you attempt to connect your device ahead of time to get familiar with how your device operates and to avoid unnecessary time spent with your clinician. Your licensed clinician will be available to connect with you ahead of time during your first session, so if you have any difficulty, it can be addressed then. There are multiple videos and articles to help you better understand each videoconferencing platform. You can also test your device by following the directions on each platform.

Before our first scheduled session using a videoconferencing platform, we will schedule a time (5 minutes or less) to briefly test it out in the event that we need to troubleshoot any technical issues. In the past, these are the issues that have arisen and what is recommended to rectify them:

- Internet browser connectivity issues
- Choppy or frozen screen: find a location that is close to your internet router. You may need to find a space that consistently gets good reception;
- Low/no volume: make sure that your volume button on your device is turned on and all the way up;
- No picture: your camera access is turned off.

### **Procedures When Interruption of Services Occurs**

In the event that technology fails or a disruption or decrease in the quality of the session occurs while we are engaged in remote psychotherapy, we may decide that it is best to discontinue the telehealth session. If this occurs, we agree that you can contact your clinician and re-start the session. If your clinician doesn't hear from you, he/she will contact you by telephone to discuss options. Therefore, it is recommended that you always have a phone available to you and that I am advised of the best number to reach you at the outset of each session.

These options may include:

- ending the treatment session;
- trying to re-connect to the video-conferencing platform;
- continuing the session by phone;
- MEET IN PERSON.



### **Emergency Procedures/Verification of Location**

Your safety is our primary concern. As such, your licensed clinician will want to know the location (address) in which you are during our session. Your licensed clinician will ask you to provide this information each time, but if your clinician neglects to ask you, we request that you inform your clinician of your current location. We are requiring this information in the event that your clinician has reason to believe that you are experiencing an emergency and they need to assist you in receiving immediate, life-saving care. In addition to providing your licensed clinician with your location at the outset of each remote session, you agree to provide your clinician with the name and contact information of a person whom your clinician is permitted to contact in the case that they have reason to believe you are at imminent risk.

Depending on your clinician's clinical, professional assessment of risk, your clinician may be required to verify that your emergency contact person is able and willing to go to your location in the event of an emergency, and if necessary, call 911 and/or transport you to a hospital. In addition, your clinician may assess, and therefore require, that you create a safe environment at your location during the entire time that you are in treatment with your licensed clinician. This may mean disposing of all firearms and excess medication from your location.

### **Appropriate Environment/Conduct/Privacy/Confidentiality**

Clients and Partnership Health Center both agree to:

- Avoid using mind altering substances during/prior to session;
- Dress appropriately;
- Conduct the session in an suitable room, such as a kitchen, living room or office (not a bedroom);
- Be in a private, confidential and secure location (closed door) in order to preserve confidentiality;
- Refrain from having any other individuals present in in the room or online while the remote session is being conducted;
- Not having anyone else participate in the session unless it has been previously agreed upon prior to the start of the session;
- Not conduct other activities while in engaged in a remote psychotherapy session, such as driving, cooking, texting or working;
- Not audio or video record sessions without first obtaining Partnership Health Center's explicit, written consent;
- Client to be located in the state of New Jersey;
- Clinician to be licensed in the state of New Jersey;
- If you are living in a long-term care facility, please find a private place to meet with your clinician away from roommates, staff, and other personnel. In the event that you can't find a private setting or are unable to access one, a headset is recommended. Please discuss this with your clinician and they will attempt to make such arrangements;
- In circumstances where you are unable to have privacy, you are free to communicate to your clinician that you want the session either stopped or completely terminated.

### **Telephone Sessions**

The telephone is considered an asynchronous telecommunication platform and therefore does not meet the criteria for tele-therapy. Please discuss the option of telephone sessions with your clinician if you do not feel comfortable with or are unable to participate in tele-therapy using a computer, phone etc.

### **CONCLUSION**

Thank you for taking the time to review Partnership Health Center's **Use/Consent of Tele-therapy Policy**

If you have questions or concerns about any of these policies and procedures or how our video-conferencing platforms work, we encourage you to bring them to your clinician's attention so that you can discuss them.



Use of Tele-therapy Policy signature page

Date: \_\_\_\_\_
Client Name: \_\_\_\_\_
Parent/Guardian Name: \_\_\_\_\_
Client DOB: \_\_\_\_\_

On \_\_\_\_\_ I received a copy of the document entitled Use of Tele-therapy Policy for Partnership Health Center. I have been given an opportunity to review this document and my questions about this policy have been answered.

Signature of Client 1 Date
Please Print Name
Signature of Parent, Guardian or Personal Representative 1\* Date
Please Print Name

\* If you are signing as a personal representative of an individual, please describe your legal authority to act for this individual (power of attorney, healthcare surrogate, etc.).

CLINICIAN'S SIGNATURE DATE