

CONSENT FOR TELEHEALTH CONSULTATION AND TREATMENT

Client Full Name:
Client Location for Sessions (full address):
Student ID:
Current Phone:

This document is an addendum to the Palomar College Behavioral Health Counseling Services standard informed consent and does not replace it. All aspects of informed consent for treatment in that document apply to Tele Mental Health (TMH) treatment.

In California, “telehealth” is defined as a method to deliver health care services using information and communication technologies to facilitate the diagnosis, consultation, treatment, and care management while the patient and provider are at two different sites. The two most common modes of telehealth for psychotherapy are via 1) live videoconferencing either through a personal computer with a webcam or a mobile communications device with two-way camera capability, and 2) telephone.

I understand that I have the following rights with respect to Tele Mental Health:

- 1) I have the right to withhold or withdraw consent at any time without affecting my right to future care or treatment or risking the loss or withdrawal of any benefits to which I would otherwise be entitled.
- 2) The laws that protect the confidentiality of my clinical information also apply to TMH.
- 3) The laws regarding limits of confidentiality and mandated reporting also apply to TMH.
- 4) I understand that the same laws that give me the right to access my clinical information and copies of treatment records also apply to TMH.

I understand the following potential benefits and risks, consequences, or limitations of Tele Mental Health:

- TMH can improve access to care as geographical distances, childcare issues and transportation challenges are virtually eliminated.
- TMH may not be appropriate if you are having a crisis, acute psychosis, or suicidal or homicidal thoughts.
- TMH may lack visual and/or audio cues, which may increase the likelihood of misunderstanding each other.
- TMH may have disruptions or delays in the service and quality of the technology used.

In rare cases, there are risks associated with transmitting information via technology as security protocols could fail. These risks include but are not limited to, breaches of confidentiality and theft of personal information. **I understand the following backup plan in case of technology failure:**

- The most reliable backup is a phone. Therefore, it is necessary that you always have a phone available and that your provider knows your phone number. *(some institutions prefer the client has a call back number...e.g. front desk if you are hosting students on campus, or your work cell, or some other form of contact....it is up to the institution/provider to decide which works better)*
- If you get disconnected from a TMH session;

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- First, try to end and then restart the session.
- If you are unable to reconnect within five minutes, your provider will call you at the phone number you provided at the outset of each session.
- If you are unreachable at this point, please call or email to reschedule non-urgent sessions.
- If your provider assesses any urgent safety issues, they will immediately follow up with initiation of emergency services/PERT response and/or will phone your emergency contact person.

Emergency Contact

If you are experiencing an emergency, including a mental health crisis, please call 911, the San Diego County Access and Crisis Line at 619-724-7240, the Suicide Prevention Hotline 1-800-273-8255, or text “courage” to 741741 or go to your nearest emergency room.

So that your provider is able to get you help in the case of an emergency, the following are important and necessary. By signing this agreement form you are acknowledging that you understand and agree to the following:

- You must inform your provider of your location at the beginning of each session.
- You must identify a person who can be contacted in the event that your provider believes your safety is at risk.

When receiving tele mental health, it is also required that you:

- Only engage in sessions when you are physically in California. Your provider will ask you to confirm this at the start of each session.
- Engage in sessions only from a private location where you will not be overheard or interrupted.
- Use your own computer or device, or one that is not publicly accessible.
- You are connected on a private internet connection or are only using a public connection in conjunction with a VPN service (*at client discretion*)
- Ensure that the computer or device you use has updated operating and anti-virus software (*at client discretion*)
- Do not record any sessions, nor will BHCS record your sessions without your written consent.

ACKNOWLEDGEMENTS

- I acknowledge/understand the attendant risks involved with TMH and voluntarily assume them.
- I have read and understand the information provided above. I have discussed it with my provider, and all of my questions have been answered to my satisfaction.

Signature of client:
Date:
Emergency Contact (Name, Relationship and Number):
Person of Support (Name, Relationship and Number) if different from above: