

**Video counseling—Medical / Mental health guidelines**

**In order to promote client safety, telemental health services have the following procedures in place before, during, and between sessions:**

**Before:**

- **All** clients are encouraged to designate an emergency contact.
- Therapist and client will identify the nearest urgent care, emergency room, and police department to the client's primary address.
- Clients agree to update therapist on any changes to their phone number, home address, and medical status—such as running out of vital medications, new medical diagnosis or allergy.

**During:**

- Therapist will develop a mental health safety plan with each client during the initial session.
- Therapist will verify client's physical location at time of session. If different than the primary address, therapist will verify nearest emergency services to that location.
- As part of the check-in, therapist will assess client's orientation to person, place, time and situation. Therapist will address any SI/HI, thoughts of self-harm, thoughts of harming others, or alcohol / substance use.
- In the event of a **medical** emergency or **imminent mental health crisis**, therapist may:
  - Contact 911 and follow their recommendations.
  - Contact the crisis hotline or initiate a welfare check.
  - Notify client's emergency contact.
  - Attempt to follow-up with client or emergency contact regarding the outcome of the intervention.

**Between:**

- Client may go to the nearest urgent care, ER, or call 911 for medical emergencies/ mental health crises.
- Contact the crisis hotline 24/7 at 1-800-762-0157.
- Walk-in to the psych triage facility 24/7 for crisis mental health assessment, Denton County Psych Triage facility 2509 Scripture St. Ste. 100 Denton, TX 76201, 940-381-9965

***I have read or have had the entire document read to me. During COVID-19 social distancing, verbal consent will suffice for the purposes of this form when technological barriers prevent a physical signature. I have discussed this with my counselor, and all of my questions have been answered to my satisfaction.***

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Client signature

Date

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Therapist signature

Date