

Denton County MHMR

Denton: 940-381-5000, Flower Mound: 214-488-0121, Crisis Hotline: 1-800-762-0157

## Video Counseling Informed Consent

***Due to guidelines from the CDC in response to the COVID-19 pandemic, Denton County MHMR has received authorization to transition counseling services to a virtual platform temporarily in order to prevent an interruption in services.***

I \_\_\_\_\_ hereby consent to engage in telemental health services (i.e. phone or video-based therapy) with my assigned provider. I understand that telemental health is the method of service provision and certain guidelines differ from in-person counseling sessions.

I understand that I have the following guidelines with respect to telemental health:

- 1) I have the right to withhold or withdraw consent to engage in telemental health services at any time.
- 2) With respect to confidentiality, the standard guidelines (as outlined in Professional Disclosure Statement) continue to apply, but there are also additional considerations.
  - Therapist will verify your identity before initiating a counseling relationship.
  - As a standard of care, the therapist will ask you to identify emergency contacts and will develop crisis protocols with you for mental or medical health emergencies.
  - Therapist will make every possible effort to avoid any dual-relationships through technology, including, but not limited to:
    - Therapist will not respond to any requests through social media, such as Facebook or Twitter, or professional sites, such as LinkedIn.

- If therapist becomes aware of any dual relationships with client through listservs, online groups, or other formats, this will be addressed with you to maintain the professional nature of the therapy relationship.
- Therapist will not complete any unauthorized searches of client's social media platforms, unless an imminent crisis warrants this, and client will be notified of any crisis-related searches afterwards to attempt to maintain therapeutic rapport.
- Therapist will confirm your location and that your space is secure prior to the start of each session:
  - Therapist and client must be physically located in Texas.
  - Therapist will ask you to confirm that you are in the room alone with the door closed to protect your privacy. Therapist and client will develop a 'code word' so that the session can be paused if someone comes into the room unexpectedly and is outside of the client or therapist's screen view.
  - If you would like anyone else to be present for the session, you must arrange this ahead of time with the therapist and sign a consent form for that individual.
  - You must present to the session fully clothed, or the connection will be disconnected immediately. If you appear to be under the influence of alcohol or other substances, the session cannot

proceed. You also must be oriented (know who you are, where you are, when it is, and the situation).

- Therapist will utilize Ring Central Meetings, a Hipaa compliant platform, from a laptop or phone to conduct sessions with you. In the event of an internet or technological outage, therapist and client agree to transition to a back-up session by phone. Therapist will call you if the session connection is interrupted.

3) I understand that there are risks and consequences from telemental health.

There is a possibility, despite reasonable efforts on the part of the therapist, that: the transmission of medical information could be disrupted or distorted by technical failures, the transmission of my medical information could be intercepted by unauthorized persons, the electronic storage of my medical information could be accessed by unauthorized persons and / or misunderstandings can more easily occur, especially when care is delivered in an asynchronous manner. As of March 17, 2020, the Office for Civil Rights (OCR) at the U.S. Department of Health and Human Services (HHS), announced, effective immediately, that it will “exercise its enforcement discretion and will waive potential penalties for HIPAA violations against health care providers that serve patients through everyday communication technologies” in order to continue to provide services to isolated individuals during this nationwide public health emergency. See additional information: [www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-](http://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-)

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[discretion-telehealth/index.html](https://www.dentoncountytx.gov/health-services/behavioral-health/telehealth/discretion-telehealth/index.html) or [www.hhs.gov/sites/default/files/february-2020-hipaa-and-novel-coronavirus.pdf](https://www.hhs.gov/sites/default/files/february-2020-hipaa-and-novel-coronavirus.pdf)

- 4) In addition, I understand that telemental health services may not yield the same results, nor be as complete as face-to-face service. I also understand that my therapist will assess for appropriateness for treatment through virtual options and will make every attempt to provide alternate referrals when a higher level of care is needed or there is a mismatch with the service delivery option (i.e. technology unavailable / discomfort with use). Please be aware that referral availability may be limited during COVID-19 social distancing.
- 5) I understand that I may benefit from telemental health, but results cannot be guaranteed or assured. The benefits may include, but are not limited to: finding a greater ability to express thoughts and emotions; transportation and travel difficulties are avoided; health needs are protected to limit possible exposure during COVID-19 pandemic; and increased flexibility for session timing.

***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