



## INFORMED CONSENT FOR TELE-MENTAL HEALTH SERVICES

This form is an addendum to the UWSP Counseling Center's standard informed consent and does not replace it; all aspects speak directly to the use of tele-mental health (TMH) treatment. TMH refers to counseling sessions that occur via video conference or phone calls; technology is the primary modality in which treatment is provided. This is distinguished from in person services where the primary modality uses face-to-face contact but can use phone calls and other forms of technology to address housekeeping matters that develop over the course of treatment. The Counseling Center TMH services are offered to create access to counseling services during major crises, such as COVID 19. The Counseling Center reserves the right to discontinue TMH for a return to in-person services when the major crisis has resolved. Our staff works with each student to determine the clinical appropriateness of the telehealth model to address their(s) presenting concerns. Participation in telehealth services is voluntary.

### THE TELE-MENTAL HEALTH PROCESS

Tele-mental health services offer unique clinical considerations; this means that video conferencing therapy may not be the most appropriate or best choice of services for the reasons you sought counseling. If your needs cannot be ethically, legally, and/or safely met with the TMH model, staff will assist you in locating appropriate in-person treatment. TMH services are discouraged for individuals experiencing severe risk of harm to themselves or others, lacking access to or difficulties maintaining necessary technology to communicate, and/or some severe psychological diagnoses/symptoms. These may include, but are not limited to:

- Recent suicide attempt(s) and/or psychiatric hospitalization
- Moderate to severe mood disorders (i.e., depression, bipolar disorder)
- Repeated acute crises
- Current or recent psychotic symptoms
- Moderate to severe eating disorders
- Moderate to severe alcohol and/or drug abuse

If the above accurately reflects your concerns, your counselor will work with you to get connected with more appropriate services. Just like the in-person counseling process, TMH services are dynamic and require frequent re-assessment of needs. If your needs change over the course of receiving TMH services, your clinician reserves the right to discontinue your TMH services and work to connect you with a higher level of care that more appropriately reflects your treatment needs.

The results of TMH cannot be guaranteed or assured. You are not required to transfer your in-person treatment to the TMH model during this crisis and you can withdraw your consent to services at any time. The Counseling Center works to optimize the quality and reduce the risks of using secure video conferencing software to provide therapeutic treatment. Given the unique clinical considerations of TMH services:

- You will only be able to engage in sessions if you are physically present in Wisconsin. Your counselor will confirm your location in each session.
- Your counselor will only proceed with session if you are in a private location where it is unlikely that you will be overheard by others.
- Your computer or device has established a secure network and not one that is publicly accessible.
- You cannot record any sessions, nor will the Counseling Center record your sessions without your written consent.
- You will provide contact information for at least one emergency contact in your location that can be reached in an emergent situation.

## **CONFIDENTIALITY and TREATMENT RECORDS**

TMH services are conducted and documented in a confidential manner according to applicable Wisconsin state laws. The staff will only reach out to you for a video-conferencing session through Zoom Business, a platform compatible with HIPPA standards. Electronic records will be maintained through the same processes outlined in the standard informed consent.

Using TMH services introduces some risks to confidentiality that do not exist with in-person services:

- Clinicians have less control over maintaining your physical safety during TMH appointments. Therefore, you will be required to provide emergency contact information to engage in TMH services. If your clinician perceives your physical danger, your clinician will reach out to your emergency contact and other emergency response personnel to ensure your safety.
- The environment in which sessions are held (i.e., your home) is less secure than a private therapy office. Weaknesses to your privacy are introduced because it is likely that your environment will not be as controlled for privacy as the Counseling Center offices. We cannot guarantee that others within hearing distance from you will not overhear what is said during your appointments.
- In rare cases, digital security protocols could fail and your confidential information could be accessed by unauthorized persons.

## **CONTACTING YOUR COUNSELOR**

Email is not a guaranteed form of confidential communication; email does not use the same encrypted software as the videoconferencing platform used for TMH appointments. The clinical staff does not communicate private or sensitive information through email or any other type of social media. It is recommended that you make a phone call during business hours if you need to reach your clinician between appointments.

## **TECHNICAL PROBLEMS**

If technical problems with video conferencing occur during your appointment, the most reliable backup plan is contact through a voice phone call. If a disconnection occurs, your clinician will work on establishing the connection for 10 minutes before contacting you via a phone call. It will be easier for the clinician to call you than for you to reach out to them(s). Therefore, please have your phone on hand during video conferencing sessions in case technical problems develop during the appointment.

## **A NOTE TO CONSIDER....**

TMH appointments, policies, and procedures were developed in response to COVID-19 recommendations. This is a new service to the Counseling Center and its staff. There will be growing pains with this process and we will do our best to remedy issues that develop during our TMH roll out. Your understanding and flexibility are much appreciated.

My signature below indicates that I have read and understand the above information and that I consent for tele-mental health services through the UWSP Counseling Center. I am aware that I can withdraw consent at any time in writing. Otherwise, this consent will be valid through July 2020.

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Client Signature

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Date

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Print Name