This Informed Consent for Telehealth contains important information focusing on doing psychotherapy using the phone or the Internet. Please read and review this carefully, it will represent an agreement with UNCSA Counseling Services.

UNCSA Counseling Services will be offering telehealth through telephonic check-in. This check-in will consist of safety assessment, processing experiences and potential referral information if needed.

Benefits and Risks of Telehealth

Telehealth refers to providing services remotely using telecommunications technologies (telephone or video). One of the benefits of telehealth is that the client and clinician can engage in services without being in the same physical location. This can be helpful in ensuring continuity of care. Telehealth, however, requires technical awareness on both parties to be helpful. Although there are benefits of this, there are some differences between in-person psychotherapy and this service, as well as some risks. For example:

- Risks to confidentiality: Telehealth sessions take place outside of the therapist’s private office, there is potential for other people to overhear sessions if you are not in a private place during the session. Counseling Services clinicians will take reasonable steps to ensure your privacy. It is important for you to make sure you find a private place for our session where you will not be interrupted. It is also important for you to protect the privacy of our session on your cell phone or other device. You should participate in these conversations only while in a room or area where other people are not present and cannot overhear the conversation.

- Issues related to technology: There are many ways that technology issues might impact telehealth communication. For example, technology may stop working during a session, other people might be able to get access to our private conversation, or stored data could be accessed by unauthorized people or companies.

- Crisis management and intervention: For immediate support outside of your scheduled appointment time. We encourage you to call the Wellness Center at 336.770.3288 to speak with a trained clinician immediately during business hours. You may also contact Health Link after hours at 1.888.267.3675 or text “Home” to 741.741. You can also receive immediate support through contacting Campus Police at 336.770.3321.

- Efficacy: Most research shows that telehealth is about as effective as in-person psychotherapy. However, there is a risk of misunderstanding one another when communication lacks visual or auditory cues.
**Electronic Communications**

You may have to have certain computer or cell phone systems to use telehealth services. You are solely responsible for any cost to you to obtain any necessary equipment, accessories, or software to take part in telehealth.

Telehealth appointments have a visual component. It is important that you be appropriately dressed during your appointment and in a private space with no distraction or others due to confidentiality.

**Confidentiality**

UNCSA Counseling Services has the legal and ethical responsibility to make our best efforts to protect all communications that are a part of our telehealth platform. However, the nature of electronic communications technologies is such that we cannot guarantee that our communications will be kept confidential or that other people may not gain access to our communications. Counseling Services uses updated encryption methods, firewalls, and back-up systems to help keep your information private, but there is a risk that our electronic communications may be compromised, unsecured, or accessed by others. You should also take reasonable steps to ensure the security of our communications (for example, only using secure networks for telehealth sessions and having passwords to protect the device you use for telehealth).

The extent of confidentiality and the exceptions to confidentiality that are outlined in the UNCSA Counseling Services Informed Consent still apply in telehealth communication. Please speak with your provider about exceptions to confidentiality.

**Emergencies and Technology**

Assessing and evaluating threats and other emergencies can be more difficult when conducting telehealth communication than in traditional in-person therapy. To address some of these difficulties, your therapist may create an emergency plan before engaging in services. You will need to provide an emergency contact in case of a disruption or technological connection failure. Your therapist will try to reconnect with you, do not contact them. If you are found to be a danger to yourself or others through therapist assessment, your therapist will begin hospitalization protocol. Your therapist will communicate this plan to you and contact your emergency contact for support through this process in order to ensure your safety and the safety of those around you. If you are in need of immediate and urgent assistance call Campus Police at 336.770.3321 or go to your nearest emergency room.

If the session is interrupted and you are not having an emergency, disconnect from the session and your therapist will wait two (2) minutes and then re-contact you via the telehealth platform on which we agreed to conduct therapy. If you do not receive a call back within two (2)
minutes, then call the Wellness Center at 336.770.3288 and leave a message, your therapist will call you back.

Please note, if working with the UNCSA Counseling intern during your telehealth session the intern’s site supervisor will be available and on-call during your phone call. Should any safety or other concerns arise that warrant supervision the UNCSA Counseling intern will reach out to their on-call supervisor for support and guidance.

**Acceptance of Terms**

We agree to these terms and will abide by these guidelines.

Client’s printed name______________________________________________

Client’s signature_______________________________________________Date: __________

Parent/Guardian signature (minors only) _____________________________Date: __________

Counselor’s signature_____________________________________________Date: __________