

Telehealth Informed Consent Addendum

What does telehealth mean?

Telehealth means your healthcare providers are using electronic communication during your treatment. Healthcare providers includes psychiatrists, psychologists, social workers, counselors, and marriage and family therapists. Telehealth services at Healthy Minds are only available to Nevada residents. We are using Zoom for videoconferencing, and if the internet connection does not work, we are offering telehealth services by phone. You will need to use a webcam or smartphone for videoconferencing, and our clinic will explain how to use Zoom. Children's legal custodian must give permission for children to participate in telehealth.

Risks and Benefits of Telehealth

Telehealth provides access to services when they may not be available otherwise. Telehealth services have been shown to be as effective as in-person services. While no one will record your sessions without your permission, the electronic services do come with new risks. Equipment could stop working during treatment, and the technology has increased risks to privacy if people are able to break into our online session. For this reason, we have an agreement with Zoom that requires them to notify us if they learn your privacy has been violated, and we are required to notify you. Zoom has security protocols to protect your confidentiality against intentional or unintentional interruptions or breaches. Using a secure internet connection, instead of a public or free Wi-Fi, wherever you are when receiving services increases the security of our sessions.

Effective Telehealth

Telehealth services will work best if you are in a quiet, private space with no distractions, such as radio, TV, ringing phones, talking, interruptions, or windows in camera view during the session. Position yourself and camera so that you are visible from at least the waist up. If there are multiple people in the appointment, make sure everyone is in view. We need a safety plan that includes at least one emergency contact and the closest ER to your location in the event of a crisis situation. The same confidentiality agreement applies with telehealth, including your healthcare professional's responsibility to share information about you or your session if there seems to be an imminent risk of you seriously harming yourself or other people.

By signing this form, I understand that I am responsible for having the necessary equipment and internet access for my telehealth session. I understand that I am not waiving any existing protections for confidentiality, privacy, or other consumer protections as described in the Informed Consent Form. I have all the same rights as clients receiving face-to-face therapy.

Patient Printed Name

Signature of Patient/Representative & Date

