

TELETHERAPY SERVICES AGREEMENT AND INFORMED CONSENT

1. Teletherapy, by definition, is the delivery of therapeutic services by which the therapist and client are not within the same physical location. This includes, but is not limited to, Web Cam sessions, Telephone conversations, E-Mails, Text Messages, or any communication involving the Internet as a medium.
2. Unless we explicitly agree, our teletherapy exchange is confidential. Any information you disclose to me is held in the strictest confidence. However, if based on the information you disclose I suspect abuse of children, the elderly, or people with disabilities, it is my duty to report this to the authorities, including Police, CPS, and APS.
3. All teletherapy services are conducted within the state of Texas, and are governed by the laws of that state. Any teletherapy services conducted must be within the physical boundaries of said state. It is the responsibility of you, the client, to inform if this is not the case, in which teletherapy services cannot be offered.
4. As in face to face therapy, it is your right to discontinue therapy services at any time. It is within the rights of the therapist to discontinue therapy if therapist feels it is in the best interests of the client. If so, the therapist will provide three separate referrals by which to continue therapy with another licensed professional.
5. Teletherapy should not be confused with face to face therapy, as it has the following restrictions: it is possible a 3rd party within your environment, or the therapist's environment, to overhear the conversations being conducted. In addition, a 3rd party could hack (man in the middle attack) and overhear or see the session as it is being conducted. Any documents or text messages could be obtained by a 3rd party. Viruses, Trojans, Worms, and other programs could reside on clients of therapist's computers which could send private information to a 3rd party. Due to these risks, it is important to maintain appropriate security measures. Firewalls, up to date virus scanners, and patched computer systems will help reduce the likelihood of a data breach, however no method is 100% secure. By signing this form, you, the client, acknowledge these risks.
6. It is the responsibility of the client to provide their own equipment in order to conduct the teletherapy session. This includes a computer or tablet, a webcam or camera built into their device, and Internet access to conduct the session. It is the therapist's responsibility to provide similar equipment in their environment.
7. It is the responsibility of the client to make sure the environment chosen to conduct the teletherapy session is as private as possible. In this environment, it is the client's responsibility to keep distractions to a minimum. In addition, it is the responsibility of the client to protect confidential information within their own environment (prevent anyone from listening in to the session from someone else in the home). It is the therapist's responsibility to do the same in his environment.
8. Teletherapy sessions are conducted via SecureVideo, a HIPAA-Compliant Videoconferencing solution. No other programs will be covered. SecureVideo provides encryption, and protects patient data via HIPAA, which is why it is chosen over Skype or other alternatives. Clients will be required to

use this service to connect for teletherapy. Therapist will provide instructions on how to accomplish this.

9. Teletherapy does not provide emergency services. If you are experiencing an emergency situation, call 911 or proceed to the nearest hospital emergency room for help, or contact your psychiatrist. If you are having suicidal thoughts, contact the National Suicide Prevention Lifeline at: 1-800-273-8255.

10. Clients have the right to request face to face counseling instead of teletherapy, as long as they can physically travel to the therapist's office, and agree to meet the schedule of the therapist. Client can discontinue teletherapy services at any time.

11. As in face to face therapy, there are no guarantees to the improvement of any condition while in the practice of psychotherapy, including the use of teletherapy. Some conditions may not improve, or even get worse. By signing this form you agree to this possibility.

12. Clients have a right to access their medical information and copies of medical records in accordance with HIPAA privacy rules, and the rules of the therapist's licensing board.

By signing this form, you agree to have read, understand, and agree to the information presented above:

Patient's Name

Patient/Legal Guardian Signature

Date