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Informed Consent for Tele-Mental Health Services during Covid-19

Effective Monday, March 23, 2020, I will be providing therapy sessions either through the HIPPA compliant video-conferencing platform doxy.me or by telephone. These sessions will enable us to maintain the continuity of our sessions, while implementing best practices to reduce risk to possible exposure to Covid-19.

As we are challenged with new stressors during this pandemic, your overall wellbeing is of utmost importance and maintaining good mental health is critically important. I will continue to offer EMDR if this is part of your treatment plan with Tele-Mental Health Services. Once the pandemic has subsided, we will return to in-person sessions unless you have developed a preference to continue with Tele-Mental Health Services and it is appropriate and beneficial to your treatment plan.

There are unique aspects to Tele-Mental Health Services as outlined below. Please review and we will discuss these when I contact you about your appointment set-up. Please sign this form and return to me prior to your session.

- There are potential benefits and risks of tele-therapy sessions (e.g. limits to patient confidentiality) that differ from in-person sessions. We will discuss some of these prior to our first appointment.
- We agree to use the video-conferencing platform or telephone which we will select together for our virtual sessions, and my assistant will explain how we will use it.
- You will need to use a webcam or smartphone during the session.
- It is important for confidentiality to use a secure internet connection rather than public/free Wi-Fi.
- Confidentiality still applies for tele-therapy services, and nobody will record the session without permission from the others person(s).
- It is important to be in **a quiet, private space** that is free of distractions (including cell phone or other devices) during the session. Please have a box of Kleenex on hand and remind others to not interrupt you for one hour. Please do not have others in the room during your session unless we have agreed that

they will be included in your therapy session.

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- It is important to be on time. If you need to cancel or change your teleappointment, please provide 24-hour advance notice by phone, email or text.
- We agree to a back-up plan to restart the session or to reschedule it, in the event of technical problems. I will call your phone immediately if an interruption occurs.
- A safety plan is essential that includes at least one emergency contact and I need to know where your current location is in the event of a crisis situation or the need for crisis support. If we are disconnected and I can not reach you or your emergency contact, and I think it is warranted, I may request a police welfare check.
- If you are under 18 years old, permission of your parent or legal guardian (and their contact information) is needed for you to participate in tele-therapy sessions.
- As your therapist, I may determine that due to certain circumstances, teletherapy sessions are no longer appropriate and that another level of care is needed or that we should resume in person sessions as soon as we are able. (post pandemic).
- Because we have so many new, fluid and varied external stressors, please do
 inform me of new treatment needs that may not have been specified in earlier
 treatment planning and goal setting.
- Please reserve important clinical information for your session time; text, email and phone messages should be reserved for administrative issues unless an urgent problem arises. Then leave a message and I will call you back as soon as possible. Or, seek assistance at your nearest emergency room.

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|------------------------|-----------------------------|-----|--------|
| Client Name | | DOB | |
| Signature of Client/Cl | ient's Legal Representative | | |
| Therapist Name/Sign | ature | | |
| Date | effective for one year. | | Page 2 |

I look forward to our continued collaboration to meet your mental health needs.