



Informed Consent

Addendum for Telehealth Counseling

What is Telehealth?

Hope Performance Systems, LLC, hereafter referred to as “HPS,” strives to provide quality behavioral health care services to clients and their families. To ensure clients have access to quality behavioral health services, HPS offers “telehealth” counseling. At Hope Performance Systems, Telehealth Counseling include the provision of behavioral health services via two-way video/audio communications in compliance with HIPAA policies and guidelines. Telehealth counseling may include diagnostic assessments, individual therapy, family therapy, and group therapy where appropriate.

The information outlined below, is specific to telehealth counseling. Please note that this information is in addition to the Informed Consent document that you will receive / sign prior to beginning services with HPS:

Confidentiality

We understand that the information you share in telehealth counseling is of a personal nature. We want you to be assured that what you discuss with your provider will be kept confidential by all means possible. HPS will not record or photograph content of telehealth counseling sessions for any reason.

The laws that protect the confidentiality of medical information also apply to telehealth counseling. It is important for you to know that your provider may occasionally discuss your case with his/her clinical supervisor or with other providers at HPS. This allows your provider to get feedback to ensure the best services possible are provided. By signing this document you are acknowledging that you understand this is our policy and you are giving your provider consent to speak confidentially about your case with other HPS providers and/or staff when needed. Otherwise, your provider is committed to maintaining your confidentiality and will only speak with others under the following circumstances:

1. As is outlined on the Consent to Use and Disclose Personal Health Information attached to this paperwork.
2. When you give us specific written permission to share information regarding your treatment with a specific person or organization;
3. In situations where we are required by law to disclose your information. The three situations in which this might occur are:
 - (1) When there is a court order or subpoena;
 - (2) When there is reasonable suspicion of child or adult abuse, neglect, and/or endangerment;
 - (3) If we believe that you are in real danger of harming yourself or someone else

Goals and Outcomes

In your first sessions, your provider will discuss what your goals for treatment are. Generally, telehealth counseling is most beneficial when individuals are willing to examine their own thoughts, feelings, and behaviors, and willing to change how they interact with others or the choices they make. You will determine the nature and amount of change you wish to make. At any time in treatment that you do not feel you are accomplishing your goals, please speak with your provider immediately.

Benefits and Risk

Telehealth counseling involves the use of electronic communications including two-way video with audio to provide services to clients who may otherwise not have adequate access to care. It is anticipated that these services will benefit you, but results of treatment can not be guaranteed. Telehealth may not be exactly the same as an “in-person” session due to the fact that you will not be in the same room as your provider. Telehealth is a relatively new approach to delivering behavioral health services and there are some limitations compared with seeing a provider “in person.” These limitations can be addressed and are usually minor depending on the needs of the client and the care with which the technology is utilized.

Because telehealth counseling is performed via technologically-based methods, it may be necessary for a technician to assist with the equipment on rare occasions. Such technicians will keep any information confidential. Telehealth counseling is performed over a secure communication system with implemented safeguards to prevent unauthorized parties from access, but you should be aware that there is a possibility of a breach that could affect confidentiality. Additional risks to telehealth counseling includes, but is not limited to, interruption of video feed, unauthorized access, and technical difficulties that may cause your provider to abruptly end a telehealth counseling session. In the event that the video feed is disrupted (drops) you may contact the office at **843.547.0200** to reconnect or reschedule your session. In the event of an emergency during a telehealth counseling session, you should be aware that your provider may have to call emergency services to respond to your physical location.

Alternatives to Care

The participation in telehealth counseling is completely voluntary. You may choose to begin, participate, or stop these services at anytime during the course of your treatment. Telehealth counseling may not be appropriate for everyone seeking behavioral health care services. If your provider believes you would be better served by another form of behavioral health services (e.g. “in-person”), you may be referred to a provider who can provide such. In addition, you should be aware that other treatment options for your diagnosis or condition, which may not be offered by HPS, may be available to include traditional behavioral health services, medical care, medications (both over the counter and prescribed), hospitalizations, and others. If you chose to use other treatment options, you should discuss the risks and benefits with your medical doctor or other health care provider.

After-hours and Emergencies

Our telephone is answered during posted business hours by the front office staff to ensure that you are helped promptly. Our providers work varied schedules, therefore your provider may not be available every day of the week to assist you. However, arrangements can be made for you to speak to a supervisor and/or associate provider if needed. This provider will make every effort to be helpful to you. Please note that we do not answer or return calls after hours. If you have an emergency after hours, call the crisis line at **1-800-273-8255**, call 911, or go to an emergency room.

Email Communication

It is important to be aware that email communication can be relatively easily accessed by unauthorized people, and therefore can compromise the privacy and confidentiality of such communications. For your online safety, please do not discuss content that is personal to you; please discuss in your telehealth session. Also, please do not use email for emergencies as email communications are not always monitored on a daily basis.

Additional Information

By consenting to participate in telehealth counseling services, you understand that you will be requested to disclose your physical location before the provision of services to ensure emergency services if necessary. You may also be requested to install applications specific to treatment onto your phone, tablet, computer or other smart device. Some applications may track or report your activity, geographical location, amongst other identifying factors.

Participating in telehealth counting services will require you to have an individual email address, internet connection, as well as the capability to use the patient portal.

Please confirm by checking below that:

- I have received or have been offered a copy of the Notice of Privacy Practices statement.
- I have completed the Client Financial Policies and Cancellation Policy Form.
- I understand that this is an Addendum to the Informed Consent document and polices and procedures defined within that document also apply to my participation in telehealth counseling services.

By signing my name below, I certify that I have read this consent form and I understand policies and procedures outlined and defined above:

Signature of Patient (or Guarantor, if applicable)

Date

Please Print the Name of the Patient

Staff/Witness Signature

Date