

Mimosa Christian Counseling Center

Telemental Counseling Information

Thank you so much for choosing Mimosa Christian Counseling Center, This document is created to help inform you about what you can expect from online sessions (also known as telemental health). Telemental health is defined as follows:

“Telemental health means the mode of delivering services via technology-assisted media, such as but not limited to, a telephone, video, internet, a smartphone, tablet, PC desktop system or other electronic means using appropriate encryption technology for electronic health information. Telemental health facilitates client self-management and support for clients and includes synchronous interactions and asynchronous store and forward transfers.” (Georgia Code 135-11-.01)

Telemental health sounds like a relatively new concept. However, many therapists have been working this way for years especially in rural areas and when clients are physically unable to get to office. Breaches of confidentiality over the past decade has made it evident that technology needs to be updated in order to protect the confidentiality. In addition, other factors within Telemental counseling approaches need to offer the highest level of care to clients.

Telephone via Landlines:

It is important to know that even in landline use, confidentiality may not be secure and confidential. There is a possibility that someone in the home or office can overhear you when you are speaking to the therapist. In addition, someone may intercept our conversations with some special technology. In fact, some individuals may be able to access your phone or your phone bill and see who you have spoken to and who initiated the call.

In addition, you or I may contact each other from a landline at my office or cell phone to set up an appointment if needed. Please keep in mind that if we contact each other about to schedule appointment, we cannot engage into ‘therapy’ as I would have to bill you for therapy.

Cell Phones:

Not only are landlines not secure, cell phones also may not be completely secure or confidential. There is also a chance that someone could overhear you or intercept your conversation. Be aware that there may be individuals who can see who you have talked with on the cell phone, how long the conversation lasted, who initiated the call, where each party was located. Because I wish to secure you right to privacy, I want you to be aware of calls where others may find out you are in therapy. I do realize that most people use their cell phone to set

up sessions (including me). I do keep your phone number in my cell phone, but it is listed by your initials only and my phone is password protected. If this is a problem, please let me know.

Text Messaging:

Text messaging is not a secure means of communication and may compromise your confidentiality. In addition, sometimes people misinterpret the meaning of a text message and/or the emotion behind it. Therefore, other than an appointment reminder, I will not respond to a text. You can send me a text to let me know you want to inform me of something, and I will call you back.

Email:

Email is not a secure means of communication and may compromise your confidentiality. However, I realize that many people prefer email because of the quick way to share information. With that said, please know that it is my policy to utilize this means of communication strictly for appointment reminders. Please do not bring up any therapeutic content via email to prevent compromising your confidentiality.

I also strongly suggest that you communicate only through a device that you know is safe and technologically secure (e.g. has firewall, anti-virus software installed, is password protected, not accessing the internet through a public wireless network, etc.). If you are in a crisis, please do not communicate this with me via email because I may not see it in a timely matter. Instead, please see below under “Emergency Procedures.

Social Media – Facebook, Twitter, LinkedIn, Instagram, Pinterest, Etc.

It is my policy to accept ‘friend’ or ‘connection’ requests from any current or former clients on my personal social networking sites such as Facebook, Twitter, Instagram, Pinterest, etc. because it may compromise your confidentiality and blur the boundaries of client/counselor relationship which I my respect and honor.

Google, Bing, etc.

It is my policy not to search for my clients on Google, Bing, or any other search engine. I respect your privacy and make it a policy to allow you to share information about yourself with me in session as you feel appropriate. If there is content on the Internet that you would like to share with me for therapeutic reasons, please print this material out and bring it to your session.

Video Conferencing (VC):

Video conferencing is a popular option for us to conduct remote session over the Internet where we not only can speak to each other, but we may also see each other on a screen. Our office uses Doxy.Me. This VC platform is encrypted to the federal standard, HIPPA compatible, and has signed a HIPPA Business Associate Agreement (BAA). The BAA means that Doxy.Me is willing to attest to HIPPA compliance and assumes responsibility for keeping our VC interactions secure and confidential. If we choose to utilize this technology, I will give you directions regarding how to log-in securely. I ask you to please sign on to the platform at least five minutes before your session time so that we can get started promptly. In addition, you are responsible for initiating the connection with me at the time of your appointment. Please remember that I may have appointments immediately after your appointment schedule and therefore, if you arrive late, I cannot extend the session beyond your time frame.

I strongly suggest that you only communicate through a computer or device that you know is safe (has a firewall, anti-virus software installed, is password protected, not accessing the Internet through a public wireless network, etc.).

Client: _____ date: _____

Witness: _____ date: _____

Consent to Treat a Minor:

The above release is given on behalf of _____
because the patient is a minor or has been determined to give medical consent for the following reasons:

Date: _____ Time: _____ Name: _____

Signature of Parent/Guardian: _____