



Please fill in all required sections. Once completed you may either fax us the form at 971-279-5635 or email a copy of your form.

Telehealth Services Informed Consent

What is Telehealth?

Telehealth means, in short, the provision of services with the provider and recipient of services being in separate locations, and the services being delivered over electronic media.

Services delivered via telehealth rely on a number of electronic, often Internet-based, technology tools. These tools can include videoconferencing software, email, text messaging, virtual environments, specialized mobile health ("mHealth") apps, and others.

NHWS' Telehealth services are provided using the following software:

- NHWS providers utilize the Google Meet platform, which is a HIPAA compliant video conferencing software.

You will need access to Internet service and technological tools to use the above-listed software. If you have any questions or concerns about the above tools, please address them directly to your provider so you can discuss their risks, benefits, and specific application to your treatment.

Benefits and Risks of Telehealth

Receiving service via telehealth the following benefits:

- Receive services at times or in places where the service may not otherwise be available.
- Receive services in a fashion that may be more convenient and less prone to delays than in-person meetings.
- Receive services when you are unable to travel to the service provider's office.
- The unique characteristics of telehealth media may also help some people make improved progress on health goals that may not have been otherwise achievable without telehealth.

Receiving services via telehealth has the following risks:

Telehealth services can be impacted by technical failures, may introduce risks to your privacy, and may reduce your service provider's ability to directly intervene in crises or emergencies. Here is a non-exhaustive list of examples:

- Internet connections and cloud services could cease working or become too unstable to use.
- Cloud-based service personnel, IT assistants, and malicious actors ("hackers") may have the ability to access your private information that is transmitted or stored in the process of telehealth-based service delivery.
- Computer or smartphone hardware can have sudden failures or run out of power, or local power services can go out.
- Interruptions may disrupt services at important moments, and the provider may be unable to reach you/your child quickly or using the most effective tools. The provider may also be unable to help you and/or your child in-person.

Assessing Telehealth's Fit For You

Although it is well validated by research, service delivery via telehealth is not a good fit for every person. The provider will continuously assess if working via telehealth is appropriate. If it is not appropriate, the provider will help you arrange in office sessions to continue services.

Please talk to the provider if you find the telehealth media so difficult to use that it distracts from the services being provided, if the medium causes trouble focusing on the services, or if there are any other reasons why the telehealth medium seems to be causing problems in receiving services. Raising your questions or concerns will not, by itself, result in termination of services. Bringing your concerns to the provider is often a part of the process.

You/your child also have a right to stop receiving services by telehealth at any time without prejudice. If you and/or your child are reasonably able to access the provider's in-person services, you/your child will not be prevented from accessing those services if you choose to stop using telehealth.

Your Telehealth Environment

You will be responsible for creating a safe and confidential space during sessions. You should use a space that is free of other people. It should also be difficult or impossible for people outside the space to see or hear your and/or child's interactions with the provider during the session. If you are unsure of how to do this, please ask the provider for assistance.

Our Communication Plan

During your first session, the therapist will develop a plan for backup communications in case of technology failures and a plan for responding to emergencies and mental health crises. In addition to those plans, your provider has the following policies regarding communications:

- The best way to contact the provider between session is to call by phone at (503) 352-0240.
- The provider will respond to your messages within 24 business hours. Please note that the provider may not respond at all on the weekends or holidays. The provider may also respond sooner than stated in this policy. That does not mean they will always respond that quickly.

Your and/or your child's work with the provider is done primarily during the scheduled sessions, which will generally occur during the following business hours (Monday - Friday 11am to 5pm). All appointments will be scheduled through the Clinic's scheduling department. Billing questions should be directed to the Clinic's billing department.

Please note that all textual messages you exchange with your provider, e.g. emails will become a part of your health record.

The provider may coordinate care with one or more of your/your child's other NHWS providers. The provider will use reasonable care to ensure that those communications are secure and that they safeguard your/your child's privacy.

Our Safety and Emergency Plan

As a recipient of telehealth-based services, you will need to participate in ensuring your/your child's safety during mental health crises, medical emergencies, and sessions that you and/or child have with the provider.

The provider will require you to designate an emergency contact. You will need to provide permission for the provider to communicate with this person about your/your child's care during emergencies.

The provider will also develop with you a plan for what to do during mental health crises and emergencies, and a plan for how to keep your/your child's space safe during sessions. It is important that you engage with the provider in the creation of these plans and that you and/or your child follow them when needed.

Your Security and Privacy

Except where otherwise noted, the provider employs software and hardware tools that adhere to security best practices and applicable legal standards for the purposes of protecting your privacy and ensuring that records of health care services are not lost or damaged. The provider will be in a secure location in our main office or in a private home office.

As with all things in telehealth, however, you also have a role to play in maintaining security. Please use reasonable security protocols to protect the privacy of health care information. For example: when communicating with the provider, use devices and service accounts that are protected by unique passwords that only you know. Also, use the secure tools that NHWS has supplied for communications.

Recordings

Please do not record video or audio sessions without the provider's consent. Making recordings can quickly and easily compromise your privacy. The provider will not record video or audio sessions.

I understand that telehealth (real-time audio/video teleconference session) is the use of electronic communication by a therapist or prescriber to deliver services when they are located at a different site than the patient; and **I hereby consent to New Horizons Wellness Services (NHWS) providing healthcare services to me and/or my child via telehealth.** The laws that protect privacy and the confidentiality of medical information also apply to telemedicine.

I understand that all NHWS policies previously agreed to remain in effect. I also understand that:

- **Copayments and other fees are due prior to services and are the same as an in-office visit for the type and length of service provided. These fees will be made via a credit card on file, or phoned in to NHWS 30 minutes before the telemedicine visit begins.**
- I will be responsible for any charges that apply to my telehealth visit. In most cases this is the same cost as face-to-face sessions, although it is my responsibility to verify payment with my insurance carrier.

Client Name

Date of Birth (DOB)

Parent/Guardian Name

Client (age 14+)/Parent/Guardian Signature

Date