ELECTRONIC COMMUNICATION RISKS, GUIDELINES, AND CONDITIONS

The Counseling and School Psychology Clinic (CSPC) offers the option of using electronic means (e.g., phone, email) to coordinate clinical care, including scheduling, appointment reminders, as well as answering questions or concerns that may arise between sessions. While the CSPC staff and students will make every attempt to protect private health information, there are possible risks involved. The information below notifies you of the risks to private involved in transmitting protected health information over the phone and/or Internet.

RISKS OF PHONE

I understand that although all voicemail and phone calls are kept confidential, this communication method is not encrypted. In addition to the clinic office phone, clinic students and/or office staff may also utilize Google Voice to be able to communicate with clients remotely. I understand that use of Google Voice may expose personal information to Google and/or information may be stored on Google’s servers. I understand that Google Voice technology may be susceptible to reliability issues, and there would be risk of phone calls not being able to be placed or received.

RISKS OF EMAIL

The CSPC utilizes an email system that is encrypted. Despite these protections, I understand that there are still risks involved. Specifically, I understand that email can be circulated, forwarded, and stored in many paper and electronic files. I also understand that email can be sent around the world and received by many intended and unintended recipients. Emails can be misaddressed and sent to the incorrect recipient or not be sent at all. It can be easier to falsify email than handwritten or signed documents. I understand that backup copies of email may exist, even after copies have been deleted. I understand that emails can be archived and inspected by institutions and online services. I also understand that emails can be used as evidence in court.

CLIENT GUIDELINES FOR USE OF PHONE AND EMAIL

I understand that phone and email communication should not be used for emergency or time-sensitive issues. I also understand that email should not be used to communicate extensive therapeutic information that would otherwise be discussed over the phone or in session. I understand that my provider may not be available to receive phone or email communication after-hours and/or on weekends. I understand that my provider will review with me more specific guidelines regarding electronic communications at the time of the initial appointment.
CONDITIONS

I understand that the CSPC is not responsible for any accidental breaches of confidentiality related to electronic communications. I understand that the CSPC will not disclose or forward my phone number or email address to any third party without written consent. I understand that email and phone communication can assist in my coordination of care and can elect for these methods of communication if this is my preference. Copies of electronic correspondence will be kept in my client file.

My initials below indicate that I have read this agreement and agree to its terms for the following:

_____ I agree to use of phone correspondence

_____ I agree to use of email correspondence

These matters have been explained to me and I fully and freely give consent to send and receive electronic correspondence, as initialed above, with my provider and/or clinic staff. I understand that I can withdraw my consent for use of electronic communication at any time and must notify the CSPC staff of my decision. I also understand that I have the right to refuse to sign this consent form. By my signature, I also authorize that a photocopy and/or facsimile (FAX) copy shall have the same effect and authority as the original copy of this document.

___________________________________________
Name of Client (please print)

___________________________________________  __________
Signature of Client                           Date

___________________________________________  __________
Witnessed by                                  Date