



Informed Consent to Telemental Health

Client Name: _____ Student ID: _____

Address of Location Client Will Be for Sessions: _____

This document is an addendum to the California State University San Marcos (CSUSM) Student Health & Counseling Services (SHCS) standard informed consent and does not replace it. All aspects of informed consent for treatment in that document apply to telemental health (TMH) treatment.

In California, "Telehealth" is defined as a method to deliver health care services using information and communication technologies to facilitate the diagnosis, consultation, treatment, education, care management, and self-management of a patient's health care while the patient and provider are at two different sites.

This form of service usually consists of live videoconferencing through a personal computer with a webcam. Telemental health is offered to improve access to counseling services to SHCS students when significant barriers of travel to campus for counseling services exist.

I understand that I have the following rights with respect to telemental health:

- 1) I have the right to withhold or withdraw consent at any time without affecting my right to future care or treatment or risking the loss or withdrawal of any benefits to which I would otherwise be entitled.
- 2) The laws that protect the confidentiality of my medical information also apply to telemental health.
- 3) I understand that the same laws that give me the right to access my medical information and copies of medical records in accordance with California law also apply to telemental health.
- 4) I understand that the dissemination of any personally identifiable images or information from the telemental health interaction to researchers or other entities shall not occur without my written consent.

I understand the following potential risks, consequences, and limitations of telemental health:

- Telemental health should not be viewed as a substitute for face-to-face counseling or medication by a physician. It is an alternative form of counseling with certain limitations.
- TMH is relatively new, and therefore lacks research indicating that it is an effective means of receiving therapy.
- TMH may not be appropriate if you are having a crisis, acute psychosis, or suicidal or homicidal thoughts.
- TMH may lack visual and/or audio cues, which may increase the likelihood of misunderstanding each other.
- TMH may have disruptions or delays in the service and quality of the technology used.
- In rare cases, security protocols could fail and your confidential information could be accessed by unauthorized persons.

I understand the following Backup Plan in Case of Technology Failure

- The most reliable backup is a phone. Therefore, it is recommended that you always have a phone available and that your provider knows your phone number.
- If you get disconnected from a telemental health session, end and restart the session. If you are unable to reconnect within five minutes, call your provider. If they do not hear from you within ten minutes, you agree (unless you request otherwise) that your provider can call you on the phone number you listed on the client information form.

Emergency Contact

If you are ever experiencing an emergency, including a mental health crisis, that is life or death, please call 911, Lifeline 1-800-273-8255, or go to your nearest emergency room. If you just need to talk with a counselor, please call 760-750-4915 and when prompted enter “9” to be connected with a counselor from a contracted agency.

So that your provider is able to get you help in the case of an emergency and for your safety, the following are important and necessary. By signing this agreement form you are acknowledging that you understand and agree to the following:

- You must inform your provider of the location in which you will consistently be during sessions, and inform your them if this location changes.
- You must identify on your informed consent form a person who can be contacted in the event that your provider believes your safety is at risk.
- Your provider may need to verify that your emergency contact person is able and willing to go to your location in the event of an emergency, and/or call 911 or transport you to a hospital if your provider deems necessary. In addition, your provider may require that you create a safe environment at your location during the entire time that you are in treatment. This may mean disposing of all firearms and excess medication from your location.

When receiving telemental health, it is also required that you:

- Only engage in sessions when you are physically in California. Your provider will confirm this each session.
- Engage in sessions only from a private location where you will not be overheard or interrupted.
- Use your own computer or device, or one owned by CSUSM that is not publicly accessible.
- Ensure that the computer or device you use has updated operating and anti-virus software.
- Do not record any sessions, nor will SHCS record your sessions without your written consent.

I have read and understand the information provided above. I have discussed it with my provider, and all of my questions have been answered to my satisfaction.

Client Signature: _____

Date: _____

Emergency Contact Name: _____

Relationship to Emergency Contact: _____

Emergency Contact Phone Number: _____