

DELR Telehealth Disclosure Statement

This statement of understanding has been prepared to help explain policies and procedures related to electronic services provided by DeBalzo, Elgudin, Levine, Risen LLC. Please let us know if you have any questions about this statement. As a client receiving mental health services through telehealth methods, you understand:

1. This service is provided by technology (including but not limited to video, phone, and email) and may not involve direct, face to face, communication. You will need access to, and familiarity with, the appropriate technology to participate in the service provided. Any paperwork will likely be exchanged through DELR encrypted email.
2. You may decline virtual services at any time without jeopardizing your access to future care, services, and benefits.
3. In the event of disruption of internet service, it may be necessary to communicate by other means. If this occurs, your provider will contact you by phone or email. So, please be sure to check your email and voicemails.
4. Mental health clinicians have a duty to warn if there is an indication that our client is a danger to themselves or others. As such, you must inform your provider of your current location and an emergency contact number.
5. Virtual services provide many conveniences and advantages. However, not all mental health concerns are clinically appropriate for virtual services. Your provider may recommend the provision of face-to-face services for specific concerns. Your provider will regularly reassess the appropriateness of delivering services through technology. If a need for direct, face to face services arises, it is your responsibility to contact providers in your area or to contact this office for a face to face appointment. You understand that an opening may not be immediately available.
6. Virtual visits should not be used for emergency medical or mental health needs. In emergency situations call **216.233.1144 to speak to the provider on call**, go to the nearest emergency room, or call 911. **Your provider will respond to routine electronic communications within 24-48 business hours.**
7. Virtual services rely on technology, which allows for greater convenience in service delivery. However, there are risks in transmitting information over the internet that include, but are not limited to, breaches of confidentiality, theft of personal information, and disruption of service due to technical difficulties. While we have taken specific encryption measures to protect the information that will be communicated, the privacy and confidentiality of computer mediated communication cannot be 100% guaranteed. You should be aware that there is a very small chance information may be stolen from transmission between yourself and your provider. So that your information reaches the correct individual, please double-check your provider's email address before sending email.

8. Other DELR staff, those authorized by the client, and those permitted by law may also have access to records of electronic communications. Video sessions are not being recorded or stored.
9. It is your responsibility to maintain privacy on the client end of communication. Any family member or other individual that you would like to have present during the virtual visit must also sign this document. To ensure client safety and privacy, you agree to do your best to participate in the virtual visit from a private location. All individuals present for the virtual visit must be within view of the camera so the provider is aware of who is participating.
10. When participating in couples or group virtual sessions, it is possible that other session participants may not be in confidential locations. As such, please be aware that we cannot guarantee confidentiality for these sessions. However, all couples and group participants are asked to participate from confidential locations. If you are in a location where others might overhear the group session, please use headphones to participate.
11. The laws and professional standards that apply to in-person mental health services also apply to telepsychology services. This document does not replace other agreements, contracts, or documentation of informed consent.

STATEMENT OF UNDERSTANDING: I have read the above statement and fully understand these policies and procedures of DELR. I understand the benefits and limitations of telehealth services.

Signature:

Date:

Current Address:

Emergency contact:
