



# CARE Counseling Clinic, LLC

## Acknowledgement and Consent to Use Electronic Communication

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I have been advised and understand that the use of e-mail, cell phone calls, texting, video chat systems, and other forms of technology in psychotherapy has not been defined as a best-practice strategy. I have also been specifically advised of the following:

1. Email, cell phone use, texting, and video chat software communications with Angie Sherwood, LCSW; Jessica Crocker, LMSW; Spring Baxter, LMSW and/or CARE Counseling Clinic, LLC and all associated staff will be used for the purpose of simplifying and expediting scheduling/administrative matters and other issues related to therapy.
2. Email, cell phone use, texting, and/or video chat system communications are NOT a substitute for in clinic treatment services and do not take the place of therapy sessions. Therefore, email, cell phone usage, texting, and video chat systems should NOT be used to communicate: • Suicidal or homicidal thoughts or plans • Urgent or emergency issues • Serious or severe side effects or concerns • Rapidly worsening symptoms \* or any other serious or life threatening circumstances
3. In a life-threatening emergency, clients should: • Call 911 • Proceed to the nearest hospital emergency room • And/or call a crisis hotline such as 1-800-SUICIDE; the Idaho Suicide Prevention Hotline at 208-398-4357 which is available 24 hours a day, 7 days a week, year-round. Text support is available Monday through Friday, 3pm to Midnight (call hotline for texting phone number).
4. Any information exchanged electronically or with the use of technology increases the risk of confidentiality breaches. No technology is 100% secure and the therapist cannot guarantee protection from unauthorized attempts to access, use, or disclose personal information exchanged electronically.
5. The use of email, cell phone, or other forms of technology does not change the fact that the service provided by Angie Sherwood, LCSW; Jessica Crocker, LMSW; and Spring Baxter, LMSW are weekly 50-minute psychotherapy sessions scheduled and confirmed by both parties in advance of the sessions. Email/cell phone and/or texting is not a reliable way of obtaining urgent help from the therapist in an emergency or crisis.

I have thoroughly considered all of the above information, and I have obtained whatever additional input and/or professional advice I deem necessary in making an informed decision regarding email, cell phone use, texting, and video chat systems communication.

By signing, I consent to the use of email, cell phone, texting, and use of video chat software as needed for all purposes related to the process of therapy with CARE Counseling Clinic, LLC. If urgent help is needed and my therapist is unavailable, I will utilize the crisis services listed above in Line 3.

Furthermore, if at any time my therapist or I believe email/texting is interfering in my therapeutic process or being used ineffectively, either of us can revoke this consent verbally, refuse to respond to emails, cell phone calls, texts, and/or video chat software, and insist upon a verbal conversation before proceeding. By signing this agreement, I agree that I have fully reviewed the agreement and am informed that if I choose communication in any of the above listed methods that I solely take the risk and responsibility and agree to hold the therapists harmless for issues resulting from any and all communication using e-mail, cell phones, video chat systems, and/or texting.

