

Consent to Telehealth

Below is a detailed informed consent document regarding telehealth via UMass secured Zoom. By logging Into my scheduled Zoom meeting I am providing my acknowledgement that I have read this document and am consenting to telehealth (individual or group) via UMass-secure Zoom*

Video Conferencing is an option for conducting remote telehealth sessions over the internet where you will be able to speak to and see your provider on a screen. You and your provider may choose to use this option if you and your provider agree that this is best for your sessions at this time. Our clinic uses a secure version of Zoom as a video-conferencing platform. If you and your provider choose to utilize this technology, your provider will give you detailed directions regarding how to log-in securely. We ask that you be available promptly at the start time of your session, having already ensured that your audio and video features are working properly. We strongly suggest that you only communicate through a computer or device that you know is safe (e.g., has a firewall, anti-virus software installed, is password protected, not accessing the internet through a public wireless network, etc.).

The following information pertains specifically to the use of our secure Zoom videoconferencing. Use of our secure Zoom videoconferencing is completely voluntary. If you have any questions about our secure Zoom, please ask us, and we can discuss whether this option is right for you.

- Appointments will be made via secure email, phone, or patient portal secure messaging, as communicated to you by your provider. Please be online promptly at the start of your session, alone, in a quiet room, with your audio and video properly set up, and with the door closed.
- If my provider and I have determined that group telehealth is right for me, and have agreed in advance that my telehealth session will be a group session, I understand and consent that other clients will be present in the Zoom telehealth session.
- For best picture and audio quality, a hardwired connection (via LAN cable) rather than a wireless one should be used if possible. Headphones add additional security.
- I agree to provide my clinician with my physical location (address) and the name of one emergency contact at the start of each session, should this be needed in the event of a crisis situation.
- I agree to provide my clinician with a back-up telephone number at the start of each session, should our video conference session get dropped. I understand that if we cannot reconnect by Zoom for Healthcare in a timely way, we may finish our session via telephone if possible.
- Confidentiality should be treated like an in-office session: no outside distractions, no recording the session, no others may be in the room without consent from both client and provider, cell phone on silent, and close other programs on your computer.
- I understand that my provider may decide to terminate telehealth services if my provider deems it inappropriate for me to continue through telehealth sessions. In this case, my provider may provide in-person care, if available, or a referral to another provider or clinic, if necessary.

I also understand the following limitations of Zoom for Healthcare video sessions:

- Any internet-based communication is not 100% guaranteed to be secure/confidential. I further agree that neither my provider nor the clinic should be held responsible if any outside party gains access to the telehealth session or its contents.
- In a crisis or emergency situation that needs immediate attention, whereby I am considering seriously harming myself or someone else, I will dial 911 or go to a hospital emergency department.

- Technical problems could occur. If the session is disrupted, the provider will attempt to re-establish the Zoom for Healthcare meeting within ten minutes. If reconnection cannot occur, your session will be finished by telephone, if possible.

*We refer to “UMass-secure” Zoom because protections have been put in place by the IT department to block functions of Zoom that make it vulnerable to interference. This is still a product of Zoom and you can find information about Zoom generally at www.zoom.us

I have been informed of and understand the risks and procedures involved with using the UMass-secure Zoom for videoconferencing technology. I agree to the terms listed above and I hereby voluntarily consent to the use of this platform for sessions with my provider. I agree that neither my provider nor the clinic should be held liable in the event that any party passes the platform’s security and discovers personal or confidential information. This consent will last until the Commonwealth of Massachusetts and United States state of emergency declarations concerning the COVID-19 Outbreak are both ended; I understand that I can withdraw my consent for telehealth at any time, and my provider will work with me to find a suitable alternative.

I am providing my informed consent to my provider to engage in the session via the UMass secured Zoom