

# Behavioral Health Wellness Clinic

## Telehealth Informed Consent

### WELCOME

Thank you for choosing ANTHC Behavioral Health Wellness Clinic for your health care. We are happy you are here. This consent document has important information about the clinic and confidentiality. This consent is our agreement between you and the clinic providers. Copies of the informed consent are available on our website: [www.anthc.org/BHWC](http://www.anthc.org/BHWC).

Business telephone number: 907-729-2492

Location: All services are complete via telehealth

Professional Bios of BHWC Providers are available on our website at:

[www.anthc.org/departments/behavioral-health-wellness-clinic/who-we-are/](http://www.anthc.org/departments/behavioral-health-wellness-clinic/who-we-are/)

### TELEHEALTH TREATMENT

The clinic delivers care through telehealth. Telehealth is care provided between you and the clinician talking with each other by audio/video internet connection. Technology may consist of personal computers, tablets, or phones.

Telehealth treatment can improve access to care in rural communities. There may be risks with the use of telehealth for people with hearing problems, those who do not understand the technology, or live in a place with electrical or internet issues. Those risks are better addressed by seeing a provider in person. The clinic's telehealth connections are generally secure but not 100% perfect. You and your providers will connect using a log in link that is encrypted. Please know there is a small chance privacy risk if the security is broken or hacked. If there is an emergency, the clinic may have limited ability to respond.

You can decide at any time during your care that telehealth is not a good fit. Please talk with your provider and/or case manager for other options.

### TELEHEALTH TECHNOLOGY

For your appointments, be sure to have your phone or other device connected to the clinic's link. If you need help, ask someone at the clinic at any time before or during your scheduled appointment. If your internet is not working, the session may be completed through phone call.

If your session is interrupted for any reason contact the clinic at 907-729-2492 immediately for assistance reconnecting to your session.

Due to privacy risks, please refrain from texting personal information to the clinic and its providers. For safety and confidentiality of communications, texting personal information is discouraged.

### YOUR LOCATION FOR THE SESSION

You should choose a location for your telehealth appointments that is private, confidential, and safe. You will tell the clinic your physical location at the beginning of each of your appointments. If you cannot find a private space, you can choose to wear headphones to protect privacy so that others cannot listen. You choose the safety of your location; but, the clinic will not provide treatment if you are, at the time of treatment, operating a motor vehicle or in a space that does not appear to be private or confidential.

Clients must be physically located in the state of Alaska when accessing BHWC services in accordance with applicable regulatory limitation on the clinic practice over state lines or international boundaries.

### CONFIDENTIALITY

The clinic will keep your information confidential. The clinic is authorized to use and disclose your information with authorized personnel to provide you treatment services, and to carryout health care operations and payment functions. The clinic will only reveal your information as permitted or as required by applicable law and regulations. There will be no recording of any of the online sessions by you or the clinic. The session information and records are confidential in accordance with applicable law and regulations.

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In case of a medical emergency for you, your records may be disclosed to other treating providers for emergency treatment purposes. The clinic's staff and appropriate support services may also use and disclose your information for health care operation purposes as permitted by law and regulations.

You may direct your providers to share information with whomever you choose, and you can change your mind and revoke that permission at any time.

### **There are exceptions to confidentiality by applicable law and regulations:**

1. If the clinic providers believe that you are in **imminent danger of harming yourself**, then your providers may be required by law to disclose your health information and call the police, mobile crisis team, VPSO and/or State Troopers.
2. If your clinic providers have reason to believe that you are **abusing or neglecting a child or vulnerable adult**, or if you give them information about someone else who is doing this, then your providers must inform the appropriate agencies such as the Office of Children's Services or Adult Protective Services.
3. If your clinic providers have reason to believe that you will **harm another person(s)**, then your providers may be required by law to inform that person and warn them of your intentions. Your providers will also contact the police and ask them to protect your intended victim.
4. If you are involved in legal proceedings and your providers' **records are court ordered for release**, then your providers will be legally obligated to release your records.

### **RECORD RETENTION**

The clinic records are retained for a period of ten years for adults. For Minors, clinic records will be retained at least 2 years after the minor patient reaches age 19 or 7 years following discharge, whichever is longer as may be required under applicable law.

### **SUPERVISION**

The clinic staff includes Behavioral Health Aides of varying levels and licensed behavioral health providers. The Behavioral Health Aides are supervised by licensed behavioral health supervisors. At times, the clinic also has master's and doctoral level-graduate student clinicians completing their practicum and delivering care. Graduate students are also supervised by the licensed behavioral health supervisors at the clinic. If you have a concern regarding your provider, you can call 907-729-2492 and request to speak to a supervisor.

### **MISSED APPOINTMENTS & CONNECTING TO OTHER CARE**

Please call 24 hours in advance if you need to reschedule or cancel an appointment.

After two (2) consecutive missed appointments (due to no-shows or cancellations), the clinic will remove you from your scheduled services.

Additionally, weekly attendance in individual therapy ensures the best results toward wellness. If you are inconsistent in your attendance and miss a total of three individual therapy appointments, the clinic will remove you from your future individual therapy appointments. Clients are encouraged to reschedule appointments instead.

We are committed to providing you care and we understand that our clinic might not be the right fit for everyone. You may stop the telehealth services at any time. The clinic staff can assist you in completing steps to connect with another provider or different clinic.

### **BEHAVIORAL STANDARDS**

Respectful behavior and communication are a must at our clinic. Persons who are intoxicated will not be tolerated. Please be respectful toward others during individual and group services. Clinic providers may end an appointment with you or require you to leave if you are intoxicated or disruptive.

### **IN CASE OF EMERGENCY**

If you have an emergency, call 911 or go to an Emergency Room or local health clinic. For mental health support, you can also call

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the 988 Suicide and Crisis Lifeline at 988.

**INFORMED CONSENT**

I have read and understand the information provided on this document. By signing this document, I consent to the telehealth care with the ANTHC Behavioral Health Wellness Clinic and its providers.

**Signature of Client or Representative:**

**Date/Time signed:**

**Signature of Provider:**

**Date/Time Signed:**

*The information on this form is required by the Board of Professional Counselors which regulates all licensed professional counselors. Board of Professional Counselors Division of Corporations, Business & Professional Licensing P.O. Box 110806 Juneau, AK 99811-0806 Phone: (907) 465-2551*