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Online Counseling Consent

Thank you for your interest in engaging with online counseling. The following sheet provides information about online counseling which will allow you to decide whether you want to consent to counseling using this medium. Please feel free to ask any questions if you need clarification.

Benefits and limitations

Online counseling is a convenient alternative to traditional face-to-face counseling and has been shown to be effective in helping with many difficulties. However online counseling has limitations. There is a lack of “personal” face-to-face interaction which can make counseling less of a relational experience. It is also not an appropriate medium for some issues.

Technological requirements and competences

To engage in online counseling, you will require a device that can connect to the internet and be able to install and use the software that we agree to use for communication. A reliable high-speed internet connection is also required. The platform that we are using is Zoom. Zoom is a third party video communication service that uses industry standard privacy and security measures. For additional information regarding their privacy standards and tips on privacy, visit the following link: <https://zoom.us/privacy>

Procedures for technical difficulties

Disruptions can occur when using the internet to communicate. Should our communication be disrupted, I will immediately attempt to reconnect and resume the session. However, if I am repeatedly unable to reconnect for 10 minutes, the session will be rescheduled (via email) to a later date once connectivity is resumed.

Confidentiality

Online counseling utilizes the Internet for the transmission of personal information and therefore there are increased risks to confidentiality and it cannot be guaranteed. To protect your confidentiality, I will use passwords to access our sessions and disguise your identity on the link to our sessions.

Crisis management

It can be difficult to deal with emergency crisis situations when using online counseling as we are often in separate locations. I will therefore ask you to provide the location from which you are attending and contact details of a local family or friend who can be contacted in the case of an emergency. If you are in crisis and there is a disruption while we are engaging in online counseling, then you should immediately phone me.

Consent

1. I have read the above and understand the risks associated with engaging in online counseling. I agree to participate in online counseling and comply with the policies outlined above.

2. I confirm that the following identifying details are correct:

First name: _____ Surname: _____

Date of Birth: _____ Location: _____

3. I agree that in the case of an emergency where there is a threat of harm that the following persons can be contacted:

Name: _____ Telephone Nos: _____

Client Signature: _____

Date: _____