

APPSTATE PSYCHOLOGY CLINIC ELECTRONIC CONTACT POLICY

This document outlines our clinic policy regarding electronic communication. In order to maintain clarity regarding our use of electronic modes of communication while you are a client at the AppState Psychology Clinic, we have prepared the following policy. This is because the use of various types of electronic communications is common in our society, and many individuals believe this is the preferred method of communication with others, whether their relationships are social or professional. Many of these common modes of communication, however, put your privacy at risk and can be inconsistent with the law and with the ethical standards of our profession. Consequently, this policy has been prepared to protect the security and confidentiality of your treatment and to assure that it is consistent with ethics and the law.

If you have any questions about this policy, please feel free to discuss this with your provider.

Consent with this form means that you give permission for the AppState Psychology Clinic to use e-mail to communicate with you. Even our limited use of e-mail includes some risks (see below). Before signing, please carefully read the following and discuss any questions or concerns with clinic staff or your clinician.

Examples of potential risks:

- E-mail can be broadcast worldwide and received by unintended readers.
- E-mail senders can easily misaddress an e-mail.
- E-mail is easier to falsify than handwritten or signed documents.
- Backup copies of e-mails may exist even after the original has been deleted.
- Employers and online services have a right to archive and inspect e-mail within their systems.
- E-mail can be intercepted, altered, forwarded, or used without authorization or detection.
- E-mail can be used to introduce computer viruses.
- E-mail can be used as evidence in court.

The following outlines how the AppState Psychology Clinic will handle e-mail communication with you:

- All e-mail messages to you or from you concerning treatment, other than scheduling an appointment, will be made part of your clinical record.
- We may forward e-mail to other members of our staff when necessary, such as administrative assistants. We will **not** forward e-mail to independent third parties without your written permission, except as authorized or required by law.
- Although we will try to read and respond promptly to e-mails from you, we cannot guarantee that any particular e-mail will be read and responded to within any particular period of time. Therefore, e-mail correspondence with us should **not** be used for emergencies or other time-sensitive matters. In an emergency, please call 911 or go to your nearest emergency service.
- If you have not received a response from us within a reasonable time period, it is your responsibility to follow up and determine whether the intended recipient received the e-mail and when the recipient will respond.
- We will **not** include sensitive information in e-mail correspondence with you, and we ask that you do not include sensitive information in e-mail correspondence with us.
- You may inform the AppState Psychology Clinic and your clinician of any information you do not want sent by e-mail.
- It is your responsibility to protect access to your e-mail account.
- We will **not** engage in e-mail communication that is unlawful.
- It is your responsibility to inform us if you change your e-mail address.

AppState Psychology Clinic staff and clinicians do not communicate via e-mail with clients under the age of 18. If you are a parent or legal guardian consenting to e-mail communication regarding your child's appointments, please sign as the client's responsible party and provide your e-mail address. **We require a separate consent form from each parent or legal guardian who wishes to exchange e-mails with the AppState Psychology Clinic to schedule appointments for a minor client.**

Text Messaging

AppState Psychology Clinic staff and clinicians **will not text message you**, nor respond to text messages from you. Exceptions may be made for scheduling purposes (e.g., reminders) if

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requested by you or if other methods of contact have been unsuccessful. This will only be done if you explicitly agreed to be contacted by text message about scheduling.

Social Media

Clinic providers do not communicate with, or contact, any of our clients through social media platforms like Twitter, Facebook, Instagram, LinkedIn, etc. In addition, if we discover that we have accidentally established an online relationship with you, we will cancel that relationship. This is because these types of casual social contacts can create significant security risks for you.

Admittedly, clinic providers participate on various social networks, but not in our professional capacity. If you have an online presence, there is a possibility that you may encounter a provider by accident. If that occurs, please discuss it with your provider during your next appointment. We believe that any online communications with clients have a high potential to compromise the professional relationship. In addition, please do not try to contact providers this way. We will not respond and will **terminate any online contact** no matter how accidental.

Website

The AppState Psychology Clinic has a website that you are free to access (**psychclinic.appstate.edu**). We use it for professional reasons to provide information about our clinic. You are welcome to access and review the information that we have on our website. If you have questions about any information on the website, discuss them with your clinician during your appointment.

Web Searches

AppState Psychology Clinic staff and clinicians will not use web searches to gather information about you without your permission. If you encounter information about your clinician through web searches, or in any other fashion that is of concern to you, please inform your clinician so that any potential impact on your treatment may be discussed.

I have read and fully understand this consent form. I understand the potential risks of using e-mail, and I agree to the conditions outlined above. I understand that the AppState Psychology Clinic does not accept an e-mail message as an emergency notification and does not guarantee a timely response or any response to an email.

I understand that AppState Psychology Clinic staff and clinicians will not respond to text messages from me (or my child) and will not communicate with me (or my child) through social media. I understand that AppState Psychology Clinic staff and clinicians will not conduct web searches to gather information about me (or my child).

I have been given the opportunity to ask questions about the statements above, and my questions have been answered to my satisfaction.

Client Name (please print) _____

Responsible Party Name (if other than client) (please print) _____

Responsible Party's Relationship to client (please print) _____

Check one:

- ☐ I give permission for e-mail communication. E-mail address: _____
- ☐ I do **not** give permission for email communication.

Check one:

- ☐ I give permission for text communication (only for scheduling). Cell: _____
- ☐ I do **not** give permission for text communication.

Client or Responsible Party Signature

Date