



NON-SECURE ELECTRONIC COMMUNICATIONS INFORMED CONSENT

Client confidentiality is protected by law and Lisa Sciarani / Your Path Forward Counseling (the “Therapist”) wants to ensure your confidentiality. Communications via e-mail and text messaging are convenient but come with inherent risks. In order to communicate with you by email or text message, your Therapist needs to make sure you are aware of the confidentiality and other issues that arise when communicating in this way and to document that you are aware of these and agree to them.

RISK OF ELECTRONIC COMMUNICATION

The transmission of client information by normal email and/or SMS text messaging has a number of risks that you should consider prior to the use of email and/or texting. These include, but are not limited to, the following risks:

1. Email and texts can be circulated, forwarded, stored electronically and on paper, and broadcasted to unintended recipients.
2. Email and text senders can easily misaddress an email or text and send the information to an unintended recipient.
3. Backup copies of emails and texts may exist even after the sender and/or the recipient has deleted his/her/their copy.
4. Employers and online services have a right to inspect emails sent through their company systems.
5. Emails and texts can be intercepted, altered, forwarded or used without authorization or detection.
6. Email and texts can be used as evidence in court.
7. Emails and texts may not be secure and therefore it is possible that the confidentiality of such communications can be breached by a third party.

CONDITIONS FOR THE USE OF EMAIL AND TEXTS

Your Therapist cannot guarantee security and confidentiality of email and text information sent and received, but she will use reasonable means to maintain it.

Clients must acknowledge and consent to the following conditions:

1. Email and texting are not appropriate for urgent or emergency situations. Your Therapist cannot guarantee that any particular email and/or text will be read and responded to within any particular period of time.
2. Email and texts should be concise. You should call and/or schedule an appointment to discuss complex and/or sensitive situations.
3. Email and texts are a part of your medical record.

4. You should not use email or texts for communication of sensitive medical information.
5. Your Therapist is not liable for breaches of confidentiality caused by you or any third party.
6. It is your responsibility to follow up and/or schedule an appointment if warranted. If you have not received a confirmation from your Therapist regarding a canceled or scheduled appointment, it is still unconfirmed and your responsibility to follow up.
7. It is your responsibility to maintain security on your end, including using your own device(s), using safe passwords, and keeping passwords protected and secure.

Client Acknowledgment and Agreement

I (the client) acknowledge that I have read and fully understand this consent form. I understand the risks associated with the communication of email and/or texts with my Therapist. I consent to the conditions and instructions outlined, as well as any other instructions that my Therapist may impose to communicate with me by email or text.

I hereby give permission for my Therapist to reply to my messages via email and text message, including any information that is deemed appropriate, that would otherwise be considered confidential. I also understand that I may withdraw permission for my Therapist to communicate with me via email or text by notifying my Therapist in writing.

Client Signature

Date

Parent/Legal Guardian Signature

Date

Parent/Legal Guardian Signature

Date