

Kate Dacy LLC
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INFORMED CONSENT FOR TELEHEALTH SESSIONS

Telehealth is the use of electronic information and communication technologies by a healthcare provider to deliver services to an individual when he/she/they/them is located at a different site than the provider.

Telehealth allows Kate Dacy (provider) to diagnose, treat, consult and educate using interactive audio, video or data communication regarding my treatment.

I hereby consent to participation in psychotherapy and/or somatic experiencing session via telephone or the internet (hereinafter referred to as Telehealth) with Kate Dacy, PCC, SEP.

- **Privacy & Confidentiality.**

- The laws that protect privacy and the confidentiality of PHI (protected health information) for face to face sessions also apply to Telehealth.
- Any identifiable information or image obtained in the use of Telehealth will not be disclosed without my consent.
- Exceptions: Information disclosed in a Teletherapy session is confidential. There are, by law, exceptions to confidentiality, including mandatory reporting of child, elder, and dependent adult abuse and any threats of violence I may make towards a reasonably identifiable person. I also understand that if I am in such mental or emotional condition to be a danger to myself or others, Kate Dacy has the right to break confidentiality to prevent the threatened danger.

- **Telehealth is voluntary.**
 - I have the right to withhold or refuse Telehealth at any time without affecting my right to future care or treatment.
 - Consent may be withdrawn orally or in writing at any time by calling Kate Dacy at 859-802-2418 or emailing her at kdacy.presence@gmail.com

- **Risks and Benefits.**
 - Risks: There are risks unique and specific to Telehealth, including but not limited to, the possibility that our therapy sessions could be disrupted or distorted by technical failures or could be interrupted or could be accessed by unauthorized persons.
 - Benefits: While psychotherapeutic treatment of all kinds has been found to be effective in treating a wide range of mental disorders, personal and relational issues, there is no guarantee that all treatment of all clients will be effective. Thus, I understand that while I may benefit from Telehealth, results cannot be guaranteed or assured.
 - Differences: Telehealth treatment is different from in-person therapy and that if Jean Leslie believes I would be better served by another form of psychotherapeutic services, such as in- person treatment, I will be referred to a provider in my geographic area that can provide such services.

- **Payment for services**
 - Fees for session: Telehealth sessions are the same fee schedule as face to face sessions.

I have read and understand the information provided above regarding Telehealth, have discussed it with Kate Dacy, and all my questions have been answered to my satisfaction.

I have read this document carefully and understand the risks and benefits related to the use of Telehealth services and have had my questions regarding the procedure explained. I hereby give my informed consent to participate in the use of Telehealth services for treatment under the terms described herein.

By signature below, I hereby state that I have read, understood, and agree to the terms of this document.

- Print Name

- Client's Signature Date