



Telehealth Services Informed Consent

Introduction: Telehealth involves the use of electronic communications to enable healthcare and mental health providers to deliver services to individuals who may not have direct access to care. The purpose of this document is to provide informed consent for telehealth services provided in a school-based setting.

Nature of Telehealth Services: Telehealth services use interactive audio, video, or other electronic media to deliver health and mental health care. These services include, but are not limited to:

- Assessment and evaluation
- Diagnosis and treatment planning
- Therapeutic interventions and counseling
- Follow-up and support services
- Case management and consultation

Benefits of Telehealth Services:

- Increased access to healthcare and mental health services
- Convenience of receiving care in a familiar and comfortable environment
- Potential for more timely interventions and support
- Reduced need for travel and associated costs

Risks and Limitations:

- Potential for technology failures or interruptions
- Possible security and privacy risks due to the use of electronic communications
- Limitations in the ability to fully assess and diagnose due to the lack of physical presence
- Potential for misunderstandings due to the lack of visual and non-verbal cues
- The possibility that telehealth may not be as effective as in-person services for certain conditions or individuals

Confidentiality and Privacy:

- All information shared during telehealth sessions is confidential and will be protected according to applicable laws and regulations.
- I understand that my **child's** healthcare information may be shared with other individuals for scheduling and billing purposes
- Efforts will be made to ensure the privacy and security of telehealth communications, including the use of encrypted platforms.
- Participants will use a private space and secure internet connection during telehealth sessions to maintain confidentiality.
- Participants will be located physically within the state of West Virginia during their appointment.
- All Participants have the right to withhold, withdraw, suspend or terminate consent to the use of telehealth services for any reason without affecting the right to future care or treatment.



Emergency Situations:

- Telehealth is not suitable for all/medical emergency or crisis situations. Participants should call emergency services or go to the nearest emergency room in such cases.

Informed Consent for Telehealth Services through School Based Wellness Center

I understand that I must provide consent for my child to receive telehealth services through the respective School Based Wellness Center. I also understand I can revoke this consent at any time and my child can continue to be seen for in person services through the Wellness Center and any Monroe Health Center location.

I also understand that at any point in my child's care the provider can determine in person appointment(s) maybe warranted based upon the child's needs as not all care can be properly administer via telehealth.

Consent for telehealth services must be provided by a parent or legal guardian for individuals under the age of 18.

Student Name: _____

Parent/ Guardian Signature: _____ Date: _____

Witness Signature: _____ Date: _____