



ACKNOWLEDGEMENT AND CONSENT TO USE ELECTRONIC COMMUNICATION AND TECHNOLOGY

Summit Counseling prioritizes confidentiality and therefore desires to avoid communication via any means in which client identity cannot be verified or in which others may be exposed to confidential information. The most secure exchange of confidential information is face to face. However, because of the ongoing advancement of technology and expansive means of communication (e.g. email, text messaging, social network sites, etc.) Summit Counseling recognizes that you may prefer to occasionally exchange information with your therapist via email or text.

I have been advised and understand that the use of email, cell phone texting, and other forms of technology in psychotherapy has not been defined as a best-practice strategy. I have also been specifically advised of the following:

1. Email or text communication with my therapist or Summit Counseling will be used for the purpose of simplifying and expediting scheduling/administrative matters only.
2. Email or text communication is NOT to be used to provide/receive treatment services or take the place of therapy sessions. Therefore, email/texting should NOT be used to communicate:

- Suicidal or homicidal thoughts or plans
- Urgent or emergency issues
- Serious or severe side effects or concerns
- Rapidly worsening symptoms

3. In a life-threatening emergency, clients should call 911 and proceed to the nearest hospital emergency room or contact a crisis hotline.
4. Any information exchanged electronically or with the use of technology increases the risk of confidential breaches. No technology is 100% secure and the therapist cannot guarantee protection from unauthorized attempts to access, use, or disclose personal information exchanged electronically.
5. The use of email, cell phone, or other forms of technology does not change the fact that the service provided by my therapist is psychotherapy sessions scheduled and confirmed by both parties in advance of the sessions. Summit Counseling does not provide intervention, and email/cell phone texting is not a reliable way of obtaining urgent help from the therapist in an emergency.

I have thoroughly considered all of the above information and I understand and agree that if I choose to communicate with my counselor through email and/or text messaging, my therapist will not be held liable for exposure of confidential information.

By signing, I consent to the use of email/cell phone texting as needed for scheduling and administrative purposes only, within the guidelines above. If more urgent help is needed, I will utilize the 911 or hospital crisis services listed above. Furthermore, if at any time my therapist or I believe email/texting is interfering with my therapeutic process or being used ineffectively, either of us can revoke this consent verbally, refuse to respond to emails/texts, and insist upon a verbal conversation before proceeding.

CLIENT SIGNATURE - required for services _____ DATE: _____