EMERGENCY CLOSURE AND TELEMENTAL HEALTH INFORMED CONSENT

Please read this document carefully. To signify that you understand what is being provided in this document, you will be asked to indicate "Yes" or "No" after various statements. Please indicate "Yes" when you agree to and understand the statements provided. Indicate "No" if you do not agree to or understand the statements provided. Direct any questions or concerns to your clinician during or after completing this document. At this time, please indicate "Yes" if you understand and agree to the instructions or "No" if you do not understand or don't agree to the instructions.

___Yes  ___No

EMERGENCY CLOSURES AND CRISIS PROTOCOL

Dalton State College may experience emergency closures due to inclement weather, health concerns, and other significant events. These emergencies often require immediate safety procedures including the closure of specific student services (i.e. counseling services). The DSC Counseling Center has created emergency procedures that prioritize the safety and well-being of students and clients during emergency closures.

All students, faculty, and staff experiencing mental health emergencies are always directed to contact emergency services. Mental health emergencies include: suicidal thoughts or plans to end your life, thoughts of harming others, psychotic episodes (i.e. hallucinations, delusions), sexual assault, and more. Emergency services can be accessed using the following contacts and links:

- DSC Public Safety: 706-272-4461
- Georgia Crisis & Access Line (GCAL): 1-800-715-4225
- Tennessee Crisis Phone Line: 1-855-274-7471
- Dial 911
- Crisis providers in TN: (https://bit.ly/2yr96km)

During emergency campus closures, non-DSCCC clients can receive community referrals for mental health services in Georgia and Tennessee using the following numbers:

- Georgia Crisis and Access Line (24/7/365): 1-800-715-4225
- Tennessee Helpline (M - F, 8am to 4:30pm CST): 1-800-560-5767

___Yes  ___No

TELEMENTAL HEALTH

For DSCCC's current clients, it is of utmost importance to us that we maintain your confidentiality, respect your boundaries, and ascertain that your relationship with your clinician remains therapeutic and professional. Telemental Health is defined as follows (Georgia Code 135-11-01):
“Telemental Health means the mode of delivering services via technology-assisted media, such as but not limited to, a telephone, video, internet, a smartphone, tablet, PC desktop system or other electronic means using appropriate encryption technology for electronic health information. Telemental Health facilitates client self-management and support for clients and includes synchronous interactions and asynchronous store and forward transfers.”

Telemental Health is a relatively new concept despite the fact that many therapists have been using technology-assisted media for years. Breaches of confidentiality over the past decade have made it evident that Personal Health Information (PHI) as it relates to technology needs an extra level of protection. Additionally, there are several other factors that need to be considered regarding the delivery of Telemental Health services in order to provide you with the highest level of care. Therefore, our therapists have completed specialized training in Telemental Health. We have also developed several policies and protective measures to assure your PHI remains confidential. All Telemental Health sessions will take place on the platform, Doxy.me. This is an encrypted service that will maintain the confidential nature of your session. Ensure that you are in a private setting with no one else around during your session to ensure confidentiality. Therapists will also use best efforts to be in a private setting where no one is able to overhear your conversation.

___Yes
___No

Appointments
To contact a clinician for an appointment during an emergency closure, call the Counseling Center at 706-272-4430 and leave a voicemail with your name and personal phone number. Voicemails will be checked daily, and we will return your call within one business day. Two attempts will be made to contact you. If we are unable to reach you after two attempts, call and leave another voicemail. We will attempt contact again within one business day. Calls received outside of normal business hours and on weekends will be responded to on the following business day. Disclaimer: Phone calls from therapists will be coming from a BLOCKED or PRIVATE NUMBER that will not identify as the Dalton State College Counseling Center.

At the time of your appointment, use the Doxy.me link sent via your DSC email or text message to log in to the session. Signing into the session will confirm you agree to the terms and conditions of using the Doxy.me service which can be found here: https://doxy.me/terms-of-service. Disclaimer: If you choose to decline the terms of service at the time of the call, notify your clinician immediately via email. You will be referred to the crisis protocol described in this document, and the appointment will be ended.

During the call, you will be required to verify your identity and current location. This information will help us ensure confidentiality and allow us to assist you in the event of an emergency. Disclaimer: Refusing to provide this information will require us to refer you to the crisis protocol and terminate the session. DSCCC will confirm your identity using the Doxy.me video/audio tools, information provided by you in our client records, and Banner. Have your government issued ID and DSC student ID available for reference during the call. Examples of acceptable government issued IDs include:

• State-Issued Driver’s License/ID Card
• Passport
• Department of Defense ID Card
• Conceal Carry Permit

___Yes
___No

Client Responsibilities
Should you choose to engage in a Telemental Health session with a clinician you will agree to:

• Be physically located in Georgia or Tennessee as our clinicians are unable to practice outside these states.
• Only talk in a private setting when no one else is around or can hear the conversation.
• To share your name, student ID, driver’s license/student ID card and physical location.
• Agree to same limitation of confidentiality as if you were in a therapy session in the office.
• Verbally end the call to ensure each party knows the call is ending and not accidentally disconnected.
• Agree to call 706-272-4430 should you be disconnected from the call to ensure clinician is able to contact you.

Please note: If there is a concern about your well-being or safety, a welfare check will be made. This would include calling a local law enforcement agency to come to your location to ensure your safety. During a phone call, you and your clinician could encounter a technological failure. The most reliable backup plan is to make contact via phone again. Your clinician will call you back should you be disconnected.

___Yes  ___No

Alternatives to DSCCC Telemental Health
Georgia HOPE (located at 1414 Dug Gap Rd, Dalton, GA 30720 and throughout the state of GA; 706-279-0405) has indicated they are receiving new clients for crisis sessions and new intakes. Their hours are Monday-Friday, 8am-5pm should you chose to continue therapy at a different location during this time.

Highland Rivers Health (located at 900 Shugart Rd, Dalton, GA 30720 and throughout the state of GA; 1-800-729-5700) has indicated they are receiving new clients for crisis sessions and new intakes. Their hours are Monday-Friday, 8am-5pm should you chose to continue therapy at a different location during this time.

Referrals to community providers in Georgia and Tennessee can be found using the following numbers:
• Georgia Crisis and Access Line (24/7/365): 1-800-715-4225
• Tennessee Helpline (M-F, 8am to 4:30pm CST): 1-800-560-5767

___Yes  ___No

SIGNATURE
By signing this document, you are confirming you have read this document thoroughly and provided appropriate responses. You understand that indicating “No” to any of the responses may impact your ability to receive Telemental Health services through DSCCC. You understand that indicating “Yes” to all of the statements signifies your understanding of the crisis protocol, the definition of telemental health as described in Georgia Code 135-11-01, the process for establishing appointments, your client responsibilities, and your awareness of community referral options. Additionally, signing this document indicates you understand this informed consent supplements and does not replace the “Informed Consent, Rights, Responsibilities, & Authorization” previously signed with DSCCC.

By signing this document, you understand and agree to this form of communication. Permission for this type of communication can be rescinded at any time per your request via email to your therapist.

_______________________________  __________________
Client Print Name  Date

_______________________________
Client Signature

Witness Print Name  Date

_______________________________
Witness Signature