



**PATH**

Psychology Assessment and  
Treatment Services of Halton

paththerapyhalton.ca 289 206-4258

**INFORMED CONSENT CHECKLIST FOR ELECTRONIC COMMUNICATIONS PROVIDED**

<input type="checkbox"/> Zoom	<input type="checkbox"/> Email	<input type="checkbox"/> Text Messaging	<input type="checkbox"/> Phone
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**There are potential benefits and risks of video-conferencing / electronic communication (e.g., limits to patient confidentiality) that differ from in-person sessions. Prior to starting video-conferencing services, we discussed and agreed to the following:**

1. Confidentiality applies and nobody will record the session.
2. We agree to use the video-conferencing platform for our virtual sessions.
3. You cannot share your session link with anyone else.
4. We agree to the above electronic communication.
5. You will find a quiet, private space that is free of distractions (you will not answer your cell phone during the session, not drive a vehicle, and you will ask others not to walk into the room during sessions).
6. Please use a secure internet connection rather than public/free Wi-Fi.
7. Be on time, and if you need to cancel or change your appointment, you must notify me in advance by phone or email.
8. We need a back-up plan (e.g., phone number where you can be reached) to restart the session, or to reschedule it, in the event of technical problems.
9. We need a safety plan that includes at least one emergency contact (such as a close relative) your physical location, and the closest Emergency Room to your location, in the event of a crisis situation.
10. If you are not an adult, we need the permission of your parent or legal guardian (and their contact information) for you to participate in sessions.
11. You have reviewed our Collection of Data, Informed Consent and Fee Policy.
12. As your treatment provider, I may determine that due to certain circumstances, if video-conferencing is no longer appropriate, alternate referrals/recommendations will be made.

**I have reviewed and understand all the risks, conditions, and instructions described in this form and consent to use the services for the purposes indicated above.**

I acknowledge that I, at any time, may withdraw the option of communicating electronically.

Client Name: \_\_\_\_\_

Signature of Client /Client's Legal Representative: \_\_\_\_\_

Date: \_\_\_\_\_



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## **What is the Personal Health Information Protection Act (PHIPA)?**

The Personal Health Information Protection Act (PHIPA) governs the manner in which personal health information may be collected, used and disclosed in Ontario. PHIPA also provides a means for redress through the Information and Privacy Commissioner (IPC) of Ontario when privacy rights relating to personal health information have been violated. *When using electronic and digital technology, privacy breaches can and do occur. Online privacy is never guaranteed.*

**For further information regarding Zoom and *Personal Health Information Protection Act* Compliance (PHIPA), please visit the following link:**

[https://zoom.us/docs/doc/PIPEDA\\_PHIPA%20Canadian%20Public%20Information%20Compliance%20Guide.pdf](https://zoom.us/docs/doc/PIPEDA_PHIPA%20Canadian%20Public%20Information%20Compliance%20Guide.pdf)

**This link states PHIPA compliance, although it is not technically acceptable for healthcare because of the of personal data collected. Secure privacy is not guaranteed on this platform, but to mitigate these risks our sessions will be locked, and the participant list will be in view.**

**Below is the defined risk area when communicating electronically:**

<b>RISK AREA</b>	<b>DESCRIPTION</b>
Viruses/Malware	Electronic communications (like email, accessing websites) can potentially introduce malware into a computer system, and potentially damage or disrupt the computer, network or security settings.
Intercepted/Forwarding	Email/text communications can be forwarded, intercepted without the knowledge of the sender or recipient or participants. Your therapist will lock all video meetings once the sessions commence to ensure no additional outsiders can attempt to access the meeting.
Back Up Copies/Logs/Tracking	EMAILS-Even after the sender and the recipient have deleted copies of emails and texts, backup copies may exist on a computer system. Emails are retained in the logs of Internet service providers. While it is unlikely that someone will be looking at these logs, they are, in theory, available to be read by the system administrator(s) of the Internet service provider.

**If there is a breach of confidentiality:**

- 1) You will be immediately informed.

- 2) Social Workers and Psychologists are considered Health Information Custodians (Health IC), as we maintain private information about you. As such, if a breach of confidentiality occurs, it must be reported to our respective colleges, as well as to the Information and Privacy Commission of Ontario (IPC).

I acknowledge that I have read and fully understand the risks, limitations, conditions of use, and instructions for use of the electronic communication services described in this consent form. I understand and accept the risks outlined in this consent form, associated with the use of this service. I consent to the conditions and will follow the instructions outlined above.

I acknowledge and understand that despite recommendations that encryption software be used as a security mechanism for electronic communications, it is possible that communications with this service may not be encrypted. Despite this, I agree to communicate with the service provider with a full understanding of the risk.

Michelle Spudic M.S.W., RSW  
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