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**Therapy Agreement During the COVID-19 Pandemic**

As we are all aware, our country and the entire world currently face a COVID-19 pandemic; this strain of the coronavirus is relatively new and potentially lethal, and as yet there is no vaccine or cure. There is an insufficient number of tests available, so none of us can be certain that we are not carrying the virus, even if we do not have symptoms. Additionally, none of us can be certain that we have not already been exposed to someone who is carrying the virus.

As a public health response for at least the next few weeks, possibly longer, we are supposed to practice social distancing to protect ourselves and to decrease the spread of the virus. “Social distancing” means limiting our contact with other people to the greatest extent possible. It also means that if we are around other people, we ought to maintain a distance of 3-6ft between ourselves and anyone coughing or sneezing, and avoid physical contact. We also need to practice due diligence in washing and sanitizing our hands and disinfecting public and high-touch surfaces on a regular basis.

We can continue necessary in-person visits, which includes appointments with healthcare providers, but many healthcare providers have transitioned or are transitioning to telehealth, that is, providing services via video conferencing and/or the telephone to exercise as much caution as possible to prevent the spread of the virus.

*Anytime we elect to meet a healthcare provider (or anyone else) in person, we take the risk of being exposed to COVID-19­—and of potentially exposing someone else.*

*In-Person Sessions*

To this point I have continued to offer in-person sessions. In response to the COVID-19 pandemic, my colleagues and I have exercised due diligence to follow safety guidelines in the office, including: disinfecting public/high-touch hard surfaces several times a day, providing hand sanitizer in the bathroom (and my office), placing the bathroom trashcan by the door to make it easy to use a paper towel on the door knob and light switch, placing tissues in the waiting area to use to avoid direct contact with the front door, requesting that anyone sick or with known exposure stay home, and handwashing/sanitizing ourselves. I have also frequently sanitized my phone and offered payment options that do not require touching my phone (e.g., cash/check, Venmo (@Jennifer-Watts-84), and PayPal).

Although I may in certain limited situations continue to meet in person, like other healthcare providers, I *offer, encourage—****and at this point prefer***—the use of telehealth/video conferencing to conduct our regular and ongoing therapy sessions until public health and/or government officials inform us that it is safe to reengage socially in our typical ways.

*Telehealth/Video Conferencing Sessions*

Telehealth/video conferencing sessions are not the same as direct client/therapist interactions due in part to the fact that client and therapist are not in the same physical location. There are potential benefits and risks. Some of the potential benefits of telehealth/video conferencing sessions are: easier access to care, compliance with the current condition of social distancing in the United States, freedom from any potential exposure to COVID-19 (or other virus) in an in-person session, and the convenience of meeting from any location.

Some of the potential risks of this technology are: interruptions, unauthorized access, potential difficulty obtaining privacy, and technical difficulties (e.g., video lag, screen freezing, delays, and static).  However, either the therapist or the client can discontinue a telehealth/video conferencing session at any time if either thinks the video conferencing connections are not adequate to conduct the session or if privacy is compromised. We will agree ahead of or at the beginning of our telehealth/video conferencing session what steps we will take if the video or audio quality is not fully sufficient to conduct/complete the session. Talking on the phone will be the final step if the video platforms do not work adequately.

Zoom and Doxy.Me are my first-choice platforms on which to conduct our telehealth/video conferencing sessions.  Both programs are free, relatively simple to use, and do not require passwords. For the former I will send an email invite link to use at our session time, and for the latter I will send by email the link to my online waiting room. Secondary video platform options are FaceTime and Skype. The former has the benefit of already being familiar to most people, but both these platforms, along with Zoom, have the limitation that they are not fully encrypted.

Additional limits and clarifications to these video platforms are:

1. They are NOT Emergency Services, and in the event of an emergency, the client must use a phone to call 911.
2. Although therapist and client may be in direct, virtual contact through the telehealth/video conferencing services, none of them provides any medical or healthcare service or advice including, but not limited to, emergency or urgent medical services. The platforms facilitate video conferencing and are not responsible for the delivery of any healthcare, medical advice, or care.
3. The therapist does not necessarily have access to any or all of the technical information in these services or know that such information is current, accurate or up-to-date. The client cannot rely on the therapist to have any of this information.
4. To maintain confidentiality it is up to the client not to share his/her telehealth appointment link with anyone unauthorized to attend the appointment. (The therapist will only ever send the link directly to the client.)

*Questions/Concerns*

I want you to be able to make an informed decision regarding your healthcare. Please ask me for clarification of anything in this Therapy Agreement that you do not understand, and please discuss any concerns you have.

By signing this form, I certify:

that I have read or had this form read and/or had this form explained to me;

that I fully understand its contents, including the risks and benefits of the procedure(s);

that I have been given ample opportunity to ask questions and that any questions have been  
answered to my satisfaction.

Your signature below indicates that you:

\* have read or had this form read and/or explained to you;

\* fully understand its contents, including the risks and benefits of in-person and of   
 telehealth/video conferencing sessions;

\* have been given ample opportunity to ask questions and that any questions have been answered  
 to your satisfaction.

Client Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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Client Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_

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