

BRENDA B. ISEN M.S.W., R.S.W.

Individual, Couples and Family Therapist

416-5594356

Registration # 324141
Ontario College of Social Workers
And Social Service Workers

Service Provider Information

Name: Brenda Isen, R.S.W.

Name of Clinic: Brenda Isen

Address: 3255 Yonge St. Suite 406 Toronto M4N 2N1

Email: brendabisen@gmail.com

Phone: 416-559-4356

Client Information

Name: _____

Address: _____

Email: _____

Phone (as required for Service): _____

Other account information required to communicate via the Services

I, _____, acknowledge consenting to have

Brenda Isen communicate with and/or provide services through Videoconferencing, texts, emails & phone calls.

1. Risks of using electronic communication

While the Service Provider will use reasonable means to protect the security and confidentiality of information sent and received using electronic communications, because of the risks outlined below, the Service Provider cannot guarantee the security and confidentiality of electronic communications:

- • Despite reasonable efforts to protect the privacy and security of electronic communication, it is not possible to completely secure the information.
- • Electronic communications can introduce malware into a computer system, and potentially damage or disrupt the computer, networks, and security settings.
- • Electronic communications are subject to disruptions beyond the control of the Service Provider that may prevent the Service Provider from being able to provide services
- Electronic communications (emails & texts) can be forwarded, intercepted, circulated, stored, or even changed without the knowledge or permission of the Service Provider or the client.
- • Even after the sender and recipient have deleted copies of electronic communications, (emails & texts) back-up copies may exist on a computer system.
- • Electronic communications (emails & texts) may be disclosed in accordance with a duty to report or a court order.
- • Emails, text messages, can more easily be misdirected, resulting in increased risk of being received by unintended and unknown recipients.
- • Email, text messages, can be easier to falsify than handwritten or signed hard copies. It is not feasible to verify the true identity of the sender, or to ensure that only the recipient can read the message once it has been sent.

2. Conditions of Using Electronic Communications

- • While the Service Provider will endeavour to review electronic communications in a timely manner, the Service Provider cannot provide a timeline as to when communications will be reviewed and responded to.
- • Electronic communications (email & texts) may be copied or recorded in full or in part and made part of your clinical chart. Other individuals authorized by the client, to access your clinical chart, may have access to those communications.
- • The Service Provider will not forward electronic communications to third parties, including family members, without your prior written consent, except as authorized or required by law.
- Prior to the commencement of the provision of services by the Service Provider through electronic communications, the Service Provider and the client will establish an emergency protocol to address the following:

○ Steps to be followed in the event of a technical issue that causes a disruption in the services that are being provided by the Service Provider; and

- • The Service Provider is not responsible for information loss due to technical failures associated with your software or internet service provider.
- • The client will inform the Service Provider of any changes in the client's email address, mobile phone number, or other account information necessary to communicate electronically.
- • The client will ensure the Service Provider is aware when they receive an electronic communication from the Service Provider, such as by a reply message or allowing "read receipts" to be sent.
- • The Client will take precautions to preserve the confidentiality of electronic communications, such as using screen savers and safeguarding computer passwords.
- • If the Client no longer consents to the use of electronic communications by the Service Provider, then the Client will provide notice of the withdrawal of consent by email or other written communication.

Acknowledgement and Agreement

I acknowledge that I have read and fully understand the risks, limitations, conditions of use, and instructions for use of the selected electronic communications as described above. I understand and accept the risks outlined above to this consent form, associated with the use of the electronic communications with the Service Provider. I consent to the conditions and will follow the instructions outlined above, as well as any other conditions that the Service Provider may impose regarding electronic communications with Clients. I acknowledge and agree to communicate with the Service Provider or the Service Provider's staff using these electronic communications with a full understanding of the risks in doing so.

I am aware of all of the issues stated above and I confirm that any questions that I had regarding the provision of healthcare services through electronic communications have been answered by the Service Provider.

Name of Client : _____

Date: _____

Signature of Client: _____

Witness: _____

Date: _____