

EMPOWER PSYCHOLOGICAL SERVICES, PLLC

45200 Sterritt St. Ste. 105

Utica, Mi. 48317

Phone:248-838-9227

Fax: 586-232-5523

www.empowerpsychological.com

INFORMED CONSENT FOR IN-PERSON SERVICES DURING COVID-19 PUBLIC HEALTH CRISIS

This document contains important information about our decision (yours and mine) to resume in-person services in light of the COVID-19 public health crisis. Please read this carefully and let me know if you have any questions. When you sign this document, it will be an official agreement between us.

Decision to Meet Face-to-Face

We have agreed to meet in person for some or all future sessions. If there is a resurgence of the pandemic or if other health concerns arise, however, I may require that we meet via telehealth. If you have concerns about meeting through telehealth, we will talk about it first and try to address any issues. You understand that, if I believe it is necessary, I may determine that we return to telehealth for everyone's well-being.

If you decide at any time that you would feel safer staying with, or returning to, telehealth services, I will respect that decision, as long as it is feasible and clinically appropriate. Reimbursement for telehealth services, however, is also determined by the insurance companies and applicable law, so that is an issue we may also need to discuss.

Risks of Opting for In-Person Services

You understand that by coming to the office, you are assuming the risk of exposure to the coronavirus (or other public health risk). This risk may increase if you travel by public transportation, cab, or ridesharing service.

Your Responsibility to Minimize Your Exposure

To obtain services in person, you agree to take certain precautions which will help keep everyone (you, me, and our families and other patients) safer from exposure, sickness and possible death. If you do not adhere to these safeguards, it may result in our starting / returning to a telehealth arrangement.

Initial each to indicate that you understand and agree to these actions:

- You will only keep your in-person appointment if you are symptom free. ____
- You will take your temperature before coming to each appointment. If it is elevated (100 Fahrenheit or more), or if you have other symptoms of the coronavirus, you agree to cancel the appointment or proceed using telehealth. If you wish to cancel for this reason, I won't charge you our normal cancellation fee. ____
- You will send a text when you arrive and wait in your car until you are welcomed in for your appointment. ____
- You will wash your hands or use alcohol-based hand sanitizer when you enter the building. ____
- You will adhere to the safe distancing precautions we have set up in the waiting room and testing/therapy room. For example, you won't move chairs or sit where we have signs asking you not to sit. ____
- You will wear a mask in all areas of the office (I will too). ____

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- You will keep a distance of 6 feet and there will be no physical contact (e.g. no shaking hands) with me. _____
- You will try not to touch your face or eyes with your hands. If you do, you will immediately wash or sanitize your hands. _____
- If you are bringing your child, you will make sure that your child follows all of these sanitation and distancing protocols. _____
- You will take steps between appointments to minimize your exposure to COVID. _____
- If you have a job that exposes you to other people who are infected, you will immediately let me know. _____
- If your commute or other responsibilities or activities put you in close contact with others (beyond your family), you will let me know. _____
- If a resident of your home tests positive for the infection, you will immediately let me know and we will then begin or resume treatment via telehealth. _____

I may change the above precautions if additional local, state or federal orders or guidelines are published. If that happens, we will talk about any necessary changes.

My Commitment to Minimize Exposure

I have taken steps to reduce the risk of spreading the coronavirus within the office and I have posted my efforts on my website and in the office. Please let me know if you have questions about these efforts.

If You or I Are Sick

You understand that I am committed to keeping you, me and all of our families safe from the spread of this virus. If you show up for an appointment and I believe that you have a fever or other symptoms, or believe you have been exposed, I will have to require you to leave the office immediately. We can follow up with services by telehealth as appropriate.

If I test positive for the coronavirus, I will notify you so that you can take appropriate precautions.

Your Confidentiality in the Case of Infection

If you have tested positive for the coronavirus, I may be required to notify local health authorities that you have been in the office. If I have to report this, I will only provide the minimum information necessary for their data collection and will not go into any details about the reason(s) for our visits. By signing this form, you are agreeing that I may do so without an additional signed release.

Informed Consent

This agreement supplements the general informed consent/business agreement that we agreed to at the start of our work together.

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Your signature below shows that you agree to these terms and conditions.

Patient/Client

Date

Psychologist

Date

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I am taking the following precautions to protect clients and help slow the spread of the coronavirus:

- I will follow CDC guidelines and maintain safe distancing.
- Masks are required for everyone who enters my office. If you have forgotten your mask, disposable children's and adult-sized masks will be available. Exceptions are made according to Michigan Executive Order 2020-147, released on July 10, 2020.
- Office seating in the waiting room and in the therapy office will be arranged for appropriate physical distancing.
- Magazines and other commonly touched items will be removed from the waiting room.
- Please text me at 248.838.9227 when you arrive and remain in your vehicle until I welcome you into the office.
- Restroom soap dispensers are maintained, and everyone is encouraged to wash their hands frequently.
- Hand sanitizer that contains at least 60% alcohol will be readily available in my waiting room.
- All appointments will be scheduled at staggered intervals to minimize the number of people in my waiting room at any given time.
- Physical contact is not permitted.
- Tissues and trash bins are easily accessed. Trash is disposed of on a frequent basis.
- Environmental cleaning throughout my office has been increased and the waiting room will be disinfected and sanitized daily.
- Online therapy is still available for individual and family therapy sessions for those who prefer this option.

All clients are asked to screen themselves daily using the following criteria:

- Do you have a sustained fever over 100°?
- Do you have a cough, or have you been coughing in the last three weeks?
- Are you having difficulty breathing or other respiratory issues?
- In the last 14 days, have you had close contact with someone who has COVID-19?
- Within the last 21 days, have you traveled to a State such as Texas, Arizona, California or Florida, that is experiencing a surge in COVID-19 cases?

If any of the criteria above apply to you, or, if you have been exposed to or diagnosed with COVID-19, please do not enter my office building. Call me at (248) 838-9227 to reschedule an appointment for a later date at least 14 days from now. In-office appointments can also be changed to online therapy appointments as needed. If you think you may be sick, contact your medical doctor immediately.