
Peak Resilience

Zoom Video Counselling Informed Consent Form



I, _____ (Print your name) am choosing to receive counselling sessions at Peak Resilience via the Zoom (<https://zoom.us/>).

By choosing this option, I understand:

About Online Video Sessions:

- Zoom is an online communication tool allowing face-to-face video, voice, or text-based chat/dialogue. Zoom calling is encrypted to protect sensitive information. For more information on how Zoom keeps its client's information private, please visit and review the information at the links below.

→ https://zoom.us/docs/doc/PIPEDA_PHIPA%20Canadian%20Public%20Information%20Compliance%20Guide.pdf

- Zoom software is available on any computer or smart phone/tablet. Ensure that your device is password protected and only you have access to the password. In addition, use a password protected private Internet connection when on a Zoom call. You may wish to choose a username that does not identify you by name to ensure more privacy.
- Any Internet-based communication is not 100% guaranteed to be secure/confidential. Your counsellor has made every reasonable effort to implement technical security measures that reduce risks of a confidentiality breach.
- I have read the [privacy and encryption information for Zoom](#) and I agree that my counsellor and Peak Resilience should not be held responsible if any outside party gains access to Zoom account information or transaction by bypassing online security measures.
- Video sessions are not to take the place of the more optimal in-office counselling sessions, but are utilized when in-office sessions are not convenient or possible, and only at the client's request.

My Responsibilities as the Client:

- I am responsible for ensuring confidentiality by closing other programs on my computer while in a video session, planning ahead to minimize distractions, and not answering calls or text messages while on the Zoom call.
- I also agree to be online five minutes prior to the scheduled video counselling appointment (preferably in a quiet room alone with the door closed). Headphones may be used to increase privacy of session.
- I agree that I will not use Zoom in an emergency situation that needs immediate attention, whereby I am considering harming myself or someone else. If a life threatening crisis should occur, I agree to contact 911 or the 24 hour suicide hotline at 1-800-SUICIDE, or go to the nearest Emergency Room.
- I agree to pay via credit card provided to counsellor prior to session.
- I agree to read the general [informed consent form](#) in addition to this form prior to starting video counselling sessions.

Counsellor Responsibilities:

- The counsellor will Zoom call the client at the scheduled appointment time.
- The counsellor will ensure to be alone in their office with a high quality, password protected wireless Internet connection.
- The counsellor will ensure all other distractions such as phone calls are eliminated during the video counselling session.
- Technical problems may occur. If a call is disrupted, the counsellor will call back unless technical difficulties persist. In such cases, the session can be continued via phone or rescheduled via phone or email, depending on client's preferences.
- If technical problems persist and the client does not want to continue the counselling session over the phone, the price of the session will be prorated based on the amount of time that has elapsed. For example, if half the session time has elapsed before the technical problems began, client will be charged for half the session.
- Payment for the session must be processed immediately following the appointment. Payment can be made via credit card provided to the counsellor for safe, encrypted, online processing.

My signature below certifies that I have read and understood the above information:

Name of Client	Signature
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Counsellor Name and Reg #	Signature	Date
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