



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

The Jonas Center has taken steps to reduce the risk of spreading COVID-19 within the office and we have posted our efforts on our website and in the office. This document contains important information about our decision (yours and mine) to have in-person services in light of the COVID-19 public health crisis. **It is at your therapist's discretion whether you will be asked to wear a mask and/or be vaccinated before in person sessions occur.** Please read this carefully and let me know if you have any questions.

Decision to Meet In-Person: We have agreed to meet in-person for now. *You understand that by coming to the office, you are assuming the risk of exposure to COVID-19.* If there is a resurgence of the pandemic or if there is a confirmed case of COVID-19 at this location or if other health concerns arise, it may be required that the location closes and we meet via telehealth. If you have concerns about meeting through telehealth, we will talk about it first and try to address any issues. If you decide at any time that you would feel safer utilizing telehealth services, your decision will be respected as long as it is feasible and clinically appropriate.

Your Responsibility to Minimize Exposure: To obtain services in-person, you agree to take certain precautions which will help keep you, me, other clients and staff safer from exposure. If you do not adhere to these safeguards, it may result in the need to end in-person services and to go to a telehealth arrangement.

- You agree to only keep your in-person appointment if you are symptom free. If you wish or need to cancel because of any symptoms you have, you will not be charged.
- ***You agree to wait in your car or outside until we call you to invite you in for your appointment unless other arrangements have been made with your therapist.***
- You agree to wash your hands or use hand sanitizer when you enter the office space.
- You agree to adhere to the safe distancing precautions we have arranged in the office and to have no physical contact.
- If you are bringing your child, you agree to make sure that your child follows all these sanitation and distancing protocols.
- If you or a resident of your home tests positive for COVID-19, you agree to inform me and, as a result, we will need to utilize telehealth services.

The Jonas Center 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.

If You or I Have Symptoms: You understand that we are committed to keeping you, me, other staff and all of our clients safe from the spread of this virus. If you arrive for an appointment and I believe that you have symptoms consistent with COVID-19 or that you have been exposed, I will ask you to leave the office immediately. We can follow up with services by telehealth as appropriate. If I have symptoms consistent with COVID-19, I will notify you and cancel our appointment.

Your Confidentiality in the Case of Infection: If you have tested positive for COVID-19, I need to notify one of the Directors so that appropriate precautions can be taken including temporarily shutting down the office. *Clients whose appointment followed the infected therapist/client and those scheduled during that two-week period will be informed of the reason for closure. No other information will be disclosed.* I may also be required to notify local health authorities that you have been in the office. If I need to report this, I will only provide the minimum information necessary and will not disclose any details about the reason(s) for your visits. By signing this form, you are agreeing that I may do so without an additional signed release.

***This agreement supplements the general Informed Consent that you signed at the beginning of our work together. Your signature below acknowledges that you agree to these terms and conditions.**

Client Signature

Date

Therapist Signature

Date