# Telehealth Terms

*Counselling by video or phone*

Telehealth makes counselling easier to fit around your life. These terms help keep our sessions private, safe and effective. All other terms of my Client Information and Agreement, including fees and cancellations, also apply.

## How sessions work

- Sessions are held on Zoom. I will send you a private, password-protected link, and use a waiting room so only you can join.
- I join from a private, confidential space.
- Telehealth is offered to clients located in Australia only.

## What I ask of you

- Attend in a private space where you will not be overheard or interrupted. Headphones can help.
- Please do not record any part of the session by audio, video or screenshot. I will not record sessions either. If you have agreed to AI Scribe, it helps draft my notes, but no recording is saved.
- Check your device, internet connection and Zoom before the session.
- Let me know where you are at the start of each session, so I can arrange help if needed.
- Join as you would for an in-person session: not driving, and not under the influence of alcohol or other drugs. Please also wear appropriate clothing.

## If the connection drops

I will try to reconnect, then call you on the phone number you have given me. If we cannot reconnect and the problem is at my end, we will reschedule at no cost.

## Safety

I will ask for an emergency contact and your location. If I believe you are at serious risk during a session, I may contact emergency services or your emergency contact. If you are in immediate danger, call 000.

## Young people and couples

For clients under 16, a parent or guardian must be nearby, but not necessarily in the room during telehealth sessions. In couples telehealth, both partners may join from the same private space or separate private spaces if appropriate, but the same Zoom link will be provided.

## Is telehealth right for you?

Telehealth suits many people, but not every situation. If I think in-person sessions would better support you, I will talk this through with you.

I agree to these Telehealth Terms.

Name: _____ Signature: _____ Date: ___/___/_____