

CONSENT AND CONFIDENTIALITY WITHIN THE VIRTUAL GROUP

Thank you for your interest in participating in the ZOOM group facilitated by our family health team staff. This document is to ensure that you are fully informed about confidentiality as it pertains to this program. It is our greatest priority that your confidentiality is protected.

As a result of COVID19, to ensure safety precautions of physical distancing are being met, we are using new technology, ZOOM, to provide group virtual care.

Risks of Virtual Communication

We will do everything we can to protect your privacy, however ZOOM is an open virtual platform and privacy cannot be guaranteed. It is important to understand that when using ZOOM, there are risks related to unauthorized disclosure or interception of personal health information. By registering for one of our virtual workshops, you are consenting to know this before attending online.

Steps that you can take to help protect your information, as well as others present in the group include:

- find a private and quiet setting
- ensure no one else is present or listening to the encounters
- refrain from the recording/picture taking of any part of the virtual group
- use your own computer/device so no one else can access your information
- ensure that you have up to date cybersecurity software

Group Standards for using ZOOM Platform for Virtual Classes

By agreeing to join/utilize the Zoom platform for virtual classes you agree to adhere to the West Durham Family Health Team Group Session Confidentiality Policy as follows:

I will NOT share any information, names and/or personal details about ANYTHING or ANYONE discussed, outside of this virtual class session (this includes with members of your household). Please help us make this time a safe space to learn and develop coping strategies.

I will NOT disclosure any personal, private, medical or health, information while attending these classes or via email . If there are any concerns around confidentiality, please let us know so we can address it promptly.

I will remain committed to attending the program. If you are in a series of classes it is important that you commit to attendance. If you cannot make to a session, let us know.

If you have questions regarding the program/discussion or content, we will leave a few minutes in the Zoom session to address questions that arise.

There will be the option of having an individual session in between groups to air concerns, as well as practice the material. Also, you can always call our office.

Cell Phones- please put them (or any other electronics) on mute or vibrate so you can fully focus on classes; this time is for you and your self- care.

Please be patient with us as this online virtual process is also a learning curve for our team.

We are doing our best to deliver the most current and appropriate information in a confidential manner.

The content and information of the group are suggestions to support and assist you with coping strategies related to anxiety, depression, stress, etc., especially during these trying times.

PATIENT ACKNOWLEDGMENT AND AGREEMENT:

I acknowledge that I have read and fully understand the risks, and limitations of confidentiality and virtual communication. I understand and accept the risks outlined above, associated with the ZOOM platform being used to communicate for the purposes of the group session.

I consent to participate in spite of these risks and I acknowledge that I may, at any time, withdraw from the group by providing verbal notice to the West Durham Family Health Team.

I acknowledge that I have read and fully understand the Group Standards for using the ZOOM platform for a virtual group program.

Patient Name (please print): _____

DATE: _____