

# WINDSOR FAMILY HEALTH TEAM (WFHT) PATIENT EMAIL COMMUNICATION CONSENT FORM

This document explains our digital health services and what you've consented to by providing your email address for communications. Your agreement is permission to send you information via email about digital health services including appointment reminders and referral status updates (Ocean), health promotion/education program information, general announcements, virtual video visits, and patient satisfaction surveys. If you would like to opt out, all you need to do is call our office (519-250-5656) and ask that your email address be removed from your health record. Please note if you opt out and remove your email address you will be unsubscribing to all features listed above.

#### DIGITAL HEALTH SERVICES

Ocean by CognisantMD

**Telus Virtual Video Visits** 

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This is a new feature that is embedded in our electronic medical record system that is a product of Telus Health and allows us to schedule and initiate a virtual video encounter with patients  How it works	Ocean by CognisantMD is an EMR-integrated patient engagement solution. Using mobile devices and a cloud-based platform, Ocean allows patients and healthcare providers to securely share health information for clinical use, administration, referrals and research.
<ul> <li>You request a video appointment by calling our reception service or using our Online Booking platforms</li> <li>You authorize us to communicate with you by email in order to receive your video visit link</li> <li>You use the emailed link (provided by Telus) to join your video visit at the scheduled time</li> <li>This service is currently available for all clinical roles but does not include emergency related conditions or those that require a clinician to physically examine a patient to assess.</li> </ul>	<ul> <li>Digital health services include:</li> <li>Online Booking</li> <li>Patient Appointment Reminders</li> <li>Patient Tablets (future)</li> <li>Patient Messages (future)</li> <li>Website Forms</li> <li>Check-in Kiosks (future)</li> <li>eReferrals</li> </ul>

### For any Virtual Visit (phone or video)

The same practices must be followed as if it were an in-person appointment, meaning: details discussed during your appointment will be recorded in your medical record, we ask that you do not record the visit, and please let us know if anyone else is in the room with you.

Please find a quiet and private space for your appointment.

We have taken the appropriate steps to preserve your privacy, however, we cannot provide you with the same guarantee of security and confidentiality as if you were seen in person because we cannot control the physical environment that you are in, or the personal technology resources that you are using when engaging in virtual video visits.

If your provider believes that the concern is best handled in person, we will rebook your appointment at the earliest possible time.

Our digital health services are expected to change over time. We will use your email authorization to communicate all of those opportunities to you. In addition to Health Myself and Telus EMR Virtual Visits we occasionally use video visits through the Ontario Telemedicine Network (OTN).

This consent covers all email communications about current future digital solutions as well as WFHT events and programming.

Stay current by visiting our website at <a href="https://www.windsorfht.ca">www.windsorfht.ca</a> or follow us on Facebook.

Please note most email communications coming from the WFHT at this time are "no reply". This means we are sending you information that is one direction only. You cannot reply. There are some exceptions made to accommodate access needs. In the future that may change and if that happens, or exceptions are made, there are risks to be aware of.

Email communications coming from outside of a secure online portal are SUBJECT TO THE FOLLOWING risks:

#### **RISKS OF USING EMAIL**

Sending personal health information by email includes several risks of which the patient should be aware. The patient should not agree to communicate with WFHT staff via email without understanding and accepting these risks.

The risks include, but are not limited to, the following:

- The privacy and security of email communication cannot be guaranteed.
- Employers and online services may have a legal right to inspect and store emails that pass through their system.
- Email is easier to falsify than handwritten or signed hard copies. In addition, it is impossible to verify the true identity of the sender, or to ensure that only the recipient can read the email once it has been sent.
- Emails can introduce viruses into a computer system, and potentially damage or disrupt the computer.
- Email can be forwarded, intercepted, circulated, stored or even changed without the knowledge or permission of the physician or the patient. Email senders can easily misaddress an email, resulting in it being sent to many unintended and unknown recipients.
- Email is permanent. Even after the sender and recipient have deleted their copies of the email, backup copies may exist on a computer or in cyberspace.
- The use of email to discuss sensitive information can increase the risk of such information being disclosed to third parties.
- Email can be used as evidence in court.
- WFHT will not be held financially responsible for any individuals' personal electronic devices due to a virus or other form of cyber damage.

#### CONDITIONS OF USING EMAIL

WFHT physicians/staff will use reasonable means to protect the security and confidentiality of email information sent and received. However, because of the risks outlined above, WFHT physicians/staff cannot guarantee the security and confidentiality of email communication, and will not be liable for improper disclosure of confidential information that is not the direct result of intentional misconduct of the team member. Thus, patients must consent to the use of email for patient communication.

Consent to the use of email includes agreement with the following conditions:

- Emails to the patient concerning diagnosis or treatment may be printed in full and made part of the patient's medical record. Because they are part of the medical record, other individuals authorized to access the medical record, such as staff, billing personnel and other health care professionals on our team who are part of your care, may have access to those emails.
- Email communication is not an appropriate substitute for clinical examinations. The patient is responsible for following up on WFHT physician/staff email and for scheduling appointments where warranted.
- The patient should not use email for communication regarding sensitive medical information, such as sexually transmitted diseases, AIDS/HIV, mental health, developmental disability, or substance abuse. Similarly, your provider will not discuss such matters over email.
- WFHT is not responsible for information loss due to technical failures.
- Each patient must use their own, unique email address. (The same email address cannot be used by two different patients).
- The patient will notify WFHT should there be any change in email address.

## **INSTRUCTIONS FOR COMMUNICATING BY EMAIL**

If communicating by email is approved on an exceptional basis or as a future standard practice, the patient shall:

- Limit or avoid using an employer's computer.
- Inform the WFHT of any change in the patient's email address.
- Review the email to make sure it is clear and that all relevant information is provided before sending to WFHT physicians/staff.
- Take precautions to preserve the confidentiality of emails, such as using screen savers and safeguarding computer passwords.
- Withdraw consent by calling the Windsor Family Health Team to have the email address removed from the patient record.
- Not rely on email for immediate assistance. If the patient's condition is considered serious or rapidly worsen, the patient call his/her family doctor's office for consultation or appointment, visit the office or take other measures (such as calling an ambulance) as appropriate.

### PATIENT ACKNOWLEDGEMENT

I acknowledge that I have read and fully understand this consent form. I understand the risks associated with the communication of email between WFHT physicians/staff and me, and consent to the conditions outlined herein, as well as any other instructions that the WFHT physician/staff may impose to communicate with patients by email. I acknowledge WFHT physician/staff's right to, upon the provision of written notice, withdraw the option of communicating through email. Any questions I may have had were answered. Any questions I may have had were answered. I am at least 16 years of age and competent to contract on my own behalf.

\* For privacy purposes we recommend that each patient use their own unique email address. Email communications include but are not limited to: appointment reminders (Ocean), Ocean referral status updates, health promotion/ education materials and patient appointment follow-up surveys. \*