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March 20, 2020

Greetings:

As your therapist it is my duty to provide you with quality, professional, supportive services in a risk-free and safe environment. The last few weeks our city, state, nation and world have faced the COVID-19 crisis. COVID-19 has threatened the health, safety and well-being of the world. We all must do our part to minimize the spread of this virus. Governmental officials have implemented rules of 10 and safe distancing measures to both contain and minimize the spread as much as possible. This has included school, businesses, city and state office closures resulting in increased fear and anxiety amongst citizens everywhere. These increased stressors will mean many will need their behavioral health services more than ever. However, in an effort to remain obedient to official's request to stay home and provide my clients with the quality counseling services they need, I have taken the necessary steps to provide Telebehavioral Health (TBH) therapy (therapy via web) through **Doxy.me**. **This option is** for my clients who **do not** want to take the risk of coming into the office. Because of my age and the fact that I have Asthma, these demographics place me at-risk which means I should and avoid possible contact with someone who might have the virus.

Should you choose to participate in counseling by way of TBH, you would simply go to my waiting room through this link, <https://doxy.me/lfecounseling> at your scheduled appointment time provided. To participate you will need to read, sign, scan and return the attached **Client Telebehavioral Health Informed Consent Form**. If you are not comfortable with the online sessions, you may also consider telephone sessions. Please be aware you are also allowed to continue face-to-face sessions in the office. However, if you choose this option of care, all face-to-face sessions in the office will be cancelled for the next two weeks or longer based on directions from government officials.

Tough times call for tough decisions. The safety of my clients as well as myself, is of the utmost importance concern for me. Please know I am dedicated to maintaining your continuity of care and support during this difficult time. Please follow the current official mandate to isolate yourself from potential exposure to the best of your ability by remaining at home. Should you find yourself becoming anxious limit your intake of news either by television or other social media streams.

Barbara Fountain, MAHS, LPC-Supervisor



*Lifeline Family Enrichment*

*Listed below are preferences offered for your counseling services. Please select the service medium you prefer. Sign the form and return to my office via email. Should you select telebehavioral health therapy remember you must also sign and return the Client Telebehavioral Health Informed Consent form.*

### **Client Therapy Selection**

**I am choosing to have my counseling sessions:**

**Face-to-Face Therapy/Counseling**

**Telephone**

**Telebehavioral Health Therapy**

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**Client Printed Name**

X \_\_\_\_\_

**Signature of Client or Legal Guardian**

\_\_\_\_\_,2020

**Date**