**Family Portal Communication Email Template**

# Introduction

Use the following templates as a **baseline for your communications with your team and clients.** *Please* ***adjust the points as needed*** *based on your agency’s specific Family Portal configuration and access you provide to users.* *Be aware of* ***spacing changes****, due to any edits you make.*

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| **Template 1: Let Agency Employees Know About Family Portal** |
| We have exciting news!  \_\_INSERT AGENCY NAME\_\_ is taking steps to better engage and connect patients to their care. Client’s will now be using the **Family Portal**!  The **Family Portal** is a **secure, integrated, online and mobile portal** that will provide clients accessto their **care schedule, parts of their AlayaCare health records, and invoices** to stay connected and engaged in their care anywhere, at any time.  *[Use if using Secure Messaging and/or Payment Gateway]* We will also be providing clients with the ability to pay their invoices via the Family Portal and communicate with our agency using Secure Messaging.  We know that treatment plans can be even better when they **involve others in the client’s circle of care, such as family members or friends**. We have made sure that other authorized individuals can have access to the client’s Family Portal too!  **An email will be sent out to client’s on** \_\_\_[INDICATE DATE]\_\_\_ informing them of the new Family Portal feature that we are offering. If they or someone in their circle of care are interested, **we will register them for a Family Portal account.** This will be done by \_\_\_\_[SEE NOTE BELOW]\_\_\_\_\_.  *NOTE for agency to consider in email:* ***Indicate******who will be taking on this responsibility****, and* ***how client’s will be requesting this feature and providing consent.*** E*.g. back-office staff responding to phone calls or emails, field staff getting clients to sign a form when they go to client visits, etc.*  *The* ***suggested method*** *is to collect consent via a form in the client profile, or a form that can be added to the client’s attachments. After that, leave a coordinator note (pinned) or use the risks section of the client profile to mention “FP Consent Received” prior to extending access. This is the suggested use case, especially when a client contact is requesting access for the family portal).*  The following **resources** can be used to **help you learn about the Family Portal** and what it entails, as well as **how to grant access** for clients and client contacts: [LINK AND LIST RESOURCES BELOW AS NEEDED]   * Granting Family Portal Access * Talking about Family Portal   The following are the **resources** you can **provide to client’s** who inquire about the Family Portal: [LINK RESOURCES BELOW AS NEEDED]   * How to Login to the Family Portal * What you Can Access on Family Portal * Additional Features You can Access on Family Portal (Secure Messaging, Payment Gateway)   These are some of the **major benefits clients will receive** when using the Family Portal: [SELECT ALL THAT APPLY]   * Viewing their care schedule * Contacting their care team through secure messaging * Requesting new services/visits * Requesting schedule changes * Requesting visit cancellations * Viewing their care team * Viewing their care information (such as vital recordings and medications) * Viewing and paying invoices * Completing forms * Viewing documents   Clients can **download the Family Portal mobile app for iOS via the App Store and for Android via the Play Store,** or simply use it on the **web**.  We are excited to be offering the Family Portal to our clients. This will also **increase our agencies operational efficiencies** as clients will be able to access much of the information they need on their own.  Regards,  [INSERT AGENCY NAME HERE] |

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| **Template 2: Let Clients Know About the Family Portal** |
| We have exciting news!  \_\_INSERT AGENCY NAME\_\_ is taking steps to better engage and connect you to your care. You will now be able to use the **Family Portal**!  The Family Portal can provide you with access to your **care schedule**, parts of your **health record** such as the medications you are taking, details regarding your **care team**, access to your **invoices, secure messaging** and much more! It is available on both the **web and mobile.**  We know that treatment plans can be even better when they **involve others in your circle of care such as family members or friends**. We have made sure that they can also have access to your Portal in order to better support you.  With the Family Portal, you will be able to: [SELECT ALL THAT APPLY]   * View when your next visit is * Contact your care team through secure messaging * View your care information (such as vital recordings and medications) * Request new services/visits * Provide feedback on your care team * Request schedule changes * Request visit cancellations * View and pay your invoices * Complete forms * View documents   **To sign up for the Family Portal**, **respond to this email or call** and let us know you would like an account. A **consent form** will need to be filled out for access to be provided. An **email will be sent to you with your credentials** and instructions for logging in.  If you would like a **member of your circle of care** such as a family member or friend to also have **access to your family portal account**, please **call or email** us. A **consent form** will need to be filled out for their access to be provided. Once consent has been given, an email will be sent to them with their credentials and instructions for logging in.  You can **download the Family Portal mobile app for iOS** via the App Store and for Android via the Play Store or simply use it on the web.  We are delighted to be your agency of choice and are looking forward to better addressing your needs.  Regards,  [INSERT AGENCY NAME HERE] |