

APPENDIX E | THE ACCF PROFESSIONAL TOOLKIT

E.4 Communication Channel Selection Guide

Supplemental resource from Beyond Wellness: The Adaptive Capacity Coaching Framework for Chronic Illness

Choosing the right communication channel affects both effectiveness and privacy compliance. This quick reference helps you match the situation to the appropriate method. When in doubt, default to the most secure option available.

Communication Channel Selection Guide

Channel	Best Used For	Privacy Level	Notes
Patient Portal (MyChart, etc.)	Ongoing updates; symptom summaries; follow-up after appointments; sharing Clinical One-Sheet or Visit Prep Worksheet	Highest	Default choice whenever available. Creates an automatic record in the medical file. Client sends; coach helps compose.
Formal Letter	First contact with a new provider; sending the Provider Introduction Letter (E.1)	High	Required for initial outreach. Mail or secure fax. Too informal to use email for a first impression with a medical team.
Secure Fax	Sending documentation to providers who do not use portals; transmitting records	High	Confirm the receiving fax number belongs to the intended provider. Document transmission confirmation.
Phone Call	Urgent situations; nuanced conversations where written communication could be misinterpreted; rapid changes in client status	Moderate	Always document the conversation immediately after: date, time, who was reached, what was discussed, any guidance received.
HIPAA-Compliant Email (encrypted platform)	Non-urgent coordination when portal is unavailable; logistics with providers on secure platforms	Moderate	Confirm the platform meets HIPAA requirements before use. Limit to coordination and logistics; clinical content belongs in the portal.

Channel	Best Used For	Privacy Level	Notes
Standard Email	Scheduling, logistics, non-clinical administrative communication only	Low	Never use for protected health information. Test: if this email were forwarded accidentally, would it compromise client privacy? If yes, use a different channel.
Client as Conduit	Sharing any information the client will present directly to their provider (Clinical One-Sheet, symptom logs, Visit Prep Worksheet)	Highest	Preferred path in most situations. Respects client autonomy, avoids triangulation, and eliminates coach-to-provider privacy risk.
Text / SMS	Emergency logistics only; never for clinical content	Very Low	Not appropriate for health-related content. If a client contacts you by text about a clinical matter, respond via a secure channel and note the boundary in your next session.

Default to the patient portal whenever possible. It is the most secure channel, creates an automatic record, and integrates with the provider's workflow.

Use formal letters for first contact. The Provider Introduction Letter (E.1) establishes your professionalism. First impressions with medical teams matter; email is too informal for this purpose.

Reserve phone calls for urgent or nuanced matters. When a client's situation has changed rapidly, when you need to discuss something sensitive, or when written communication could be misinterpreted, a phone call is appropriate. Always document the conversation afterward.

Never use standard email for protected health information. If you must communicate by email, use a HIPAA-compliant platform or limit content to scheduling and logistics. A reasonable test: if the email were forwarded accidentally, would it compromise client privacy? If yes, use a different channel.

Let the client be the conduit when possible. In many cases, the most appropriate path is to prepare information for the client to share with their provider. This respects the client's autonomy, avoids triangulation, and reduces privacy risk. The Clinical One-Sheet (E.2) and Visit Preparation Worksheet (E.3) are designed for this purpose.

When Multiple Channels Are Needed

Complex coordination sometimes requires layering channels. For example: send the Provider Introduction Letter (formal letter) to establish the relationship, then follow up with a patient portal message for ongoing updates, and use phone for urgent concerns. Document which channels have been established with each provider and note any provider preferences in the client file.