

INFORMATION TECHNOLOGY POLICIES

Monica D. Klisz, LPC
Counseling for Recovery, Growth & Wellness

Please read each of the following policies carefully. These policies exist to protect your personal information and to maintain appropriate professional therapeutic boundaries. They are informed by professional counseling ethics, Commonwealth of Virginia law, and my own understanding of best practices for my occupation.

Text Messaging Policy

I use text messages in instances of arranging or confirming appointments with clients or when a client must alert me they are running late or have a scheduling issue. In such an instance, I will respond to acknowledge receipt and address the scheduling issue. It is my policy not to provide counseling or consultation to clients via text messaging. It is also mutually understood that texting is not a secure form of communication and privacy and confidentiality cannot be guaranteed.

By initialing here, you indicate that you understand my text messaging policy and agree to adhere to it as described ____

Telephone & Automated Voice Messaging Policy

I could call you for a variety of professional reasons including 1) to provide an appointment reminder, 2) to provide a brief fifteen (15) minute phone consultation, 3) to return a phone call you have placed to me. Note that these are only sample reasons I may call, though any reason shall be professional in nature. In the event that I call you and you do not answer, I will leave a voice message if such a feature is available.

By initialing here, you agree to allow me to call and leave voice messages for professional reasons ____

In the event that I call you and someone other than you answers the phone, I will ask to speak with you. If they ask who is calling, I shall provide my name but not my title or credentials. If they inquire about my reason for calling, I shall not provide a reason without your permission. It is best if you help me understand who could potentially answer and instruct me if I am to speak with this person or not. In any case, I will not reveal you are receiving services from me even with your consent to do so.

By initialing here, you agree to allow me to call and ask to speak with you for professional reasons ____

Email Policy

I am willing to correspond with you by email for limited purposes. Such emails shall be professional in nature and generally limited to 1) scheduling appointments, 2) providing supportive comments or feedback, 4) responding to specific administrative or consulting requests not of a psychotherapeutic nature. Note that there may be other professional purposes that may be suitable and these are only some examples.

It is also important to note that 1) I shall not provide professional counseling services by email, Skype, or any other computer or internet device, 2) emergencies shall not be addressed by email with the above noted exception of scheduling, 3) I shall not accept any forwarded emails from clients or any emails from clients not professional in nature including but not limited to chain letters, links to websites, or multiparty ad hoc discussion forums, 4) I do not wish to be carbon copied (cc) or blind carbon copied (bcc) on any email. In the event that you have an email, forward, or other piece of online information you wish to share with me, please bring it in person to our next appointment.

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It is also mutually understood that emailing is not a secure form of communication and privacy and confidentiality cannot be guaranteed.

By initialing here, you indicate that you understand my email policy and agree to adhere to it as described ____

Social Media Policy

I do not currently participate in social media services with clients (e.g., Facebook, Twitter, Google+, LinkedIn, and similar sites and services). Any requests to join such a network will be declined. Please understand that this is a matter of professional counseling boundaries and best practice and not a reflection on your desirability as a friend. Our professional relationship prohibits us from being friends, even in the social media sense of the term.

By initialing here, you indicate that you understand my social media policy and agree to adhere to it as described ____

My signature given here indicates that I have read carefully and completely the above policies. I understand them completely and have no questions at this time. Should a question arise, I agree to inquire about it in person before acting.

Signature

Date