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Social Media Policy

This document outlines my office policies related to use of Social Media. Please read it to understand how I conduct myself on the Internet as a mental health professional and how you can expect me to respond to various interactions that may occur between us on the Internet. If you have any questions about anything within this document, I encourage you to bring them up when we meet. As new technology develops and the Internet changes, there may be times when I need to update this policy. If I do so, I will notify you in writing of any policy changes, offer a printed copy of the updated policy or you can view it at <http://dorothyjhughes.com>.

Some of the relevant ethical codes to consider in my social media policy considered here state:

- Mental health counselors do not disclose client confidences except by written authorization or waiver, or where mandated or permitted by law.
- Verbal authorization will not be sufficient except in emergency situations, unless prohibited by law.
- When providing couple, family or group treatment, the therapist does not disclose information outside the treatment context without a written authorization from each individual competent to execute a waiver.
- In the context of couple, family or group treatment, the therapist may not reveal any individual's confidences to others in the client unit without the prior written permission of that individual.
- Mental health counselors are aware of their influential positions with respect to clients, and they avoid exploiting the trust and dependency of such persons. Therefore, they make every effort to avoid conditions and multiple relationships with clients that could impair professional judgment or increase the risk of exploitation. Such relationships include, but are not limited to, business or close personal relationships with a client or the client's immediate family. When the risk of impairment or exploitation exists due to conditions or multiple roles, therapists take appropriate precautions.

EMAIL/TEXT: If you need to cancel or change an appointment time; a telephone call or text may get the message to me in a timely manner. Please notify me if you decide to avoid or limit, in any way, the use of e-mails, cell phones texts, or storage of confidential information on computers. If you communicate confidential or private information via text or e-mail, I will assume that you have made an informed decision, will view it as your agreement to take the risk that such communication may be intercepted, and I will honor your desire to communicate on such matters via e-mail. Please do not use e-mail for emergencies. Due to computer or network problems, e-mails may not be deliverable, and I may not check my e-mails daily.

If you e-mail me content related to your therapy sessions, please note that e-mail is not completely secure or confidential. If you choose to communicate with me by e-mail, be aware that all e-mails are retained in the logs of your and my Internet service providers. While it is unlikely that someone will be looking at these logs, they are, in theory, available to be read by the system administrator(s) of the Internet service provider. You should also know that any e-mails I receive from you and any responses that I send to you become a part of your legal record and may be revealed in cases where your records are summoned by a legal entity.

SOCIAL MEDIA: Messaging on Social Networking sites such as Facebook or LinkedIn is not secure, and I prefer you never use them to try to contact me. It could compromise your confidentiality

to use Wall postings, @replies, or other means of engaging with me online once we have an already established client/therapist relationship. It may also create the possibility that these exchanges become a part of your legal medical record and will need to be documented and archived in your chart. I may not be able to read these messages in a timely fashion. If you need to contact me between sessions, the best way to do so is by phone or text (765) 237-7652 or via email at djhugheslmhc@yahoo.com.

FRIENDING: This social network policy serves as your notification that being linked as friends or contacts on these sites can compromise your confidentiality and our respective privacy. As in any other public context, you have control over your own description of the nature of our acquaintance, if you choose to disclose a professional relationship. For example, if I saw you at church or school and you ignored me, I would follow your lead and do the same. If you introduce me to your friends, I will agree with your description of how you know me. I will not confirm nor deny any professional relationship between myself and clients on any social network sites. I reserve the right to discontinue any social network connection without prior notification, and I encourage you to do the same. I discourage the use of social network sites for any communication about our therapeutic relationship, including scheduling issues, due to the lack of privacy protections. I do not accept friend requests from current or former clients nor do I search for my clients on social media sites.

Viewing your online activities without your consent and without our explicit arrangement towards a specific purpose could potentially have a negative influence on our therapeutic relationship. If there are things from your online life that you wish to share with me, please bring them into our sessions where we can view and explore them together, during the therapy hour. My current treatment agreement states that I keep patient information private and do not share it with others unless there is reason to believe that the patient or another individual is at risk. It is easy to forget that when we type names into a search engine or a field on a social network, we are also sharing information with others. If you have questions about this, please bring them up when we meet, and we can talk more about it.

CONCLUSION: If you have questions or concerns about any of these policies and procedures or regarding our potential interactions on the Internet, please do bring them to my attention so that we can discuss them.

Acknowledgement of Review of Social Media Policy

By signing below, I am indicating that I have read this document, understand my rights as a client, and accept the responsibility as stated. I have been offered a printed copy of the Social Media Policy and all questions regarding these policies have been answered to my satisfaction. This document is also available at <http://dorothyjhughes.com/>

Client Name: _____

Date: _____

Signature: _____

Therapist Name: _____

Date: _____

Signature: _____