

# Mind In Balance, LLC

Heal ~ Grow ~ Connect

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License: 62628

## Virtual Therapy/Counseling

### Virtual Therapy/Counseling (telephonic or video chat) Informed Consent

Engaging in therapy/counseling services via the internet has a multitude of benefits. It also comes with some additional risks. Please be sure to read carefully and ask any questions that arise.

Please be aware that extensive steps are being taken by me to ensure your confidentiality. It is also important on your end that whenever we conduct a session, you find a secure, private space where you cannot be overheard and are using a secure internet connection. By signing the consent form you are acknowledging that you will not hold me, Jolene McVean, LPC, responsible for any situation in which your confidentiality may be breached due to action/inaction on your part.

Please note, technical difficulties are a realistic possibility at any time for a variety of reasons and are often outside of your control or mine. If there are glitches in session, attempts will be made to get back on track and to provide you with the full time allotted not including the disruption time. In the event the session is unable to be completed, all or part of the session may need to be rescheduled at no additional cost to you. If there are problems with a video chat, it may be an option to switch to telephonic to complete that session.

Please keep in mind that body language can sometimes be perceived slightly differently and verbal communication can be challenging via video connection as opposed to face-to-face interactions. Eye contact is very different because one must actually look directly into the camera to appear to be looking at the other person's eyes. Additional clarifying questions may be necessary to make sure you are completely understood so that nothing is missed by using this medium of communication. Please feel free to inquire of me if you are unsure about what I may be verbally or non-verbally communicating.

Current laws and ethics stipulate that I only practice within the state in which I am licensed. That means I can and will only see clients who reside in the state of Texas. I require proof of residency prior to providing any online services by obtaining a copy of some form of legal ID with a photograph and address, such as a driver's license.

Thank-you in advance for understanding these matters which are unique to virtual counseling/therapy and I look forward to serving you in this capacity!

### I have read and I agree to Virtual Therapy/Counseling

*Signature of Client or Legal Guardian*

*DOB*

*Date*

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*Sign Full Name*

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*MM-DD-YYYY*

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*MM-DD-YYYY*