

**REAL LIFE COUNSELING
CONFIDENTIALITY AND CLIENT RECORDS POLICY**

It is the express policy of Real Life Counseling that client information, including the identity of persons seeking outpatient mental health services, acquired in rendering services shall be considered strictly confidential by all personnel for all purposes.

All independent contractors providing services in the Real Life Counseling offices (8911 E. Orme, Suite D, Wichita, KS 67207) as well as office staff must sign an Acknowledgement Statement recognizing personal responsibility for the access of client records, for maintaining the confidentiality of any and all information in their possession or control and for their obligation to comply with this policy and all applicable laws governing the use of and access to Protected Health Information (PHI).

The following client information is subject to this CONFIDENTIALITY AND CLIENT RECORDS POLICY, as well as any other documents that contain the same or similar information as referenced client records:

- Physical client records
- Electronic data
- Telephone/voicemail/email electronic communication
- Visual recognition
- Oral communication

Client records are to be stored in the Real Life Counseling offices and only accessed by clinicians and office staff by keycode. Records will be stored in a locked file cabinet, which will be locked by staff when not in use. Offices will be locked each night by staff. During business hours, confidential information will be stored behind a locked door in order to prevent unauthorized access to protected health information.

No one outside of clinicians and office staff is entitled to access client information, unless written consent is given by the client.

The law requires that each individual client receiving services must consent to the release of his or her file information. Therefore, if more than one family member participates in a session, each and every participant must consent prior to the release of the file information. Where a minor is receiving services, the appointment of a guardian ad litem may be necessary prior to the release of the minor client's information. Under no circumstances should client information be released without first obtaining appropriate AUTHORIZATION TO DISCLOSE PROTECTED HEALTH INFORMATION forms signed by all necessary parties.

The recipient of any client records disclosed by clinicians or office staff will be advised of the confidential nature of the records, and that recipient is not authorized to make any further release or use of the records other than as specifically authorized.

An accounting will be kept on all requests for disclosure and disposition of the request in the client's file.

Clients may request copies of their medical records, and must sign a written release to receive such a copy.

Revised: 09/17/2015

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**ACKNOWLEDGEMENT OF CONFIDENTIALITY OF CLIENT INFORMATION
AND RECORDS FOR CONTRACTORS OF REAL LIFE COUNSELING**

I, _____, an employee or contractor of Real Life Counseling hereby acknowledge that I have read and that I understand Real Life Counseling's Confidentiality and Client Records Policy. I further understand that I must comply fully with this policy as part of my contract work and that any failure on my part to comply with this policy may result in finding of professional misconduct, professional malpractice and legal action against myself, other employees/contractors and/or Real Life Counseling.

Printed Name

Signature

Date