

## **Therapy Contract**

A therapy contract is an agreement which includes all of the practical arrangements necessary for you to be clear and comfortable with all aspects of the therapy you receive. Please read the terms and conditions of therapy outlined in this document and sign below if you agree to the terms and conditions. Thank you.

Times of Sessions:	We will agree the best time that you can attend therapy sessions.
Confidentiality:	All therapists are bound by their professional codes of conduct regarding confidentiality. A therapist will only breach your confidence if you say something that implies risk or danger to yourself or others. It may be helpful to remind you that nothing sent to me electronically (mobile, email, or other devices) can be guaranteed to be entirely secure. You can talk to anyone you wish about your own therapy, in person, on social media sites, etc. As a therapist, and bound by ethical frameworks, I would never "Google" a client, or access information about a client on social media sites. I will not accept friend's requests on social media sites. I do not permit unauthorized digital recording of sessions by clients.
Record keeping:	I keep hard copy (paper) records relating to the clients I am currently working with. These records are held securely, not kept any longer than is necessary, and destroyed securely at the end of the recommended period of retention. I do not keep any electronic records regarding my ongoing work with clients. You do have a right to access your records; a written request to me directly is required. If you receive therapy as a couple please note that these records remain the confidential material of the couple relationship and one person cannot request access for a third party.
Supervision:	Therapy cases are sometimes discussed during supervision. All counsellors and therapists have supervision from an appropriately qualified and experienced therapist to help with problems and ensure that their practice is safe. Your actual identity is kept confidential during supervision.
Self Help:	Often you are encouraged to carry out between session tasks, such as reading, diaries and exercises between sessions; as this has been proven to improve therapy outcomes. It is important when commencing therapy that you're able to commit to completing these between session tasks, as this often forms the basis of our next therapy session, and allows me to pace the therapy appropriately.



Communication with External Agencies:  Therapy via Skype:	Sometimes it may be appropriate to inform your GP or other agencies that you are receiving therapy. If this is the case you would always be asked for written consent to do this, and a rationale why this may be appropriate would be provided.  If you are having therapy via Skype, privacy should be maintained, it is your responsibility to ensure you are in an environment where you
	can't be overheard. Call quality and security cannot be guaranteed.
Payment:	I ask clients to make payment prior to the session, either online via PayPal or BACS. I can accept payment when you arrive at the session, with Visa, MasterCard, Maestro or cash, card payment on arrival at the session would incur a 2.75% additional charge.
Cancellations:	I attempt to reschedule cancelled appointments where possible. If you need to cancel less than 24 hours prior to the session, I would require full payment for the session.
Contact between therapy sessions:	Depending on the nature of your difficulties, I can provide details of services which may be appropriate for you to contact in a crisis. I am happy to receive emails or voicemail messages regarding cancellations and brief emails regarding "between therapy tasks". However I am not able to respond to crises or emergency situations.
Termination of Contract:	Both parties have the right to terminate the Therapy Contract at any time. If I believe the therapy I offer is not helpful for you, or you believe it is not helpful for you, then it would be appropriate to be open and transparent with each other, so you are able to access more appropriate services. Where possible I would endeavour to help you with this.
Gifts and Presents:	I am unable to accept gifts from clients to avoid any potential conflict of interests.

## I understand and agree to the terms and conditions of the above contract.

Name of client/clients:
Signature of client/clients:
Name of therapist:
Signature of therapist:
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