

Client Agreement

About me:

My name is Peter Edwards

My contact number is 07917 666 494

My email address is Peter@CounsellingPlus.co

I am a Registered Counsellor with the British Association for Counselling and Psychotherapy (BACP). I conduct my counselling practice within the BACP 'Ethical Framework for Counsellors'. This document can be found at www.bacp.co.uk.

If at any time you think I am in breach of this code of ethics, I hope that you would be able to discuss this with me and that we could find a resolution to the situation. If not, I will provide you with details of how you might express your concerns directly to the BACP. (These are also available via the BACP website.)

I work in private practice offering face-to-face, internet-based and telephone counselling. I am committed to offering a service which is welcoming to people of all backgrounds in a supportive and non-discriminatory manner.

How I Work with You

We will agree appointment times to meet at 9, Dunstone View, Plymstock, Plymouth PL9 8TW, or on line. My normal fees are set out on my website: I will charge you £____ per session. Payment is required in advance by cash, PayPal or cards.

Sessions last 50-60 minutes, which is common practice for Counselling work. I spend further time completing notes and undertaking other related work. The length of sessions can be varied, by agreement. Usually, weekly sessions are best through more or less frequent meetings can be agreed depending on your situation and preferences. I make appropriate, confidential notes on each session.

What happens if you must cancel the appointment, or do not arrive?

If you have made payment for a session but find you are unable to meet at the appointed time, I will retain the fee for the session unless you give a minimum of 24 hours notice. In exceptional circumstances, I may refund your fee.

Please arrive no more than five minutes before the agreed start time as other clients may be leaving just before and it is important not to breach confidentiality. I keep a minimum gap of 15 minutes between appointments.

I will give reasonable notice of any holidays I intend to take; if I am sick I will endeavour to notify you as soon as practicable.

If you do not attend two consecutive sessions without prior arrangement, this agreement will automatically expire.

About the way I work

Confidentiality and Security

I am registered with the Information Commissioner's Office and I will keep your information secure as required by law. Any information about you and what we discuss in our counselling sessions will not be communicated with a third party except in clinical supervision of my work (this is standard practice and required under the Code of Ethics). Your identity will not be revealed to my Supervisor¹.

I am legally bound to make disclosure to the authorities if:

- I believe you are likely to cause serious harm to yourself or others;
- you reveal that you are involved in money laundering or terrorism;
- a Court of Law requires me to submit my case notes or give evidence.

If at any point during therapy I believe that you are at serious risk or in need of emergency support, I may ask for your consent to contact your GP or other health service.

Any personal information disclosed to me will not be used for any purpose other than counselling records. I do use these records for planning and personal evaluation of my practice. All client data is treated in complete confidence and is destroyed 8 years after the end of our work together. I do not retain paper records as I use a specialist, secure, computer-based system.

Guidelines for emergency contact

Were you find yourself in a major crisis and considering serious self-harm it would be vital to get immediate help. This could include contacting your GP or your nearest accident and emergency service (A & E). You could also call the Samaritans on 0345 909 090.

Client Name(s) (block capitals):	Signature(s):	Date:

Counsellor's Name:	Signature:	Date:
Peter Edwards		

¹ Please note that if we encounter each other outside our therapy sessions I will not greet you unless you greet me first - otherwise there is a risk that your confidentiality may be broken. Ignoring each other in such circumstances is not rude!

Your Details

GP's name and practice: (contact will only be made where clients agree that contact is appropriate, or in an emergency).

Are you currently on any medication? If so, please state what this is and dosage.

Your telephone:		
Is it OK to leave a message on this number?		
Email address:		
Is it OK to put you on my email or postal list? (I will not share this with anyone else.)	Yes	No
Your address:		
	Post code:	

What is the main reason for you coming to counselling?		
Relationship issues	Anxiety/stress	Bereavement
Abuse	Domestic violence	Self esteem
Anger	Eating disorders	Work
Depression	Psychosis	Addictions
Trauma	Physical problems	Cognitive
Stroke related issues	Personality problems	Other

Gender:	Male:	Female:
---------	-------	---------

Your age(s):		
--------------	--	--

Date(s) of birth:		
-------------------	--	--

Do you have a disability?	
---------------------------	--

Ethnic background:	White English/Welsh/Scottish/N Irish/UK
	Irish
	Gypsy or Irish Traveller
	Mixed ethnic background
	Indian
	Pakistani
	Bangladeshi
	Chinese
	African
	Caribbean
Other (please state):	

Religion or belief:	No religion	Christian
	Jewish	Buddhist
	Muslim	Sikh
	Hindu	Other

Sexual Orientation	Heterosexual	Lesbian
	Gay man	Bisexual
	Transgender	Prefer not to say