

## Counselling Contract

This is a counselling contract between

..... Client  
&  
Phill Turner MBACP..... Counsellor

As a member of the British Association of Counsellors and Psychotherapists (BACP) our work together is conducted in accordance with the BACP Ethical Framework for good practice in counselling and psychotherapy [http://www.bacp.co.uk/ethical\\_framework](http://www.bacp.co.uk/ethical_framework)

I work within the BACP guidelines for face to face and telephone counselling and Psychotherapy. I hold professional indemnity insurance.

**Confidentiality:** Everything you tell me is confidential except in certain circumstances. If you tell me you or someone else, a vulnerable person or a minor is at risk of harm, then I may be obliged to inform the relevant authorities, I will endeavour to inform you and discuss this with you before doing so.

**Supervision:** All counsellors who work under the BACP code have to undertake supervision which is an important part of their practice. Its aim is to check that the counsellor is working safely and to help to improve their practice. When the clients are discussed with my supervisor it is usually anonymously. (i.e. I will not use your real name)

If I need to cancel an appointment with you, I will give you as much notice as possible and you will not be charged. Sessions will normally last for 50 minute.

**Note keeping and contracts:** I keep brief coded notes of sessions to remind me of details and issues raised. These are stored securely and will be destroyed when no longer needed. Contact details and contracts are kept separately from the notes.

**As a Client:** I agree to pay at the end of each session, by the method agreed. I agree that if I the client need to cancel an appointment I will give 24 hours notice. Otherwise the session will need to be paid for.

I agree that I will endeavour to be free from the effects of drugs and or alcohol during each counselling session.

Clients address.....

Phone numbers.....

Client's doctors address.....

This information will only be used in an emergency and I the counsellor will endeavour to inform and gain the permission of the client before using it.

Signature Client.....

Date.....

Signature Counsellor.....

Date.....

### **Complaints**

Complaints should be sent to the British Association for Counselling and Psychotherapy  
BACP House, 15 St John's Business Park, Lutterworth, Leicestershire LE17 4HB, United Kingdom  
**Email:** [bacp@bacp.co.uk](mailto:bacp@bacp.co.uk)