**CHECK-IN SESSION CONTRACT**

**Information, terms & conditions**

**SESSIONS AND FEES**

* The one-off check-in counselling session is 50 minutes (depending on the client’s requirements).
* The cost at time of printing is £50 for the session.
* Payment for the counselling session is due the day before your appointment (or earlier if you prefer).
* Payments can be made by bank transfer (see below).
* **Mettle Business account**

Account name: **Azure Dragonfly**

Sort code: **04-03-33** Account number: **63664910**

Reference: **YOUR NAME** (NB: This is important so I can identify payment for your session).

**TECHNICAL ISSUES**

* If you are unable to join the Zoom session at the time of your appointment, please phone me on the contact number below.
* If the connection fails *during* our session I will try twice to reconnect to Zoom.
* If connection/reconnection via Zoom is not successful, I will contact you on your preferred phone number to discuss how we proceed.

**CONTACT DETAILS**

Counsellor Name: **Jacqui Miller**

Email: **jacqui.miller@azure-dragonfly-counselling.co.uk**

Telephone or text: **07938 66 99 78**

**CANCELLATION AND CHARGES**

* Please give a minimum of 24 hours’ notice if you cannot attend the appointment (contact me by email at jacqui.miller@azure-dragonfly-counselling.co.uk).
* Cancellations with less than 24 hours’ notice, or non-attendance, will still need to be paid for.

**ETHICS**

I am a registered member of the British Association of Counsellors and Psychotherapists, and I abide by the BACP ethical framework.

**CONFIDENTIALITY**

Counselling sessions are confidential but there are some circumstances that you need to be aware of, and others in which confidentiality may have to be broken.

* Counsellors are required to have regular monthly supervision for the purposes of continuous professional development. Cases may be discussed during this time, but care is always taken to preserve client anonymity. My supervisor follows the same procedures for confidentiality that I do.
* In adherence with the BACP ethical code, I am obliged to break confidentiality if a client were to disclose involvement in, or knowledge of, an act of terrorism, money laundering or drugs trafficking.
* I have a policy to discuss any instances of serious harm to self or to others with my supervisor, to ensure client safety is priority.
* I have a legal obligation to report harm or abuse to a minor or vulnerable adult.
* In extreme cases a counsellor may be legally compelled to provide information at the request of a court of law.
* A counsellor may break confidentiality if the client specifically requests this.

**PRIVACY & SECURITY**

As a counsellor in private practice, it is necessary for me to gather certain information to ensure our working relationship runs smoothly, and so that I have the information required by BACP and by my insurance company. This information includes:

* Your name.
* Your date of birth.
* Your contact details.
* An emergency contact.
* Any relevant medical information and GP contact details.
* Presenting issues, and brief, factual counselling notes regarding sessions.

Only I have access to this information unless you advise me to share it, or I am informed by a court of law to do so.

* All client material is treated in accordance with BACP, insurance and GDPR requirements.
* A copy of your Client Information Form and records of attendance, together with brief, factual notes will be kept by me in a locked cabinet secured with a combination lock accessible only to me.
* At the end of our counselling agreement, information regarding our exchanges will be stored for a period of 7 years (in accordance with guidelines from the BACP and my insurance provider). After this time the information will be destroyed.
* Audio/video counselling takes advantage of the encrypted services offered by Zoom, and you will be sent a link to a secure connection in time for your counselling session. Sessions are locked to ensure no third party has access to our meeting.

You can read my full privacy policy regarding how information you supply is handled by visiting my website: <https://azure-dragonfly-counselling.co.uk>

**COUNSELLING CONTRACT**

**Client & counsellor agreement**

* As your counsellor, I aim to start and finish sessions promptly. I will be available for the full 50 minutes of your session on the date and from the time agreed. I cannot extend the time of a session, even if you are late or we have technical difficulties, as this could impact the session following yours.
* Unless I am seriously unwell and unable to contact you, I will aim to give at least 24 hours’ notice if I need to cancel the session.
* Please ensure you find a comfortable, private, and quiet place for our online session where you will not be disturbed (for example by family members, your phone, or even pets). It should be somewhere you will not be overheard. This will enable you to engage more fully with the session.
* As I offer confidentiality regarding the content of our sessions, I would ask that you do the same by not sharing any of the content of our sessions with a third party.
* To ensure you get the most out of the session, I would ask that you do not attend if you are under the influence of any substances. This can impact your ability to engage with, and remember, the session fully.
* You may not make audio or video recordings of our session together and neither will I. This is because privacy and confidentiality are very important in counselling. Even if you give your permission there would not be sufficient control of recorded materials for me to adhere to the required ethical, data protection, privacy, and insurance requirements of my practice.
* You (the client) will be liable for the full cost of the session if you do not attend and fail to give at least 24 hours’ notice via email. This includes when the notice period falls outside the working hours for Azure Dragonfly Counselling (an email received at least 24 hours prior to the session will be deemed sufficient evidence of notice).

**If you need further information regarding this counselling contract please contact me via email, otherwise please complete the form on the next page before returning the contract to me.**

**IF YOU WOULD PREFER TO COMPLETE THE CONTRACT WITH ME BEFORE YOUR SESSION, PLEASE LET ME KNOW.**

**COUNSELLING CONTRACT**

**Client information form**

Your full name:

What you prefer to be called:

Preferred pronouns (optional):

Date Of Birth:

Address:

Postcode:

Phone number:

Is it OK to leave a voice or text message? YES  NO

Email address:

GP name, Surgery, and telephone contact details:

Do you give consent for us to contact your GP if necessary: Yes  / No

Name of who to contact in an emergency:

Their relationship to you:

Phone or email address for your emergency contact:

Brief details about why you want a check-in session and an outline of anything specific you want to focus on:

Please tick the boxes below to confirm you have read and understood this document before filling in and returning the agreement.

By completing and returning this form you are consenting to the Azure Dragonfly Counselling Contract:

*I confirm that I have read, understood, and agree to the terms of the Azure Dragonfly Counselling Contract outlined above.*

*I agree to my data being used and stored in the ways outlined above (see the Azure Dragonfly Privacy Policy on the website for more detailed information).*

YOUR FULL NAME:

DATE:

🖂 Please return this document via the website CONTACT page at

<https://azure-dragonfly-counselling.co.uk> or by email to

[jacqui.miller@azure-dragonfly-counselling.co.uk](mailto:jacqui.miller@azure-dragonfly-counselling.co.uk)

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