A logo for a counseling services

Description automatically generated

Counselling Contract for Barleyfields Counselling Services

This counselling contract ("Contract") is entered into between the counsellors [Counsellor’s Carly Hurst-Williment], hereinafter referred to as the "Counsellor," and the client \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, and hereinafter referred to as the "Client." This Contract is in accordance with the ethical guidelines and principles set forth by the British Association for Counselling and Psychotherapy (BACP).

1. Purpose and Scope:

This Contract aims to establish the terms and conditions of the counselling relationship between the Counsellor and the Client. The scope of counselling services will be based on the Client's needs and goals, as discussed and agreed upon during the initial assessment.

2. Confidentiality:

The Counsellor acknowledges the importance of confidentiality in the counselling relationship. The Counsellor will maintain the confidentiality of all information disclosed in the course of counselling, except where:

   a. The Client provides written consent to disclose information.

   b. There is a legal obligation to disclose information.

   c. The Counsellor believes there is a risk of harm to the Client or others.

3. Professional Boundaries:

The Counsellor and the Client will maintain a professional relationship throughout the counselling process. The Counsellor will refrain from engaging in any dual relationships that could compromise the objectivity or effectiveness of the counselling relationship.

4. Informed Consent:

The Client acknowledges that counselling is a voluntary process and that they have the right to ask questions about the counselling process, including the methods, techniques, and potential risks involved. The Client agrees to provide truthful and accurate information during counselling sessions.

5. Fees and Payment:

The fees for counselling services will be discussed and agreed upon between the Counsellor and the Client. The Client agrees to pay the agreed-upon fee before or during each session unless alternative arrangements have been made in writing.

6. Cancellation and Rescheduling:

The Client agrees to provide at least 24hrs notice in the event of cancellation or rescheduling of a counselling session. Failure to provide sufficient notice will result in the Client being charged for the missed session, except in cases of emergency or unavoidable circumstances.

7. Termination:

Either party may terminate this counselling relationship at any time, with or without cause, by providing written notice to the other party. The Client understands that discussing the termination process and any potential referrals during the final sessions is beneficial.

8. Supervision and Consultation:

The Counsellor will engage in regular supervision or consultation with another qualified professional to ensure the quality and effectiveness of the counselling services provided. The Client's identity will remain confidential during these discussions.

9. Complaints:

If the Client has any concerns or complaints regarding the counselling services, they are encouraged to discuss them with the Counsellor. In the event that a resolution cannot be reached, the Client may contact the BACP for guidance and further action.

10. Governing Law:

This Contract shall be governed by and construed in accordance with the laws of [Jurisdiction]. Any disputes arising from or relating to this Contract shall be subject to the exclusive jurisdiction of the courts of [Jurisdiction].

By signing below, both the Counsellor and the Client acknowledge that they have read and understood the terms of this counselling contract and agree to abide by them.

Counsellor: Carly Hurst-Williment Date:

Client:                             Date: [Date].

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Telephone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Doctor Attended \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Health Issues \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Emergency Contact \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_