**CANOE COUNSELLING CONTRACT**

**Counselling Agreement**

Counselling provides a space in which you are encouraged to explore your feelings and any difficulties. We all have challenging times in life; times when we feel we can’t cope or even feel helpless. Counselling can help by:

* Having someone to talk things through with who is not involved
* Exploring what the problems are and considering options for dealing with them
* Gaining a better understanding of ourselves and why we feel the way we do

**My commitment to you**

I will work alongside you and support you, using my skills and training to develop a relationship where you will feel able to explore and express your feelings and to find a way forward for you.

I am a member of the Association of Christian Counsellors, and will work to their Ethical Framework. You can find this on their website.

I have full professional indemnity insurance and am DBS checked. My safeguarding training is up to date, and I am first-aid qualified.

**Confidentiality**

The counselling relationship is based on trust and confidentiality is paramount. What you tell me will remain between us. The only exceptions to this are:

* If you give consent for me to share information
* If there is a serious risk of harm to you or someone else. I would discuss this with you prior to taking any action and hopefully we would decide together on what action to take
* Where the law requires it, for example, with terrorism, drug trafficking or money laundering.
* When information disclosed is of such gravity that confidentiality cannot reasonably be expected to be maintained. This would apply in the case of serious crimes or where there are reasonable grounds to believe that there is risk of harm to others.
* You tell me about current ongoing child abuse or risk to vulnerable adults whether it involves you or someone else.
* I am ordered by a court to disclose information.
* I am required to attend monthly counselling supervision, as part of ethical practice and to keep clients and counsellors safe. This involves discussing all of my client work with my supervisor. However, identifying details are kept to a minimum and the supervisor is also bound by confidentiality.

**Appointments**

Therapy requires an ongoing commitment from you, whether that is for a shorter period of a few weeks or longer therapy over several months. In order for you to benefit from therapy we would normally meet weekly. Generally it is preferable to have a regular day & time as I will book that time for you.  If for clinical reasons, extra sessions are needed within a week, we can discuss this.

Please make every effort to attend our sessions on time, as I will not be able to allocate extra time if you’re delayed.

Babies under 6 months are welcome in sessions if you wish. Older children aren’t able to attend counselling sessions as this may be distracting for you and the nature of therapy may upset children. If you see me outside sessions I will say hello. Please let me know if you would rather I avoid this for your privacy.

After we have ended our work together you are always welcome to contact me again and book a session after 3 or more months have elapsed. I will do my best to accommodate this. It’s also ok for you to email me after we have completed working together, if you wish. I won’t initiate contact with you but would be happy to hear from you again!

**Online work**

When working online my usual video conferencing platform is MS Teams. I can also use FaceTime, WhatsApp or Skype if you prefer. Please ensure you are in a quiet, confidential space where you can’t be overheard. Headphones might be useful for this if appropriate. You may also wish to have a glass of water, tissues and a pen and paper handy. I will call you by video chat at our appointment time, and will have my mobile phone beside me as a back-up in case of any technical difficulties.

**Face-to-face work**

When working face-to-face, upon arrival at the Brunei Community Centre, there is a spacious waiting area with toilet facilities and a water cooler available. Please make yourself comfortable and I will come out and get you at our appointment time. This is to ensure that if a previous session over-runs, client confidentiality is maintained, and that I have time to prepare for our session.

**Fees**

My standard fee is £45 per session of 50 minutes. If you have a discounted fee agreed with me over email, this discounted fee will apply instead of £45.

I will review my fees annually and give you 1 month notice of any increase.

You may pay by bank transfer. My bank details are:

Starling Bank

Jane Pickersgill

Sort Code: 60-83-71

Account Number: 32800915.

All fees must be paid 24 hours before each session in line with my cancellation policy below. Fees paid later than 24 hours after the end of each session are subject to a 10% additional charge. If there are 3 late payments in a period of 3 months, I reserve the right to cancel our future sessions together. All outstanding fees must be paid before our next session together can go ahead.

**Cancellations**

I organise my diary so that a regular time slot is made available to you, and this slot will not be given to any other client so that you can rely on my commitment to your therapy. If you need to cancel or rearrange an appointment please give as much notice as possible, ideally 48 hours or more.

Cancellations made with less than 24 hours notice will be charged at the full rate, except in cases of medical or childcare emergencies. In these circumstances, if you have already paid your fee, it can either be refunded to you or rolled over to pay for your next session at your choice.

A session will not be able to proceed if you attend under the influence of drugs or alcohol and the cancellation fee will apply.

If I need to cancel a session, I will give you as much notice as possible – ideally 48 hours or more, except in cases of medical or childcare emergencies. I may not be available to meet with you every week due to my holidays or continuing professional development requirements. However I will always aim to give you plenty notice about planned absences and if required, we can try to make a different arrangement for that week as a one-off session.

**Out of hours contact**

I do not operate an out of hours service, and it is therefore important that in a crisis you contact an organisation such as The Samaritans on 116 123. It is usually most beneficial to conduct all our therapy work inside a planned session time, and as such (unless in exceptional circumstances) I would only reply to emails or texts where they relate to the administration of our sessions.

**Duration and review**

The number of sessions we will work together is flexible. Some clients will only need a few sessions to get what they need, others will require many more. This is something we will discuss.

Unless we have agreed to work long term I will usually conduct an informal review at every 6th session. This allows us to reflect on progress and make any necessary changes.

You may end your therapy at any time. However, it is always better to work to a planned ending, or to discuss why therapy is not working for you, as this may be something we can work through together. However, you will not be pressured into continuing. If you have any concerns about my work or how we are working together then I would encourage you to discuss this with me. If you are finding counselling difficult please do try to talk to me about that so that we can discuss it and find a way forward. If it’s easier you can always email me.

**Privacy Notice**

My privacy notice is available at [www.canoecounselling.com](http://www.canoecounselling.com), and a copy can be made available to you on email at any time.

**I understand and agree to the terms and conditions of this contract**

Client Name..........................................................................................

Client Signature......................................................................................

Date........................................................................................................

Therapist Signature................................................................................

Date............................................................................................................................