

Therapy Agreement

Therapist/coach	Victoria Riches
Email	ClarityPTC@gmail.com
Contact number	07734913138
Clients name	
Contact phone no	
Email	
Home address	

Therapist statement

I commit to adhering to the British Association of Counselling and Psychotherapy (BACP) ethical framework, which recognizes:

- putting the client first and valuing each client as a unique person
- protecting client confidentiality and privacy – confidentiality will only be broken with the client’s written consent and if I perceive that you may be putting yourself or others at risk
- contracting appropriately with the client and working within my competence
- keeping my skills and knowledge up to date
- collaborating with peers to improve the quality of what is being offered to clients
- ensuring that my wellbeing to sustain the quality of the work
- keeping accurate and appropriate records.

Client Statement

- I agree to undertake sessions of **50** minutes each to explore and address key issues or struggles I am experiencing in my life at a rate of £60 per session.
- I am committed to taking positive action to make improvements in my life and to meeting the goals I identify as necessary to do this.
- I am committed to being as receptive, open and honest as necessary in order to work with my therapist towards achieving my goals.

Ground Rules

- I understand I am fully responsible for the decisions and choices reached during the therapy sessions.
- I understand that therapy is designed to facilitate my personal exploration and develop a plan/strategy for appropriate goals.
- I understand that therapy can involve deep and broad exploration of my life experience, which may involve all areas of my life including work, family, health, relationships, education and recreation.
- I acknowledge that deciding how to handle any issues is my responsibility.

- I understand that if I am not satisfied with my progress during this time and wish to cancel my remaining sessions, I may do so at any time up to 48 hours before the following session, otherwise I will incur a cost.
- I commit to inform my therapist if I am currently in any kind of other therapy and that any medical practitioners involved in my care have been advised of my intention to work with a therapist.

DPA and storage of Information

- Any session notes made will be kept separately from the client’s personal information such as their name, address and contact details.
- No information about the client will be passed on to any third parties.
- The client has the right to see any information held by the therapist by asking or submitting a request in writing.
- As part of the therapist’s commitment to ongoing supervision through the BACP, some topics from the therapy sessions maybe anonymously and hypothetically shared in professional supervision sessions.
- All records will be kept securely in either a locked cabinet or in password protected files on electronic devices throughout the coaching process.
- All written records will be properly destroyed after a year.
- If we agree to communicate by text or by email, these records may be kept for the same duration as your session notes.
- My mobile phone is a smart phone and may have your texts, email address and any voicemails on it. The phone is password protected.

Communication

- Generally, our communication will be during the therapy sessions.
- If you need to contact me in between sessions, text or email is requested. I will try and reply as soon as possible within normal working times.

Cancellation policy

- If the client cancels the session within 48 hours of the session, the full therapy session fee will be payable
- If more than two sessions are cancelled without 48 hours-notice, the therapy agreement for the remaining agreed number of sessions may be ended.

I have read and agree to the above:

	Name	Signature	Date
Therapist	Victoria Riches		
Client			