



The Psychotherapy Agreement

Length of sessions: One hour per session. Frequency to be negotiated and reviewed according to need.

Fee: To be discussed and agreed upon at the time of referral

What to expect: The first session involves a full assessment of need and identifies the issues you wish to work on. It is also your opportunity to decide whether you can engage with the psychotherapist and whether you think it would be useful to continue with the relationship.

Cancellation: There is a cancellation fee of £10 for any appointment agreed. If the cancellation is within 24hrs of the appointment, the fee must be paid in full.

Confidentiality: Information that is shared between the client and the therapist is usually considered confidential. However there are some limits to this agreement.

- Where the information given suggests that the client or someone else is at risk, in terms of personal safety. Then the therapist will take whatever steps deemed appropriate. However the therapists concerns will usually be discussed with you before any action is taken.
- Where it might be helpful to contact your GP or other supporting professionals. Again this would usually be done with you knowledge. However if your safety or the safety of another person is the concern and you refuse permission, the therapist reserves the right to contact the relevant external services without your permission.
- Clinical supervision. Psychotherapists present their casework and receive regular clinical supervision as a requirement to meet the standards of practice code set by the UKCP. The aim of this is to monitor and develop the professional practice of the therapist. Supervision is done on a confidential basis and names are usually withheld.

Records: All written notes and audio recordings are kept in a secure environment.

Audio Recordings: Provision of psychotherapy does not depend on you giving permission for this to happen. However audio recording can be useful, particularly when the issues being considered are of a complex nature. If the Therapist wishes to make a recording of your sessions your permission will be asked for.

Psychotherapist-----
Name(printed)

Client-----
Name(printed)

Date-----